

Dearth of medical resources in Africa for COVID-19 reminiscent of early HIV/AIDS pandemic

May 8 2020



Satellite imagery of Africa. Credit: Public Domain

"We have seen this before." Global health scholars have issued a clarion

call about the needless loss of life expected because of a foreseeable prospect of "slow and inadequate access to supplies" to control COVID-19 in sub-Saharan Africa. They say what is unfolding now is similar to when lifesaving diagnostics and treatments came to the region long after they were available elsewhere.

COVID-19 cases in Africa have doubled in the last two weeks—with Africa Centres for Disease Control and Prevention and the World Health Organization tracking exponential growth in some countries, raising concern Africa might be the next epicenter of the pandemic.

"A governance crisis is unfolding alongside the pandemic as [health officials](#) around the world compete for access to scarce medical supplies," writes the global health team including lead author Matthew M. Kavanagh, Ph.D., assistant professor in the Department of International Health at Georgetown University Medical Center and director of Global Health Policy and Governance at the O'Neill Institute for National and Global Health Law. He and his colleagues published their article today in *The Lancet*.

They write, "Having navigated Ebola, HIV, and tuberculosis epidemics, and a range of annual, sporadic, and concurrent outbreaks, several African countries have unparalleled disease response capacity." Despite this level of preparedness, and even where there's enough money, "many African health authorities are unable to obtain the supplies needed as geopolitically powerful countries mobilise economic, political, and strategic power to procure stocks for their populations."

To help avoid being locked out of the market, the authors argue say [political leadership](#) and political convening powers are needed to develop short and medium term actions.

On May 4th, the European Union hosted a virtual pledging conference

that secured \$8 billion for Africa, as heads of state launched a new COVID-19 "accelerator" for vaccines, diagnostics, and treatment. The authors note it has not yet dealt with several "thorny ethical issues in affordability, access, and distribution" of current and future tools to African countries. "This is an ethical imperative but also a shared interest; the COVID-19 pandemic has taught us that unaddressed outbreaks in one part of the world put people throughout the world at risk," they write. "It is entirely foreseeable that many countries will be locked out of the market. Governments have structured the global trading system and they have the power now to ameliorate its ill effects amidst crisis."

The authors conclude, "In 2020, we have the opportunity to learn from past mistakes by countering market forces, thus ensuring that lives on the African continent count equally. Doing so will take both moral clarity and political courage."

More information: Matthew M Kavanagh et al, Access to lifesaving medical resources for African countries: COVID-19 testing and response, ethics, and politics, *The Lancet* (2020). [DOI: 10.1016/S0140-6736\(20\)31093-X](https://doi.org/10.1016/S0140-6736(20)31093-X)

Provided by Georgetown University Medical Center

Citation: Dearth of medical resources in Africa for COVID-19 reminiscent of early HIV/AIDS pandemic (2020, May 8) retrieved 15 May 2024 from <https://medicalxpress.com/news/2020-05-dearth-medical-resources-africa-covid-.html>

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