# THE BROOKINGS INSTITUTION

## **WEBINAR**

#### **HOW AFRICA IS TACKLING COVID-19**

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## PARTICIPANTS:

## **Moderator:**

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## Panel:

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## PROCEEDINGS

MR. O'HANLON: Good morning, everyone, and welcome to this Brookings event that we're doing in partnership with our friends in National Security, and representatives of other organizations from around the world on how Africa is handling the COVID crisis at this juncture as we get further and further into the summer of 2020, as defined here at least in the Northern Hemisphere and try to understand the way in which a continent in which 54 countries and more than a billion people is trying to handle this greatest transcontinental health crisis of our lifetimes. I've got the privilege of moderating an event with an amazing group of panelists. As I said, I'll introduce them briefly in just a moment. Our basic approach today is going to be to speak amongst the 5 of us for a little bit as I pose some broad questions. Then in the second half or so of the hour, we'll go to your questions that you can still send in at <a href="mailto:events@brookings.edu">events@brookings.edu</a> if you wish to do so by email, if you haven't already. Again, <a href="mailto:events@brookings.edu">events@brookings.edu</a>. I'd like to one more time reiterate that we're doing this in conjunction with our good friends at Out in National Security, a remarkable organization, and we're doing this through Brookings with the Africa Security Initiative.

As you may see on your screen already, we have folks from multiple locations around the world. Zoe Marks is at Harvard. She is an expert on Sierra Leone, where she has done a great deal of field work and research. She also thinks and writes about gender issues across the continent and the world and we're very fortunate to have her with us today.

As I move clockwise around the screen, at least as my screen shows, we have Youssef Travaly, who is speaking to us live from Kigali, Rwanda. We're very happy to have him there. He is with the Friends of Europe and he's also a scientist which makes sense, given the topic today and the crisis that the world is facing. His PhD is in material science, but he has certainly looked at and has studied and worked on a number of issues in general fields of science and technology. I'm sure he will be helping us today to understand some of the implications of COVID in Africa at a technical level, as well as at a policy level.

Xander Meise is at the University of Pennsylvania, at the Center on Ethics and the Rule

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of Law. She is an attorney. She thinks, as you might have guessed, about how the legal systems around

the world operate and how they can perhaps at this juncture be relevant in addressing challenges from

the COVID crisis, as well.

Desiree Cormier Smith is a former U.S. Foreign Service officer, with expertise and

experience in South Africa who has also worked with Madeline Albright in her amazing work around the

world and now is at The Open Society Foundation, thinking about a number of issues in terms of human

rights in terms of response to this crisis at that sort of level, as well.

The way we'll proceed now is that I'm just going to ask each panelist for 3 or 4 minutes to

define an aspect of the problem of COVID-19 in Africa. By aspect, I mean 1 or 2 particular countries or 1

or 2 particular dimensions of the problem. As you have heard, some of our panelists are experts on law,

some om human rights, some on gender issues, some on technical aspects of COVID and of course,

what I'd like to do is just get a few ideas on the table here in the opening, and then go to a second round

in which we can follow up and maybe ask questions and make comments about each other's initial

thoughts before we move forward to audience Q&A.

So, without further ado, and appropriately enough, starting from our panelist who is ow in

the heart of Africa, where he currently again resides in Kigali, Rwanda, Youssef, over to you, my friend,

and thank you for being with us today.

MR. TRAVALY: Thank you, for this introduction. Good morning, everyone, or good

afternoon, depending on where you are. So, basically, as a way of very quick introduction, I will give a

very brief overview on Africa's responses to COVID-19. According to me, when it comes down to Africa's

responses to COVID-19, I think it's very important that we focus on what has worked and see under

which frame of condition those specific experiences can be replicated across the continents. So, what I

can say for sure, as a key lesson, is that many countries in Africa have taken the opportunity to combine

the emergency health care with protocols and innovation to improve response effectiveness. So,

basically, my takeaway today from some Africa responses, I have 4 takeaways I would like to share with

you.

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The first one is that we really need to definitely, going forward. We really need to definitely need to (inaudible) and master digital technology. That is number 1. The number 2 takeaway is that we really need to develop testing and accurately synchronize testing capacities and implement these across the continent. The third takeaway is that we really need to foster the presence of strong manufacturing-based capacity across the continent, and because we have seen that the countries with a strong mining capacities have been able to convert those industry and make masks for the healthcare people. And then the last takeaway, which is actually might be expected, is we need to foster better alignment between government planning and health/emergency/health foresight. So, it's getting critical that we stop and look at health of mankind in that kind of if we have to face future shocks. So, where do we go from there? I think if we want to prepare for future shocks, whether they are economic or sanitary shocks, we really need to agree on continent health or in a constant of what I see as government intervention. So, the first one is really physical fortitude. We need to improve that. The second one is digital fortitude, which we need to improve. The third one is to regulate the environment, where we need to work very seriously. Then the last one, I think, the first one is digital technology. I see a set of timely digital technologies that we need to harness. Then the last one, we need a conducive environment for staffers. No countries have seen what we have today because we have seen a critical war of staffers in supporting the government in the fight against COVID. I think what is tied to this framework is that we really need to come up with innovative instruments to boost innovation in Africa. So, I will stop here and then we can discuss in more detail what I have said here.

