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MATRIC NO: 17 /SMS09/008

COURSE CODE: I R D 310

COURSE TITLE: ASIAN IN WORLD POLITICS

**ASSIGNMENT TITLE:**

**HOW IS ASIA AS AREGION RESPONDING TO THE COVID -19 PANDEMIC? CONTRAST THIS WITH THE RESPONSE IN AFRICA**

**ANSWER**

**WHAT IS CORONA VIRUS?**

Corona virus disease (COVID-19)—formerly known as 2019-nCoV—was first detected in Wuhan, China in December 2019. While it was initially thought to be contracted from animal-to-human contact, it has since been shown to be contagious via human-to-human contact.

WHAT IS PANDEMIC?

A **pandemic** is a disease outbreak that spreads across countries or continents. It affects more people and takes more lives than an epidemic. The World Health Organization (WHO) declared COVID-19 to be a pandemic when it became clear that the illness was severe and that it was spreading quickly over a wide area

HOW IS ASIA AS A REGION RESPONDING TO THE COVID-19 PANDEMIC?

Countries in south east have mobilized a wide range responses to THE COVID 19 pandemic with some other prepared than others. without as swift response, countries in the region risk a severe outbreak, especially among the vulnerable refugees and internally displace person .the us should examine its current aid portfolios especially for poorer countries in the region and consider whether it can offer additional assistance to it friends in southeast Asia it should also seek to safeguard liberty in the midst of a crisis that some countries could see as a carte blanche to expand government power.

A regional response on the NEW CORONAVIRUS disease outbreak has come under the spotlight as Southeast Asia scrambles to prevent the wider transmission of COVID-19, which has reached eight out of 10 ASEAN member states.

THE World Health Organization on Tuesday called on countries in the Southeast Asia region to urgently scale up aggressive measures to combat COVID-19, as the numbers of cases continue to rise globally. The virus, which was first detected in China, spread rapidly to 152 countries and territories, infecting nearly 175,000 people and killing 7,019.

The situation is evolving rapidly. We need to immediately scale up all efforts to prevent the virus from infecting more people,” said POONAM KHETRAPAL SINGH, regional director of the WHO Southeast Asia Region (WHO-SEARO).

“Urgent and aggressive measures are the need of the hour. We need to act now,” the WHO official said in a statement.

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**GLOBALNATION**

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Skip

Eight of the 11 countries grouped under WHO-SEARO have confirmed cases of COVID-19, and numbers are increasing quickly Singh said. Thailand leads the SEARO area’s confirmed cases count with 177, followed by Indonesia with 134.

Meanwhile, in the WHO’s West Pacific Region (WPRO), Malaysia has by far the highest number of confirmed COVID-19 cases at 552, followed by Singapore (243), the Philippines (142), Vietnam (57), Brunei (50) and Cambodia (12). ASEAN member states are split between the SEARO and WPRO branches of the WHO.

The SEARO director’s comments signaled much greater urgency than when WHO-WPRO director Takeshi Kasai said last month that it was “time for us to work together and focus not only what confronts us today, but plan for tomorrow”.

Concerns have grown following a spike of new cases originating from a mass religious event held from Feb. 27 to March 1 in Kuala Lumpur, Malaysia, which many other people from the region attended, especially from neighboring countries.

The event, a large-scale Quran recitation event often accompanied by preaching, was attended by some 14,500 Malaysians and about 1,500 foreigners, including 696 Indonesians, 215 Filipinos, 130 Vietnamese, 90 Singaporeans, 79 Cambodians and 74 Bruneians, *The Straits Times* reports.

At least three Indonesians tested positive in Malaysia after attending the event. Meanwhile, Brunei’s Health Ministry said that most of the country’s confirmed COVID-19 patients were linked to the gathering, while Cambodia reported Tuesday that 11 out of the 12 new infected cases had a history of travel to Malaysia.

Authorities are also tracking Malaysians who attended the event, encouraging them to report themselves to the authorities in their respective states for testing, according to local reports.

When asked recently about the possibility of hundreds of Indonesians being exposed to the virus in Malaysia, President JOKO “JOKOWI” WIDODO said that his quick response team would investigate the new cluster.

“Our team will look into it and will be assisted by the [National Intelligence Agency], the National Police and the Indonesian Military,” JOKOWI said on the sidelines of a visit to SOEKARNO- HATTA International Airport on Friday.

Elsewhere, the battle to contain the virus among countries has been mired in unproductive quarrels among neighbors.

