

# PUTTING OUT THE SMALL FLAMES: SOUTH AFRICA'S APPROACH TO COMBATING COVID-19

© 2020 B. GORELIK

DOI: 10.31857/S032150750009552-9

Boris M. GORELIK, PhD (History), Independent Researcher (boris.gorelik@outlook.com)

**Abstract.** *Although the COVID-19 pandemic started only recently, and the epidemiological situation in Africa and worldwide changes rapidly and sometimes unexpectedly, a preliminary analysis of the South African experience in handling the outbreak can be illuminating. Within the two months since the first confirmed case was reported in South Africa, the government took comprehensive measures to combat the new coronavirus. These measures displayed patterns and attitudes that will probably persist and determine the government's response to the COVID-19 crisis.*

*'Putting out the small flames to avoid a raging fire' has been the main principle of the government's strategy. The anticipatory action includes community screening and testing, using some of the experience that South African health professionals acquired in containing the HIV/AIDS pandemic. By minimising or preventing community transmission in high-risk areas they have succeeded in maintaining a comparatively low infection rate.*

*South African policymakers have displayed flexibility in response to the demands of the population and the business community. The full lockdown has been replaced with the so-called 'shielding' approach, protecting the most vulnerable residents while allowing the rest of the people to engage in their normal activities, with mandatory precautions.*

*The government has also shown its resolve to salvage the South African economy by reallocating a large part of the budget and securing loans from international financial institutions, such as the New Development Bank (BRICS), for a stimulus package that amounts to 10% of the country's GDP.*

**Keywords:** South Africa, coronavirus, pandemic, COVID-19, Africa

The fight against the new coronavirus in Africa began only a few months ago, and the epidemiological situation has been changing. The approaches to handling the COVID-19 emergency have been evolving as both governments and healthcare professionals obtain new information on the virus, its fatality and recovery rates.

This process is also taking place in South Africa, where the COVID-19 pandemic has been recognised as the greatest health crisis since the outbreak of Spanish flu a century ago. President Cyril Ramaphosa even stated that his country 'has never had to deal with a public health emergency of this magnitude' [1]. Under these circumstances, it is too early to evaluate the efficiency of the measures taken against the pandemic in that country. However, these measures have displayed certain characteristics that can be identified in order to understand how South African policymakers would view new developments and respond to them.

## IMPOSITION OF A LOCKDOWN

A confirmed COVID-19 case in South Africa was first reported on 5 March, 2020. Ten days later, President Ramaphosa declared a national state of disaster. There were just sixty confirmed cases of COVID-19 countrywide and no confirmed deaths, but community transmission of the virus had already started. Epidemiological projections indicated that 40% of the South African population would be

infected and over 350,000 of those would die from the coronavirus unless its spread was arrested [2]. South Africans, with their immunity compromised by high rates of HIV and tuberculosis, were deemed particularly vulnerable to the infection [3].

South Africa became one of the first countries on the continent to impose a countrywide lockdown. From 27 March most South Africans were prohibited from leaving their homes except for necessary trips, such as buying groceries or seeking medical help. All shops and companies were closed except those providing essential goods and services. Liquor and cigarettes were not regarded as essential goods, so their sale was stopped. The expected reduction in alcohol-related cases was meant to enable hospitals to keep more beds ready for COVID-19 patients.

The mandatory social distancing and other emergency measures introduced by the government helped to forestall the spread of infection [4]. Although the number of COVID-19 cases in South Africa was expected to grow exponentially, the curve proved to be flatter than was the case in the US and many countries of Western Europe. The pattern of the infection in March and April resembled that of South Korea [5].

## LESSONS LEARNT FROM THE HIV/AIDS PANDEMIC

Since the imposition of the lockdown, the daily number of new confirmed COVID-19 cases had a

tenfold reduction. It had been growing by 41% on the average, but, during the lockdown the number was rising by only 4% [6].

South African epidemiologists have used their experience of the HIV/AIDS pandemic. Given that the country has the largest number of confirmed HIV cases in the world, the government cannot afford to let their nation fall victim to another dangerous virus, which is why they have consistently taken the advice of medical experts.

Another lesson from the HIV pandemic has been 'putting out the small flames to avoid a raging fire' is an appropriate strategy of managing the outbreak [5]. To identify COVID-19 cases and minimise community transmission, mobile testing units and thousands of health workers, some already employed in HIV- or tuberculosis prevention, are deployed in areas with the highest population density and, correspondingly, the highest risk of infection. Residents showing coronavirus symptoms are identified and treated, and their contacts quarantined.

