



## POVERTY, CORONAVIRUS PANDEMIC AND NEW FRAMEWORK OF STATEHOOD IN AFRICA

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### **Abstract:**

This paper addressed itself to the power deficit of statehood in Africa, against the containment of the Coronavirus pandemic. To illuminate a true picture of Africa's absorptive capacity for transnational health pandemic challenges such as the ongoing coronavirus (COVID 19), three countries of Africa (Egypt, South Africa, and Nigeria) were examined. These three countries have usually been regarded as sub-regional powers of the African continent. The analysis of the paper proceeded with two assumptions, that: 1) poverty imposes constraints on African countries' response to global pandemics; and 2), African countries require new frameworks of statehood in view of the cascading damage inflicted by global pandemics on the African population and economies. Using content analysis, results from secondary sources of data collated the analysis revealed that Africa is seriously deficient in empirical knowledge, skills and techniques to contain the coronavirus and such other previous health challenges such as Acquired Immune Deficiency Syndrome (AIDS). The World Health Organization's Joint External Evaluation (JEE) Report for instance scored African countries low over the COVID 19 pandemic containment. The paper also found that in spite of well-established basic disease surveillance in some African countries, they lacked necessary infrastructure such as Premature Ventricular Contraction (PVC) Kits for the containment of the virus. Finally, the paper accentuates the need for Africa to encourage research on Africa's rich natural environment to promote empirical visions and praxis on herbal medicines production, and to develop economic and political strengths to autonomise positive scientific outcomes. The case of Tanzania where herbal solutions were produced for the management of Coronavirus, but jettisoned by international political propaganda is not helpful for Africa. It also became abundantly clear that Africa would need, apart from research and development, an integrated approach to global pandemics, technological innovations, and citizen diplomacy as a new framework of statehood.

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## 1. Introduction

As the state in Africa approaches the dawn of the 21st century in this era of globalization, the people have come to the realization that the manifest role of the state involving the destiny of the people is fast becoming a rouse in view of the prevailing poverty and helplessness in the continent. Thus, it is becoming difficult if not impossible for the state in Africa to uniquely face transnational challenges such as endemic diseases like Acquired Immune Deficiency Syndrome (AIDs) and the ongoing coronavirus pandemic, currently ravaging Africa and indeed, the entire world.

The state in Africa has demonstrated serious poverty or incapacity in the handling of global pandemics or public health challenges (Harsant and Duvenhage, 2000:5-29). The incapacity of the average African state to cope with global challenges involving public health has forced the state to depend almost entirely on metropolitan states and global institutions to protect citizens' destinies and state interests. The sub-optimal capacity of the state in Africa is not in tandem with the Westphalia mandate for statehood, which avers the ability and authority for the nation-state to deal with global challenges (Weber, 1964: 156). It is on this note that Modelski (1972:56) points out that: *"as the end of the century draws near, globalization is forcing us to rethink the nature of the political community (that is the nation-state) as the basic unit of human affairs."*

Modelski's assertion is clearly apt especially when we consider the case of Africa where the states are unable to deliver political goods and services and lacks the absorptive capacity to face challenges emanating from consequences of globalization. Hall (1992: 64), opines that globalization challenges the traditional conceptions of the nation-state posing normative questions concerning the future of the nation-state and the nature of the modern political community. Invariably, the poverty level of the state in Africa predicated on poor infrastructural facilities corruption, bad governance and politics, poor citizen diplomacy and so on, has ensured that the state does not deliver stable public health, especially when faced with challenges of global pandemics. It is along this line that this paper examines the containment of the Coronavirus given the level of poverty in Africa. Specifically, the paper examines the sub-regional powers such as Egypt, Nigeria and South Africa, in view of their Statuses in Africa, to give us a picture of what Africa is capable of doing concerning the pandemic.

Generally, there are a plethora of perspectives about the origin and characteristics of the pandemic known as Coronavirus (Covid-19). Popular among the perspectives are those emitted in the debate between the US and China. From the United States Government led by former president Trump comes the perspective that there is every likelihood that the novel Coronavirus may have escaped from a laboratory in China (Donald Trump, [www.bbc.com](http://www.bbc.com)). Corroborating the US Government perspective, Soyinka (<https://www.vanguard.com>), states that the Coronavirus was made in Wuhan laboratory China. He recalled that Chinese virologists revealed that by December 2019,

influenza that attacks the respiratory system was discovered in the city of Wuhan in China. This gave Soyinka the impression that Coronavirus had its origin in China.

