HOW UGANDA LEADS ON COVID-19

The culture of health and sickness

A study started in Uganda before the coronavirus began its global travels may be the only reliable, real-time information the world has on how a community thought about and responded to the pandemic. It showed the need to assess vulnerability before a disaster, and show empathy based on understanding

A David Napier and Edward F Fischer | LMD English edition exclusive

JESSICA CHRISTIAN - SAN FRANCISCO CHRONICLE - GETTY

A group of researchers, led by David Mafigiri at Makerere University in Uganda, began collecting data this January for a long-planned health vulnerability assessment to identify what makes people and communities more vulnerable or resilient to infectious diseases. This study was in place well before the Covid-19 pandemic as part of *Sonar-Global*,[1] a European Commission-funded research programme, and the team could amend questions based on current developments.

The data is now being analysed. But it is clear that, since lockdowns are still in place globally for fieldworkers and there is a hold on almost all face-to-face public health research, Uganda may have the only systematic real-time data on how people in at-risk communities conceptualise and respond to the virus.

The information the assessments collected is notable. The interviews lasted between one and three hours, much longer than a normal health survey. Instead of taking blood samples and asking multiple choice questions, researchers met participants in their homes and had structured but wide-ranging conversations about access to services, about availability of medical care and other health-related information, and about local conventions, practices and norms – 'culture'.

Why culture? And why invest time and effort on things apparently unconnected with health and infectious disease? Because infectious viruses are about social networks and cultural norms, as much as about microbes. As science tells us, viruses are inert, unable to attack us. We *transmit* viral data though our social networks and cultural pathways. We give viral information to each other by how we live and what we do. Otherwise viruses just sit inert, sometimes for thousands of years. So understanding cultural contexts is just as important as sequencing genomes in tackling viral outbreaks.

Culture is nonetheless downgraded. Most of the time, when medical researchers try to work culture into their models, they fall back on tired stereotypes about local beliefs as obstacles to biomedical care, a supposed opposition of culture and science. In this paradigm, social scientists are lined up to help 'real' scientists determine why culture keeps others from doing what's medically recommended.

A broader understanding of culture recognises its varied potential. Though clinicians may see culture as an obstacle to health, it is also a source of enduring trust. Moreover, it is not just something 'they' have: healthcare providers, scientists and policymakers all have their own cultures of practice, which inform their unique perspectives and encourage them to work together.

Cultures of practice

However, the underlying and often taken-for-granted assumptions of culture about what is feasible can also limit innovative thinking. That's why we use the word culture pejoratively to describe the intransigence of institutional cultures, political, academic or professional. In this sense, accounting for the cultural contexts of health and wellbeing is a primary health determinant – why 'the systematic neglect of culture in health and healthcare is the single biggest barrier to the advancement of the highest standard of health worldwide.'[2] That's because culture is, in fact, the key to addressing health equity, especially when providers and target populations operate under different shared understandings about what matters most biologically and socially.

Thus, a cultural context of health approach is critical in responding to Covid-19. Because governments not previously concerned about health equity feel they must blame others for the impact of their own negligence. Because thinking of Covid-19 as only a medical challenge fuels xenophobic fears about outsiders. Because humanitarian action groups talk about working with communities even as inequalities within communities are exacerbated by the crisis. And because, given the socially sanctioned, chronic neglect of citizens already on the margins, Covid-19 pushes those on the edge into overt *calamity coping*. The taken-for-granted assumptions of cultures of practice give us a sense of belonging and trust, but can blunt creative thinking and social innovation. Our assumptions help little in times of uncertainty. We know this because, when a disaster happens, so many show up late and with outdated equipment.

What can a cultural understanding of Covid-19 vulnerability tell us? We don't need more research to recognise that the elderly, the homeless and unemployed single parents are especially at risk. They're already vulnerable socially and economically, and, to our shame, become even more so when their fragile survival strategies are even more challenged.

> **Organised humanitarian action all but stops in Covid-19, as we have little way of knowing what's happening among those most vulnerable**

But inequalities are always exaggerated in a crisis, and then many initially less vulnerable people are also pushed across capability and opportunity thresholds and into conditions of real peril.

