



INSIDE

Overview of  
COVID-19 in East Africa

East Africa urban  
landscape, livelihoods  
and implications of COVID-19

Impact on  
urban food insecurity

# IMPACT OF COVID-19 ON LIVELIHOODS, FOOD SECURITY & NUTRITION IN EAST AFRICA

## URBAN FOCUS

3 AUGUST 2020

01

**HIGHLIGHTS & COVID-19 OVERVIEW**

Overview of COVID-19 spread globally and in East Africa • COVID-19 outlook

04

**CONTAINMENT MEASURES AND IMPACT**

Containment measures helped slow down the virus spread • Economic cost of confinement

07

**EAST AFRICA URBAN LANDSCAPE**

Urbanization in EA • High prevalence of informal settlements • Informal settlements associated with higher risks • Access to basic services

14

**URBAN LIVELIHOODS AND IMPLICATIONS OF COVID-19**

Dependence on informal, vulnerable livelihoods • Human story • Declining income, deepening poverty • Rural-urban linkages

24

**MARKETS AND PRICE DEVELOPMENTS**

Response of markets and food prices to COVID-19 restrictions • Regional trade and price outlook

26

**IMPACT ON NUTRITION**

Regional food price inflation • Cost of a nutritious diet and non-affordability

29

**URBAN FOOD SECURITY**

High market dependence • Food expenditure constitutes major share of budget • Urban poor: emerging hot spot of food security • Human story

33

**COVID-19 AND URBAN PROTECTION RISKS**

All forms of violence increasing in urban settings • Spike in GBV • Escalating rate of evictions • Vulnerable groups at particular risk

35

**ADDRESSING THE VULNERABLE**

Urban vulnerability • Increasing food insecurity • Likely deterioration in nutritional status

36

**MONITORING FOR EVIDENCE-BASED RESPONSE**

Value of data and information • Remote monitoring tools • mVAM • Readiness & Response Tracker • Urban database

38

**BIBLIOGRAPHY**

# HIGHLIGHTS



Urban populations in East Africa are highly vulnerable to the COVID-19 pandemic, particularly 35 million people, or 58% of the urban populations living in informal settlements who are at high risk from its impact.



Livelihoods and incomes of these urban populations are seriously affected, particularly the urban poor who depend on the informal sector, with serious consequences for their food security and nutrition.



The number of food insecure people in East Africa is estimated to increase this year to more than 41 million people as a result of COVID-19, including 14 million who are estimated to live in urban areas.

## COVID-19 OVERVIEW

### GLOBAL OVERVIEW

COVID-19, a global pandemic, has resulted in more than 18 million cases globally and contributed to 690,000 deaths as of 2 August. The highest burdens are in the United States (4.8 million cases and 158,000 deaths), Brazil (2.7 million cases, 94,000 deaths), and India (1.8 million cases, 38,000 deaths) (Johns Hopkins, 2020).

The epicentre of the pandemic has moved from China to Europe and North America, and now towards the global south, in particular South America and South Asia, and lower income countries are increasingly seeing many cases (Mahler & Wadhwa, 2020). Though countries in Asia, Europe and Oceania had gained control of the spread and slowly started opening up societies, many countries have started to experience a new wave of increasing cases, causing some countries and cities to implement partial lockdowns again (WHO, 2020).