A counterargument by the Head of Wuhan Institute of Virology in China emphatically denied any link between the Wuhan laboratory and the Coronavirus. For her, the virus which is an offshoot from the SARS-Cov-2 arose naturally after passing from bats, through mammalian species to human beings (Gerald, 2019:6). Another perspective that appears to support that of the Wuhan Institute of Virology in China, holds that Coronavirus, rather than showing any sign of laboratory manipulations, instead reveals the likelihood of animal origin (<https://virology.biomedcentral.com>).

So far, since the outbreak of the virus in 2019, there has not been any agreement yet about its origin, but there appears to be concord or harmony about its characteristics and hazards. The literature so far on Coronavirus reveals that the Coronavirus pandemic is influenza that attacks the respiratory system. It is an infectious disease that causes illnesses ranging from cold to more serious respiration problems. For instance, the World Health Organization (WHO), posits that Coronavirus include such severe disease as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) ([www.emo.who.int.com](http://www.emo.who.int.com)). Because several known coronaviruses are circulating in animals and have not yet infected humans, the World Health Organization (WHO) advises that: “Countries are encouraged to continue strengthening their preparedness for health emergencies in line with the International Health Regulation, 2005.”

In Africa, the virus has already been causing collateral damage in human populations. The number of confirmed cases so far recorded in some African countries such as South Africa, 2,046,311million; Egypt 281,903, Morocco 533,945, Algeria 141,007 and Nigeria 167,803 as of July 4<sup>th</sup>, 2021 show clearly that the various is having a cascading Maelstrom effect on Africa (John Hopkins, <https://africaarguments.org>).

**Table 1:** Coronavirus Incidence in some selected African states

|                               | <b>South Africa</b> | <b>Egypt</b> | <b>Nigeria</b> |
|-------------------------------|---------------------|--------------|----------------|
| Number of cases               | 2,046, 311          | 281, 903     | 167, 803       |
| Number of deaths              | 61, 507             | 16,242       | 2,121          |
| Number of treated & discharge | 1,792,361           | 213,628      | 164,378        |

Source: <https://www.worldometer.int>

The incapacity of African countries to contain or respond to public or global hazards puts to question the existing framework of statehood in Africa. This paper is not interested in the politics of the origin of the virus but in the response or containment strategies of the virus and the handling of emergencies from the global environment by African states. What therefore is of further concern is how countries of Africa can develop the capacity through good statehood to respond to public health hazards in a globalized world. The ‘capacity question’ is therefore the catchphrase that lies in the background of this paper. To this end, this paper proceeds with two assumptions;

- 1) the poverty situation in African countries imposes serious constraints on African countries’ responses to global hazards;

- 2) African countries require new frameworks of statehood that can generate the high ground to respond to transactional challenges.

The methodology of the paper is descriptive and qualitative utilizing data from secondary sources and analyzed using content analysis.

The paper is organized into four sections: the first section is the ongoing introduction; the second is the conceptual explications; in the third section, the paper examines the responses of African countries to the Coronavirus pandemic given the African situation. Finally, in view of the implications from the analysis in section three, the paper concludes by canvassing a holistic approach to building statehood capacity in Africa.

## **2. Conceptual Explication**

This section carries out conceptual clarification of the major concepts used in this paper and the way they are applied in the paper. The concepts involved are poverty, Coronavirus, Africa, new framework and statehood.

### **2.1 Poverty**

The concept of poverty in the modern sense implies a situation where the majority of people of society have fallen short in the performance of globally accepted social indicators such as education, sanitation, water supply, food security and public health. These social indicators are usually regarded as “Human Basic Needs”. The human basic needs conception of poverty sees the majority of African states especially sub-Saharan Africa as lacking in the globally accepted standards of living (Iyola, 1989, Ogunsanwo, 2015). The core issue in the poverty situation of African states is bad governance and bad politics predicated on corruption and poor handling of infrastructural development (Iwara and Ekpe, 2020). The lack of these core basic needs in African countries are having a telling effect on the state and that is responsible for the low level of capacity available to the state in Africa that determines its response to globally created challenges such as public health. It is this low level of state capacity that is the kernel of analysis in this paper. Therefore, the argument is that the containment of the Coronavirus is a function of the capacity available to the state.

