Unravelling the Mystery of Covid-19 Pandemic Effect in Africa: An African Theocogical Reflection

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Abstract

In this chapter, I examined global efforts to unravel what is now considered a mystery regarding an apparent overturn of the otherwise expected devastation of Africa as the worst to be hit in the history of corona virus pandemics within the last hundred years. Various postulations about the Covid-19 pandemic were limited to only scientific research and are inconclusive. I proposed a holistic approach that integrates religious interpretations, based on African Theocological framework.

Key Words: African Theocology, Covid-19 Pandemic, Mystery, Planetary health

1.0 Introduction

Contributing a book chapter on 'Some New Opportunities' for 'Education as Mission' in 2008, Gerald Pillay opened his article with a caution about predicting opportunities and, by extension, threats in the twenty-first century. Pillay's cautions were based on some universally disruptive experiences of the first four decades of the twentieth century. Perhaps to avoid shock and panic he suggests limiting imagination to 'the period of our own lives.' Even that is not to be without 'surprises.' He writes:

How this century will turn out is quite likely to be very different from anything that we can imagine – even among the most prescient among us. Few at the beginning of the last century could have imagined that two periods of global conflict lay ahead; yet those two worlds wars were radically and indelibly to change the shape, destiny, and values of Europe and many other parts of the world.²

Could Pillay be right? For, as if history repeating itself, there is a 'surprise' to many people in the world today, within the first two decades of the twenty-first century. By 1918, the second decade of the twentieth century, it was the surprise of the First World War coupled with the 'Spanish Flu' of 1918-1919, which was 'radically and indelibly to change the shape, destiny, and values of Europe and many other parts of the world.' A century thereon, in 2019-2020, the second decade of the twenty-first century, it is the surprise of Covid-19. Although Bryan Walsh laments how the global eco-community apathetically failed to avoid the 'surprise' of Covid-19,³ that it is a reality now, cannot also be avoided. It is here with us. The World Health Organisation (WHO) declared it a pandemic; and many countries commonly describe it a "global war"⁴ feared with similar consequences as World War I—destiny and

¹Gerald J. Pillay, 'Education as Mission: Perspectives on Some New Opportunities,' in Andrew Walls and Cathy Ross, eds. *Mission in the 21st Century: Exploring the Five Marks of Global Mission*, (Maryknoll, NY: Orbis Books, 2008): 165.

²Pillay, 'Education as Mission: Perspectives on Some New Opportunities,' 165.

³ According to Bryan Walsh, "The History of Pandemics', 'over the past 15 years, there has been no shortage of articles and white papers issuing dire warnings that a global pandemic involving a new respiratory disease was only a matter of time. Accessed 21st April, 2020, https://www.bbc.com/future/article/20200325-covid-19-the-history-of-pandemics

⁴ In Ghana, like many other countries, the common perception of, language used and attitude to Covid-19 is that of a war. However, Shaimaa Khalil, BBC News, 'Coronavirus: How New Zealand relied on science and empathy' reports that

value change radically and indelibly.⁵ For Africa the Covid-19 pandemic is not the only surprise; the unfolding of the pandemic itself has produced another surprise that the global eco-community considers a mystery.

In this paper, I propose to review the incidence of Covid-19 pandemic, examine some factors believed to account for Africa's surprise or mystery-an apparent overturn of the historically known and otherwise expected devastations of corona virus pandemics on Africa in a century. I shall reflect on the factors with a framework of African Theocology and suggest African spirituality and divine grace also as probable interpretive keys.

1.1 Covid-19: Origin, Pathogenesis and Spread

Covid-19 is a novel disease caused by a new and highly mutative strain of a contagion from the corona viridae family of viruses called the Severe Acute Respiratory Syndrome-Corona virus II (SARS-CoV-2).⁶ It is an enveloped large positive-strand RNA genome, which ranges from 27-33kb.7 Coronaviruses cause severe respiratory tract and gastro-intestinal diseases in humans and animals.⁸ The primary symptoms of Covid-19 include fever, persistent cough, and shortness of breath. These symptoms are evident between two to fourteen days after being exposed to the virus.⁹ Thus, initially, everyone assumed the Coronavirus was a pulmonary virus that attacks the lungs and causes serious respiratory infections. But evidence is adduced that in seriously ill Covid-19 patients, cases of thrombosis or pulmonary embolisms have been observed.¹⁰ According to Dr. Frank Misselwitz, a Bayer Scientist of Cardiovascular and Clinical Coagulation Development,