### EAST AFRICA OVERVIEW

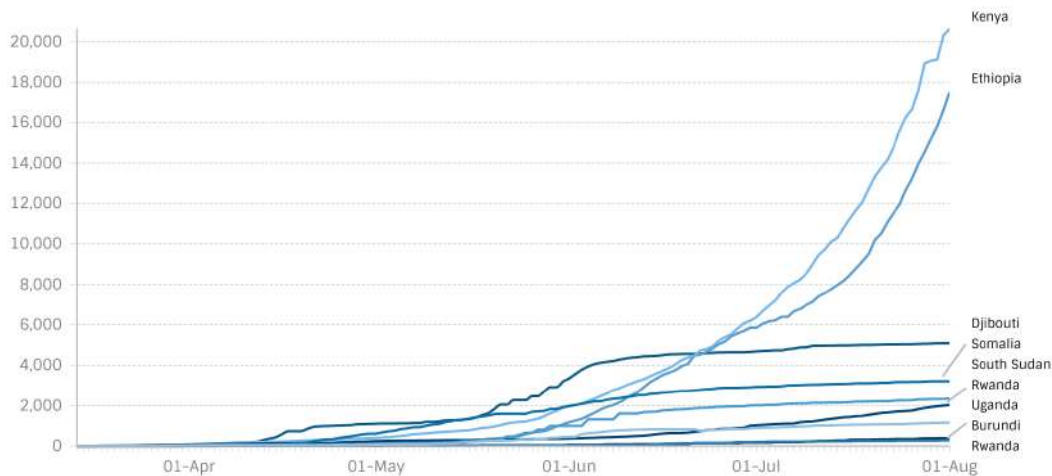
At 53,000 confirmed cases and 821 deaths as of 1 August, the region is at a relatively modest level compared to other regions in the world, though the number of new cases is increasing more rapidly than before. Globally, the fatality rate is estimated at between 0.6% and 3.5%, but until now it seems to be at the lower end in East Africa<sup>[1]</sup> (Kissler et al., 2020).

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<sup>[1]</sup> This report covers Burundi, Djibouti, Eritrea, Ethiopia, Kenya, Rwanda, Somalia, South Sudan and Uganda, which are the countries covered by WFP's bureau for East Africa



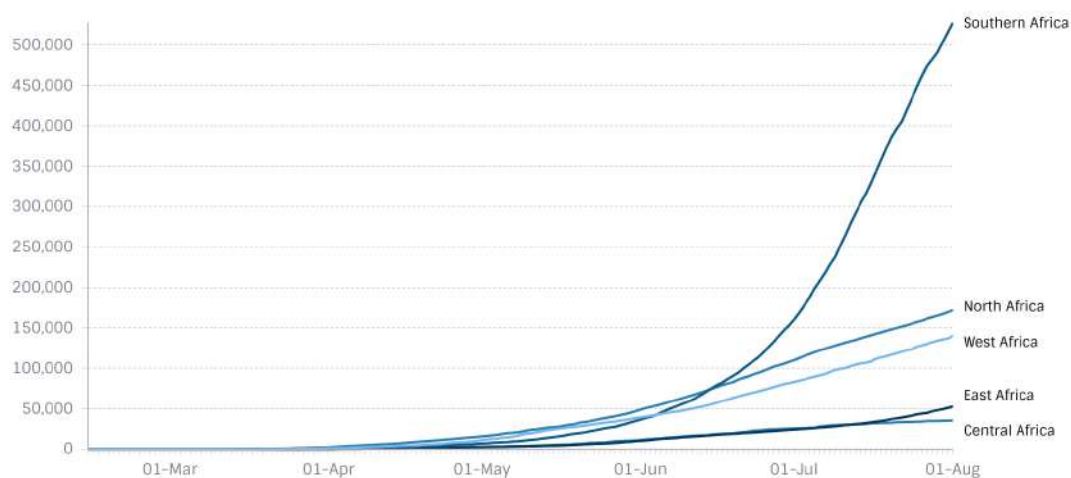
**Figure 1** COVID-19 cases in East African countries



Source: WHO

The increase in the region is especially due to Kenya and Ethiopia beginning to see rising numbers of new daily cases (Figure 1). By 1 August, Kenya had the most cases (20,636) followed by Ethiopia (17,530), Djibouti (5,081), Somalia (3,212), South Sudan (2,352), Rwanda (1,022), and Uganda (1,154). Eritrea and Burundi had less than 400 cases each. The highest number of deaths were reported in Kenya (341), followed by Ethiopia (274), Somalia (93), Djibouti (58) and South Sudan (46). Five persons have reportedly died in Rwanda, three in Uganda and one in Burundi, while no deaths have been reported in Eritrea. Figure 2 shows the number of COVID-19 cases in regions of Africa. Clearly, the pandemic has not peaked yet.