However, the comparatively low number of confirmed COVID-19 cases in South Africa has also been attributed to insufficient testing [7]. By 28 April, for every thousand residents, South Africa had conducted 10 times fewer tests than Italy or Spain, and 7 times fewer than Russia. Still, South Africa, with its 3.1 tests per thousand residents, was second only to Ghana (3.2) among the African countries with a population of two million and more. South Africa also outperformed its BRICS partners: India (0.5) and Brazil (1.6) [8].

During the lockdown, the National Health Laboratory Service aspired to raise the daily number of COVID-19 tests to 35,000. The inefficiency of the public healthcare system, the lack of testing kits and testing sites as well as the lengthy processing of samples hindered the progress [7; 9; 10]. At the end of April, nearly 10,000 tests were carried out in South Africa every day. Although it represented a threefold increase from the beginning of the month, the goal was not reached [11].

## THE LOCKDOWN ENDS

By the end of April, over 5000 confirmed cases of the new coronavirus had been reported [12]. South Africa found itself among the three countries with the highest COVID-19 infection rate on the African continent, the others being Egypt and Morocco (which conducted significantly fewer tests per

thousand residents). It also had the largest number of confirmed COVID-19 cases south of the Sahara.

The COVID-19 death toll in South Africa was less than 100, and nearly 2100 patients had recovered by the end of April. The low fatality rate may be explained by the predominance of young people among the residents. The median age of the South African population is twenty-five, and younger COVID-19 patients have a much lower chance of severe disease or death than those aged seventy or older. Four out of five COVID-19 cases in South Africa were under seventy-one years, which places them in the lower-risk group [13]<sup>1</sup>.

Restrictions on economic activity were eased from 1 May in a phased lifting of the lockdown. Precautions were still to be taken to limit community transmission and outbreaks of the new coronavirus. Each province, district and metropolitan municipality has been classified according to the local COVID-19 infection rate and the health system capacity, with the restrictions imposed or lifted according to the current risk level in the area.

After the lockdown, the consensus among medical experts in South Africa seemed to be that South Africa would not avoid a gradual escalation in the number of COVID-19 cases [5; 14]. The thinking was that many of the social distancing restrictions would be upheld for the next 3-5 months in order to sustain a comparatively low infection rate.

The Department of Health announced that the spread of the new coronavirus in South Africa was being slowed down thanks to the preventive measures taken by the government and the public health sector. Their projections indicated that the peak numbers of coronavirus cases would be reached in September, with a total maximum number of 1.5 million COVID-19 cases in Gauteng, the most densely populated province. The lockdown restrictions bought the authorities an additional two months to prepare hospitals and quarantine facilities for the surge and avoid overburdening the healthcare system. In the worst case, South African hospitals would need twice as many ventilators and three times as many intensive-care beds as there were in April [1; 15].

## THE NEED OF AN AFRICAN APPROACH

The medical authorities are going to intensify COVID-19 testing and community screening. The National Health Laboratory Service plans to widen its testing capacity thanks to the newly

<sup>1</sup> Update on Covid-19 (22nd April 2020), SA coronavirus, 22 April 2020. <https://sacoronavirus.co.za/2020/04/22/update-on-covid-19-22nd-april-2020>

acquired machines which process samples automatically and produce results within an hour [16]. The gradual lifting of the lockdown restrictions lessens social distancing and increases community transmission. Although herd immunity will be developed sooner, the new factors complicate pre-emptive case detection [7]. It will be further compounded by the seasonal flu epidemic in the next few months [17].

Africa has considerably fewer health professionals, ventilators and hospital beds per person than other continents [18]. Meanwhile, South Africa's healthcare and financial resources exceed those of most African countries. Comparatively well-funded and staffed non-governmental organisations make up some of the deficiencies of the public health system in South Africa. However, the country grapples with the same social and political problems including poverty, corruption and mismanagement, as other African nations. These problems have aggravated the coronavirus crisis in Africa, therefore the strategies pursued by Western countries in combatting COVID-19 should be adapted to the local conditions.

The South African government has eventually realised the futility of enforcing the lockdown in townships and informal settlements. Self-isolation and strict social distancing are impossible in poor, overpopulated parts of African cities [19]. Only half of the South African population have access to water inside their homes or have a flush toilet connected to the sewage system. Millions of South Africans live in informal urban settlements with communal taps and toilets [20]. Residents have to go out every day if only to earn a living, and a lockdown deprives them of their meagre income. In some of these areas, they have completely ignored the government restrictions and recommendations.

The media exposed disturbing cases of police and army brutality as these forces wield emergency powers for the first time since the 1980s [21; 22]. Rather than achieving compliance with the new regulations, the oppressive actions triggered protests and fomented disobedience.

