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## ABOUT SADC

The Southern African Development Community (SADC) is an organisation founded and maintained by countries in southern Africa that aim to further the socio-economic, political and security cooperation among its Member States and foster regional integration in order to achieve peace, stability and wealth. The Member States are: Angola, Botswana, Union of Comoros, the Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, United Republic of Tanzania, Zambia and Zimbabwe.

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EXECUTIVE SUMMARY

The bulletin provides an overview of the global, continental and regional overview of the pandemic. Several SADC Member States have embarked on processes towards lifting of public health and other measures in view of depressed economies, which is the crux of this report, where we provide an analysis of the costs and benefits of lifting measures and further highlight the importance of undertaking a risk assessment of each country, including at sub-national level, prior to the lifting of lockdown and other measures. Experts have indicated that premature lifting of lockdown measures may lead to a second wave of the pandemic, such as what has been witnessed in Germany and South Korea among others, therefore WHO guidelines remain paramount.

According to Michelle Bachelet the UN Commissioner for Human Rights, “If the re-opening of societies is mishandled, all the huge sacrifices made during the initial lock down will have been for nothing. However, the damage to individuals and to the economies, will not just be retained –it will be significantly amplified”

The report also provides some highlights of testing in the SADC region, further making emphasis on the importance of testing which remains quite low in most countries in the SADC region. Like in previous reports, we continue to track the socio-economic issues emanating from COVID-19. Reference has also been made on the importance of ICT, as driver for economic growth as well as a facilitator for business continuity in these challenging times.

Key recommendations in the report are summarised below:

- **Adjusting of public health and social measures**
  - The adjusting of measures should not be undertaken all at once, but should be considered at the subnational level, starting in areas with lowest incidence. Basic individual measures (e.g. isolation and care of suspect and confirmed cases, quarantine of contacts, hand hygiene and respiratory etiquette) should be maintained.
  - Where feasible, measures should be lifted in a controlled, slow, and step-wise manner, for example, using two-week intervals to identify any adverse effects.
  - In the absence of scientific evidence on the efficacy of each single measure, as a general principle, measures with the highest level of acceptability and feasibility and the fewest negative consequences could be introduced first and removed last.
  - Protection of vulnerable populations should be central in the decision to maintain or lift a measure.

- Some measures (e.g. business closures) could be lifted first where the population or individual density is lower and could be lifted for part of the workforce before allowing 100% of the workforce to return to a business

- **Testing for COVID-19**

  Member States are encouraged to increase their testing capacity to be able to isolate, trace contacts and treat patients to reduce the spread of COVID-19, focusing on those presenting with symptoms and the vulnerable among others

- **Social and Economic Sector**

  Member States are urged to revise priorities reflected in budget revenue, spending and financing to meet COVID-19 emergency demands and to contain fiscal deficits and surges in public debt, at manageable levels.

- **Enhancing Connectivity in SADC**

  Member States are urged to invest in enhancing ICT capabilities to ensure business continuity, which will also have a positive ripple effect on economic growth. 
1. GLOBAL SITUATION

Declared as a pandemic by the World Health Organization (WHO) on 11 March 2020, COVID-19 has become a global emergency, given its impact on the world's population and the economy. As of 13 May 2020, 4,170,424 Cases have been reported globally with 287,399 associated deaths.

As of 10 May 2020, WHO had deployed International Emergency Response Teams to Ghana, South Africa, Zambia, Senegal, Burkina Faso, Ethiopia, Cameroon, Algeria, Democratic Republic of the Congo, Congo and Zimbabwe to support countries UNESCO, UNICEF, the World Bank and WFP have published a Framework for Reopening Schools, addressing the impact of school-closure on children, specifically the marginalized. The framework highlights the importance of education and considerations for safe return to school, providing advice on core pillars including safe operations, learning, including the protection and wellbeing of the most marginalized.

2. SITUATION ON THE AFRICAN CONTINENT AND IN THE SADC REGION

Across the continent, countries have implemented a number of control measures to comprehensively prepare for and respond to COVID-19. The goal of countries’ strategies in general was to control the pandemic by slowing down transmission and reducing mortality associated with COVID-19, with the ultimate aim of reaching and maintaining a state of low-level or no transmission. Based on local epidemiological situation, some countries are in the process of scaling up public health and social measures, while others are or currently considering scaling down these measures.