Covid-19 seriously damages the inner walls of the blood vessels, known as the endothelial cells. This goes hand in hand with a severe inflammatory reaction, causing clots to form in the patients' large and, in some cases, small blood vessels - and sometimes even in more than one place. This can lead to organ failure caused by the clots blocking the vessels.¹¹

The first case of Covid-19 was reported in Wuhan (Hubei Province, China) on 31st December 2019,¹² but has since spread rapidly to other parts of the world. The General Di-

¹¹Misselwitz, 'Does Covid-19 Cause Thrombosis and Pulmonary Embolism?'

[&]quot;unlike the countries that declared 'war on Covid-19', the government [of New Zealand's] message was that of a country coming together. It urged people to 'Unite Against Covid-19'". accessed 21st April 2020, https://www.bbc.com/news/world-asia-52344299

Andrien Vogt, of CNN, "Gov. Cuomo: Covid-19 is moment of transformation for society,"

https://edition.cnn.com/world/live-news/coronavirus-pandemic-intl-04-16-20/index.html ⁶ S. Yang, P. Cao, P. Du, Z. Wu, Z. Zhuang, L. Yang, X. Yu, Q. Zhou, X. Feng, X. Wang, W. Li, E. Liu, J. Chen, Y.

Chen, and D. He. "Early estimation of the case fatality rate of COVID-19 in mainland China: a data driven analysis." Annals of Translational Medicine, Vol. 8, No. 4, 2020. See also http://atm.amegroups.com/article/view/36613/html

⁷ Lia van der Hoek, Krzysztof Pyrc, Maarten F. Jebbink, Wilma Vermeulen-Oost, Ron J. M. Berkhout, Katja C. Wolthers, Pauline M. E. Wertheim van Dillen, Jos Kaandorp, Joke Spaargaren, and Ben Berkhout. "Identification of a new human coronavirus." Nature Medicine, Vol. 10, 2004: 368-373.

⁸ J. S. Guy, J. J. Breslin, B. Breuhaus, S. Vivrette, and L. G. Smith. "Characterization of a coronavirus isolated from a diarrheic foal." Journal of Clinical Microbiology, Vol. 38, 2000: 4523-4526 (4523).

WHO. COVID-19 coronavirus pandemic. Retrieved on 28/02/2020 from https://www.worldometers.info/coronavirus/coronavirus-incubation-period/, 2020b.

¹⁰ Dr. Frank Misselwitz, 'Does Covid-19 Cause Thrombosis and Pulmonary Embolism? Accessed 13 July 2020. https://www.magazine.bayer.com/en/does-covid-19-cause-thrombosis-and-pulmonary-embolisms.aspx

¹² John Hopkins University, 'How is the outbreak growing: Cumulative cases,' accessed 16 April 2020, https¹²WHO. Director General's Opening Remarks at the Media briefing on Codvid-19 on 11 March 2020, accessed 16 April 2020,

rector of World Health Organization (WHO) declared Covid-19 as a pandemic on 11 March 2020, saying, we have never before seen a pandemic sparked by a Coronavirus. This is the first pandemic caused by a Coronavirus.¹³

The virus is zoonotic but spreads also from person to person through contact with an infected person or infected objects. This occurs when tiny droplets are expelled from the affected person or object to a susceptible individual. But WHO admitted that there is some evidence that the disease could be airborne also, especially in crowded places.¹⁴ On the day Covid-19 was declared a pandemic "more than 118,000 cases in 114 countries and 4,291 people had lost their lives."¹⁵ But by 16th April 2020, WHO was glad "we're seeing encouraging signs in some countries that have been the epicentres of the pandemic." But the UN organization for health warned that even as "some countries are now considering lifting social and economic restrictions ... it must be done extremely carefully. If done too quickly, we risk a resurgence that could be even worse than our present situation."¹⁶ The WHO thus feared an anticipated second wave of the pandemic if precautions were not taken.