MR. O'HANLON: Thank you, Youssef, for excellent opening remarks and for your succinctness and conciseness but let me take advantage of your conciseness to ask you one quick follow-up before we even move on. Since you are the opening speaker and since you are in Africa, I realize you're only in one of 54 countries in Africa, but how would you frame the severity of the crisis right now either within Central Africa where you currently reside or more continent wide for a generalist who is watching our show today and doesn't really follow Africa in detail. May have seen a couple of newspaper stories. I'm just wondering how you would measure or gauge the severity of the crisis of COVID in Africa

so far. Is it worse than expected, maybe not quite as bad as expected yet? Maybe the worst is still to

come. Is the greater effect on the health care sector or is it more on the economies of Africa that have

partly shut down as they've tried to limit contagion and therefore, perhaps, the great effect is not so much

in terms of health as in terms of reduced economic activity and that would then make us want to worry a

lot about getting loans and grants to various African governments, depending on which problem is more

serious. So, what I'm saying is, could you frame the problem for us at this juncture in July 2020. Other

panelists may want to come back to this same question. Just how bad is the COVID crisis in Africa and is

it normally at this point a health problem or an economics problem? Obviously, it's both, but is it more

one than the other?

MR. TRAVALY: I think generally speaking, except for South Africa, it is more facing I will

say an economic problem. It is less easy than expected. It is just in a country like Rwanda — I know that

Rwanda is a bit exceptional, but I think in 4 months, I think we managed not to exceed 2,000 cases. We

have 1,600 cases of COVID in Rwanda. We have more than 50 percent recovered, which is excellent,

but what I see - that's why I am insisting on financial instrument --- I see that we have been relying on

foreign aid to support the private sector in this context, and me looking for more African countries to be

more resilient, if there is such a crisis. This is why I am talking about really supporting the innovation

ecosystem, so that when there is a future shock, we are able due to the money that is generated by our

ecosystems to support the countries. So, I think less severe than expected.

MR. O'HANLON: Thank you. That's very helpful. Xander, over to you, including

anything you want to say about this broad question, but also your specific legal perspectives and

dimensions to the question. Thank you for joining us.

MS. MEISE: Thank you so much for having me today. I'm so pleased to be here and

joining these esteemed fellow panelists. I definitely want to come back to that question. I think there's a

lot to talk about on that. Quickly, I would say I think that long term, there is a real economic issue, but it's

a real economic opportunity right now, as well. And countries of Africa are well placed in a way to push

back against their past funders in a way perhaps that they haven't had before. We have seen some

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leaders, for instance, speak out against China, Chinese leadership and against the United States and its leadership and other places as well in an interesting change to the dynamic. So, I would love to come back to that and the economic opportunities that are arising from it, but for the initial question, I think what we see with any crisis, is a test of infrastructure saw, for instance and a test of institutions. The courts are no exception when it comes to this. Around the world, as countries deal with COVID, there is an effect on courts and on justice. What is the extent of the powers that a leader can have? What is the check on that power? Courts are a natural one, but also, who are some of the most vulnerable in a crisis like this? Those within the criminal justice system and those in need of that criminal justice system. So, we see COVID, for instance, have outbreaks in prisons, in countries in Africa, as well as around the world. We see — and I believe Zoe may talk about this, but vulnerable populations such as women and children who are particularly effected in times like this, also needing those courts to help them, and how is that going to happen. So, some of the specific examples that we have seen in the last few months of these dynamics in play include, in South Africa, which as Youssef said, has seen some of the most severe effects of the health aspects of this, but they are not alone. I mean, very quickly after it became clear that this was a pandemic, we saw 17 countries on the continent declare states of emergency, 9 declare states of public health emergency and 3 declare states of natural disaster. And there is a troubled history of countries on the continent declaring states of public emergency and what that might need, and the powers that come from that. But I think that we have seen here in the last few months, an interesting dynamic whereas leaders have tried to take decisive action — with public shutdown to the economy, but also in other aspects of government service, you see challenges to that in courts. We see the courts push back. We see courts pushed back and say, No, these measures that you've taken are constitutional, for instance, but these are not because they're not narrowly tailored. We see courts push back and say, "I". Yes, you do have the authority to do this; however, our law calls for you, for example, and then you have to submit an affidavit, and you did not. Right? So, there is this pushback of we have rules. They actually must be followed. We see also a struggle though with at those low lawyer levels in the criminal justice system. What cases can come forward, look at this knot. You talked about technology. I think that we've seen

some really creative uses of technology when it comes to the courts, as to how to continue them going forward. One of the most interesting places for that is which cases are considered urgent and imminent enough to require court action. This is where we see, for instance, tensions on issues of domestic violence and how the courts can still act in a time like this to protect those most vulnerable. I'll leave it at that, and I believe Zoe is going to be talking more about the role of women and children here.

MR. O'HANLON: Thank you very much. And I'll just allow the smooth transition to Zoe since we do have some continuity in subject matter before I come up with follow-up questions later on. So, Zoe, thank you for being with us today and over to you.