3. SUMMARY OF EPIDEMIOLOGICAL SITUATION IN SADC MEMBER STATES

The cumulative caseload in the SADC Member States as of 13 May 2020 was 14,096 representing 28.5% of total cases on the African continent, with a cumulative death tally of 312 representing 21% of total deaths on the continent. Four countries in the SADC region, South Africa (11,350 cases), DRC (1169 cases), United Republic of Tanzania (509 cases) and Mauritius (332 cases) represent approximately 94% of the total caseload in the SADC region. More importantly Seychelles and Mauritius have reported zero active cases since 11th May 2020 and 14th May 2020, respectively.

3.1 COVID-19 control measures implemented by Member States

SADC Member States have continued to implement control measures to achieve low level or no transmission with varying intensity depending on the transmission scenario each country is facing (no cases, first cases, clusters of cases, or community transmission). These measures included among others; identification, testing, isolation and care for all cases, tracing and quarantine of all contacts, public health and social measures at individual and community levels. Many countries in the region also implemented additional large scale public health and social measures (PHSM), including movement restrictions, closure of schools and businesses, geographical area quarantine, and international travel restrictions.

As some countries move to ease or tighten public health measures and social measures decisions should be based on scientific evidence and real-world experience and take into account other critical factors, such as economic factors, security-related factors, human rights, food security, and public sentiment and adherence to measures.

3.2 Risk assessment before adjusting public health and social measures

The decision to introduce, adapt, or lift public health and social measures should be based on a risk assessment with a standard methodology to balance the risk of relaxing measures, capacity to detect a resurgence in cases, capacity to manage extra patients in health facilities or other locations, and ability to re-introduce public health and social measures, if needed. Since the risk of COVID-19 transmission is not homogeneous within a country, the risk assessment should be extended to sub-national or even community levels. The risk assessment must address the following questions:-

- What is the likely impact of adjusting public health and social measures in terms of the risk of case resurgence?
- Is the public health system able to identify, isolate, and care for cases and quarantine contacts?
- Is the public health system able to rapidly detect a resurgence of cases?
- Is the health care system able to absorb an extra patient load and provide medical care in case of resurgence?
RECOMMENDATIONS for Member States when considering the adjusting of public health and social measures

- The adjusting of measures should not be undertaken all at once, but should be considered at the subnational level, starting in areas with lowest incidence. Basic individual measures (e.g. isolation and care of suspect and confirmed cases, quarantine of contacts, hand hygiene and respiratory etiquette) should be maintained.

- Where feasible, measures should be lifted in a controlled, slow, and step-wise manner, for example, using two-week intervals to identify any adverse effects.

- In the absence of scientific evidence on the efficacy of each single measure, as a general principle, measures with the highest level of acceptability and feasibility and the fewest negative consequences could be introduced first and removed last.

- Protection of vulnerable populations should be central in the decision to maintain or lift a measure.

- Some measures (e.g. business closures) could be lifted first where the population or individual density is lower and could be lifted for part of the workforce before allowing 100% of the workforce to return to a business.

The lifting or adjusting of public health and social measures should be coupled with measures aimed at breaking chains of Covid-19 transmission by detecting, testing, isolating, and treating cases and quarantining contacts. Evidence in the SADC Region demonstrates that while some countries have significantly expanded their testing capacity, the required level of testing to effectively control the transmission of the virus remains insufficient. Figure 2 below shows the level of testing in the SADC Region in selected countries. South Africa, Mauritius and Zimbabwe have conducted the highest number of tests, representing a marginal level of testing in the SADC region.

4. WHO RECOMMENDED CRITERIA FOR COMPREHENSIVE LIFTING OF PUBLIC HEALTH AND SOCIAL MEASURES

WHO recommendations on a comprehensive epidemiological, health system, and public health surveillance criteria for lifting public health and social measures are provided as an Annex to this report. These criteria are not prescriptive, and it may not be feasible to answer some of them owing to lack of data, for instance.

To the extent possible countries should focus on the criteria most relevant for them to inform decision making. The thresholds are indicative and may need to be revisited as further information about the epidemiology of COVID-19 becomes available. It is recommended to systematically assess the criteria at least weekly at a subnational administrative level when feasible.

