### "We are all in this together"

- Global burdens of COVID-19
- Global benefits of anti-Covid-19 policy
- Skewed against poorer nations of the world
- Within poorer nations, against the vulnerable

- Mortality caused by diseases other than Covid-19?
- Distribution of disease mortality across countries according to their economic standing
- Prioritisation of disease concerns reflected in the global consciousness of the issue
- Overwhelming preoccupation of the world with Covid-19 and the response of stringent economic lockdowns

### WHO's announcement on 11<sup>th</sup> March 2020

"WHO has been assessing this outbreak around the clock and we are deeply concerned both by the alarming levels of spread and severity, and by the alarming levels of inaction. We have therefore made the assessment that COVID-19 can be characterised as a pandemic. Pandemic is not a word to use lightly or carelessly. It is a word that, if misused, can cause unreasonable fear, or unjustified acceptance that the fight is over, leading to unnecessary suffering and death"

- It is safe to say that no such comparable attention has been paid to other communicable diseases.
- Where do those diseases stand in relation to Covid-19?

## Communicable diseases in poorer and richer countries

The WHO classifies the top-10 causes of global mortality into three major categories:

- 1. Communicable
- 2. Non-communicable (chronic)
- 3. Injuries

The total death count for 2019 from these top-10 causes was estimated at 55.4 million.

Let us concern ourselves with the category of communicable diseases.

Information on the 10 leading causes of death is available for each of four country-groupings based on the World Bank's categorisation by per capita gross national income:

- 1. low-income countries
- 2. lower middle-income countries
- 3. upper middle-income countries
- 4. high-income countries.

There are four communicable diseases that appear in the infamous top-10 list in at least one of these four groupings.

- 1. Lower respiratory infections
- 2. Neonatal conditions
- 3. Diarrhoeal diseases
- 4. Tuberculosis (TB)

- Let us call them "the four communicable diseases" or the "4C diseases"
- Together, 4C diseases accounted for 7.9 million of the global count of 55.4 million deaths in 2019.
- For reference, it should be noted that the global death count for Covid-19 for 2020 was around 1.8 million.

Let us collapse World Bank's four-fold country classification into a binary one.

- 1. Group 1 (Set of relatively poorer countries) by combining low and lower middle income countries
- 2. Group 2 (Set of relatively richer countries) by combining higher-middle and high-income countries

# Global distribution of five major communicable diseases between poor and rich countries: 2019 & 2020

	Total deaths (m)				Deaths/million		Ratio
Disease	All	Rich	Poor	Rich share (%)	Rich	Poor	Poor/rich
The 4C diseases	7.91	2.08	5.83	26.3	508.3	1627.7	3.2
Lower respiratory infections	2.6	1.05	1.55	40.39	256.6	432.7	1.69
Neonatal conditions	2.4	0.56	1.84	2.33	136.9	513.7	3.75
Diarrhoeal diseases	1.51	0.11	1.4	7.29	26.9	390.9	14.53
Tuberculosis	1.4	0.36	1.04	25.71	88	290.4	3.3
Covid-19	1.81	1.41	0.4	77.9	339	109.9	0.33

Notes: i) Data for Covid-19 pertain to 2020, and for other diseases to 2019. Mortality figures for the 4C diseases are from WHO.

- ii) Mortality figures for Covid-19 are from country-level data in Our World in Data and terminate on either 30 December or 31 December 2020.
- iii) Data are aggregated separately for richer and poorer countries, employing the World Bank's country groupings.
- iv) Country and world population figures for 2019 are from the World Bank, and global population figures for 2020 are from the Population Reference Bureau, 10 July 2020.
  v) Country population shares in 2020 are assumed to be the same

in 2019.

#### Discussion

- Because poorer countries are still in the earlier stages of the epidemiological transition, deaths from contagious diseases are relatively high.
- If you live in a richer country, you are about 1.5 times as likely to die from a 4C disease as from Covid-19. But you are 15 times as likely to die from a 4C disease relative to Covid-19 if you are from a poorer country.
- The contrast is particularly well-marked in the case of diarrhoeal diseases (where the per capita mortality ratio stands at over 14.5), somewhat less evident for lower respiratory infections (with a ratio of 'just' 1.7), and is typified by the differential mortality from TB (with a ratio of 3.3). All this is to be compared to the ratio of 0.33 from Covid-19.

- In this context, two additional features of Covid-19 are worth taking note of. First, the 2020 Covid-19 global mortality figure is actually smaller than each of the corresponding figures for neonatal conditions and lower respiratory infections, while TB, with the lowest aggregate mortality count of 1.4 million, nevertheless registers a magnitude that is a substantial 78% of the magnitude of Covid-19 mortality. (And TB has taken its toll year after year to a greater absolute degree in the past decades and certainly so as a fraction of world population for many more years.)
- Yet, richer countries accounted for over three-quarters of the global Covid-19 mortality in 2020. That is to say, <u>Covid-19 is by no means the single-most-deadly communicable disease in the world but it is the only one which, in terms of aggregate and per capita mortality, is decidedly more significant for richer countries than it is for poorer countries.</u>

• The differential implications of communicable diseases for the rich and the poor are fundamentally mediated by their mode of communication. For lower respiratory infections, the Centers for Disease Control and Prevention says (undated), "Many of the germs that cause respiratory (breathing) diseases are spread by droplets that come from coughing and sneezing. These germs are usually spread from person to person when uninfected persons are in close contact with a sick person. Some people may become infected by touching something with these germs on it and then touching their mouth or nose. In general, the best way to help prevent spread of respiratory germs is to avoid contact with droplets of secretions of saliva, mucus and tears."

- The principal mode of transmission is through casual person-to-person contact. This is, of course, true of Covid-19 as well. With the other infectious diseases, however, transmission is also profoundly mediated by conditions of poverty and nutrition. For the class of diarrhoeal diseases, the WHO (2017) indicates that "infection is spread through contaminated food or drinking water, or from person to person as a result of poor hygiene".
- The same is true of neonatal infections transmitted from mother to child or via the environment, during or after childbirth. As pointed out in Johns Hopkins Medicine (undated), several of these conditions are caused by viruses, fungi, parasites, and bacteria, and infection can arise from exposure to contaminated soil, water, fruits, and vegetables. Typical neonatal conditions would include Group B streptococcal disease, listeriosis, E.coli infection, meningitis, sepsis, conjunctivitis, candidiasis, and other congenital infections.

- The point is that for a subset of communicable diseases, communication is mediated by poverty, and an improvement in socioeconomic conditions (while no guarantee against bad hygiene) serves as significant insulation. When that is taken into account, a communicable disease like Covid-19 is of vastly greater significance for richer countries, just as it is for rich populations within poorer countries. Covid-19 is nowhere near as class-conscious as the other communicable diseases we have mentioned.
- Would, or should, such a skewed salience distort the optimal behaviour of a globally concerned social planner? Or, neglecting the preoccupations of richer countries for the moment and asking the question from a narrower and more self-interested perspective, should poorer countries buy into draconian measures to combat Covid-19 at the possible risk of neglecting other infectious diseases that ravage these societies? Of course, it is easy enough to insist that nothing should be neglected. But nothing comes for free and hard choices must be made.

So, are we all in this together?

### Resource link

https://www.ideasforindia.in/topics/human-development/covid-19-and-other-diseases-an-animal-farm-perspective.html