MS. MARKS: Thanks so much, Mike, for the invitation to be here. It's wonderful to meet my co-panelists. It's particularly valuable to be able to connect trans continentally, even though the media (inaudible) resumes the hits, because I think I speak for a lot of people who don't live in Africa but spend most of our time thinking about it. It's incredibly difficult to speak about countries on the continent when they haven't been in the past 12 months. So, I'm running up against my comfort level of being able to talk about countries that change so rapidly and I haven't been in Africa since the crisis broke out. So, I want to preface my comments by saying the biggest challenge, I think, for us to think globally and to share solutions and to share what's working and to also like pinpoint weak spots and vulnerabilities. The biggest challenge is actually just to access information and so I will talk about gender and inequalities and vulnerable populations particularly in the African context, but I want to start just by saying that one of the biggest challenges in African countries and here in the U.S., and calling in from Cambridge, Massachusetts, one of the biggest challenges has been lack of segregated data and lack of real time data. And Youssef sort of set this up in talking about the importance of harnessing digital technology and strengthening testing capacity. What we really need to be doing in African countries as much as my home country here, is trying to insure that testing is rapid and inefficient, but that it's also public and transparent and that it's the right indicators that are being collected. So, there's a lot of variation in how we could think about the severity of the crisis particularly in specific communities and what we've seen with community transmission in that not only is there sort of lag time. I think a lot of us have been

watching trends across the continent with baited breath and certainly not optimistic at this stage that Africa is going to come out sort of without more severe outbreaks than what we've seen, but there is definitely been a lot more lead time for African countries and African governments to prepare. So, what I'm looking for right now is, is there going to be accurate and effective data quick enough about populations in different parts of the countries that we're looking at so that we can have tailored responses. So, I think with gender and gender inequality, it's a great microcosm of how lack of good data and lack of just segregated data can really drive inequality is in that whole crisis. So what we know about COVID sort of runs into very quick limits when we look at pregnant women and when we look at sort of anti-natal care, what the impact is on a pregnancy, what the impact is on a baby who is born during COVID and there is sort of a health system effective, but then there's also if a woman is infected with Corona virus during her pregnancy, we have very little information about what will happen. So that's just sort of 1 indicator of how we can think about why we would want to segregate data about how health effects of Corona virus and where the agencies are spreading. Another example of why we would ne3ed the segregated data at this stage is we don't know the rate of transmission in urban communities versus rural communities. It looks like rural communities are slightly insulated through dispersal. We know that the sort of shut down of markets had a really harmful effect on rural or graying communities access to cash, but we also know that there was a bit of a buffer because they usually are subsistence farmers throughout Africa and have more access to producing their own food. So there is some interesting new survey results that innovation for poverty action did in Moabi and Liberia with sort of the poorest of the poorest of subsistence farmers that found there was not an impact on their food security, but there was a significant negative impact so far of lockdowns on their access to cash. And so that is going to have knock on effects for families' ability to invest in their children's education, to access other forms of basic medical care, taxes, basic treatments and preventative care that has otherwise just sort of become available (inaudible). So these are some of the ways that they think we can begin thinking about what types of desegregated data we need in order to have a tailored response. And what I really want to avoid is this sort of we all run to the fire and we miss the embers that have been sort of spilling over. Ron

Dorsten says that where we start to see that all of the health games that were made and the sort of basic to live free and the antenatal care, and post-natal care, access to early child development, nutrition, medicines. That that would become corroded because of disruptions to the supply chain. Maybe he could invent just in within country level. So, that things made just sort of the second point that I wanted to use my first few minutes to talk about which is thinking about social protection and how can we really think about social protection efficiently at this time, knowing that governments are incredibly resource strapped. So one of the things that I haven't seen guite as much discussion about, although II look forward to hearing about co-panelists and any of the audience questions is really the interruption to aid funding. I think we have seen an initial flush of the resources, which is really valuable, but in the long term, it looks like the projected aid that's being made available, it's 50 percent last less than Sierra and said there has been a dramatic role that wealthy countries who have been profiting off of Africa for centuries, a dramatic fallback, and the aid that's going to be provided and that's just looking at plans or aid expenditures. It is not even looking at what's been paid out. We've all seen that in May it stayed, so obviously we've withdrawn from WHO. We think that that is — there's a lot that could be said there. It's highly political, but it also shows that it is sort of a blatant unwillingness, just the part to follow African and international multi-lateral leadership. I think that's something that the continent has been doing really well, but if it doesn't have kind of global support, I do worry a bit about what the kind of high-level implications are, particularly for vulnerable communities. So, to sort of try to stay within the framework of thinking about inequality, thinking about gender and equality is a great way to think about what these kind of global knockdown effects look like. So, there are, I think, really big questions about how governments are going to be able to allocate and prioritize, both giving their economies back up and running and maintaining social protection for some of that sort of insulation that we need that is not COVID specific, but actually everything else specific. Because a country like Sierra Leone, for example, is almost entirely commodity dependent for foreign exchange. So, they only just last week reopened flights which meant that the entire government didn't have access to foreign exchange revenues for the past 3 or 4 months. So that has really drawn down their resources. So we see that households are actually a microcosm of

this shape in some ways. Families have been spending time on savings and they have been going into debt to make it through this sort of lockdown periods and disruptions to markets. Governments have been doing the same. I think there is a real opening here to think about who needs to have resources, reality that to them. How can we invest in human capital and continue to educate children so that they don't fall far behind? How can African governments really support the vulnerable but also just integrate them into a healthier economy that is not so dependent on foreign exchange and primary commodities when we're looking at a major demographic boom in the next 60 to 70 years?

MR. O'HANLON: Excellent. Thank you, A lot of things I want to follow up on, but I'll hold off on that until Round 2 and bring in Desiree first who has got, as I mentioned, considerable experience in South Africa, considerable experience with the private sector, now a new position with The Open Society Foundation. So, Desiree, over to you, please.