A further analysis is provided in Figure 3 above, which is testing in SADC Member States per 1000 population. When considering testing by population size, Mauritius has the highest testing coverage. The graph above shows that for every 1000 Mauritians, 55 have been tested for COVID-19. In South Africa, for every 1000, 7 have been tested and in Botswana, for every 1000, 5 have been tested and are second and third respectively. The above analyses underscore the importance of testing, particularly testing in proportion to the population.

Figure 2 : COVID 19 testing rate for selected countries

Figure 3 : Testing per 1,000 population

Source : SADC Member States published data (as at 14 May 2020)
5. EASING LOCK DOWN MEASURES: BALANCING BETWEEN SAVING LIVES AND REBOOTING THE ECONOMY

The impact of COVID-19 especially the lockdown of the economies left a significant portion of the global population vulnerable, as incomes dried up with little or no social safety nets. International Labour Organisation (ILO) reported that out of the total number of affected people in the labour market, approximately 1.6 billion informal sector workers were significantly impacted by lockdown measures and/or working in the hardest-hit sectors.

The lockdowns adopted in most countries assisted with containing the spread of COVID-19 and strengthening health systems to be more prepared for the increase in infections. However, it was detrimental to the economy especially the informal sector whose livelihoods or incomes are dependent on whether they operate or not. In light of the limited fiscal spaces and the precarious fiscal positions of most governments, the significant COVID-19 related expenditures and inadequate social safety nets to safeguard livelihoods of people especially the informal sector resulted in the continued lockdown of economy untenable, captioned as ‘die from hunger or virus’ scenario. Consequently, with an increased risk of an economic depression, governments were forced to consider the policy dilemma as both options of re-opening or not have costs and benefits.

The easing of lockdown restrictions and reopening of economies will have a positive impact on the economy but it comes with a social cost which translates to an economic cost as governments would be required to put additional resources further widening their fiscal deficits and debt levels. Reopening of the economy will result in significant activity in economies which had ground to a halt during the lockdown period. However, the downside, is the increased risk in the infection rates, if this is not well managed, which will put pressure on the health system. Therefore, it is key to balance between re-opening of the economy and the level of health system preparedness for the increase in infections. Re-opening of the economy should be done alongside heightened efforts to limit the spread of the virus until a vaccine COVID-19 is found. Mitigation of these risks involves ensuring that “COVID-19 ready state" building blocks are in place which include a robust testing, tracing and treatment. These blocks will assist in not only flattening the curve but in crushing the curve. However, premature re-opening of the economy may trigger an uncontrollable outbreak with severe socio-economic costs. It is imperative to have a comprehensive data driven re-opening plan to ensure the re-opening rate does not trigger an outbreak.

In the SADC region, Member States have adopted a phased methodical re-opening of economies strict COVID-19 health and safety protocols. The easing of lockdown regulations will result in restoration of more than 20 per cent of economic activity. However, the economies are not yet out of the woods as the negative socio-economic effects of the coronavirus persists. In the short to medium-term, the global and regional economies are faced with a risk of an increase in infections which can result in the reintroduction of extreme social distancing measures/lockdowns. Member States will need huge resources to bolster public health, for the economic stimulus, and for social safety nets, which will place an enormous strain on budgets.

6. UN GUIDANCE ON SOCIO-ECONOMIC RESPONSE AND RECOVERY

In an effort to guide Member States the UN has recently announced that its intervention will focus on five key streams, which are connected by action to meet the need for environmental sustainability, if countries are to recover and be better prepared to address future shocks, including pandemics. Therefore, there is need for Member States to align their responses to benefit from the following UN intervention:

- protecting existing health services and strengthening health systems’ capacity to respond to COVID-19;
- helping people cope with adversity, through social protection and basic services;
- protecting jobs, supporting small and medium-sized enterprises, and informal sector workers through economic recovery programmes;
- guiding the necessary surge in fiscal and financial stimulus to make macroeconomic policies work for the most vulnerable and strengthening multilateral and regional responses; and
- promoting social cohesion and investing in community-led resilience and response systems.