### **SHIELDING THE VULNERABLE**

Due to the lack of income-generating opportunities, the most disadvantaged South Africans became fully dependent on social grants and government rations. There were reports of government officials appropriating food parcels and supplying them for bribes [23]. During the lockdown, the authorities failed to organise timely delivery of food parcels. As a result, hungry residents resorted

not only to violent protesting but also to looting of shops and delivery vehicles [1; 24; 25; 26].

Experts have warned against a blanket imposition of physical distancing. In order to alleviate the pressure on the economy and the healthcare system as well as to ease the socio-political tensions, the authorities should focus on protecting the high-risk groups, such as residents aged over seventy or those with underlying health conditions. While those groups are required to maintain physical distancing during the pandemic to minimise or eliminate their chances of being infected, others can engage in economic and other activities with fewer restrictions [27]. Modelling for the African context shows that 'shielding a small portion of the population is a potentially more practical strategy to adopt for a prolonged period of time, compared with strong physical distancing among the general public' [18].

The gradual lifting of the countrywide lockdown and the more selective application of the restrictions indicates that the South African government is inclined to take the 'shielding' approach. There may be more COVID-19 cases than under a full lockdown, but the number of severe cases would probably be reduced [18].

### **10% OF GDP AS A STIMULUS PACKAGE**

The official unemployment rate in South Africa had exceeded 29% before the pandemic [28]. Further significant job losses are expected until September or even October due to the lockdown, financial troubles and permanent closure of small and medium businesses [29; 30; 31]. The South African Reserve Bank expects that 370,000 employees in the formal sector would become redundant in the near future [32]. According to another forecast, which considers the informal sector, over a million South Africans would lose their jobs as a consequence of the COVID-19 emergency [33].

On declaring the state of disaster in mid March, the government took steps to minimise the damage to the economy and the employment rate. The government allocated funds to enable companies affected by the COVID-19 crises to continue paying salaries. Employees infected by the coronavirus in the workplace started receiving grants. Small and medium businesses could apply for direct subsidies and tax deferral. The South African Reserve Bank set its repurchase rate at a record low: 4.25%.

Yet these targeted interventions added up to 0.7% of GDP, while most emerging markets were allocating from 2% to 5% of their GDP for managing the COVID-19 crisis [18; 34].

In late April, the South African stimulus package was increased to 10% of GDP. The government started implementing a comprehensive plan to revitalise the economy, which provides for bigger subsidies and guaranteed loans to small businesses, more substantial grants for the unemployed and large-scale funding of the healthcare system.

### BORROWING TO SAVE THE ECONOMY

A quarter of the amount was taken from the country's budget, but the remainder had to be raised with external funding, which had proved to be a formidable task. The economy had gone into a recession even before the pandemic reached the country. Both Fitch and Moody's demoted the country's sovereign debt to sub-investment grade because of the slow economic growth and the widening primary deficits [35]. South Africa was excluded from the FTSE World Government Bond Index, which raised the cost of borrowing in the financial markets.

This year, the country's economy is expected to contract drastically. Estimates vary from -2.5% (Moody's) to roughly -6% (South African Reserve Bank; IMF). The potential damage to the GDP is said to be graver than after the 2008 financial crisis. The South African National Treasury has projected a deep recession with the fiscal deficit of 6.8% of the GDP [32].

Despite the bleak outlook for the South African economy, the government managed to obtain loans from the World Bank and the International Monetary Fund. Besides the South African government is relying on a billion US dollars from the New Development Bank, established by the BRICS grouping [36; 37].

### THE SOUTH AFRICAN WAY OF MANAGING THE PANDEMIC

The government's reaction to the pandemic has been characterised by anticipatory action such as the comparatively early imposition of the lockdown and proactive community testing and screening. The authorities have followed the recommendations of both the WHO and leading South African epidemiologists. Although the required daily number of COVID-19 tests was not achieved during the lockdown, South Africa appears determined to intensify the testing. The timely lifting of the lockdown and the transition to the 'shielding' model demonstrates that the authorities are prepared to adjust their approach to the changing situation.

By gradually restoring economic activity, the government has shown its regard for the interests of the South African business. The generosity of the new stimulus package surprised even the government's critics. The authorities seem determined to minimise the damage that the pandemic and the restrictions have caused to the economy in recession, to invest in retaining productive capacity, compensate for the income losses of the most disadvantaged residents and prevent further erosion of the tax base.

However, South African officials as well as law enforcement and military personnel have sometimes abused their emergency powers. The effectiveness of the policies depends on the efficiency, honesty and goodwill of those who carry it out, and it remains to be seen if the government's ambitious strategy can be implemented successfully.