MS. SMITH: Thank you and thanks for having me today. I'm going to start off with my usual disclaimer that, you know, as many of the panelists noted, it's very difficult to talk about Africa in one broad stroke. Right? It's 54 distinct, unique countries. So, I'm going to be doing a lot of generalizing today and some of the things that I say may be accurate in some places and be completely inaccurate in other places. So I want to make that disclaimer now, but when we're talking about such a huge topic and a huge continent, I think for the purposes of this hour-long discussion, I sort of need to make some broad generalizations. I want to start by saying that COVID has decimated economic and health systems around the globe. This is not unique to Africa. We have seen it here in the United States and other developed countries like the U.K. So, it's understandably having a devastating impact on African countries. I think it's also important to note that comparatively speaking, the numbers of COVID cases have been relatively low on the continent, with the notable exception of South Africa, but still, relatively speaking, South Africa has about the same amount of cases as Florida, which is 1 state in the United States. So I think it is important to put it in that context, that African countries have relatively speaking been able to prepare better because of their previous experience with other pandemics and because COVID came to the continent relatively late, but there is also the aspect of perhaps a lack of testing. So

there could be number that we just aren't identifying because of the lack of testing. At the same time, the ever-socioeconomic impacts across the continent, I think, are quite severe and something that I may disagree a bit with Youssef on it. I think that the economic consequences of COVID may well outlast the virus itself, with the disproportionate impact on vulnerable communities, particularly women and the poor. So, I think that is something that we should focus on. Obviously the immediate concern would be mitigating the harm, the immediate harm of COVID-19, but I think it is critical to look at the long term effects and perhaps use this moment to reimagine and to address some of the long term government issues and structural inequalities and weaknesses that this virus has really exacerbated and exposed. I have a lot of other points, but I'm going to pause there because I think the panelists have laid out a really great picture and we can go on to questions now.

MR. O'HANLON: Well, great. Let me now pose an additional question myself and maybe go in reserve order. So, Desiree, since you were so succinct, I'll allow you to speak next and invite you to add some of your additional points, but I guess, as I hear you all, you know, I'm still trying to place COVID in relative perspective. I was a Peace Corps volunteer in the former Zaire in the 1980's. Back then the big problems were HIV, AIDS, Ebola, the chloroform resistant malaria, and poor maternal and child health care leading to a lot of deaths. Those remain issues in Africa, most of those, and most of them remain much more serious than COVID-19, as best I can understand from your answers and from what I know about the topic more generally. Therefore, I'm still trying to understand what the top public policy requirement should be that we should be using this crisis to focus on and to address, because it seems to me Africa has so many challenges, and you've touched on them, the need for innovation and investment and stronger infrastructure, stronger institutions protecting legal rights, gender rights, healthcare capability. COVID-19 almost just one more insult that Africa didn't need, but luckily, it's doing pretty well so far with it at least in health care terms, I'm hearing you all say. So, I guess my guestion is two-fold. One, do I have it right that at least so far, knock on wood, COVID-19 probably is not anywhere near Africa's biggest health care problem, even in 2020, even as we speak. Then, secondly, what is, you know, given that you've talked about the law and gender, and the economies in Africa, and the debt

problems and the lack of government resources, and the shutdowns in some of the cross quarter economic activity that have resulted from COVID. What big new idea is needed on the economic front to mitigate the effects of this crisis, if it is really at this point, more of an economic problem than it is a health problem? So, again, some of you touched on these questions, but I think they are so important that I want to come back and ask you to take another crack and add some more additional perspective to what you've already said, starting, if I could, with Desiree.

MS. SMITH: Sure. So, you know, I think, a lot of the lockdown measures that many governments took, were criticized for being woefully out of touch with reality of many countries. Right? So, a lot of the containment measures that work well on the west and not were the hallmarks of the Corona virus response, such as regular handwashing and social distancing, raised real practical and equity concerns, given the limited and unequal access to clean piped water and the density of the urban core. Furthermore, a lot of the vast majority of the labor force in Africa is employed in the informal sector and a lot of those folks are dependent upon daily work, going out to markets, going, you know, daily venders and formal vendors, for their livelihoods and so, a common refrain you'd hear from Africans is that, "I'm going to die of hunger because I die of COVID". So, putting into measures and using the sort of copy and paste approach from other countries really hampered not only the health response to COVID, but I think has even worsened the economic response. So, I think in order to mitigate the long-term economic impacts, there is going to have to be some ingenuity. It cannot be another copy, paste approach from what other countries have done. I think this is now an incredible opportunity for sort of rod stakeholder for each man, bringing in simple society, entrepreneurs, the youth, to come up with African solutions that would be relevant and applicable for the context of the continent moving forward and I don't know what those answers are because it will vary by country and I think that is necessarily so. I don't think we can use a one size fits all approach when it comes to the health impact of COVID, as well as the economic recovery.

MR. O'HANLON: Zoe, if I could go to you next, please. Then I'll go to Xander and Youssef.

