

The weekly newsletter supporting SDG
June 17, 2020



CORONA PERSPECTIVES

CHALLENGES – CHANCES – LEARNINGS

What do we (not) see ?

How to judge ?

What can we do this week ?

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in support of

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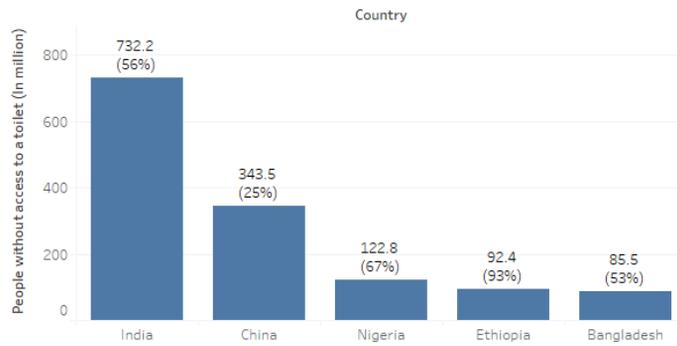
AFRICAN UNION

What do we (not) see?

It takes more than social distancing

Most debates around how to cope with COVID-19 are led from a perspective of a developed world reality. The graph to the right indicates why suggestions on how to tackle the challenges caused by viruses need to take into account that the vast majority of people remain living in a reality which is far from overcoming the risks by giving advice such as "social distancing." If publicly announced support programs are to be more than the usual window dressing, it makes sense to listen to those experts who take multiple diverse realities into account.

Lack Of Access To A Toilet: Top 5 Countries



Source: <https://www.worldatlas.com/articles/countries-with-the-fewest-toilets-per-capital.html>

Over 93 different Indigenous communities have been affected

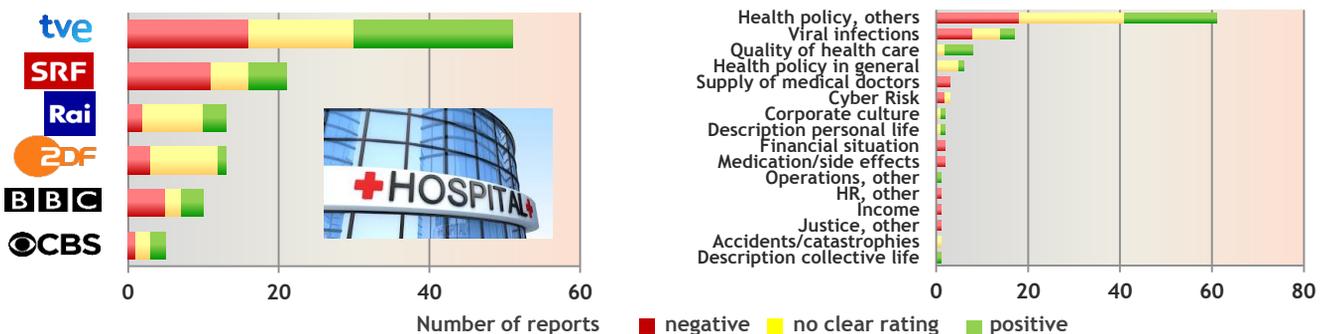
From the Amazon to Australia, indigenous communities on average suffer a 9% mortality rate. The response from Australian Aboriginal communities to restrict the spread of coronavirus started decisively in early March. Supported by the Australian Department of Health, the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands Traditional Owners restricted access to their region. The combined Aboriginal Organisations of Alice Springs demanded a special control area for the Northern Territory. The chief executive of the National Aboriginal Community Controlled Health Organisation, Pat Turner, called for better health resourcing with community control to face the virus. The Mapoon Aboriginal Shire implemented its own travel ban, while numerous land councils stopped issuing permits for visitors. The Tangentyre Council and Larrakia Nation implemented "Return to Country" programs to cover the cost of people wishing to return to their communities. Furthermore, the Northern Land Council has produced and distributed health messages in all 17 different tribal languages.