### **2.2 Coronavirus**

This is a type of infectious disease that is known to cause illnesses ranging from cold to more serious diseases such as respiratory problems. The common signs of the virus include respiratory systems, fever, cough, shortness of breath, and breathing difficulties (WHO/int.Health Regulation, 2005).

Revelations by WHO detailed investigations found that severe Acute Respiratory Syndrome Coronavirus (SARS-COV) was transmitted from Civet cats to humans in China in 2002, and the Middle East Respiratory Syndrome Coronavirus (MERS-COV) from dromedary camels to humans in Sandi Arabia in 2012. For the World Health Organization (WHO), several unknown coronaviruses are circulating in animals that

have not yet infected humans. It is along with this WHO narrative and study of the emerging globalization of Coronavirus, that this paper reasons that Africa needs a new framework of statehood that can respond swiftly to the emerging global world characterized by international public health challenges. The paper, therefore, adopts the explanation or definition of Coronavirus by the World Health Organization (WHO).

### **2.3 Africa**

Africa is one of the continents of the world located south of the Sahara Desert. It is made up of largely black people and harbors a large stock of the poorest countries of the world in terms of development. The African continent is the second-largest with about 54 politically independent countries. Africa is rich in natural assets but lacks the technology to transform its potential assets into real assets. The governments of African countries lack that citizen diplomacy that bothers on delivering political goods and services to the citizens (Iwara, 2015). Though Africa is large to be studied as a single variable the convergence of the lack of basic social indicators makes the continent a variable that can be studied as a subject.

This paper examines three African countries usually regarded as sub-regional powers so that we can have precision and true representation of what Africa can best do in the containment of the Coronavirus currently raging the continent.

### **2.4 New Framework**

This is a composite concept, being made up of two words; 'New' and 'framework' 'New' essentially means something fresh or recent, or something just incoming, framework on the other hand according to the Cambridge Dictionary, is a system of rules, ideas or beliefs around which something can be built (<https://dictionary.cambridge.org>). In sum, therefore, a 'new framework' can be said to mean a fresh structure of doing something. In this case, a 'new framework' of statehood involves a fresh paradigm that can enable the African states to deliver political goods and services to the people including capacity for health emergencies and the capacity to energy in international relations.

### **2.5 Statehood**

This involves a condition of being recognized as an independent nation that enjoys the autonomy or jurisdiction in dealing with the affairs in its territory and people (Iwara, 2016). This supposes that whether challenges are caused either internally or externally, the state should use its high ground to overcome them. Anything short of this feat would put statehood to question especially when the life of the state is imbued in dependency. The Montevideo Convention of 1933 established criteria for statehood as follows: (i) a permanent population (ii) a defined territory (iii) an independent government and (iv) the capacity to enter into relations with other states. The convention sees a state as 'sui generis' i.e. a legal entity (<https://thenewinternationalaw.worldpress.com>). Of the Montevideo criteria, the capacity to relate with other states and independent governments holds the key to statehood. The question is, what framework is necessary

for the state in Africa to achieve capacity and independent government? Statehood, therefore, is one of the major concepts of analysis in this paper.

Apart from the Montevideo criteria of statehood, contemporary statehood would also include the ability of such to develop sufficient consensus on vital domestic and foreign policy issues to deliver political and economic goods and services to the people. It is axiomatic that political and economic powers are the precursor of such other powers in military, health and other state institutions (Ottoh, F. O. (2014: 255-174).

### **3. African countries' Response to Coronavirus Pandemic**

Coronavirus entered Africa from Europe and the United States and not from China as the international media initially speculated (Hopkins, <https://africanarguments.org>). The first confirmed case in North Africa was in Egypt, while in sub-Sahara Africa, the first confirmed case was in Nigeria. As of May 3<sup>rd</sup> 2020, the highest number of confirmed cases occurred in South Africa with 6,783 cases, Egypt with 6465 cases, Morocco with 4474 cases and Nigeria with 2558 cases. There is of course the argument that the confirmed cases of Coronavirus in Africa have been under-reported due to suppression of testing and inadequate (PCR) premature ventricular contraction kito (<https://african.arguments.org>). What is however clear is that Africa is experiencing cascading collateral damage on human populations, over Coronavirus given the rising cases. It is also clear that so far in Africa, there are serious crises of mission over the containment of the virus, in view of the fact that countries of the continent have demonstrated the incapacity to handle or contain the virus.