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MS. MARKS: Sure and thanks. I agree with much of what Desiree has just said. I was just taking notes and trying to organize my thoughts. I think I broadly agree with your characterization you make and I generally am not one to sort of ambulance chase particularly in a continent where there is such a diversity of countries. There are so many complex problems. They must have been doing work for the past several years in Nigeria and even just thinking about a sort of centralized federal response to something like COVID makes no sense. Right? What's happening in the Northeast looks similarly like some of the outbreaks that you're seeing in the South and the way you would manage that would look very different than what you would do in Abuja, but that said, I do think there is a really unique threat that COVID poses and I'll admit I'm a little bit out on my tap when they start thinking about buyer citizens, thinking about medicine. I'm a political scientist by training, but we have no really effective treatment or vaccine or cure for COVID and there is not one on the horizon. That has very serious concerns about African country's ability to access and distribute one, when it becomes available. And so, you know, I've been trying to follow some of the numbers around where do we see, where we see various gender gaps in Corona virus globally and then in African countries specifically? Seventy percent of health care workers in Africa are women. We know that the vast majority of people being infected with coronavirus amongst health workers in the United States where we have data are women. So, 73 percent of health worker infections in the U.S. are among women. They think we cannot conduct spec. Similar numbers if we start seeing higher Corona virus treatment loads in hospitals across the continent is, what I am concerned about is really just the impact that would have on nurses and doctors and even community health workers across Africa. We know from Ebola in Sierra Leone and that area, that more than 8 percent of health workers died from Ebola, whereas the death rate in the general populations was between 1 and 2 percent. So that kind of an impact is just devastating on our already bleak health systems that are undersupplied in terms of trained nurses, doctors and other health workers. So, that's my first concern, is that that is just differently lose a significant portion, even if it is a relatively small proportion. And you know that reduction and ability to care across Africa, it takes years to retain those people and to replace them. That doesn't even count for loss for the community and within the health

system when morale hits. So, I think that's a really serious concern that we need to take seriously, even though like you said, tuberculosis, HIV, AIDS, malaria, these continue to be global challenges that some African countries are just proportionately challenged. The other thing I want to point out is I am really nervous about how African countries can access foreign exchange without opening their economies and making themselves vulnerable to these global vectors of coronavirus. So, where Ebola and Lac fever and some other tropical disease that hope can amend historically neglected, they tend to hide out in rural communities and they don't travel as quickly. So, we know that during COVID, Eastern Congo was able to eliminate Ebola. It's this huge epidemic victory in the midst of a global pandemic. There are a lot of lessons that have been learned, but they have also been learned for some of these more kind of remote epidemics and Corona virus comes in on an airplane. It flies into a city and it flies into regional hubs where we have otherwise been trying to leverage some of that technology and investment and connectivity to generate regional economies within Africa. So, I'm very worried that African countries are stuck in a bind where they're forced to open these regional hubs and forced to trade with Europe and forced to have flights open up to China to increase access to global supply chains and that that's in transient play that kind of the vulnerable, the Achilles heel, the vulnerable spot on the continent for more and more Corona virus to come in and then it travels through these care workers where we see women just proportionately represented. So there is a lot that I could say about kind of just proportionate vulnerabilities and how it affects kind of migrant workers who may be primarily men, but I kind of want to leave it there and just say I do think this is different, even if the numbers are not as significant.

MR. O'HANLON: Thank you. Very helpful. Xander, over to you, please. Same set of questions if I could.

NS, MEISE: Okay. To continue on something that Zoe said, this pressure to reopen the economies is really strong, and we see this in South Africa. South Africa was originally lauded for taking direct measures that seemed to initially curtail the spread of the virus there. Now, people can debate whether they were excessive or not, but things seemed to be under control numbers wise, and then with the economy taking a really hard turn down, they reopened. Then we see what happens. Their numbers

explode. So, this pressure is real. I absolutely do think that the economic effects are what we are going to see for years and years to come. And we already see this in the numbers now. Africa, again we're making generalizations here, and I hate using that term, but we are forced to today. You know, growth has been nearly at 3 percent. I believe it was 2.9 last year, overall growth. And the numbers for this year, 2020, are predicted to be negative 2, maybe even negative 5, continent wide. That's not something that just turns around, especially when the issue that is causing it is not really in them making Africa. Right? This is happening with Africa's trade partners. This is happening with China. This is happening with the United States. Right? So, even if COVID is gone from the continent, that doesn't mean like this, that that trade can pick back up, but at the same time I think we see a real opportunity here. Before I move to that though, an example just of some of these long-term effects, we just look at the airline industry in Africa. So, just that one snapshot. Okay? That has been one of the areas of great success in recent years. Not only in the European airlines, but we have seen other airlines expand their services and things like that, and you know, a recent article points to that, where South Africa Airways has been in some financial difficulty since 2019, but we see Air Mauritius has announced that they are going to put the airline into a voluntary administration to try and salvage it. Rwanda Air has announced it will slash net salaries of its staff between 8 and 65 percent. Kenya Airways has also seen cuts. However, it has converted some of its passenger flights to cargo flights. Why? Humanitarian aid and trying to keep some of these trade routes open. Ethiopian Airlines has done the same, but if you think about the impact that an airline has, as far as all of the economic generation around it, related to trade, but also the jobs created by its jobs, things like this, we lose those airlines due to the lack of trade from this disease. To rebuild them is not an easy feat. Then that's just one tiny little piece of this longer true picture. To the opportunity, things that have been going on that don't have to do with COVID on the continent, would include the African continent of Free Trade Agreement, you know, which was signed a couple of years ago, has 54 signatories. On July 7, that was supposed to be the commemoration of African Integration Day and celebrating the coming into force of this new agreement and this look of having a continent-wide trade economy. I think that as far as opportunities go, one thing that we may see come out of this is in

conjunction with what's been going on for years in developing a continent wide trade and free trade region is, well, more looking to their fellow countries on the continent, rather than to those outside trade partners. How can we strength internally trade between countries? How can we promote products on the continent to be sold on the continent and not be as reliant on outside sources? I mean, that's not an easy fix, but if there ever a good time to do it, this may be it, considering that some of our trade partners are going to continue to be hesitant or be dealing with their own difficulties in the next few years. This may be that time if there ever were one to harness that opportunity.