1.2 Africa and the Second Wave of Corona Virus Pandemics

In April 2020 when the WHO feared and warned against risking a second wave of the pandemic, Africa had just entered its 10th epidemiological week after Egypt recorded the first case in February 2020. Continentally, Africa's situational statistics then presented 9,895 confirmed cases, including 1,017 deaths and 4,642 recoveries, from 52 African countries. Two countries, Comoros and Lesotho, were still virus-free; and for the infected countries the virus was "imported from Europe and the United States, rather than from the original Covid-19 epicentre China."¹⁷

¹⁷ Shabir Ahmad Lone & Aijaz Ahmad 'COVID-19 pandemic – an African perspective' https://www.tandfonline.com/doi/full/10.1080/22221751.2020.1775132

https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020 ://coronavirus.jhu.edu/data/cumulative-cases

¹⁴ Imogen Foulkes, BBC News in Geneva, 'Coronavirus: WHO rethinking how Covid-19 spreads in air,' Accessed 12 August 2020, https://www.bbc.com/news/world-53329946

¹⁵ WHO. Director General's Opening Remarks at the Media briefing on Codvid-19 on 11 March 2020.

¹⁶ WHO. Director General's Opening Remarks at the Media briefing on Codvid-19 on 16 April 2020. [In fact, according to Thomas J. Bollyky, since the end of May 2020, there has been reports of resurgence or second wave of the disease in places like USA, Spain, India, South Africa and Peru, as accessed 10 August 2020 at https://www.cfr.org/conference-calls/resurgence-covid-19. But Melissa Hawkins, Professor of Public Health, Director of Public Health Scholars Program, American University, explains that a wave of an infection describes a large rise and fall in the number of cases. There is not a precise epidemiological definition of when a wave begins or ends. But there are two necessary factors that must be met before we can colloquially declare a second wave. First, the virus would have to be controlled and transmission brought down to an exceptionally low level. That would be the end of the first wave. Then, the virus would need to reappear and result in a large increase in cases and hospitalizations. She concluded on this explanation that though certain areas such as Hawaii, Alaska and Montana were experiencing resurgence by June 2020 the entire USA was not in a second wave. Accessed 12 August 2020, https://theconversation.com/the-us-isnt-in-a-second-wave-of-coronavirus-the-first-wave-never-ended-141032. Similarly, Global Data Health Care observes spikes in Spain by 4th August 2020, but did not think it was yet a second wave. Accessed 12 August 2020 at https://www.pharmaceutical-technology.com/comment/spain-resurgence-covid-19/]. Yet by 2nd November 2020 Mathieu Pollet reports in Euronews about a second wave in Europe, that 'The vast majority of countries are declaring more cases each day now than they were during the first wave earlier this year.' See Mathieu Pollet, 'Coronavirus second wave: Which countries in Europe are experiencing a fresh spike in COVID-19?', accessed 2nd November 2020, https://www.euronews.com/2020/11/02/is-europe-having-a-covid-19second-wave-country-by-country-breakdown

That the WHO's fear for and warning against a second wave was a major concern about Africa more than the rest of the world could be, inter alia, out of a historical anticipation. I have elsewhere recounted that a century ago, the Spanish Influenza pandemic, caused by H1N1, was not only associated with World War I, but resurged in three waves by 1919. The resurged phase was more lethal and virulently hit Africa sub-Sahara the worst, killing almost two percent of Africans in six months. This was because Africa was apparently spared the first wave and so lacked immunity that those who were exposed to the first wave had earlier developed.¹⁸ A century on now, Yakubu Lawal observes that when China, Italy, Spain and the USA were hard hit by fatalities of Covid-19 pandemic during the early stages, "it was widely speculated that Africa would be the worst hit when the virus eventually reached the continent." He rightly explains the logic of this prediction lying in the fact that "most of Africa is underdeveloped, constantly struggling with inadequate healthcare facilities and gloomy health indices."¹⁹ This history of corona virus pandemic in Africa has almost repeated itself since March 2020, except in an unprecedented overturn that has become a surprise and mystery for unravelling.

1.2.1 The Mystery - Overturned Corona Virus Pandemic History of Africa

As earlier hinted Covid-19 finally found its way to Africa with Egypt recording the first case in February 2020.As in all places where the pandemic was reported "some fatalities followed, but the expected catastrophe never occurred, even when the pandemic reached its first peak, plateaued, and then declined. It is now rising again in some countries, though not as rapidly as before."²⁰ In other words, the history of Africa and corona virus pandemic that the WHO feared in April 2020, did repeat itself but with a surprising and mysterious twist. Africa did pass through a first wave between February and August 2020. The downward trend of the first wave in August and September 2020 was appreciated as a positive development by Dr Matshidiso Moeti, World Health Organization (WHO) Regional Director for Africa. He warned, however, that "we must not become complacent: because "other regions of the world have experienced similar trends only to find that as social and public health measures are relaxed, cases start ramping up again."²¹

It is not certain whether health measures in Africa were relaxed, but a second wave of Covid-19 surged by October 2020. The Africa centre of Disease Control (CDC) published that "[t]he number of new Covid-19 cases being reported daily in the months of July and August in Africa declined rapidly. This trend reversed during the month of October with many countries now experiencing either their first major increase in the number of new Covid-19 cases or their second wave of the pandemic."²² So, effectively, between November

²⁰ Lawal, "Africa's low COVID-19 mortality rate", 118.