### References

1. From the desk of the President (20 April 2020). <https://sacoronavirus.co.za/2020/04/20/from-the-desk-of-the-president-20th-april-2020> (accessed 22.04.2020)
2. Baleta A. COVID-19: What we think we know about the epidemiological numbers. <https://www.spotlightnsp.co.za/2020/04/14/covid-19-what-we-think-we-know-about-the-epidemiological-numbers> (accessed 14.04.2020)
3. President Cyril Ramaphosa: Escalation of measures to combat Coronavirus COVID-19 pandemic-23-mar (accessed 14.04.2020) <https://www.gov.za/speeches/president-cyril-ramaphosa-escalation-measures-combat-coronavirus-covid-19-pandemic-23-mar>
4. What South Africa learned from AIDS. *The Economist*. 18 April 2020. <https://www.economist.com/middle-east-and-africa/2020/04/16/what-south-africa-learned-from-aids> (accessed 20.04.2020)
5. South Africa's coronavirus lockdown: what comes next - and what needs to happen to end it sooner. <https://businesstech.co.za/news/government/389247/south-africas-coronavirus-lockdown-what-comes-next-and-what-needs-to-happen-to-end-it-sooner> (accessed 20.04.2020)
6. Wiysonge C.S. South Africa's War on COVID-19. <https://www.samrc.ac.za/news/south-africas-war-covid-19> (accessed 28.04.2020)
7. Schütz E. COVID-19. Why is SA not testing more? <https://www.spotlightnsp.co.za/2020/04/20/covid-19-why-is-sa-not-testing-more> (accessed 25.04.2020)
8. COVID-19 Coronavirus Pandemic. <https://www.worldometers.info/coronavirus> (accessed 29.04.2020)
9. Kahn T. SA can conduct 25,000 COVID-19 tests a day. <https://www.businesslive.co.za/bd/national/health/2020-04-14-sa-can-conduct-25000-covid-19-tests-a-day-business-for-sa-says> (accessed 01.05.2020)
10. Harding A. Coronavirus in South Africa: The lull before the surge? <https://www.bbc.com/news/world-africa-52228932> (accessed 11.04.2020)
11. Update on COVID-19 (27 April 2020). <https://sacoronavirus.co.za/2020/04/27/update-on-covid-19-27th-april-2020> (accessed 27.04.2020)