MR. O'HANLON: Excellent. Thank you. And, Youssef, over to you for any further thoughts on how to place this crisis in perspective and what big next steps might be needed in policy terms to address all the kinds of ripple on effects that are occurring.

MR. TRAVALY: Yeah, I did not see the years of policy intervention. The number 1, I think, roughly speaking would be the countries have been focusing on prevention and diagnosing of doing better than the ones focusing on treatment and post treatment. That's one clear picture. So, I think one area of policy intervention is only to foster the reform of the health care system in Africa, so that there is much more emphasis on prevention and diagnosis, which is what we call actually costing lives or presumed (inaudible). I think this is valued for a disease like Ebola, and any kind. So, we already have to focus on prevention and diagnosis. The second area of intervention that I see has to do with the scheduling of (inaudible). So, basically, we have to have an environment that is high performance on the continent. This requires 2 things, a national, half national and also consequently cooperation and collaboration, because we have misinformation on how much money we will need for the continent to transition to the forces that is a revolution. And we are taking on 20 trillion. So, where do we get that money, and this is what we need for those high performing (inaudible), because it is this type of stuff that will relieve the continent and not such that will impact the continent to face the future. Third, the last area of intervention that I see has to do with what I call new economics. So, Clematis (phonetic) calls on me. California calls on me. Methanol (phonetic) calls on me. Hypogenic (phonetic) calls on me. Silicone Valley calls on me. They all call on me. So, how do we have these new economics. I think what the

pandemic has shown is that we really need to be able to develop new economics, because those are the type of economies that will have each of the different countries to be much more resilient. For instance, if you go to the hypogenic to one country would be announcing the pandemic and this is a very important aspect. If you develop several different economies, the same ones become more resilient to break down of supply chains. So when you think about fostering the optional new economies, with the theory of putting us into the manner that I see.

MR. O'HANLON: Excellent. Well, thank you. So, we have just under 20 minutes now for questions from the audience. I think what I'm going to ask the panelists to do, if you have note paper or at least a good memory, is I'm going to run down the list of about a half dozen questions. Please make note of the one or two that you think you could speak to most effectively. We'll just have one final round of responses from each of you, after I put all these questions on the table. Some of them lend themselves more to one of you than another, so we can have a couple of people speak to some of these questions but bear in mind we're only going to have about 15 minutes a total for the panel to address them. One questions is about the U.S. private sector, and what can the American private sector do to help Africa led initiatives to respond to the crisis, but also to address and go on with some of the priorities you've been talking about already today in terms of building types of African economies that are more resilient, that are more dynamic, that can handle this sort of problem. So, what can the U.S. private sector do? Another question is about testing, maybe more along the lines of what Zoe was addressing earlier, and also Desiree. You had both talked about testing and uncertainty about rates. About with testing at such low rates in places like Nigeria, what are some of the ways we could try to get a more accurate sense of caseload. Then, building on that first question and thinking about investment, the question is simply the third question. Will Africa ever be the same for investors? So, how are longer term economic opportunity changing perhaps because of COVID if you think that's a valid premise. Fourth question is about humanitarian aid and whether that is something where we've seen a major change in our national response or maybe the more important question is how do we get more financial and macroeconomic aid to these economies that have suffered and are suffering the kind of GDP contraction that Xander talked

about a minute ago with concerns about negative 2 percent to negative 5 percent GDP growth this year in many different countries on the continent. Fifth question is about Morocco, and in April, the questioner poses or points out, Morocco launches an African initiative for a concerted management of the pandemic and since applies to 15 countries. Is that a good example of what could happen more, if anybody is familiar with that particular case? Then finally, wrapping these questions into longer term questions of sustainability and development, you know, again many of you have touched on this issue already, but the question is how is the pandemic effecting sustainability? I guess the wraps here, one or two more questions. One is about NGO's and how they can harmonize their efforts. Are there any opportunities for NGO's to work together more effectively, more synergistically, given the nature of this crisis and given the number of actors that we know are involved in Africa already? Finally, given the Ebola outbreaks in West Africa, how do you see capacity issues with COVID and Ebola together. This gets to the broader question of how we think about COVID-19 in the pantheon of all the health care challenges that Africa already has. Are there any specific aspects concerning Ebola that you would try to take lessons from or look for opportunities? And just as I was speaking, a final question has come in. I will stop and again, with apologies to those who have posed questions we're not necessarily going to get equally detailed answers to every question, but I wanted to get your questions before the panelists and they can pick 1 or 2 each to address, but the question here to finish. Africa has the most serious hunger and food insecurity issues of any place on earth, at least, certainly among the most serious. How has COVID-19 effected agricultural production and food distribution within the countries themselves and across the continent. So, with all of that, big mouthful, let me now turn things over, starting -- I guess we'll go in the order that we began with today. So, Youssef, if you could address 1 or 2 of those questions, please, in about, you know, 3 or 4 minutes. Thank you.