¹⁸ Ebenezer Yaw Blasu, 'The Invisible Global War: An African "Theocological" Assessment of Responses to COVID-19,' Evangelical Review of Theology, vol. 44, No. 4, (2020), 302-312.

¹⁹ Yakubu Lawal, "Africa's low COVID-19 mortality rate: A paradox?" International Journal of Infectious Diseases, Vol. 102, (2021), pp. 118-122 (118). Accessed on 21st April 2021, at https://www.sciencedirect.com/science/article/pii/S1201971220322426

²¹ WHO Africa, 'Social, environmental factors seen behind Africa's low COVID-19 cases' Accessed 21 April 2021, https://www.afro.who.int/news/social-environmental-factors-seen-behind-africas-low-covid-19-cases

²² Africa CDC, 'Responding to the Second Wave of COVID-19 in Africa,' accessed 21 April 2021, https://africacdc.org/download/responding-to-the-second-wave-of-covid-19-in-africa/

and December 2020 the continent entered and has been passing through a second wave of Covid-19 pandemic into the first quarter of 2021. In their research to trace the trajectory of the pandemic in Africa Stephanie J. Salyer *et al.* reported that,

As of Dec 31, 2020, 14 (25%) of 55 countries had only experienced or were still experiencing their first wave of cases, 40 (73%) had experienced or were still experiencing a second wave of cases, and four (7%) had experienced or were still experiencing their third wave of cases.²³

They concluded that"[b]y the end of 2020, most of the African continent was experiencing a fast evolving second wave of the Covid-19 pandemic, reporting a 30% increase in both the weekly incidence and the mean daily new cases when comparing the peak of the first wave [July 2020, epidemiological week 29] to epidemiological week 53 [in December]." Their statistics showed the number of confirmed cases by 31st December 2020 as 2, 763, 421 with 65, 602 deaths, yielding a case-fatality-rate of 2.4%, while 2, 292, 067 recovered.²⁴

All this is an already predicted repeat of history; it is the incidence and resurgence of a corona virus pandemic unfolding in Africa almost as it had happened a century ago. The twist, however, is in the effect of Covid-19. Contrary to the effect of the H1N1 pandemic a century ago, Stephanie J. Salyer *et al.* observed that "[c]ompared with other continents, it appears that Africa has not experienced the pandemic at the same magnitude with respect to the overall Covid-19 case and death counts."²⁵ In another research Yakubu Lawal concludes that "Covid-19 mortality rates are generally lower in Africa than in more advanced nations, whether at the peak or in the plateau or decline phases of infection rates and case fatality rates for the countries analyzed."²⁶ But what could account for this unprecedented mystery of relative resilience to Covid-19, and hence, overturning Africa's history of corona virus pandemics?

1.2.2 Unravelling the Mystery of Africa's Relative Resilience to Covid-19 Pandemic

The global community have been seriously engaged in unravelling the mystery of Africa's experience of relatively less spreading and casualties of Covid-19. Both scientific research findings and informed speculative theories have been employed without any conclusive declaration yet. Among the explanations so far advanced is Dr. Matshidiso Moeti's postulation of political expediency. As Africa regional Director of WHO, Moeti believes it is "the robust and decisive public health measures taken by governments across the region".²⁷ In addition, there are explanations from the angles of demography, life expectancy and possible immunity due to past epidemics. Yakubu Lawal concludes in his research that "the positive predictors of Covid-19 mortality rate include population mean age, life expectancy, and pre-

²³ Stephanie J. Salyer, Justin Maeda, Senga Sembuche, Yenew Kebede, Akhona Tshangela, Mohamed Moussif, Chikwe Ihekweazu, Natalie Mayet, Ebba Abate, Ahmed Ogwell Ouma, John Nkengasong, "The first and second waves of the COVID-19 pandemic in Africa: a cross-sectional study" *The Lancet*, Vol. 397, No. 10281, (April 3, 2021), pp 1265-1275 (1270). Accessed 21 April 2021at https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00632-2/fulltext

²⁴ Salyer, et al., "The first and second waves of the COVID-19 pandemic in Africa'p. 1272.

