

Failure at the top

At the time of writing, the National Department of Health had reported 70 038 cases of COVID-19.^[1] Testing problems aside, this number of confirmed cases puts us at number 21, ahead of countries such as Belgium (60 100), Sweden (51 614) and the Netherlands (48 783).^[2] On the African continent, only Egypt, with 42 980 cases (as of 14 June 2020), is anywhere close to us. With the current total of 1 423 deaths, South Africa (SA) accounts for 35% of deaths in the World Health Organization African Region.^[3] In a webinar hosted by *Daily Maverick* on 14 June 2020, Prof. Glenda Gray, while recognising that SA (along with other African countries) does not seem to be following the developing world disease pattern, also stated that one thing was clear: 'We have not yet peaked'.^[4] I am not going to get into the arguments around the projected total number of deaths in SA or the rest of the continent. Suffice it to say that, so far, it would appear that our younger age distribution is relatively protective, along with the lessons our clinicians are able to take away from Italy and New York in terms of patient management, coming late into the pandemic. However, it is also clear that in Western Cape Province, where the numbers are far ahead of the rest of the country (although Gauteng and Eastern Cape are rapidly catching up), hospitals are already stretched.

So, what price lockdown? I am going to stick my neck out and say that I no longer think that even our initial 21-day lockdown had any effect at all on the virus. But it had a catastrophic effect on the most vulnerable in our population who, already poor, are now plunged into levels of poverty such that many will never recover. The government made much of planned economic rescue packages, particularly when we moved from Level 5 lockdown to Level 4 (which was little different apart from short-lived imposition of a curfew), but it would appear that very few have benefited from these, and it has been up to civil society and local communities to step in to prevent people from literally starving to death.

That is already a massive failure on the part of government. Other massive failures have come in the form of micromanagement through irrational rules and regulations during lockdown, meaning that people could not buy cooked food, T-shirts (unless worn as undergarments) and summer clothes (when much of KwaZulu-Natal and our more northern provinces have summer temperatures year round). Then came the modified Level 3 and all of a sudden it was 'over to us'. Having imposed a draconian lockdown, with levels of police and army brutality (again against the most vulnerable in society) such that we were among countries singled out by the United Nations for human rights abuses in the pursuit of lockdown, our President now exhorted us all to take responsibility for preventing further spread of the virus. Since 1 June 2020, a cursory glance at our daily figures will show a rapid rise in cases in Gauteng and the Eastern Cape, suggesting that relaxation of the lockdown measures has, at least in these provinces, resulted in many more infections. And then in casual conversations I find that many people do not realise that most infections are mild and recover quickly on their own, that there is no medicine to treat COVID-19, that regular hand washing is at least as effective as wearing masks (which I remain unconvinced about anyway), and that it is probably safe to let your child go back to school. Then there is the stigma

associated with the disease. A friend who is a social worker told me she would no longer work with a community health worker in the local hospital who had been diagnosed with COVID-19 – *after* the CHW's quarantine period was over. It took a long discussion, with a highly intelligent woman, to persuade her that this was unnecessary and discriminatory.

So, while telling us all to 'take responsibility', our President and his government have failed massively and unforgivably in one of the most important areas in the control of infectious diseases – community engagement and information. People were willing to lockdown for the first 21 days, and relatively OK with the following 14 days. But thereafter life took on farcical aspects through micromanagement and the tendency of our ministers to pull 'regulations' off the tops of their heads while speaking to the media. By 1 June, when we started to re-open the economy, our population was tired, poor, cold in the areas of the country where winter bites, and totally confused. Small wonder that they are abandoning the cardinal rules of physical distancing, hand washing, and being careful when you cough (and our mandatory mask wearing). With no public information campaign other than the sporadic and not particularly helpful SMS messages that appear from some or other government source, this is hardly surprising. I have seen a few posters (in more than one language), and I have heard that there are campaigns on the radio. But where is the massive public information campaign that we need, now more than ever, to tell people about the virus, how it spreads, and how (relatively easily) you can protect yourself and your family? This is totally unforgivable on the part of government in general, and the Department of Health and our Minister in particular.

Yes, it is now 'over to us'. We could not continue with lockdown. Its consequences have been catastrophic and, frankly, we need to simply get on with normal life now. But, because we need to do this at a time when we are still nowhere near the peak of our infections, people need to take all the simple precautions that can help to prevent transmission of the virus. And they need to understand why. I call on our government to urgently roll out massive and far-reaching public health and information campaigns to give people the tools they require to 'take responsibility'.

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