

## Reflections on the Impact on Human Capital of Two Pandemics : *COVID 19 around the world and HIV/AIDS in Kenya*

By Andrew MacMillan<sup>1</sup>

COVID 19 is having a massive impact on our lives and on the global economy. I don't want to underestimate the suffering that it has caused for many people, especially those who have lost kin and friends as well as those who can't find work or continue their studies. In this note I contrast the relative lightness of its damage to human capital with the much more destructive and long-lasting impact of the HIV/AIDS pandemic on societies in Africa around the turn of the century. I refer particularly to the experience of one rural community in western Kenya which is only now getting fully back on its feet as a result of investing for over 20 years in better education.



I conclude in suggesting that governments respond to the COVID 19 experience by putting more effort into inducing changes in lifestyle and nutrition which will reduce the susceptibility of their people to similar pandemics and other diseases while also reducing the threat of environmental shocks.

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<sup>1</sup> Andrew MacMillan is an agricultural economist specialised in tropical agriculture, former Director of FAO's Field Operations Division. He co-authored a book entitled "How to End Hunger in Times of Crises – Let's Start Now" (Second Edition, Fastprint Publishing, 2013).

## **COVID 19**

Normally when estimates of the cost of an epidemic are counted, the figures are directly related to increased health services expenditure (including vaccines, medicines and hospitalization) and the direct losses in current and future production caused by time off work and premature death.

While in most countries COVID 19 has induced a sharp rise in health services expenditure, the loss in production directly attributable to the disease has been relatively small, largely because the vast majority of those who have died have been 'senior citizens' who have no longer been working and have relatively short life expectations. A large proportion of those dying have already been suffering from other life-threatening illnesses and, from a food and nutrition perspective it is of interest to observe that the severity of symptoms and the probability of infection being lethal appears to be associated with obesity and almost certainly with under-nutrition, especially in developing countries [\[read\]](#).

Most of those who have been affected by the disease and have survived have recovered their working fitness in a short time and have not suffered long-term disabilities.

Governments that adopted lockdown strategies to control the spread of COVID 19 find that the direct costs of the disease, while significant, are dwarfed by the resulting drop in economic activity and by the immense fiscal costs of contemporary measures to shield businesses from collapse and to protect incomes of people who have been prevented from working. Most such governments have run up huge fiscal deficits and are wondering how they can pay them off without major increases in taxation or stimulating inflation.

What is enormously significant is that COVID 19 has left the work force largely intact in all affected countries. Their human capital – a country's greatest asset – remains undamaged though possibly in need of redeployment to address new priorities that are emerging as people come to recognise that we have to change the way we live if our stressed planet is to be able to offer future generations a decent life.

## **HIV/AIDS in Kenya**

I first came face to face with the HIV/AIDS pandemic that was killing about 300,000 Kenyans every year during a visit in 2001 This is about the same number as COVID 19 has killed so far in the whole world.

I spent a week in the extremely poor rural district of Bondo in Western Kenya which had the highest HIV infection rate of all districts in the country. Unlike COVID 19, AIDS was killing people in their prime – able bodied workers and child-bearing parents. About one third of Bondo's adult population had been affected (with no prospect of recovery) or had already died, and a third of children were orphaned.

At that time, as part of my work with the UN Food and Agriculture Organization (FAO), I was engaged in designing long-term strategies for recovery from drought in the Horn of Africa. My aim in visiting Bondo was to explore with residents their ideas on how their community could recover from the double trauma of drought combined with a very high incidence of HIV/AIDS. The sheer scale of mortality was overwhelming and touched almost every family in the district.

We agreed that the immediate priority was to assure local food security for the surviving population, especially through raising labour productivity and improving nutrition. This was addressed through drawing on the successful experience of other districts of Kenya in running [Farmer Field Schools](#) that brought together farmers voluntarily into small groups to help each other to identify and resolve common constraints and to take up ideas that could keep their families better fed [[read more Farmer Field Schools in Kenya](#)].

For the longer term, proposals were put forward by local elders for ambitious irrigation projects and industries for processing and exporting fish caught in Lake Victoria but these seemed well beyond the capacity of the stricken community.

Eventually a lady rose to speak. Grace's message was that we had to face up to reality and accept that we had lost a generation and that therefore the community should do everything in its power to enable the next generation - especially the orphans – to have a better life than that of their parents. The priority, she argued, was to invest in ensuring them a decent education.

Providing general education was not part of FAO's mandate, but her remarks led to the creation of a long-term partnership between the Got Matar Community, close to the town of Bondo, and my family, friends and other well-wishers. Our joint aim has been to translate Grace's strategy into reality. The result is that the children born around the turn of the century are now beginning to enter adult life with a decent education.