That is why Uganda can now tell us more than we might expect. To understand what is happening in real time with real people, we need, as did David Mafigiri, to assess vulnerability before a disaster; like his own research team in Uganda, we need an extant interest in the disadvantaged. Ongoing empathy is critical. Without that, you have no access to what you should have known and now can't. Your belated concern rings hollow in the face of that failure, which makes you liable to blame others. Indeed, organised humanitarian action all but stops in Covid-19, as we have little way of knowing what's really happening on the ground among those most vulnerable, who live alone and without access to online services.

In response to such new instability, the World Health Organisation (WHO) rightly wants a 'Just Recovery from Covid-19'. That, of course, is critical. But what we need equally is a just preparedness *before* an epidemic. We have to do the hard work of creating cultures of trust and solidarity in advance, and resist salvation narratives in which epic actions create save-the-world medical heroes and destructive villainous viruses.

In welfare states, where trust in government has remained relatively stable, there are few heroic stories, because stability and a commitment to the common weal lessened the need for bombast well before Covid-19 incited it. Initiatives such as *Cities Changing Diabetes* (a Danish community engagement strategy sponsored by Novo Nordisk)[3] show how prior work to understand health vulnerabilities translates, despite its focus on a non-communicable disease, into actionable understanding in the crisis. That is because the programme has been assessing global health vulnerabilities since 2015, years before Covid-19.

New vulnerabilities

Vulnerability emerges variably, at different times and places. This means that, while already vulnerable populations become even more so under stress, new vulnerabilities emerge that often outstrip old ones. Service industry employees without health benefits and dependent on daily income become more vulnerable, especially where they now have to go back to work, than those elderly who can stay at home and wait it out. High-income physicians without adequate protective gear are as vulnerable as those with chronic pre-existing conditions. Places we previously thought of as havens are anything but: in Europe and the US, the most vulnerable are in 'care' institutions: nursing homes, shared housing, prisons.

We failed these vulnerable groups because their illness experiences are socially driven, and that is too often separated from health. We look instead for specific risk factors in isolation without seeing how compounding, already-existing, stressors push populations into extreme vulnerability during a crisis – especially those with few choices and nowhere to go. In the UK, ethnic minorities are dying at higher rates from the virus than the rest of the population; and in the US, African Americans have far higher mortality rates than white and Asian American populations.[4] Yet, as crises widen existing rifts in societies, they also open up opportunities for communities to come together in ways unthinkable in normal times; in Rio de Janeiro, for instance, gangs in several favelas imposed shelter-in-place orders to reduce transmissions.

Communities must often adapt on their own, because political systems are vulnerable to pandemics too: the global crisis is making clearer what is important at national and local levels, and what is less so. It shows us what we collectively value, and makes us reconsider often-tacit assumptions. Indeed, our judgments of what is essential have also changed across the globe, providing a singular opportunity for institutions and governments to rebalance private gain and public good.

This adjustment can go either way. On the one hand, speaking of the virus as a foreign enemy incites xenophobia, with the social category of 'insider' – the 'we' in 'we are all in this together' – getting smaller and smaller. On the other, the pandemic has catalysed new alliances, as with Black Lives Matter and anti-police protests. Mistrust in the institutions of government may be the only thing uniting the far right and far left in countries like the US and Brazil.

That is why 'just preparedness' matters, and also why Uganda might lead the way in understanding the human impact of Covid-19. Because this pandemic is not just about an infectious threat, but about the urgency of caring beforehand, and about the steep decline in social trust that emerges quickly in unequal settings where global neoliberal economics have undermined public wellbeing.

Fortunately, that decline has created opportunities in surprising places. Gangs in favelas may seem a stretch when policymakers think about health systems change, but some far-sighted private companies have been quicker than many governments to recognise and respond to shifting public sentiment: sending their employees to work from home, speaking out against racism and calling for more government guidance. However, not all businesses are equal: companies less vulnerable to shareholder pressure to maximise short-term profits are better able to consider their potential long-term future roles, and not just in the next quarter – recognising that an economy cannot survive unless nation states and their citizens have stability, enough income, and access to robust and well-funded care.

