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Rights
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COVID-19 and U.S. International Pandemic Preparedness, Prevention, and Response

Chair Bass, Ranking Member Smith, and Members of the Subcommittee – Thank you for inviting me to testify today on the response by the U.S. Agency for International Development (USAID) to the pandemic of COVID-19 in sub-Saharan Africa. It is an honor and privilege to testify in front of this Subcommittee, and I look forward to your questions.

As of July 27, 2020, sub-Saharan Africa nations have reported close to 715,000 cases of COVID-19, a number that has more than doubled since July 1, 2020, and nearly 12,000 deaths. Over 60 percent of these reported cases have been in the Republic of South Africa, but we are seeing a worrying acceleration in various spots around the continent -- including in the Federal Republic of Nigeria and the Republic of Ghana. But we also do not know what we do not know. The amount of testing is low. Data are weak and incomplete.

As a result, it is too soon to say how widespread the outbreak could become in sub-Saharan Africa. We know some places are going to get hit hard (and have been hit hard already) -- while other places less so. A wide range of factors are at play: the degree of a country's international exposure, how urban it is, age demographics, its health capacity, and even its basic level of good governance -- all are key determinants. In addition, even where the disease is not as prevalent, and hasn't disrupted global supply-chains, caused lockdowns, and falling global remittances -- among other second- and third-order effects -- have affected every country. Thus, the needs are diverse, and our response must remain flexible to adapt to the shifting face of this pandemic -- country by country.

The good news is that despite how complex this situation is, the United States is already playing a leadership role in helping Africans successfully respond to this crisis. The U.S. Government has provided close to \$410 million to 45 countries across sub-Saharan Africa respond to the COVID-19 pandemic. The United States, through USAID, has shown a long-standing commitment to the African people. When former Administrator Mark Green last testified before this Committee, he spoke of USAID's overarching mission of helping communities on their Journey to Self-Reliance. Our investments in global health throughout the decades are a cornerstone of this approach. The United States has committed more than \$60 billion over the last 20 years to support public health on the African continent -- by far the largest contribution of any donor nation. The USG through the U.S. President's Emergency Plan for AIDS Relief

(PEPFAR) has trained over 285,000 healthcare workers and saved over 18 million since PEPFAR's inception in 2003.

The success of these investments has created deep, trust-based relationships with countries across Africa, together with strong public health platforms through initiatives like PEPFAR and the President's Malaria Initiative (PMI). In fact, these relationships and platforms have proved vital in our response to COVID-19, and allowed us to deploy targeted assistance quickly. In South Africa, for example, the USG, including USAID has leveraged the PEPFAR platform -- and over 5,000 community health workers to support efforts to control infections and provide clinical care to help protect those most vulnerable to COVID-19, including people who are living with HIV.

In addition to working to address the health effects of COVID-19 across Africa, it is also important to note that USAID and our partners have also deployed a rapid response to COVID-19 in two other areas: (1) mitigating food-insecurity and humanitarian needs; and, (2) lessening the second- and third-order effects of the pandemic, through targeted programs to reduce the disease's economic, educational, and employment impacts; pushing back against democratic backsliding; and minimizing the overall loss of development gains.

Responding to COVID-19: Health

We know that what happens elsewhere in the world can affect us here at home. USAID's assistance in Africa related to COVID-19 focuses on saving lives by improving public health education, protecting healthcare workers, strengthening laboratory systems, supporting disease-surveillance, and boosting rapid-response capacity in more than 47 countries across sub-Saharan Africa. These programs build on the over \$100 billion in investments the United States has made in health programs and structures in Africa over the last 20 years.

Our Department of State counterparts have likewise contributed to the COVID-19 response by helping meet the urgent demand for medical services. For example, the Bureau of Political-Military Affairs and regional bureaus worked with Congress to authorize partner countries like Chad, Ghana, Mauritania, Rwanda, Senegal, Sierra Leone, and Uganda to utilize equipment previously delivered for peacekeeping and/or counterterrorism missions to be temporarily utilized for domestic COVID-19 response.

We provide high-quality, transparent, and meaningful assistance to help communities affected by COVID-19 and equip them with the tools needed in their efforts to combat this pandemic and future ones.

For example, in Nigeria, USAID launched a partnership with cellphone provider Airtel to provide critical information via voice and text messages on physical distancing, safe hygiene practices, and other preventive measures to contain the spread of the disease. Through this

partnership with the private sector, we are now able to distribute the latest public-health messaging instantly to one million Nigerian citizens a day.

We must also address the root causes of these outbreaks, and apply the lessons learned from epidemics past. We have learned that poor governance, lack of transparency, and weak capacity exacerbate outbreaks and epidemics.