7. SOCIAL AND ECONOMIC PERSPECTIVES

The sharp global economic downturn brought on by the COVID-19 pandemic will severely affect every region in the world and Africa will not be spared. African countries will be affected through numerous channels, notably, through the trade and tourism channels. Nationwide as well as partial lockdowns will also weigh heavily on consumption expenditure. As a result of the COVID-19 pandemic, the global economy is projected by the International Monetary Fund (IMF) to contract sharply by a negative 3 per cent in 2020, much worse than during the 2008–09 financial crisis. Additionally, uncertainties concerning COVID-19 and the effectiveness of public policies intended to curtail its spread are fuelling market volatility. The IMF has projected a partial recovery in 2021, but the level of growth will remain below the pre-virus trend, with considerable uncertainty about the strength of the rebound. However, worse growth outcomes maybe possible if the pandemic and containment measures last longer. Emerging and developing economies are likely to be severely hit if firm closures and extended unemployment lingers.
As the pandemic unfolds, adverse economic impact was revealed by the contraction of leading economies during the first quarter of 2020. Preliminary data, showed that the world's two largest economies, US and China, recorded historic economic contractions in the 2020 first quarter of 4.8 per cent and 6.8 per cent, respectively. On the other hand, the Eurozone's economy also contracted by 3.8 per cent in the first quarter of 2020. The contraction was largely due to the coronavirus lockdown from mid-March 2020 which forced businesses to close and consumers to stay at home. France, Spain and Italy economies contracted the most, with France entering into a recession.

The impact of COVID-19 is significantly severe in economic sectors that strive on human interactions and travelling. Social distancing measures and restrictions of movement had a significant impact on the aviation and tourism sectors. Based on the measures implemented to contain the spread of COVID-19 coupled with lockdowns, quarantine, travel bans, border closures across the world and the patterns of previous crises (2003 SARS and 2008 global economic crisis), the United Nations World Tourism Organisation (UNWTO) estimates international tourist arrivals to decline by between 20 to 30 per cent in 2020. This translates to a loss of between $300 billion to $450 billion in international tourism receipts (exports) which is almost one third of the US$1.5 trillion generated globally in the worst-case scenario. Additionally, International Air Transport Association (IATA) forecasts a contraction in passenger volumes of about 48 per cent for 2020 resulting largely from economic downturn, travel restrictions, change in consumer spending behaviour and loss of travel confidence.

Globally governments have invested heavily to curtail socio-economic damage through buttressing the health systems as well as mitigate the erosion of the economic base which will determine the recovery period length. As the pandemic evolves so do measures taken by governments to tackle it which will ultimately impact the global and individual fiscal deficits for 2020. The IMF projections for government borrowing globally, points to a likely increase from 3.7 percent of global GDP in 2019 to 9.9 percent of global GDP in 2020. In developed economies, the fiscal balance to GDP ratio is projected to rise from 3.0 percent of GDP in 2019 to 10.7 percent of GDP in 2020; the ratio for the United States is projected to escalate from 5.8 percent of GDP to 15.7 percent of GDP. For developing economies, the fiscal balance to GDP ratio is estimated to rise from 4.8 percent of GDP in 2019 to 9.1 percent of GDP in 2020.

**RECOMMENDATIONS**

There is need for governments to revise priorities reflected in budget revenue, spending and financing to meet COVID-19 emergency demands and to contain fiscal deficits and surges in public debt, at manageable levels.

8. **ENHANCING CONNECTIVITY IN SADC REGION**

COVID-19 has demonstrated the critical need for smart digital technologies and solutions. Given the effects of the lock down in many countries’ public offices, businesses such as supermarkets, pharmacies as well as academia have resorted to enhancing their digital and technological capabilities to enable telecommuting, online transactions, online shopping, online education and telemedicine during this time. The role of ICT during this time is critically important and therefore must be enhanced to ensure business continuity. It is also important to ensure diversification of sources of energy to support ICT infrastructure in different settings such as installation of solar grids in communities where electricity is in short supply. Experts have projected that the COVID-19 pandemic will continue into the foreseeable future, therefore the role of ICT cannot be over-emphasised.

**RECOMMENDATIONS**

Governments, Private Sector, Businesses must invest in enhancing ICT capabilities to ensure business continuity, which will also have a positive ripple effect on economic growth.