Mistrust in business

There have been calls by world leaders, including Ursula von der Leyen, head of the European Commission, for a new Marshall Plan to improve abysmal levels of trust in business recorded by Paul Edelman's Trust Barometer.[5] But that mistrust can only be reversed by sustained long-term commitments that are faithful to a range of stakeholders – including employees, clients and the social and natural environments we all depend upon for survival.

Divisive political leaders, like Donald Trump or Brazil's Jair Bolsonaro, may blame the left, or the Chinese, or the CIA for Covid-19, based on alternative, often paranoid political narratives that divide local communities. That is because for opportunists, big or small, the crisis remains an intractable intrusion into populist narrative worlds built on political delusion. But the virus's deadly materiality resists rhetorical defences and counter-factual denials, even if some seem intent on taking the ship down, or watching it sink while drowning in denial. The states lacking welfare can only blame others.

Social trust and faith in institutions are therefore crucial for the collective actions required to halt viral transmission. We have to coordinate our social behaviours in uncomfortable, inconvenient, and even personally painful ways. They are vital to collective wellbeing and require sacrifice; a sense of commonality and social solidarity must be based around shared values – culture. A crisis in governance, correlates with, and can be directly mapped onto, a crisis in trust, because where we find trust is key.

As the US pulls support from the WHO, there is a serious question: where do we go for an independent and trustworthy adjudication on health risk? The world's biggest healthcare charity, the Gates Foundation, has always espoused magic bullet answers to health problems and is uninterested in the complex social drivers of our wellbeing. The Centers for Disease Control is a US federal agency that works well in good times but in bad times is vulnerable to partisan political nonsense. Without socially trustworthy institutions, how are we to respond to growing uncertainty?

Sustained uncertainty

And how, finally, can we learn to deal with sustained uncertainty and the psychological vulnerability it causes? If many governments cannot lead equitably, and viruses are just information we share, there must be other drivers of Covid-19 we can act on. Other factors remain under-represented: the more people there are on the planet, the more often viruses like Covid-19, which are more contagious but less lethal than Ebola, will connect us. And that is a big problem, not only because science, in the absence of a vaccine, still medicalises a pandemic almost entirely driven by our social responses, but because there are more of us to circulate and adapt to that viral information.

This really matters with Covid-19, since, if lasting immunity doesn't happen soon, we need to rethink the social contract in ways that run counter to those who advocate for biodeterminism or xenophobic scapegoating or maximising self-interest. Otherwise, when the pandemic abates even temporarily, we risk going back to 'normal', forgetting what we might have learned until the next infectious disease outbreak, when we will again be completely surprised by what we should have expected. We need to consider the needy before that happens – to put heart and soul into thinking about both how we live together with uncomfortable uncertainty, and how we address together the social and cultural drivers of health vulnerability ●

A David Napier is professor of medical anthropology at University College London, innovations lead for *Sonar-Global*, global academic lead for *Cities Changing Diabetes* and international chair of the Robert Wood Johnson Foundation committee on the *Cultural Contexts of Health and Wellbeing* initiative. Edward F Fischer is professor of anthropology and health policy at Vanderbilt University in Nashville, Tennessee, where he also directs the Center for Latin American Studies and the *Cultural Contexts of Health and Wellbeing* initiative

1 www.sonar-global.eu **2** A David Napier et al, 'Culture and health', *The Lancet*, vol 384, 1 November 2014, p 1,608 **3** www.citieschanging-diabetes.com/home.html **4** Ed Pilkington, 'Black Americans dying of Covid-19 at three times the rate of white people', *The Guardian*, London, 20 May 2020 **5** 'Edelman Trust Barometer special report on Covid-19 demonstrates essential role of the private sector', www.edelman.com

BRAZILIAN ARMY'S 'UNGROUNDED LIGHTNING CONDUCTOR'

Jair Bolsonaro, wannabe dictator

As the pandemic continues to grow, Brazil's president is using the crisis to erode democracy, even invoking the style and words of Mussolini. For now, government emergency aid ensures the support of Brazil's poorest

André Singer | Translated by Charles Goulden

Opposite page Contra Costa County, California, is relaxing lockdown fast, but still has record new Covid-19 infections

ANDRE BORGES - NURPHOTO - GETTY

Jair Bolsonaro, Brazil's president since 2018, joined a rally on 31 May calling for the army to shut down the Congress and Federal Supreme Court (STF). It was the fourth time he had called for a military intervention since the World Health Organisation, of which he is highly critical, declared Covid-19 a pandemic on 11 March. Perhaps to ensure people remembered the occasion, he appeared on Brasília's Three Powers Square, where the executive, legislative and judiciary branches of government have their seats, riding a military police horse.