Indonesia and Singapore have tussled about the sharing of information on imported COVID-19 cases and other logistics requirements, which began when a health official from the Indonesian side accused Singapore of withholding important information for tracing infected persons, which the city-state and other Indonesian officials refuted.

JOKOWI said on Monday that he had spoken with Singaporean Prime Minister LEE HSIEN LOONG, although he did not elaborate. “Singapore has helped us a lot. I don’t remember how much but it was quite a lot. So if they want to help, we will accept,” the President said.

A spokesperson for Singapore’s Foreign Ministry later revealed more details about the phone call, saying that the leaders agreed to further strengthen cooperation to counter the virus threat.

“Singapore has been in close touch with the relevant Indonesian ministries and agencies on the COVID-19 situation, including on the provision of medical equipment to Indonesia. The Singapore government has also contributed personal protective equipment to the BATAM HEALTH OFFICE at its request,” the spokesperson said.

And while Indonesia takes cautious steps to address the pandemic, Malaysia became the first country to announce a two-week lockdown of the country, days after the Philippines moved to shutter its capital Manila and later the entire island of Luzon. Laos has sealed its borders with China and Myanmar, while people in Brunei, Singapore and Thailand have been ordered to restrict their movements.

These incidents, as well as the different policy decisions that ASEAN countries have made in response to the pandemic, have served to underline the discrepancy between neighboring countries and cast doubt on the feasibility of a united regional response, despite the group already having several response mechanisms in place.

ASEAN countries met as early as January to prepare a region-wide response to the rapid spread of the new CORONAVIRUS disease and continue to meet to evaluate the regional response.

**HOW AFRICA RESPOND TO COVID-19 PANDEMIC?**

Since its outbreak in December 2019, COVID-19 has spread exponentially, and was declared a global pandemic by the World Health Organization (WHO) on 11 March 2020. The Southern African Development Community (SADC) recorded its first case of COVID-19 in early March, and since then, the numbers have been increasing. As of 15th April, 2020, fourteen (14) of the sixteen (16) SADC Member States have been affected by COVID-19 – Angola, Botswana, ESWATINI, Democratic Republic of Congo, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, United Republic of Tanzania, Zambia and Zimbabwe.

In addition to the measures put in place by Member States, SADC has put, and will continue putting in place regional measures that are critical in responding to the COVID-19. So far, SADC has undertaken ten (10) regional coordinated actions to contain the spread of COVID-19 and mitigate its social and economic impacts on the region. These regional actions can be found on this link: SADC regional response to COVID-19.pdf

These regional actions pertain to strengthening Disaster Risk Management; suspension of regional face-to-face meetings; coordinating and monitoring the implementation of the SADC Protocol on Health, utilization of the SADC Pooled Procurement Services for pharmaceuticals and medical supplies and the adoption of regional Guidelines on Harmonization and Facilitation of Cross Border Transport Operations across the Region during the COVID-19.

**CONTRAST THE RESPONSE OF ASIA AS A REGION TO THE RESPONSE OF AFRICA TO THE COVID 19 PANDEMIC**

The continent population and health system make it different from other region e g Asia that have experience COVID 19 to date .first the continent demographic structure is different from Asia region .the experience in Asia showed that people over 60,and those with significant health problems are most vulnerable to severe cases of COVID 19.but in Africa youth may be considered a significant protective factor in the pandemic it occurs in younger patient because of the demographics and associated endemic conditions that affect the immune system, how the virus will evolve and manifest itself on the continent is unknown.

Africa has the high prevalence of malnutrition, anemia, malaria, HIV/AIDS, and tuberculosis .Liberia, for example has one of the highest rates of stunting in the world. Social

Cohesion and social gathering are of great importance in Africa; weekly attendance of a regions service is highest in Africa with rates as high as 82%inuganda and Ethiopia. The capacity to provide critical care is the lowest in the world .severe form of COVID -19 lead to respiratory failure requiring ventilation support, the ability to treat severe forms of COVID 19 will depend on the availability of ventilators, electricity and oxygen. In Liberia for example there is no intensive care unit with ventilators. All these are not issues in Asia region in response to COVID 19 pandemic

.Asia has money to buy equipment that will prevent the region from the spread of the virus but Africa relied on donations given to them by other region.

**REFERENCE**

1. Critical preparedness, readiness and response actions for covid-19
2. The media briefing on COVID -19-13 march 2020.