**Figure 2** COVID-19 cases in African regions



Source: Johns Hopkins

While statistics at sub-national levels are not up-to date or are generally not well disaggregated by rural versus urban, available figures show a higher proportion of cases in urban than in rural areas. For instance, around 70% of total cases in Kenya as of 27 July were in Nairobi and Mombasa, the two major city counties. In Uganda, 18.2% of the 1,176 cases reported as of 1 August 2020 were in Kampala and Gulu districts, which are relatively urbanised (KCCA, 2020). In Burundi, 82.7% of the 191 cases reported until the first week of July were in Bujumbura, the country's capital. In Somalia, 78% of the 3,038 cases by 9 July 2020 were in Banadir region where Mogadishu city is located (Somalia Ministry of Health, 2020).



UN-Habitat/Kirsten Milhahn

## COVID-19 OUTLOOK

Recent evidence suggests that coronavirus can be airborne, which poses an additional threat to the region as crowded places, public transport carriers and poorly ventilated health facilities are examples of areas where the spread could be quicker than previously anticipated. Additionally, a study in *The Lancet* concludes that herd immunity is not a viable solution, meaning all countries should focus on minimising the spread (Pollán et al., 2020).

To be able to effect responses while waiting for a vaccine, it is essential to have an overview of how the pandemic can develop based on evidence from previous similar viral outbreaks. Until now, a possible scenario was that it may be possible to eradicate COVID-19 with its closest genetic relative virus. However, this is no longer seen as plausible by public health authorities, and a more likely scenario is that if immunity to COVID-19 is not permanent, it is likely to occur on a seasonal basis until a vaccine becomes available (Kissler et al., 2020).

If the current outbreak is followed by a second wave, such as was already seen in some Asian and European countries that are the farthest in terms of the spread cycle, devastating impacts on the fragile health systems and economies of East Africa should be anticipated (Gavi, 2020). This is particularly concerning as the increase in COVID-19 has still not reached its peak in this region.

While there are numerous efforts underway to develop a vaccine, it could still be months or a year away until it is successful and accessible to people all over the world. The World Health Organization (WHO) indicates that there will be no return to the “old normal” for the foreseeable future and recommends three factors to control the disease and get on with our lives: a) focusing on reducing mortality and suppressing transmission, b) empowered, engaged communities take individual behaviour as being in the interest of each other, and c) strong government leadership and coordination of comprehensive strategies that are communicated clearly and consistently (WHO, 2020).



# CONTAINMENT MEASURES AND IMPACT

## CONTAINMENT MEASURES HELPED SLOW THE VIRUS SPREAD

Governments around the world including in East Africa have taken what Bhari and Fakir (2020) refer to as the “biggest state-led mobility and activity restrictions in the history of mankind,” which has proven to be highly effective in saving lives (Deb et al., 2020). Measures such as varying degrees of social distancing have been adopted to ‘flatten the curve’ and to avoid the risk of overwhelming health systems; followed by their gradual lifting after achievement of some control of transmission (WHO, 2020). A study by Hsian et al (2020) released on 6th June estimated that without shutdown measures, there could be as many as 500 million more COVID-19 infections in six countries including China, South Korea, Italy, Iran, France and USA (Hsiang et al., 2020).

The spread of COVID-19 in East Africa started slightly later than in other parts of the world. This provided an opportunity to learn and implement measures that worked elsewhere. Since March 2020 when the first cases started being reported, a variety of control measures have been adopted with the aim of controlling the spread of COVID-19 and saving lives, flattening the curve and ensuring that health systems are not overwhelmed. The general measures adopted across the region included: emphasis on social distancing, hand washing and use of hand sanitisers; awareness creation; closure of institutions such as schools and religious places of worship; banning of social gatherings; suspension of international flights and travel restrictions to countries with high COVID-19 cases; and restrictions on internal movement from areas with reported cases; wearing of protective gear (masks); quarantining any incoming travellers or suspected contacts; and restricting travel across countries by closing border entry points unless for essential services and cargo.