It has taken almost 20 years to come close to completing the creation of an improved education system that truly enhances the 'human capital' of the community that was brought to its knees by the HIV/AIDS pandemic. It is not a process that could have gone much faster because it is determined by the emerging educational needs of the 'next generation' as it grew up. First came upgrading of several of the 10 primary schools that serve the community, and then, 6 years later, the construction of a 600-place co-educational secondary school with lots of bursaries for orphans (now thriving with over 800 pupils). The final priority, in which we are still engaged, is to complete purpose-built training workshops for the 10 practical skills training courses of the Got Matar Institute of Technology which trains over 200 girls and boys in making clothes, building houses, repairing vehicles, working in the food industry, making furniture and blacksmithing, providing beauty therapy and cutting hair, and running computer systems.

The Community has led this programme and is proud of its success in creating opportunities for an otherwise lost generation.

### **Closing thoughts**

There is still no vaccine to prevent HIV/AIDS but anti-retroviral therapy (ART), when available, prolongs the lives of infected people, yet it still kills 28,000 people in Kenya every year – not far from the number who have died from COVID 19 so far this year in countries such as Italy, Spain and Britain.

There is still no knowledge on how to prolong the lives of seriously affected COVID 19 patients other than to ventilate them, and the mainstream strategy for preventing infections is to insist on quarantine and social distancing while frantically pouring massive resources into any initiative that could invent a vaccine.

Just as few people, other than those immediately affected, recall the severity of the HIV/AIDS pandemic, memories of COVID 19 will probably soon fade away. The great risk is that governments will not take the long-term view that would require them to get to grips with the fundamental lifestyle problems that predispose modern society to be increasingly vulnerable to pandemics and which also increase the frequency of shocks induced by climate change and environmental degradation.

Instead of counting on a magic wand vaccine to emerge, I suggest that governments should aim to cut the spread and lethality of future pandemic infections through a concerted effort to reducing the incidence of associated non-communicable diseases, especially those attributable to malnutrition, stemming from both over- and under-nutrition. We can't be sure that we can develop a vaccine for this and future viral pandemics but right now we have all the knowledge and experience needed to launch a concerted global programme to end obesity and hunger, and thereby substantially reduce the threats that pandemics such as COVID 19 stand to have on human lives.

It is striking that the World Health Organization declared obesity as an epidemic some 20 years ago, but that few governments have yet taken serious steps to reduce its incidence. There have also been global commitments to end hunger by 2030, but the chances of getting there are not high unless governments seriously address all aspects of malnutrition that have resulted in a vast proportion of the world's population being unhealthy and, as we have now seen, open to disease.

We are seeing signs of success at Got Matar because the community took – and stuck to – a long-term approach to restoring human capital through educating the children of its lost generation.

The COVID 19 experience must be a wake-up call for governments to collectively bring about fundamental changes not just in what we eat but in the way we live in general and how we treat each other. This will require a deepening of our understanding of how we have fallen with our eyes shut into a much greater global public health emergency than that triggered by COVID 19 and of how we can dig our way out of it. If we get things right, we could greatly lighten the huge burden of ill-health under which the world now needlessly lives at a fraction of the resources spent on managing the current pandemic. The same lifestyle changes required for healthier living are also essential for serious progress towards sustainable natural resources management.

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To know more:

- Bird, E., Latest evidence on obesity and COVID-19, Medical News Today, 2020.
- Got Matar Community Development Group, Webpage <http://www.gotmatar.org>.
- Duveskog, D. *et al.*, Farmer Field Schools in Rural Kenya: A Transformative Learning Experience, Journal of Development Studies, 2011,1-16,iFirst article, 2011.
- Trueba, I. and A. MacMillan, "How to End Hunger in Times of Crises – Let's Start Now", Second Edition, Fastprint Publishing, 2013.

Selection of articles on [hungerexplained.org](http://hungerexplained.org) linked to the topic :

- The COVID-19 dilemma: Health or the economy? 2020.

- [COVID-19 and food: the economic and food crisis hits the more vulnerable - some insights](#), 2020.
- Opinion : [Beware High-Fat Diets](#) by Wan Manan Muda and Jomo Kwame Sundaram, 2019.
- [Facts and figures on world malnutrition](#), 2019.
- [\\$1.2 trillion annually, is the estimated cost of obesity by 2025, unless proper action is taken](#), 2017.
- Opinion : [Hasn't the time come for some brave new thinking on food management?](#) by Andrew MacMillan, 2014.
- [Myth 9: In periods of economic crisis, it is too costly to fight against hunger](#), 2013.