12. Update on COVID-19 (28 April 2020) with Media Presentation. <https://sacoronavirus.co.za/2020/04/28/update-on-covid-19-28th-april-2020-with-media-presentation> (accessed 28.04.2020)
13. Update on COVID-19 (22 April 2020). <https://sacoronavirus.co.za/2020/04/22/update-on-covid-19-22nd-april-2020> (accessed 25.04.2020)
14. Hogg A. Inside COVID-19. What comes after lockdown ends... <https://www.biznews.com/inside-covid-19/2020/04/20/covid-19-lockdown-stanford-sunter-dogs> (accessed 27.04.2020)
15. Du Toit P., Cowan K. SA government plans for COVID-19 to peak in September but questions about data remain. <https://www.news24.com/SouthAfrica/News/sa-government-plans-for-covid-19-to-peak-in-september-but-questions-about-data-remain-20200411> (accessed 13.04.2020)
16. Evans S. Cowan K. Nine days left: 5 things SA must get right before lockdown ends. <https://www.news24.com/SouthAfrica/News/nine-days-left-5-things-sa-must-get-right-before-lockdown-ends-20200421> (accessed 21.04.2020)
17. Cowan K. NICD's top epidemiologist: How the COVID-19 pandemic is evolving and why we should be concerned. <https://www.news24.com/SouthAfrica/News/nicds-top-epidemiologist-how-the-covid-19-pandemic-is-evolving-and-why-we-should-be-concerned-20200412> (accessed 14.04.2020)
18. Kartik J., Leke F., Ooko-Ombaka A., Sun Y.S. Finding Africa's path: Shaping bold solutions to save lives and livelihoods in the COVID-19 crisis <https://www.mckinsey.com/featured-insights/middle-east-and-africa/finding-africas-path-shaping-bold-solutions-to-save-lives-and-livelihoods-in-the-covid-19-crisis#> (accessed 30.04.2020)
19. Keaveny P. Why heavy-handed policing won't work for lockdowns in highly unequal countries <https://theconversation.com/why-heavy-handed-policing-wont-work-for-lockdowns-in-highly-unequal-countries-135989> (accessed 16.04.2020)
20. Gevisser M. Share a Toilet with Your Neighbor? *New York Times*. 3 April 2020. <https://www.nytimes.com/2020/04/03/opinion/coronavirus-south-africa.html> (accessed 29.04.2020)
21. SANDF issues stern warning after soldiers accused of beating Alexandra man to death. <https://www.iol.co.za/news/south-africa/gauteng/sandf-issues-stern-warning-after-soldiers-accused-of-beating-alexandra-man-to-death-46625061> (accessed 13.04.2020)
22. Stay home or be whipped. *The Economist*. 4 April 2020. <https://www.economist.com/middle-east-and-africa/2020/04/04/some-african-governments-are-enforcing-lockdowns-brutally> (accessed 15.04.2020)
23. Hunter Q. Ramaphosa tells ANC that SA needs R1-trillion for COVID-19 relief: insiders. <https://www.timeslive.co.za/politics/2020-04-20-ramaphosa-tells-anc-that-sa-needs-r1-trillion-for-covid-19-relief-insiders> (accessed 25.04.2020)
24. Masweneng K. 'There is no lockdown here': Diepsloot residents won't stay home as hunger sets in. <https://www.timeslive.co.za/news/south-africa/2020-04-21-there-is-no-lockdown-here-diepsloot-residents-wont-stay-home-as-hunger-sets-in> (accessed 22.04.2020)
25. Chaos in Macassar as people loot spaza shops, burn debris. <https://citizen.co.za/news/covid-19/2272825/watch-chaos-in-macassar-as-people-loot-spaza-shops-burn-debris> (accessed 22.04.2020)
26. Mkentane O. Desperation, hunger causing looting of trucks, says Social Justice Coalition. <https://www.iol.co.za/capetimes/news/desperation-hunger-causing-looting-of-trucks-says-social-justice-coalition-46963190> (accessed 26.04.2020)
27. Abdalla S; Galea S. Africa and Coronavirus - Will Lockdowns Work? <https://www.thinkglobalhealth.org/article/africa-and-coronavirus-will-lockdowns-work> (accessed 20.04.2020)
28. Quarterly Labour Force Survey (QLFS) - Q4:2019. Media release. <http://www.statssa.gov.za/?p=12948> (accessed 12.04.2020)
29. Faku D. CCMA warns of jobs bloodbath in coming months. <https://www.iol.co.za/business-report/economy/ccma-warns-of-jobs-bloodbath-in-coming-months-46680676> (accessed 01.05.2020)
30. Henderson R. Investec warns of social harm if South African lockdown endures. <https://www.iol.co.za/business-report/economy/investec-warns-of-social-harm-if-south-african-lockdown-endures-46839005> (accessed 20.04.2020)
31. Buthelezi L. Asset managers join calls to end the lockdown. <https://www.fin24.com/Companies/Financial-Services/asset-managers-join-calls-to-end-the-lockdown-20200423> (accessed 30.04.2020)
32. Dlodla S. Reserve Bank slashes SA growth forecast by 6.1% as Covid 19 hits economy. *Business Report*. 14 April 2020. <https://www.iol.co.za/business-report/economy/reserve-bank-slashes-sa-growth-forecast-by-61-as-covid-19-hits-economy-46679264> (accessed 22.04.2020)
33. Omarjee L. SA business alliance expects 1 million job losses, economy to contract by 10%. <https://www.fin24.com/Economy/South-Africa/coronavirus-sa-business-alliance-expects-1-million-job-losses-economy-to-contract-by-10-20200414> (accessed 20.04.2020)
34. Moola N. The Big Stimulus: How SA can fund it, and how to spend it. *Financial Mail*. 2020. 20 April. <https://www.businesslive.co.za/fm/opinion/2020-04-20-the-big-stimulus-how-sa-can-fund-it-and-how-to-spend-it> (accessed 25.04.2020)
35. Magubane K., Omarjee L. Govt's economic rescue plan a race against time. <https://www.fin24.com/Economy/South-Africa/covid-19-govts-economic-rescue-plan-a-race-against-time-20200419> (accessed 22.04.2020)
36. COVID-19 update: Ramaphosa announces R500 billion economic support package; additional grants for unemployed. <https://www.businessinsider.co.za/coronavirus-in-south-africa-everything-we-know-about-covid-19-in-sa-2020-3> (accessed 22.04.2020)
37. Isa M. IMF, World Bank scope to assist SA may be limited. *FinWeek*. 8 April 2020. <https://www.fin24.com/Finweek/Business-and-economy/imf-world-bank-scope-to-assist-sa-may-be-limited-20200408> (accessed 10.04.2020)