

COVID-19 Africa: Social Work Practice, Ethical Dilemmas and Human Rights Concerns

HUMAN RIGHTS & ETHICS IN SOCIAL WORK

IFSW's ethical statement underlines the importance of promoting human rights which stresses that social work is based on

- respect for the inherent worth, dignity of all people and the individual and social /civil rights that follow from this
- challenging discrimination and oppression
- promoting social justice, respecting diversity
- work toward access and the equitable distribution of resources
- challenge unjust policies and practices
- build networks of solidarity to work toward transformational change and inclusive and responsible societies.

HUMAN RIGHTS IN AFRICA

The African Commission on Human and Peoples' Rights based in Addis has called for governments to put human rights at the centre of their fight against Covid-19. The African Centres for Disease Control (CDC) recorded on 6 May 2020 there were **49,352 cases, 1959 deaths and 16,315 recoveries**. Recently it has urged States Parties to ensure that COVID-19 responses are designed and implemented in a way, which respect fundamental human rights and which do not lead to persecution and violence towards vulnerable groups.

From our previous webinar we learned about the contribution that social workers are making already, all of which are key human rights roles for the profession:

- psycho-social support to those living under the lockdown
- helping in situations of domestic violence
- social protection initiatives in identifying poor households for assistance
- Implementing cash transfer schemes assisting with distributing food

- disseminating correct info on COVID, dispelling some of the myths around the virus in order to counter stigma
- helping re-integrate children with families and take them off the street
- developing peer counselling and other group support schemes

There are 4 key areas I wanted to cover regarding human rights and ethics in this pandemic situation:

(1) ACCESS TO FOOD, SHELTER AND PHYSICAL SECURITY ARE KEY TO HUMAN RIGHTS

We were hearing from Anstance last week about Maslow's Hierarchy of Needs where basic physical needs have to be satisfied first. In a health emergency the key to dealing with this is dealing with these physical needs first. This is incredibly important, we can't begin to consider how to successfully tackle COVID or any health emergency until fundamental human rights of food, nutrition, clean water and secure accommodation are there.

Also we can't assume we know what these needs are. Social workers know the importance of listening to people. The key thing which social workers do all the time is working with the people – asking the various community groups – women, men, youth, elderly – what they want, what they can do for themselves, what help would they appreciate. For people already suffering hardship because of unemployment, drought or a swarm of locusts, social welfare is usually provided by relatives, the community, with limited resources they are used to looking after themselves as best they can.

If a lockdown cuts these social ties, adversity can very quickly become destitution. If lockdowns are to be introduced and if human rights are to be respected governments should address **the social and economic impact of lockdowns on low-income earners and the unemployed.**

Lockdowns may not always be appropriate for Africa with a very young population compared to Europe. The median ages in Italy and the UK are about 45 and 40 for example, whereas the average age in sub-Saharan Africa is about 20. China, Europe and North America all

adopted much the same epidemic control policy: lockdown. Many African governments have followed suit, but in general **lockdowns may be simply unworkable in the continent**. Only a few African countries, such as Rwanda and South Africa, have the capacity to administer a centralised strategy.

For people living from day to day, reliant on earning cash in the market to buy food, a few days' lockdown is the difference between poverty and starvation. Staying at “home” is no real option for inhabitants of densely packed slums with abject water and sanitation access, and the vast majority of workers in the informal sector, with no employment rights let alone access to adequate social benefits. It is important that the necessary steps to ensure the health and well-being of vulnerable groups, which may include the majority of people who are living in resource-poor settings, by facilitating their access to safe drinking water, soap and sanitizers, accessible and appropriate health facilities and other basic social services. Communities must be supported to help themselves and social workers do this all the time.

(2) COMMUNITY-BASED RESPONSES ARE VITAL

Governments should focus on community-based approaches to raise awareness and increase resilience. African countries have learned much from tackling epidemics such as HIV and Ebola that should be put to good use as they face the impact of Covid-19. Some 15m Africans died of AIDS, before cheap antiretrovirals became available while Ebola killed 11,300 people from 2013 to 2016. Social workers know how important it is engaging with communities who can provide the contextual details and knowledge of what has worked for them in the past. An example is the Veronica Bucket, a simple but effective receptacle to collect waste water to enable people to wash their hands in the absence of running water, invented by a Ghanaian health worker during the Ebola outbreak. Also Senegal is developing a \$1 COVID-19 test kit that is easy to access for the community.

