ACTaccelerator
ACCESS TO COVID-19 TOOLS

The Human Cost of COVID-19

ACT now, ACT together to accelerate the end of the COVID-19 crisis

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THE HUMAN COST OF COVID-19

As of November 11th 2020, COVID-19 has killed more than 1.1 million people and infected more than 44 million people in every part of the world. The International Monetary Fund (IMF) estimates the pandemic will cost the global economy $28 trillion in lost output by 2025.

The International Labour Organization (ILO) estimates that 495 million full time equivalent jobs will be lost in the second half of 2020 and the World Bank estimates 150 million people could be pushed into extreme poverty by 2021. More than $12 trillion has already been spent by G20 countries to deal with the consequences of the pandemic.

As bad as these figures are, the current epidemiological data on the velocity and trajectory of disease's spread suggest that we are still at the start of the pandemic. No more than 10% of the world's population are estimated to have yet contracted the virus meaning the vast majority are still at risk. Ten countries account for 70% of all reported cases and deaths and just three countries account for half. There is still a long way for the virus to develop if left unchecked.

There is hope. We have significantly advanced our understanding of what works to fight the disease. We have new tests that provide results in less than 30 minutes. We have strong evidence that dexamethasone treats the disease, while trials on other new medicines such as monoclonal antibodies are advancing quickly. We have a wide portfolio of vaccine candidates on the cusp of finalizing phase 3 trials. And clinical practice has advanced in understanding how oxygen, personal protective equipment (PPE), and overall health system capabilities can be best used to improve a patient's chances of recovery.

However, only a fundamental change in funding and approach will turn that new hope into an effective weapon against the virus. The IMF estimates that if medical solutions can be made available faster and more widely, it could lead to a cumulative increase in global income of almost $9 trillion by end-2025. The only way to end the economic, human and development crisis of the pandemic is to treat the cause of the pandemic. If G20 countries were to devote just 1% of the stimulus being spent on treating the consequences of the pandemic they would more than fund the $38 billon funding needs of the ACT-Accelerator.

That case is laid out in more detail in the ACT-Accelerator Investment Case. But this is not really about numbers or money. COVID-19 is a human tragedy that is unravelling lives and livelihoods all around the world. The next few pages tell their stories.

NOMBASA
CAPE TOWN, SOUTH AFRICA

"Health workers need training and more PPE to protect themselves and their families. That support is needed now."

Nombasa Krune-Dumile is a front-line health worker living with HIV in Cape Town, South Africa. After beating tuberculosis and COVID-19, she is back in the trenches, helping others overcome all three diseases. Nombasa has an urgent appeal to governments and global health partners:

"My family had COVID. I was very scared. For people who are living with HIV and TB, when COVID arrived, it's like it was the end of their life.

...

We know that we are struggling as healthcare workers in terms of PPE, and we are also struggling because there is no one who is catering to the community.

...

We can make sure that we are working together as front liners, and also with our communities. I think we can manage to fight COVID as well."

Learn more about Nombasa's story on The Global Fund's website.

SHUKRIA
NAKARABAD, AFGHANISTAN

"During the campaign, we learned that we had to take the danger of the coronavirus seriously. One of the ways to protect against and combat this deadly contagious disease is wearing masks."

COVID-19 has hit Afghanistan hard. The last official tally reported around 42,000 COVID-19 cases and over 1,500 deaths, though the actual figures are likely higher. Low education levels, limited access to information, water and sanitation; and a weak health system make it difficult for the country to control the rapid spread of the virus.

24-year-old Shukria is part of a growing cohort of women across Afghanistan who have turned to producing masks to meet the demand triggered by the threat of the virus in their communities. What convinced Shukria to take action is an awareness campaign about the coronavirus that the Citizens' Charter, Afghanistan's flagship development program, organized in her village. So far, she has distributed nearly 1,000 masks to neighbours and villagers who cannot afford to buy protective equipment. Shukria now intends to train more women in the village to stitch and sew their way to helping defeat the coronavirus.

Shukria and the millions like her facing the COVID-19 in Afghanistan urgently need equal access to the tests, treatments and vaccines required to fight this pandemic.

Learn more about Shukria's story on The World Bank's website.

GRACIA
WEST PAPUA, INDONESIA

“The radio lessons help me a lot because I can hear my teachers explaining the lessons. We can then discuss this further through our group on WhatsApp.”

COVID-19 is taking mental toll on all of us. Teachers and students are being especially affected.

Every morning, 13-year-old Gracia sits down on the floor of her living room next to her small portable speaker and eagerly tunes into her teacher’s lessons on the radio. Although she is not able to return to school yet, she enjoys hearing her teacher’s voice and taking part in interactive activities with her classmates.

Millions of children remain out of schools, millions are not learning. Equal access to tests, treatments and vaccines around the world is essential to help a generation of students get back to the classroom.

Learn more about Gracia’s story on UNICEF’s website.

EUGENE
VIENNA, AUSTRIA

"I felt chills down my spine – will I die? What will happen to my family? Will I survive this?"

Eugene, a 32-year old care-home nurse in Austria first noticed COVID-19 symptoms on his way home from work.

"At that time, our care facility did not have enough personal protective equipment and there was a lack of disinfectant. My colleagues and I had to create our own masks out of gauze bandages, while more and more patients were testing positive each day."

To protect his family, Eugene set up a tent out in their garden, and slept there to isolate himself. It was not an easy few days as spring had only started, and temperature dropped at night. So did the symptoms setting in: dry and rough coughing, a 39˚ fever, his whole body aching, and chills despite wrapping himself in layers of sheets.

Eugene's road to recovery was rough, but he says it's not as bad as many others he has witnessed or read about. Now he is back at work, ready to pick up where he left off. His care facility has also acquired more than enough PPE and disinfectants for the staff and the patients. He comes back ready with a story to tell them, and reassure his patients that COVID-19 is not necessarily a death sentence: "It did not kill me, and instead it has made me more resolute and compassionate."

Learn more about Gracia's story on WHO's website.

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