MR. TRAVALY: Thank you. So, maybe I will choose the one with will Africa ever be the same for investors, combined with the one on the private sector. What I can say for sure is that the problem we are facing today, and I would like to focus on science for now, which means innovation based scientific research. We are investing in Africa less than 1 percent in R&D. Therefore, we are a deficient of

skills, a deficient of knowledge, and a deficient of technology because of the fear that we don't invest too much in our end. That's when I think the U.S. can help, because they can bridge with Africa by giving us access to the other ideas of (Inaudible) can bend the diversities, if they are in very interesting. I mean, they can be skillful on the continent. Again, they will benefit from technology concepts from the U.S. to African, from the U.S. private sector to Africa, which will go on for scaling and that if the ING is as to be promotionalized, then there is an appointment to scale back (Inaudible). The reason why this scheme we could be progressing is the framework to scale up innovation in the U.S. is much more rigid than the framework that we have in Africa, which is much more favorable. So, in one of the problems, extreme health, for instance, was an idea that came from the U.S., was entitled to scale up in Africa and then brought back for commercialization. So, we need to be able to directly care for these sideboards of (inaudible). I think I will close with this and it will give more room for my pandemic thoughts.

MR. O'HANLON: Thank you. Xander, over to you, my friend.

MS. MEISE: Sure. So, I'll take the one about humanitarian aid and maybe macro level interventions. So, the international community earlier on in this crisis was continuing to give aid, but as I think somebody mentioned earlier, there is now some pressure for those governments not to be given aid when they need to do aid at home. We can think of — taking from the United States. The United States has had a problem providing PPE for its own medical workers. Now is not a time when the United States is going to be able to send PPE outside the U.S. So, what can governments do? Well, there has been a lot of talk about potentially restructuring or otherwise changing the payments on loans to governments, because many countries in Africa do not have the same sort of economic resources of liquidity or flexibility and the ability to budget as perhaps other economies do, with more stable currencies. So, can we think about pushing back institutional loan payments? Can we think about restructuring debt or forgiving, even, some of the debt? This is particularly an interesting question when one thinks about it from both sides. So, China and the U.S., being 2 big players in donating at that sort of institutional level. Wouldn't this be an amazing opportunity for either China or the U.S., or other partners, to consider taking a bold move and saying, okay, and during this time, we're going to forgive part of your debt or something

like that. So, the United States, which in some ways, there have been other Brookings discussions of this. You know, China has eclipsed the U.S. in its economic involvement on the continent in many ways. This would actually potentially be an opportunity for the U.S. to come back and show leadership and rebuild some of its relationships with countries if it were to take a bold stand on the economic relief. And in doing that, because it's not a cash outflow or a good outflow from the U.S. or from some of these other countries, that might be easier for the European Union, United States, Canada, China, you name it, to take on at this moment, where they themselves necessarily have the funds to go out, but they could say don't give me funds right now and consider this. I think while we have seen for years calls to restructure institutional debt at the macro level, this might actually be one of those times where it could happen, because this is not something effecting just one country or one region. This is effecting the whole world and I think we really need to raise those big picture questions and say well, what if, and why not. So, I look forward to that aspect of these discussions.

MR. O'HANLON: Yeah, that's a really powerful statement. Thank you, very compelling. Zoe Marks, over to you, and then we'll finish with Desiree.

MS. MARKS: Okay. I'll try to be as efficient as possible, and I might start — I'll try to take a couple of them together. So, starting with this question about testing, and then also some of what Youssef said, and thinking about NGO harmonization and then investing in local innovation. So, I think that one of the potential innovations that we could see coming out of a lot of African countries with high digital connectivity, particularly where there is a lot of access to mobile ones and data, is we've seen what's up in indigenous and newly generated apps being used really effectively, not only to send them information about COVID, but also to help, you know, we could see that transformed into an opportunity for self-reporting symptoms. Then if there are some communities that have relatively high testing accessibility, and others that are using the app that don't have access to testing, you can basically do matching and see whether or not what's coming in from self-reports looks like what's happening in other communities that have either higher or low grades of testing. You could imagine that there are ways to sort of make really well-informed inferences, if we're using some of the digital innovations that African

startups have develope3d already to not only share information about public health and COVID prevention, but also to start trying to identify early hot spots. So, that's one thing that I think would be fantastic. Then thinking about what is like NGO harmonization opportunity within this, I'd love to see NGO's doing 2 things, and I'm speaking particularly about high international NGO's. One is to not just do the sort of ambulance chasing of everything that we're already doing, now being a COVID thing, or being shut down, but also 2 things I'd like to see them do, is, 1, take leadership from the incredibly well coordinated regional responses that I think are being led at the highest level by Africa, CDC. If you haven't been to their web site, and you're listening in, please check it out. They have a live tracker. They've just developed and coordinated procurement system across the continent. I'm sure there have been hiccups. I know, that for a week, they're relatively reliable and informative press conferences were cancelled because of the Ethiopian and then that shut down, which is incredibly counter-productive when everything is on line, but the African CDC and letting this sort of regional coordinated response guide what NGO's are doing to coordinate, is really key for dong what Xander just mentioned, is taking this opportunity to make fundamental structural change in whose leading initiative on the continent. It seems to be Africans right now. Then the second thing I'd like to do is to think about what are the initiatives that you're supporting and where is innovation coming from? This is where I think NGO's are also really well places to try to invest in some of these startups and digital tech initiatives that are innovative and have uptake at the local level because they are both for purpose. They are built in ways that are not only culturally resonate and accessible for people who maybe have literacy issues or who don't trust the government, but that it's really strengthening the social cookies of the country. Then the last thing I want to say is not end on the bright spot of innovation and opportunities for multi and low holes, stakeholder engagement, but there is a real challenge here with the digital divide, and a lot of broke communities, particularly women don't have access to mobile phones and don't have access to data and aren't able to access information that's not in their local language. So, I think that this is an opportunity and a challenge across the continent right now to thing regionally about how can we ensure that all African countries look like Rwanda, look like Kenya, with data connected, because if you can't access information, then you're