Responding to COVID-19: Mitigating Food-Insecurity and Humanitarian Needs

As noted, responding to the health challenges alone will not solve this crisis. This emergency highlights that we must proactively -- and comprehensively -- address how the COVID-19 crisis has eroded food security and worsened malnutrition across sub-Saharan Africa. At the beginning of 2020, conflict, poor macroeconomic conditions, and weather shocks were already increasing food-assistance needs across the globe. The Famine Early-Warning System Network (FEWS NET), funded by USAID, estimates 113 million Africans will be in need of emergency humanitarian food assistance this year, which represents an increase of approximately 25 percent in the span of just one year. The onset and progression of the COVID-19 pandemic, and measures taken to suppress its spread -- such as the lockdown of urban areas -- are likely to increase the magnitude and severity of acute food-insecurity.

To that end, USAID is working with the World Food Programme (WFP) and non-governmental organizations (NGOs) to invest over \$120 million of COVID-19 supplemental humanitarian resources to address emergency food needs in 17 countries in Africa. We also are addressing disruptions to agricultural production, trade, and local markets; the loss of livelihoods; and the deterioration of essential social services, like water and sanitation, while building longer-term resilience. Each of these investments plays an important role in strengthening food security and nutrition.

In countries and regions with complex humanitarian crises, in addition to emergency food, USAID funds health, water and sanitation, and logistics for emergency humanitarian responses. In Nigeria, USAID is working with the WFP to meet the food needs of approximately 480,000 people who are facing acute food-insecurity because of COVID-19 in Borno, Adamawa, and Yobe States, the epicenter of the crisis in the Lake Chad Basin. This assistance also supports people in densely populated urban areas who cannot meet their minimal food needs because of decreased economic activity, movement restrictions, and rising food prices. With funding from USAID, the WFP will provide cash transfers for locally procured food assistance in July and August, the peak of the lean season when food-insecurity is highest.

In addition to emergency humanitarian assistance, USAID is addressing longer-term food security mitigation through Feed the Future. In the Republic of Rwanda, Feed the Future is providing vulnerable farmers, many of whom are women, with seeds to grow drought-resistant

crops so they do not miss a harvest season because of COVID-19. The program is also making tractors available to farmers who are experiencing labor shortages because of the pandemic, and is providing post-harvest equipment and advice to help them protect and store crops.

Responding to COVID-19: Reducing the Second- and Third-Order Impacts of the Pandemic

We will see wide-ranging impacts of COVID-19, many of which will not become clear for some time. Beyond COVID-19, we expect to see significant increases in mortality because of vaccine-preventable diseases, malnutrition, maternal deaths, HIV, tuberculosis, and malaria -- which would reverse the progress made from decades of the U.S. Government's investments in global health. To counteract these losses, USAID will leverage ongoing investments in health to mitigate the impacts of COVID-19 and sustain that long-fought progress. Beyond health, early data also suggest significant second- and third-order impacts across the continent not only on health, but also on economic growth, education, democracy, and conflict.

Before this crisis, the economic-growth estimate for the African continent for 2020 was 3.9 percent. Now, many countries in Africa are facing significant economic contractions. According to the World Bank, the pandemic could cut Africa's growth in Gross Domestic Product in 2020 by between two and five percentage points -- the continent's first recession in 25 years. Through Prosper Africa, USAID is adapting existing trade and investment tools and creating new ones to help businesses adjust their strategies, protect their investments, and find new opportunities in response to COVID-19.

Additionally, COVID-19 is wreaking havoc on education in Africa. The pandemic has pushed 279 million learners out of schools across the continent, and the impact on the education workforce will be a strain for years to come. Where feasible, USAID's education programs have pivoted to introduce new teaching materials and distance learning because of nation-wide school closures. However, the provision of equitable learning opportunities for all pupils is far from achieved.

We are also very concerned about democratic backsliding and have seen how some African regimes are using COVID-19 to restrict democratic space and further constrain free media. USAID is closely tracking the evolution of the spread of COVID-19, its impact on citizen-responsive governance, civil and political rights and stability. Disturbing trends include the cancellation or postponement of elections, targeted crackdowns on key population groups, and increased gender-based and criminal violence, among others. Many national governments are taking active steps that could curtail individual citizens' data privacy and civil liberties. We have also seen severe repression of perceived violators of lockdown conditions that could portend more aggressive government control even after the pandemic subsides. In the Republic of Mali, USAID is working with local governments, NGOs, citizens groups and concerned individuals to

counter dangerous misinformation and rumors about the sources and spread of the novel coronavirus. Civil-society partners are tracking misinformation and correcting it via radio, social media and peer groups to point Malians to accurate government and NGO resources.

Conclusion

Looking long term, we understand that COVID-19 will continue to have multiple effects in the months and years ahead. We remain committed to working with governments, civil society, faith-based organizations, academia, and the private sector in our African partner countries through this pandemic, now and into the future. No other nation can match our unparalleled generosity, our open, collaborative approach, or our long-term commitment to helping communities on their Journey to Self-Reliance. At the same time, other countries need to do their fair share, and USAID is working with the Department of State to increase burden sharing by other donor countries. Thank you again for the opportunity to address this Subcommittee, and I look forward to your questions.