
Crisis and opportunity

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The coronavirus pandemic is now affecting the poor regions of the world. This threatens the progress of global health.



Photo: Einar Nilsen

The state of global health has never been better than at the start of the decade 2020–29. Life expectancy in the last 70 years has increased by 25 years, many infectious diseases are rapidly receding (largely thanks to increasing vaccination coverage), smallpox has been eradicated, and more and more people have access to health services [\(1\)](#). However, as the first wave of the coronavirus epidemic appears to have abated in our part of the world, it is becoming clearer that we are facing a global health crisis that may set development back many years.

Until the start of May 2020, more than 90 % of all coronavirus-related deaths occurred in the wealthiest countries [\(2\)](#), but now it is the turn of regions with poor access to health services, such as Latin America and Africa. In regions affected by war and conflict, or in overpopulated, unregulated cities, effective measures to prevent infection, such as good hand hygiene and social distancing, are difficult to implement. In many places, the health services are also ill-equipped. For example, Malawi has only 25 intensive care beds for a population of 19 million, and most of Kenya is without ventilators [\(3\)](#). The UN has estimated a need for many tens of millions of COVID-19 tests in Africa, but these are difficult to obtain because Western countries have bought up most of the production capacity [\(4\)](#).

Both Latin America and Africa are dependent on medical imports. Altogether 96 % of all medical equipment in Latin America is imported from abroad, mainly the United States, which has now introduced stringent export restrictions [\(5\)](#). At the same time, the virus is spreading aggressively in the region. In mid-June, more than 1.2 million COVID-19 cases and more than 52 000 deaths were reported in Latin America [\(5\)](#). Increasing poverty, poor emergency preparedness, a faltering health service and inadequate information do not improve the prospects. In a recent questionnaire survey conducted by UNICEF among more than 10 000 adolescents from 31 Latin American countries, one-third of those asked believed that they could not be infected, and more than half did not know where to find public information about the virus [\(6\)](#).

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In the long term, however, it is the pandemic's secondary effects that may prove to be the greatest threat to global health. The United States has threatened to withdraw its funding to WHO, a decision that may have serious consequences [\(4\)](#). And the current threat posed by a looming economic recession to many countries' economic growth puts humanitarian projects in the firing line. Both the UN Global Humanitarian Response Plan and Oxfam, one of the world's largest non-governmental organisations, are struggling to obtain funding and are being forced to discontinue projects [\(4\)](#). At the same time, preventive measures against infection, such as the closing of abortion clinics and the halt in production of contraceptives, is leading to a significant increase in unplanned pregnancies in many African countries [\(7\)](#). This constitutes just one of several threats to maternal and child health on the continent.

In many places, vaccination coverage is under threat. UNICEF reports immense problems with the distribution of vaccines due to the pandemic, and calculates that 117 million children are now at risk of not receiving the measles vaccine (8). In Afghanistan, the UN has reported polio outbreaks in regions where polio has not been seen for 20 years (8). In India, MMR vaccination has fallen by 69 % since the coronavirus measures were introduced (2). And a study published in *The Lancet* has calculated that globally, somewhere between 42 000 and 192 000 children will die each month as a consequence of the pandemic's effects on access to food and health services (9). Altogether 29 countries have stopped measles vaccination because of the pandemic. Outbreaks of the disease have already been recorded in 18 of these countries (10).

Nevertheless, there are some glimmers of hope. Thanks in large part to efforts by WHO, the number of African countries where COVID-19 tests are available has increased from two to forty-four, and more and more countries are putting systems in place for improved monitoring and control of the spread of infection (11). And with crisis comes, not least, opportunity. Many of the pandemic's secondary global health consequences are still possible to reverse. This requires a coordinated international effort. The pandemic has shown us more clearly than ever how closely global health is interwoven with our own health. It may be just the incitement we need to strengthen, not weaken, international cooperation for continued improvements in global health.

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