²⁵ Salyer, et al., "The first and second waves of the COVID-19 pandemic in Africa' p. 1272.

²⁶ Lawal, "Africa's low COVID-19 mortality rate' p. 121.

²⁷ WHO Africa, 'Social, environmental factors seen behind Africa's low COVID-19 cases' Accessed 21 April 2021, https://www.afro.who.int/news/social-environmental-factors-seen-behind-africas-low-covid-19-cases

Covid-19 era '65- years+ mortality %."²⁸ This implies that younger age could be a reason Africa seems less affected by the pandemic since "[a]bout 91% of Covid-19 infection in sub-Saharan Africa are among people below 60 years, and over 80% of cases are asymptomatic."²⁹ Other reasons heightened include "interaction of socio-ecological factors such as low population density and mobility, hot and humid climate."³⁰

That the climate factor enjoys the highest claim of a possible source of the difference between global and Africa's experience of the spread and casualties of Covid-19 pandemic is supported with existing scientific evidence. According to Kariuki Njenga et al., "Africa experiences warmer and drier weather in the December to April season, with average day temperatures > 20°C in the entire sub-Saharan Africa region and more than 30 of the 46 countries of that region averaging $> 25^{\circ}$ C"³¹ They further observed that though other studies in Spain are conflicting, statistical regression analysis "comparing effect of temperature on the number of Covid-19 cases across the 204 affected countries, exclusive of other possible factors, found countries with higher temperatures reporting lower infections, while those with lower temperatures serving as pandemic hotspots."32 Corona virus disease burden is "higher in winter and colder seasons globally" due to "increased viability of the virus in cold dry conditions with low levels of sunlight and the tendency of people to spend more time indoors, enhancing spread."33 Paulo Mecenas et al. considering such scientific evidence state that for Africa "warm and wet climates seem to reduce the spread of Covid-19. However, these variables alone could not explain most of the variability in disease transmission."34 They did not suggest what else. I propose African spirituality and divine election by grace.

1.2.3 African Spirituality and God's Grace: Africa's Covid-19 Mystery Unravelling Factors?

While the second wave of Covid-19 surges on and the case of Africa remains a mystery, all postulations from either scientific research or mere logical arguments to unravel the mystery have been inconclusive, and so largely informed speculations. Thus, the doors of informed probability remain open in the global search for unravelling the Covid-19 mystery in Africa. In my view, as an African Christian and theocologist, it is not ridiculous to look outside the scientific box into the realms of religion for additional clues. African theocology, characterized by a holistic worldview that integrates religion and science, emphasizes the need to integrate Christian faith and ethics in the application of modern technoscience.³⁵ I must be the first to admit that religiosity in Africa may have serious challenges; but it is so elsewhere, being a cultural phenomenon and a human activity. Moreover, Africans are known to be noto-

²⁸ Lawal, "Africa's low COVID-19 mortality rate' p. 121.

²⁹ WHO Africa, 'Social, environmental factors seen behind Africa's low COVID-19 cases' Accessed 21 April 2021, https://www.afro.who.int/news/social-environmental-factors-seen-behind-africas-low-covid-19-cases

³⁰ WHO Africa, 'Social, environmental factors seen behind Africa's low COVID-19 cases'

³¹ M. Kariuki Njengaet al., 'Why is There Low Morbidity and Mortality of COVID-19?' 564–569.

³² Njenga*et al.*, 'Why is There Low Morbidity and Mortality of COVID-19?' 564–569.

³³ Njenga et al., 'Why is There Low Morbidity and Mortality of COVID-19?' 564–569

³⁴ Paulo Mecenas, Renata Travassos da Rosa Moreira Bastos, Antonio Carlos Rosário Vallinoto, David Normando Effects of temperature and humidity on the spread of COVID-19: A systematic review,' September 18, 2020, https://doi.org/10.1371/journal.pone.0238339

³⁵ Ebenezer Yaw Blasu, *African Theocology: Studies in African Religious Creation Care*, (Eugene, Oregon: Wipf & Stock Publishers, 2020): p. 91.