Though he wore a plain blue polo shirt, without the medals that feature in equestrian portraits of Mussolini, his appearance still evoked the Italian dictator. This was no accident, as Bolsonaro later quoted Il Duce on Facebook: 'It is better to live one day as a lion than a hundred years as a sheep.'

Until the pandemic, Brazil's mode of government had seemed to be what Adam Przeworski calls 'stealth authoritarianism',[1] a gradual erosion of democracy characterised by slow progression, superficial respect for the rule of law and implementation by elected leaders rather than forces external to the political system: no tanks in the streets, and no military junta seizing power.

Bolsonaro took advantage of the crisis to speed democratic erosion. Where other would-be dictators used lockdown measures to extend their power, he portrayed resistance to the scientific advice as a struggle that justified greater authoritarianism. Inspired by US President Donald Trump, he set himself up as the champion of individual freedom to continue working, though the governors of several Brazilian states, supported by the STF and Congress, were calling on people to stay at home.

Orchestrated chaos in healthcare

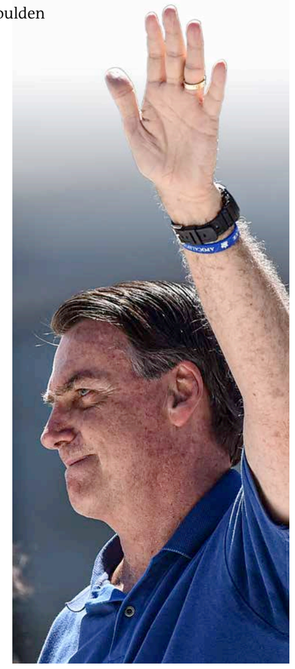
Bolsonaro escalated his standoff with the other branches of government by firing two health ministers for supporting the WHO's analysis, before handing the portfolio to a general. He promoted hydroxychloroquine as a treatment though he had no proof it was effective, and visited factories without wearing a mask, ignoring physical distancing rules and even hugging people. He encouraged his supporters to go into hospitals and get video evidence that they had empty beds, and forbade the circulation of data on the progress of the pandemic.

In this way, Bolsonaro orchestrated chaos in healthcare. As of mid-June, Brazil was recording 1,200 deaths a day (while Argentina, with a population one fifth of Brazil's, was reporting 30). The death toll had topped 50,000, half that of the US (the world's highest), and it was not clear if the pandemic had yet reached its peak.

How was Bolsonaro able to start this proto-fascist adventure? Through bold action: in April he forced justice minister Sérgio Moro to resign. Moro, a former judge and the architect of the anti-corruption probe Operation Carwash (Lava Jato), had played a key role in Bolsonaro's rapid rise to power. Bolsonaro's objective was to gain influence over the powerful Federal Police (PF), the Brazilian equivalent of the FBI, which has thousands of personnel fighting corruption and organised crime.

Since Brazil's return to democracy in 1985, presidents have respected the independence of the PF, which has come to be regarded as a state rather than a government structure. Moro, when announcing on 24 April that he was leaving the justice ministry, described facing pressure to appoint commanders loyal to the president (especially in Rio de Janeiro, where members of Bolsonaro's family are under investigation) and said that the resignation of the director-general of the PF the previous day 'challenges…our all-important commitment to the rule of law.'

The jailing of former military police adjutant Fabrício Queiroz, on 18 June, brought the Bolsonaro family's problems with the Rio de Janeiro judiciary to public attention once more. Queiroz – a former aide to Jair's son Senator Flávio Bolsonaro, who was accused of embezzlement during his time as a member of the Rio de Janeiro state assembly – was arrested by police at the house of a lawyer close to the president. It is as yet impossible to gauge the impact of this incident, especially on the president's relations with the STF.