stuck out of getting some of that data that I talked about in the beginning, where we have real time

updates and data desegregation regionally, but you're also going to be just a managed when the markets

do reopen and when we start to see some of that regional economic integration that Xander was talking

about.

MS. MARKS: If I just may say one sentence, you mentioned African CDC. We want to

look at bright spots here They have been one of the most amazing ones, and we talk about institutions

and infrastructure, and I think that's a great example of a success. The work that they have done, and

that they will continue to do now that they've been tested in this environment. That's one of the bright

shining lights, I think, to come out of the last few months.

MR. O'HANLON: Can one of you spell out the acronym just for someone who may not –

you said CVD?

MS. MARKS: CDC, the African center for disease Control and Prevention.

MR. O'HANLON: Where is it located?

MS. MARKS: In Addis Ababa.

MR. O'HANLON: Great. Desiree, over to you for final thoughts.

MS. SMITH: Okay, I will try to be very, very succinct. I'm going to answer a couple of the

questions, but I'll start with what the U.S. private sector can do, since that was my most recent position

with Albright's Strong Bridge Group. I think there's a large scope of things that the U.S. private sector can

do, and this is now the time for them to engage, not disengage. I think, you know, it's critically important

for U.S. companies to remain in African markets, not pull back, even though we ae facing eeriest

challenges here at home. That is understandable, but to the extent possible, U.S. private companies, can

play a huge role in the economic recovery by creating more jobs on the continent. So, even before

COVID, the continent was facing about a job of about 20,000,000 jobs and that is a critical point to keep

in mind, given the youth bulge. Right? So, now there is a very real risk of additional jobs being lost

because of the close of Pandemic. So, to the extent that it's possible to create new jobs in this post-

COVID world, that I think is going to be critically important. One way that companies can do that is by

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bringing supply chains to the African continent, something that you just touched on earlier, that I think it is going to be critically important, especially given the point that Xander made, that this pandemic is global, right? So, even if and when Africa gets it under control, other markets and other training partners may still be grappling with it. So, giving the rise of the African Continental Free Trade area, I think this is a real opportunity to reimagine supply chains and that is an opportunity to create desperately needed wellpaying jobs. On the testing point, I am no expert on testing. I am not a scientist, but I will say that there is an opportunity to look at what has worked on the continent. Look at some of the innovative approaches to testing that have been taken in places like Senegal where \$1.00 to grab the test and was local. In places like Rwanda, where they are doing cold testing, which is the lower costs of mechanics. You test large numbers for COVID-19. Then I'll end on the NGO questions. NDG's in civil society at critical part of this, particularly given that the mistrust in between citizens and governments in many places. So, I think NGO's definitely need to be at the table. They need to be using their inside voices to the extent that they are harmonizing their efforts to amend the very limited resources that many are facing. I think where they can play critical roles including protecting some of the most unilateral, -0-8at9p that includes women, children that have Billy, but also migraines, refugees, staff workers, LGBD are people who have been targeted, even more since the pandemic, particularly by overzealous, security forces, and police forces that have taken a militaristic approach from tourists to enforce a lot of these lockdowns. In doing so, have targets poor communities and those already stigmatizing communities. I think in Youssef, I think there are going to be incredibly important to encourage transparency in government spending. One thing that we saw in the Ebola crisis, and I think it an important lesson, to apply for this is to the COVID pandemic is a lot of resources were lost and lives were lost, due to corruption. That is an unnecessary evil, and I think NGO's play an important part, an important role in encouraging government transparency in holding leaders to account, particularly in places where leaders are using the pandemic as a guise to consolidate their power, instead of actually protecting public health. I'll end there.

MR. O'HANLON: You four have been fantastic. I don't know how you covered so much in 60 minutes. I'm really privileged to have been part of this with you. I want to thank Luke and other

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friends at National Security. I want to thank Zoe and Desiree and Xander and Youssef for excellent

comments ranging from health care considerations and NGO's to gender and law to economics to the

future of Africa at large, and the way in which the United States and others around the world can be part

of helping build its future. So, without any further ado, thank you, very best wishes, everybody stay safe.

Have a good rest of the summer as we go forward and our best wishes to friends around the world, but

espe3cially in Africa today. We're privileged to be partners with you on so many things we do together.

We wish you the very best. We also compliment and comment you for the way in which you have limited

the spread of Corona virus. Frankly, a lot better than a lot of the rest of us have so far. Best wishes with

that going forward as well. So, thanks to all. Take care.

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