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Question: How is Asia as a region responding to the COVID-19 pandemic? Contrast this with the response in Africa.Â

Answer

The impact of this pandemic will be hard-hitting and long-lasting in Southeast Asia, along with much of the rest of the world. Singapore, for example, is grappling with a new wave of cases tied to its large migrant worker population. Indonesia and the Philippines, the slow government response to the crisis and weaknesses in their public health systems are beginning to take a toll. Alongside the Economic Impact it does to these countries due to the lockdown, especially for countries that are own for their tourist centers and highly dependent on trade.

Singapore and Vietnam got off to a very early start in responding to the initial outbreak, which initially seemed to have kept the epidemic under control. These countries were the first to shut down travel with China back in early February, and both countries enacted extensive surveillance, monitoring, contact tracing, and isolation of those infected or in contact with the disease. Singapore relied on widespread temperature taking, testing, meticulous contact tracing, and targeted quarantine measures for confirmed cases, those in contact with them, and returning travelers. Singapore has also utilized high-tech tools to trace the virus, such as mobile apps that aid in contact tracing, and developed its own testing kits and antibody tests. Vietnam has relied on mobilizing its society and on massive social closures and extensive surveillance of citizens. From the early onset of the pandemic, Vietnam shuttered non-essential businesses and schools and enacted large-scale quarantinesâ the entire province of Vinh Phuc, north of Hanoi, was put under a 21-day quarantine starting February 13, and tens of thousands of citizens have been placed in â quarantine campâ run by the military. Despite their markedly different approaches, Singapore and Vietnam share some important characteristics that have shaped their responses. Both countries were among the hardest hit by the SARS outbreak in 2003 and were determined to better prepare for the next pandemic. Both governments are highly centralized, unified, and well organized.

At the other end of the spectrum in terms of mobilization and early response to the emerging epidemic are countries such as the Philippines and Cambodia, whose leaders were not only slow to respond but also actively downplayed the risks. Both President Rodrigo Duterte and Prime Minister Hun Sen take pride in their close relations with China, and both leaders went out of their way in the early days of the pandemic to dismiss concerns about the virus and the risk posed by maintaining unrestricted travel linkages with China.

Thailand offers a model of both the best and worst aspects of Covid-19 response in Southeast Asia. Despite public criticism for its initially lackluster response at the onset of the crisis, the Thai government snapped into action in late March when Prime Minister Prayuth announced one of the most comprehensive national lockdowns in the region and declared emergency powers.

The final concern is focused on the second wave of infections that we are seeing in Singapore and other parts of Asia that were hit early with Covid-19 cases, like Hong Kong and Taiwan. Singaporeâs soaring infection rates after the governmentâs misstep on foreign workers offer a cautionary tale about the vulnerability of even the most capable bureaucratic systems. The region needs to prepare for second and additional waves of infection, which will further complicate government strategies and deepen economic impacts.

102 new measures by governments responding to the COVID-19 pandemic in 45 African countries south of the Sahara. These include legislative action (passage of laws and regulations, orders/decrees), executive orders/decrees, and other practices that have not been codified. Most of the measures are some form of executive order or proclamation, 28 countries have declared state of emergency, national health emergency. Countries that have declared State of emergency in Africa are : Angola, Cape Verde; Cote dâ Ivoire; Democratic Republic of the Congo; Equatorial Guinea; Eswatini/Swaziland; Ethiopia, Guinea; Guinea Bissau;

Lesotho; Liberia; Mozambique; Namibia; Senegal; Sierra Leone; and Botswana and The Gambia. And countries that declared Health of Emergency in Africa are: Botswana; Burkina Faso; Republic of Congo; The Gambia; Kenya; Liberia; Madagascar; Niger; Sudan; and Togo.

Governments are increasingly cracking down on dissent by using excessive force or by using "fake news" or disinformation charges to suppress public criticism of a particular government's response to the pandemic. High poverty levels, overcrowded living conditions, strained infrastructure (medical, water and sanitation, service delivery) make social distancing, curfews, and lockdowns difficult to enforce, especially over a long period of time

reference; www.icnl.org
www.csis.org