MITIGATING THE IMPACT OF COVID-19 IN CONFLICT ZONES

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Brief Report

ABSTRACT

The COVID-19 pandemic has affected the whole world. The conventional narrative has focused on developed nations. However, developing nations and conflict zones have also been disproportionately affected. In this article, I want to bring attention to the effect of COVID-19 on conflict zones. I outline the key challenges and some remedial measures which can be taken.

Leaders of the world and international organisations like the WHO and the UN need to act rapidly to prevent greater loss of life in the world’s conflict zones. Peacekeepers, healthcare workers, aid organisations and local bodies need to work together to ensure that the effects of COVID-19 in conflict zones are mitigated.

KEY WORDS

COVID-19, conflict zones, developing nations

CLASSIFICATION

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INTRODUCTION

The COVID-19 pandemic has affected the whole world. The conventional narrative has focused on developed nations. However developing nations and conflict zones have also been disproportionately affected. In this article, I want to bring attention to the effect of COVID-19 on conflict zones.

A recent article has highlighted the plight of refugees and migrants during the current COVID-19 crisis [1]. Another recent study has looked at the effect of social isolation measures in containing the COVID-19 outbreak in China [2]. The efforts of the authors are to be lauded. As developed nations are tackling COVID-19 aggressively, developing nations and conflict hotspots should also receive attention [3]. Social isolation measures now need to be urgently implemented in conflict zones like in Africa and in the Middle East.

However there are considerable challenges that need to be overcome if social distancing measures are to be effective in impoverished nations that are also in conflict zones. I outline a few of these challenges below:

1. There is a need for peacekeepers, aid workers and healthcare workers to have continued access to conflict zones. However this needs to be balanced with the unfortunate reality that they can also inadvertently spread the disease. Migration of peacekeepers, aid-workers and healthcare workers in conflict zones needs to be managed. A large influx of aid workers, some of whom may already be infected with COVID-19, may result in further spread of the disease. Aid workers need to take adequate precautions while attending to people in conflict zones.

2. Public transport are usually overcrowded and in many developing nations this is the only mode of transport for a livelihood. Developing economies, especially those ravaged by conflict, can collapse under social isolation.

3. Managing migration of refugees fleeing from conflict zones. As developed nations go into border shutdown, they should try to provide assistance to refugees fleeing conflict zones. This can be in the form of providing medical care in camps that also implement some form of social isolation.

4. Trust deficit in doctors and healthcare workers. Doctors were attacked during the Ebola crisis highlighting a trust deficit [4]. Many lessons have been learnt from the Ebola crisis in Africa. Community engagement has been a very effective measure in the fight against the Ebola virus epidemic in Africa [5]. Healthcare workers will need to reach out to communities and build trust in order to effectively combat COVID-19.

5. Existing diseases and epidemics. The Democratic Republic of Congo and other regions in Africa have been ravaged by a deadly measles epidemic [4, 6]. This highlights the need to also manage existing epidemics as scare resources will be diverted to combat COVID-19 [6, 7].

Conflict zones cause armies to come into close contact with each other and cause displacement of people. They can also cause breakdowns in public health infrastructures and overcrowding and unsanitary conditions in refugee camps. All of these factors can lead to further spread of infectious diseases [8].

In places like Syria, where the civil war has raged for many years, living conditions in refugee camps can enable faster spread of the virus. It can be very difficult to implement social distancing and isolation in refugee camps where thousands of displaced people have the barest of essentials. If possible, temporary ceasefires should be negotiated by peacekeeping organisations in conflict zones.
Such simple and low-cost physical measures as face masks can also be effective [9] (in combination with social distancing and other measures to improve hygiene). Adequate quantities of personal protective equipment should be provided to people living in conflict zones and those working in peacekeeping and aid organisations.

Travel restrictions to and from countries in conflict zones (except for citizens of that country and essential personnel like people in healthcare professions, peacekeeping organisations and aid organisations) may also be helpful. These measures, although draconian, may be helpful since social distancing may be difficult to implement in conflict zones.

Authoritarian governments in these conflict zones may also impede the rapid response and dissemination of public health information that is necessary in epidemics [10]. Timely and accurate information dissemination to people living in conflict zones is critical.

As developed nations tackle the spread of COVID-19, the leaders of the world and international organisations like the WHO and the UN need to act rapidly to prevent greater loss of life in the world’s conflict zones. Peacekeepers, healthcare workers, aid organisations and local bodies need to work together to ensure that the effects of COVID-19 in conflict zones are mitigated.

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