The Coronavirus pandemic appears to have posed itself as the most urgent global crisis of the present generation of people. It has so far exposed the structural weakness of states and exacerbated inequality in terms of policy responses and balanced solutions to address public health and economic challenges, the Coronavirus pandemic. The African situation is precarious, suggesting that African countries require new frameworks of statehood. This paper examines the situation in the three African sub-regional powers, namely: Egypt, South Africa, and Nigeria, to unravel their capacity to contain Coronavirus in their respective countries. This eventually would give the paper a holistic picture of what African countries can best do in the containment and control of the pandemic in Africa.

#### **3.1 Containment of Coronavirus in Egypt**

Generally, Egypt has a well-established basic diseases surveillance system, but that does not constitute a high ground for the containment of the prevailing Coronavirus pandemic as revealed by the situation in Egypt. In a seminar organized by the American Chamber of Commerce and the Egyptian American Joint Business Council titled "The COVID-19 pandemic: Coronavirus is an imminent opportunity for multilateralism", the government of Egypt through its minister of international cooperation, posited that Egypt has taken steps to counter the spread of Coronavirus in three initial strategic steps ([www.egypttoday.com](http://www.egypttoday.com)). In the first step according to her President Abdel Fatah El-sisi



the country allocated LE 100 Billion to finance the comprehensive plan to confront the effects of the virus; in the second step, the ministry of health introduced a countermeasure to counter the spread of the virus; and the third step involves extra funding involving financial measures of the Central Bank of Egypt to intervene in the socio-economic system of the people including the reduction of interest rate by 3 percent and 63.5 USD for health services and to increase absorptive capacity for the critical patients. Under the extra funding, the IMF also earmarked a sum of 5.2 billion USD as financial aid to support Egypt to encourage developmental projects in order to ease the socio-economic situation in view of the Coronavirus pandemic (accessed June 3, 2020).

In view of the foregoing steps taken in Egypt for the containment of the virus, three further measures were adopted ([www.al-monitor.com](http://www.al-monitor.com)). The first in the series of such measures according to Al-monitor was the imposition of lockdowns involving the closure of schools, airports and regulation of social movement. The second measure or moment was to face the virus through medical initiatives and the medical insurance system. Protocols in the health care setting were scheduled to be given careful attention. Third, was the measure of rapid testing and utilization of risk assessment approach to the containment of the virus.

Though Egypt has introduced some sweeping measures for the containment of Coronavirus in the country, the government of the country has considered allocation of money and the imposition of lockdowns as well as perhaps, mandatory quarantine as the foci for containing the virus. Little or no emphasis has been laid on boosting the use of digital technologies which the measures beckon on to curb the pandemic.

### **3.2 Containment of Coronavirus in South Africa**

South Africa responded to the Coronavirus like other African countries by imposing a lockdown. The government of South Africa utilized the community health workers, to test people, while building on the experience used in battling HIV and TB (accessed June 3, 2020). The Economic Adviser to the president Trudi Makhaya noted the shortage of test kits in addressing risks and disease hotspots. The South African states focused on poverty alleviation by ensuring that social relief reach the greater proposition of the population. There were also attempts to create major jobs. Other measures include (i) The SA strategy was to minimize infection in the country by reduction of mass gathering and giving health care settings careful attention. (ii) Reposition retail outfits by extending them adequately to avoid population density. To this end, medical authorities in South Africa were encouraged to maintain hygiene protocols, especially in clinics and households. The authorities also encouraged exposure to the understanding of the virus. In the words of Prof. Madhi, ([www.bbc.com](http://www.bbc.com)) the people of South Africa were yet to adequately demystify the virus. He noted that it is not possible to contain the spread of Coronavirus by just lockdowns.

Like in the case of Egypt, the potential of technology in South Africa to facilitate containment of the spread of Coronavirus, poses a significant threat for the containment of the pandemic and was not mentioned in the country's strategies for containment of the virus.