In the region, even though strict lockdowns in the form of complete shutdowns were not applied, various measures such as ‘lighter’ lockdowns were implemented by governments. While stricter and more prompt actions were taken very early after detection of the first cases, governments started easing controls due to the consequences on economies and livelihoods. In some countries in the region, the easing of controls has happened amid increasing cases, exposing even more people to the disease.

In addition, other country-specific measures were also adopted to curb the spread of COVID-19 in populated areas and especially in urban areas. **Uganda, Rwanda** and **Djibouti** initially imposed lockdowns after reporting first cases but have or are gradually easing restrictions to allow people

to pursue their livelihoods (Uganda Media Centre, 2020) (FEWS NET, 2020) (UNCT Djibouti, 2020). The lockdown in Uganda has been eased except in districts with clusters/potential clusters of



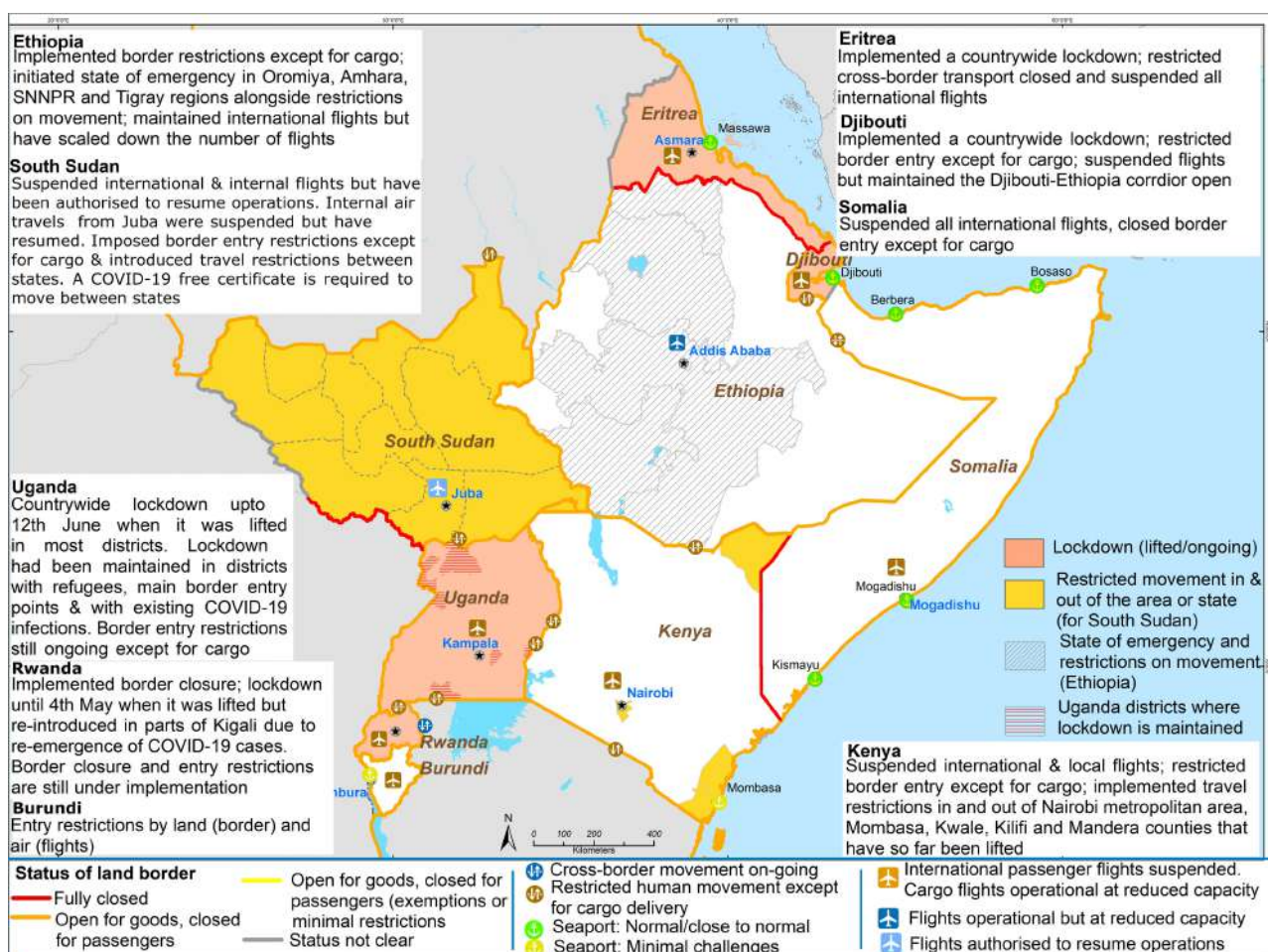
infections still under investigation, areas hosting refugees, at main border entry points that still need more comprehensive surveillance and testing, and in border points with water bodies and informal crossings across water. Rwanda reinstated its lockdown on parts of Kigali in June after COVID-19 re-infection cases increased (Bloomberg, 2020).