RAI reports about hospitals in Italy as if everything is fine

It takes access to non-biased information in order to make a qualified decision as to whether changes are necessary. Watching the public service TV news from RAI Uno, audiences in Italy would not think there was any need for improvement in regards to the status quo of hospitals operating between Milano and Palermo. A few positive reports, a few negative reports, and a vast majority of neutral reports seem to reflect a reality which was surely perceived differently by victims of COVID-19 who experienced the services offered in Italian and international hospitals during the first 6 months of 2020. This was only topped by their sister program in Spain. TVE offered an even larger number of positive stories reflecting the realities in the hospitals. One can understand that during the heat of the crisis journalists were hesitant to cover the reasons for the extremely high number of deaths, but since April the situation in both countries has improved. But has the reporting?

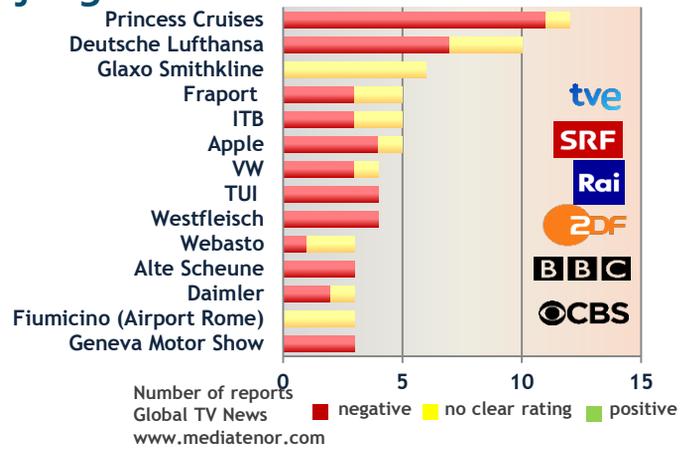
Reporting on hospitals: Volume and rating and topics (Jan 1 to June 9, 2020)



Basis: Media Tenor International: 113 reports on hospitals in 6 international TV news programs, Jan 1 – June 9, 2020

How to judge?

There has been probably no other period since 9/11 in which people went back to old habits of news consumption as it was 40-50 years ago. All traditional media report all-time record numbers of people returning to their offerings keeping audiences informed about what was going on within their national borders and beyond. Not all companies managed to illustrate that they had learned to weather the storm from previous crises. The graph to the right lists those who were challenged the most by the lockdowns or caught by low standards in serving their clients.



Judging from the past

140 countries signed the UN Declaration on the Rights of Indigenous Peoples in 2007. Among these basic rights was the confirmation of access to the accounts, assets, and grounds owned by Indigenous people. Close to nothing has happened since then. The media does not report on these issues either. Mining companies like BHP just announced that they will move ahead with expansion projects that will destroy at least 40 ancient Indigenous sites in Australia, just days after a national outcry over the razing of another archaeological site carried out by another mining company, Rio Tinto. But without access to their resources, how can Indigenous communities finance challenges caused by COVID-19?

During COVID-19 it has been even more challenging to provide reliable polling – which requires a solid and scientific access to diverse groups in society. The World Association of Public Opinion Research is providing access to research from all continents. One study about the sentiment in eight selected African countries illustrates the extremely low rates of satisfaction on how citizens from South Africa, Uganda, Kenya, Tanzania, Ghana, Zambia, and Nigeria feel regarding how their governments managed the challenges caused by the coronavirus. And while China spent a lot to provide immediate help, the rating of President Xi is as low as that of Putin or Trump. More respected are Macron and Merkel.

https://www.infiniteinsight.net/Online_Multi_country_poll.pdf

Judging for the future

Most of the countries failed to ensure enough face-masks and other personal protective items were in stock. Moving forward, national solutions and national providers are supported in order to no longer be dependent on logistical nightmares. Too often the medical equipment which was sold was found to be rotten and unusable – after governments and others paid a huge amount. Moving forward, providers such as 3M are starting to act in order to fight malfunctioning markets:

<https://www.startribune.com/with-two-new-lawsuits-3m-has-filed-14-claiming-n95-fraud/571108192/>

Healthcare in Emerging Markets

The American University of Antigua College of Medicine, a UNA1 member institution in Antigua and Barbuda, is organizing within the framework of the 75th anniversary of the United Nations (UN75) an online dialogue under the topic "Healthcare in Emerging Economies," covering issues such as availability of adequate healthcare professionals, healthcare infrastructure, and quality and affordability of healthcare. As the dialogue will take place during the ongoing COVID-19 pandemic, there will be space to discuss the impact of the pandemic on these issues. For more information, including details for registration, please visit this website:

<https://www.auamed.org/news/united-nations-75th-anniversary-american-university-of-antigua-webinar/>

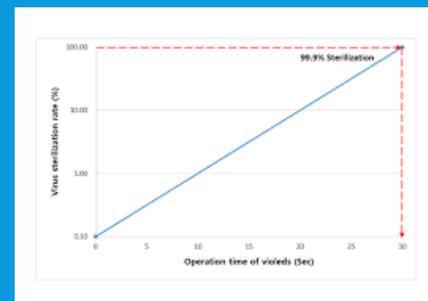
What can we do this week? 3 Suggestions

Provide homes and sanitation to stop the virus spreading

To stop the spread of COVID-19, we've asked billions of people to stay at home to minimize the spread of the virus. But what if your home has no running water or no ability to flush a toilet. An unsanitary home is a breeding ground for viruses. This is why governments need to invest in better housing. 3 areas governments can focus on are: 1) Geospatial technologies and drones to support infrastructure development to identify opportunities to reduce overcrowding and allow for social isolation and self-quarantining for future pandemics. 2) Investing in improving home sanitation and infrastructure in neighborhoods that are most at risk. 3) Provide subsidies for homes to improve their sanitation facilities and provide jobs – such as plumbers and carpenters – for local community residents. These actions will give governments and health systems more time to fight the virus until a safe vaccine has been developed.

The promise of ultraviolet light as a treatment for Coronavirus

Ultraviolet germicidal irradiation has been used as an effective disinfectant process since the 1950s. Short-wavelength ultraviolet light kills or deactivates microorganisms, destroying their nucleic acids, attacking their DNA, and their capacity to perform vital cellular functions. The challenge in using the process within the body has been holding the light inside the body long enough for the disinfection to occur. Andrei Goverdovsky, of the state nuclear agency Rosatom, announced that Physicists at the Russian Institute of Physics and Power Engineering have developed a solution to the problem, with patients inhaling ultraviolet light emitting molecules and gas components. Agency scientists are very optimistic that this process, which they have termed Luminous Gas Treatment, has the capacity to effectively treat not only coronavirus but also SARS, MERS, tuberculosis, and certain forms of cancer.



<https://www.acsh.org/news/2020/04/15/covid-19-uv-led-can-kill-999-coronavirus-30-seconds-14719>

Mortality in senior citizen homes

Worldwide the over-mortality in old people's homes and nursing homes was caused by the way governments and local authorities responded to the CoVID-19 infection. Causes are crystallizing now: wrong or unnecessary treatment; sedation; and the omission of necessary treatment of actual previous disease among them. Investigations by the public prosecutor's office will now follow. In Switzerland, Lombardy, France, Spain, and the US, a wave of lawsuits is rolling out. Due to isolation without visiting rights for the elderly, decisions were often made without relatives. Senior citizens who were cared for at home or in small residential groups under the control of their relatives fared better. In a residential group everyone lives in their own room, but large living/dining areas, the kitchen, and bathrooms are shared by residents, as are the 24/7 care services. The residents feel more like they are at home, and the relatives have influence on the organization of their daily routine, nutrition, and medical care. The evaluation of official data shows that there was at no time a reason for draconian lockdown measures. States that never locked up at all - states where people were allowed to move freely outside and not be alone in closed rooms – have ended up no worse off than states where quarantine was compulsory. States that were initially sealed off but were quickly re-opened have not seen any explosions of coronavirus cases. We should learn from those that have successfully done things differently. In Taiwan, life went on normally. Of 25 million people, there were 48 infected, and that without information from the WHO. Planning was coordinated by doctors, epidemiologists, virologists, biologists, infectologists, and other scientists together with the government, as it should be. The paradigm also included the fundamental premise that the body is wise by nature, that symptoms are meaningful, and that radical healing is eminently possible if we are in harmony with the earth, honor our place in the natural world, and that a healthy body need not fear infection. Marina Baaden

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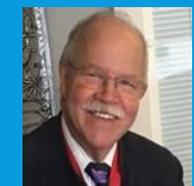
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