### 3.3 The Nigerian Situation of Coronavirus Containment

The federal government of Nigeria on April, 27<sup>th</sup> 2020 released guidelines for the containment of the Coronavirus pandemic. The guidelines included lockdown, closure of schools, a schedule for markets to reduce population density, and testing for the control of the virus. The strategy for the control of the virus as revealed by Osagie Ehanire (Accessed May 17<sup>th</sup>, 2020) posits that the control of the virus would proceed from the points of entry as the targets. Osagie assured that Nigeria has the capacity to detect and respond to the virus and other public health threats, particularly at the point of entry. According to him, the Nigerian government has in February 2020 approved N71 million to increase the services unit of the Federal Ministry of Health. For him, the unit was implementing measures at all levels of borders to prevent further importation of the virus.

On the strategy of lockdown, Osagie stated that, in view of the negative impacts of the lockdown such as shutting down of businesses and markets which largely halted and stagnated economic growth, the government decided to relax the measures hitherto given by the National Centre for Disease Control (NCDC). Experts in the NCDC opined that, curbing the spread of the virus as a result of relaxation of the measures, relaxed daily relative risk increase in confirmed cases and mortality. The NCDC also observed that growth in confirmed cases occurred in areas where active measures were not taken and where premature ventricular contractions (PVC) kits are lacking. Ehijiele (2020:9) observed that the problem of medical equipment or facilities is a general one for all African countries. The PVC kits for instance, according to him are potential technology without which the containment of Coronavirus poses a significant threat in Africa.

It can be recalled that the World Health Organization's International Health Regulations' Emergency Committee advised all countries to prepare adequately for containment of the virus including active surveillance, early detection, isolation and case management that appropriate medical infrastructure such as PVC kits can facilitate. It was on this aspect that the World Health Organization's joint External Evaluation (JEE) multi-sectoral effort to evaluate Nigeria's capacity to prevent detect and respond to a public health emergency, scored Nigeria poorly. Nigeria was scored using the JEE indications as follows:

- 1) Prevention mechanism: JEE scored Nigeria 'poor' basing its rating on the country's limited capacity to prevent biological, chemicals and radiation health risks.
- 2) On the detection of the virus, JEE scored Nigeria 2.6 across the 13 indicators in this category. This means that Nigeria to an extent has developed some capabilities to detect new health risks through surveillance and laboratory capabilities to test disease but the sustainability of these capabilities is still in doubt.
- 3) The country performed badly in the response category with an average score of just 1.5 across 20 indicators, suggesting that Nigeria has limited capacity to respond to a sudden health risk.

Apart from the evaluation of the agency of the World Health Organization (WHO-JEE), the evaluation of the Presidential task force on COVID-19 declared that the national



response to the Coronavirus pandemic has been challenged by inadequate infrastructure, manpower and a global shortage of essential items (Osagie, [www.weforman.org](http://www.weforman.org)).

A careful examination of the various strategies of African countries reveals the countries' common focus on lockdowns, allocation of monies, seeking of foreign aid and low levels of hygiene are noticeable. The countries are not keen to develop digital skills and techniques to enhance effectiveness in screening, isolating, testing and in the control and management of the Coronavirus pandemic, especially at community levels.

Also noticeable is the precarious nature of the political logomachy of the non-authorization of the peripheral states in Africa which constantly renders auto-centric discoveries not autotomized by the state. There is presently in Africa, state apathy to auto-centric development, particularly involving herbal medicine inventions. Thus, the non-existence of an institutionalized system of autonomous and independent state mechanisms and instruments, have affected the development of various sectors of the state, including public health.

#### 4. Conclusion

The increasing risks of globalization, particularly on public health seems to duck the responsibility in the respective states of the world to build global matching standards of statehood. As constructivist theorists would tell us, states have a responsibility to mold appropriate responses to globalization challenges based on environmental peculiarities (Rosenau and Czempiel, 1992:18). The current ravaging Coronavirus has exposed the weakness of many countries in the global order, including African countries, as lacking the high ground to cope with the risks of the globalization of public health. The low level of development of African countries makes them ill-prepared to tackle global pandemics such as Ebola that erupted in 2014, and the ravaging Coronavirus which entered Africa in February 2020, as recalled by this study.