**Kenya** imposed and maintained a night-time curfew, travel restrictions in and out of COVID-19 hotspots such as the Nairobi metropolitan area, Mombasa, Kwale, Kilifi and Mandera and enforced border closures instead of a full lockdown. Starting in July, travel restrictions were lifted in all these affected regions despite an increase in daily reported cases (Al Jazeera, 2020). **South Sudan** introduced a night curfew and ban on inter-state travel (Cordaid, 2020).

Unlike other countries in the region, **Ethiopia** maintained its airline operations to many international destinations though the scale of flights has reduced in recent weeks. Internally, Ethiopia declared a state of emergency in four regions (Oromiya, Amhara, SNNPR and Tigray) and restricted travel in order to curb the spread of the disease (Embassy of Ethiopia in London, 2020).

While **Eritrea** imposed a lockdown in April, there is general lack of information about the current status. Overall, it has been observed that various measures have helped reduce the spread of the virus, while new infections have increased in some areas after opening up. Thus indicating the need for carefully considering how to dealing with the situation.

**Map 1** Measures in East Africa implemented to control COVID-19



Source: World Food Programme

## CONTAINMENT MEASURES HAVE HUGE ECONOMIC COST

Though effective in curbing the spread of the virus and related deaths, stay-at-home requirements and closures of workplaces come with the highest economic cost (Askiras et al., 2020). Overall, the global economy has suffered vastly during the pandemic due to an abrupt fall in demand, high capital outflows from developing and emerging economies, a plunge in oil demand and a near-collapse of global trade (World Bank, 2020) (IMF, 2020). The 2020 pandemic has fuelled a global recession expected to be the deepest since World War II. Despite a global rollout of financial stimulus packages equivalent to roughly 10% of the world GDP (UNESA, 2020), long-lasting economic impacts are expected (World Bank, 2020). Though developed economies are already suffering, research shows that developing economies will be hit harder by the economic consequences (Noy et al., 2020).

Generally, it is anticipated that East Africa will see disruption in three main areas: the loss of income for especially people working in the informal sector with women and youth being disproportionately affected (ILO, 2020), falls in income from remittances, and the disruption of food systems (WFP, 2020). In addition, there are amplifying factors in developing economies, including in East Africa, such as a large share of informal workers with a low opportunities to work from home, less diversified income streams to provide public revenue including a high dependency on tourism and remittances, limited fiscal space, high public debt, relatively small public sectors and sources of tax revenue, weak health systems, and overall a relatively higher prevalence of conflict, violent riots and unrest (Noy et al., 2020) (Vorisek, 2020) (IFPRI, 2020).

The World Bank estimates that over the next five years, emerging and developing economies could experience drops in output of nearly 8% while oil-dependent countries such as South Sudan could decline by as much as 11% (World Bank, 2020). Furthermore, an additional 100 million people (adjusted from an estimate of 40-60 million in April) (Mahler et al., 2020) could be pushed into extreme poverty, corresponding to the result of three years of cumulative efforts to combat global poverty (World Bank, 2020).

With the global downturn, remittance-dependent countries will inevitably be affected. The World Bank estimates that the level of remittances to Sub-Saharan African countries will drop by 23% in 2020 (Ratha et al., 2020). The COVID-19 pandemic has had a profound adverse impact on the

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