The most important lesson is that communities must be at the forefront of responding and this is something that social workers know is vital if health and other measures have any chance of working and is central to a human rights response – people need to be involved, to be

respected, to be empowered rather than always having things done for and to them by others, even if they are well-meaning.

(3) INTERNATIONAL SOLIDARITY NEEDED

There is an ethical requirement for social protection which IFSW has spearheaded through developing its social protection policy. However **global protectionism instead of global solidarity has prevailed**, with more than 70 countries imposing restrictions on the export of medical materials. Getting hold of the chemical reagents needed to process tests can be difficult, as African countries don't produce their own and need to compete for limited global supplies.

John Nkengasong of Africa's Centres for Disease Control says "the collapse of global co-operation and a failure of international solidarity has shoved Africa out of the diagnostics market".

Although many western countries have put huge sums into supporting businesses and social welfare schemes many African countries simply do not have that option. Yet this is a time when international solidarity is extremely important. As rich countries proclaim "we will do what it takes" at home, they have a moral duty to offer the same option to those countries most damaged not just by the virus itself but also by the aftershocks of rich countries' own deliberate actions. In addition, they have a clear self-interest in successful global containment: national border controls have not proven to be an effective barrier against the pandemic's spread.

Also from a human rights perspective, COVID has meant that more than ever before it is important to work together, we are one world and problems affecting one region will spill over and affect another. Social workers have always advocated international solidarity and work for this through the United Nations and our various global regions.

(4) AFRICAN COUNTRIES MUST RESPECT HUMAN RIGHTS

There are tremendous challenges in Africa and countries have a massive shortage of resources; however health is perhaps the most area needing investment. The World Health Organization has urged African Union members to fulfil a 2001 pledge to allocate at least 15% of their annual budgets toward the health sector. The U.N. agency reported in 2011 that nearly all African countries failed to meet that target.

In some countries Human Rights Watch have reported that people's human rights have been severely impacted with trying to force people into lockdown with beating, forcible removal of informal traders from the street and in some countries even shooting of civilians. This has occurred in Kenya, Nigeria, South Africa, South Sudan and Zimbabwe among others. Governments have acted with a flagrant disregard for human rights.

Yet cooperation, solidarity and a respect for human rights are really needed and feature in responses to this epidemic – in particular swift detection, early testing and rapid response require cross-border collaboration and strong solidarity among neighbouring countries and with the international community to combat the spread of infectious diseases.

Many countries are providing much-needed assistance which social workers are at the forefront of implementing – for example **Nigeria** is using an existing National Social Register to map and identify vulnerable groups for conditional financial help. The **Rwandan government** has announced a safety net, including through food distribution in Kigali. **South Africa** has set up an independent Solidarity Response Fund to alleviate suffering and distress caused by the COVID-19 pandemic and assist South Africans affected by the outbreak, and **Kenya** announced tax relief and voluntary reduction of salaries of senior state officers.

FINAL POINT

Overall social workers provide very much needed community support to vulnerable members of the community in backing up these initiatives to tackle COVID-19. Our social work associations are key to supporting them so it is very positive that IFSW and our Africa region is developing such good links and these electronic methods such as the current

webinar in providing a platform for social workers to share their practice with one another.

KEY POINTS

- (1) **Social work is fundamentally a human rights profession** and our concerns are inevitably involve the basic human rights that we all have – principally for good nutrition, clean water and a healthy environment, good shelter and physical security. Social work is fundamental human rights work.
- (2) **Communities are key to tackling COVID** and need to be engaged rather than just being instructed from above. Our anti-discriminatory and anti-oppressive values mean that we treat people with respect and dignity through active listening, strengths-based approaches and co-producing solutions to problems.
- (3) **International solidarity** – The social work profession needs to be even more engaged in arguing that we live in one world, where what happens to one person impacts meaningfully upon everyone and requires sharing of resources and power and engagement in international governance structures.