> **Bolsonaro orchestrated chaos in healthcare. As of mid-June, Brazil was recording 1,200 deaths a day, the death toll had topped 50,000, and it was not clear if the pandemic had yet reached its peak**

Moro was seen as a hero by a middle class preoccupied with the fight against corruption, despite the way he used the legal system to persecute former president Luiz Inácio Lula da Silva. When he accused Bolsonaro of attacking the rule of law, calls for impeachment spread fast on social media. Memes appeared of Vice-President Hamilton Mourão as a football player preparing to come onto the pitch.

Even the man Bolsonaro had appointed prosecutor-general, Augusto Aras, could not avoid requesting an investigation after Moro's revelations. His submission to the STF mentioned six offences of which the president might be guilty, including obstruction of justice. The investigation uncovered a video of a cabinet meeting held 48 hours before Moro's resignation that not only confirms Moro's allegations about the PF but records Bolsonaro calling for the people to be armed, to make it possible to organise resistance against state governors and city mayors. Referring to the lockdown imposed in parts of Brazil, Bolsonaro says, 'I want the people to take up arms. It's the only way to make sure no son of a bitch…can force a dictatorship on us.'

Daring alone does not explain why Bolsonaro feels able to imitate Mussolini. His drift into authoritarianism takes advantage of the isolation of the judiciary in its attempts at resistance while other institutions are bogged down in politics. The president of the Chamber of Deputies, Rodrigo Maia, who has received more than 30 impeachment requests and must decide whether proceedings should go ahead, knows that Bolsonaro has protected himself by giving senior administrative posts to self-styled centre-ground parties and commands enough votes to thwart any attempt at impeachment in plenary session.

Nobody knows how long the centre-ground parties will remain loyal to Bolsonaro. Their sole desire is to profit from the machinery of state, and they are well known for abandoning sinking ships. Yet Bolsonaro has managed to stay afloat so far, thanks to the support of the people and of specific affinity networks groups, the largest linking him to the military high command.

A third of voters have supported Bolsonaro since the first round of the 2018 presidential election and still do, according to a poll by Datafolha in late May. They do not constitute a majority, but are enough to keep him in office. However, breakdowns of survey results suggest that the government is losing support among the middle class, a key, though not the sole, pillar of Bolsonarism.

Support from the poorest

Between December and April, Bolsonaro's approval rating fell by 11 points among voters whose household income is 5-10 times the minimum wage, the second highest tranche. Among the poorest voters – those with a household income of less than twice the minimum wage, who until then had supported Lula da Silva, leader of the left-wing Workers' Party (PT) and president from 2003 to 2010 – his approval rating rose by nine points.

This is partly explained by the emergency aid given to around 50 million vulnerable workers during the pandemic, a monthly payment from April to June of 600 reais ($110; the minimum wage is around 1,000 reais). Single-parent households and those where both parents were eligible could receive 1,200 reais a month. This is a significant amount, especially in Brazil's poorest regions. Moreover, half the population work in the informal sector with no regular income, and government calls to resume economic activities resonate with their preoccupation with earning enough to live on.

Some believe Bolsonaro's alliance with major evangelical churches could help to build a new support base. These organisations, whose membership rose from 7% to 30% of the population between 1980 and 2019, are concentrated in working-class neighbourhoods. Bolsonaro remains a Catholic, but had himself re-baptised by a pastor of the Assembly of God (one of the largest Pentecostal churches) in the River Jordan, in Israel, in 2016. In the middle of the pandemic he welcomed representatives of 11 evangelical churches to the presidential palace. The best known pastor among them declared that Brazil 'will not be Venezuela, it will not be destroyed by anyone, it will not fail'.[2]

Continued on page 8 ▶

1 Adam Przeworski, *Crises of Democracy*, Cambridge University Press, 2019 **2** Hanrrikson de Andrade and Patrick Mesquita, 'Encontro entre pastores e Bolsonaro tem oração por Congresso e STF' (Prayers for Congress and the STF at pastors' meeting with Bolsonaro), *UOL Notícias*, São Paulo, 5 June 2020, noticias.uol.com.br