Researchers at the Imperial College, London have painted a very gloomy picture about the African situation over the control and management of the Coronavirus (accessed February 2021). For them, as reported by Arkebe, the Senior Minister and Special Adviser to the Prime minister of Ethiopia, "*designing measures to tackle the pandemic that reflect reality and ensuring that they are effective, in Africa is doubtful*". The opinion of the researchers over the South Africa situation, a country that is far better in the social welfare system in sub-Saharan Africa, but is unable to manage a lockdown and self-isolation due to lack of access to clean water, puts to question the capacity of other countries of Africa with far less developed social welfare systems than south Africa, control the pandemic. This particular African situation over which countries of the continent do not have the reasonable infrastructure to deal with the global health pandemic raises the question of statehood in Africa. It is along with this predicament of statehood in Africa, that this paper offers the following contexts as a way of building statehood in Africa with a view to developing absorptive capacity for global pandemics forward in African states.

#### **4.1 Research and Development**

The average African country spends less than 0.5% of GDP on funding research. This attitude contrasts with the OECD countries average put at 2.3% (Ogunsanwo, 2016:380). It is actually amazing that with the development challenges that confront Africa, scientific research scarcely makes the discussion agenda of African countries (Peter, 2000:87-107). Whereas, research and development constitute a key factor for the improvement of citizens' needs and expectations in Africa. As noted by collaboration for research excellence in Africa. (CORE, 2020), research and development can only thrive in an atmosphere that is oriented towards development priorities. Ultimately, therefore, African countries would need to do more to support research and development for the continent to develop its absorptive capacity for both intra-continental and global challenges. For instance, research based on environmental peculiarities should lead to increased evidence-based policymaking, and in the present circumstance of COVID-19, it could lead to discoveries of essential items for the control and management of the virus. This is particularly so given Africa's rich environmental resources which appear to be becoming on developing herbal medicine or pharmaceuticals (Nwoke, 2013:28). It is, therefore, the opinion of these authors that the African States promote the development of herbal medicine through research by supporting the ongoing experimental communities in some African states. An example of these experimental attempts is the Tanzanian case. In Nigeria for instance, the government asked those who had claims to herbal cure for Covid-19 to come forward with such claims with a view to supporting them in order to find a cure for Covid-19.

#### **4.2 Technology**

Technology has always been an important factor of statehood, especially in terms of state power including its attendant political and diplomatic enablement. Iwara (2020:98-104) highlights the dangers of African countries' reliance on foreign technology and suggested that Africa should begin the resuscitation of Africa's traditional technology that was being developed before colonialism but abandoned during and after colonialism. African traditional technology developed tools of mining and metallurgy. Apart from technology in a traditional sense, Africa can also begin a strategic partnership for technology acquisition or purchase from the technology holders (Iwara, 2015:4340-4345). Optimists argue that the ongoing technology hubs in Africa constitute a step forward. The fear according to them, however, is that because such hubs are established by foreign concerns with imperialist motives, there is every likelihood that such foreign technological hubs may be detrimental to Africa's technology quest or auto-centric parameters. This again is because Africa needs techniques and skills that can transmit its potential assets to real assets to enhance its global competitiveness. Technology is important for the development of the capacity to deliver public health especially in containing pandemics such as Coronavirus and Ebola.

### **4.3 Integrated Approach to Pandemic**

An integrated approach is a factor of statehood that involves the critical need to strengthen evidence-based strategies and policy for the containment of pandemics. It works when national public health surveillance and response subsystems are reinforced to fight pandemics. This is currently not so in Africa, as political holders subjugate the health systems and rather opt for corrupt political structures that become ineffective in the handling of public health. The integrative approach essentially advocates the effective and efficient use of resources, information flow and responsible attitudes to public health threats. This means the integrated approach addresses itself to deploying various sectors of the state such as mass communication, digital skills and techniques, education training and other infrastructures of state and non-state actors for the common goal of control and management of potential pandemics.

### **4.4 Citizen Diplomacy**

Citizen diplomacy as a factor of statehood suggests that the state builds the capacity of the citizens in such a way that the citizens contribute to a healthy environment, peace and stability of the state. Citizens' diplomacy places citizens at the heart of the state to the extent that citizens' interests and state interests are in harmony. This aspect of the state in Africa, for now, is below expectation and this has drastically reduced citizen support and emotional attachment to the state. Above all, it is in the larger interest of the state that citizens are given the right and responsibility to engage matters of the state in a way that reduces the gap between the citizens and the state. A situation where the citizen is discouraged from contributing to solving state challenges is not helpful. In some African Countries, herbal health practitioners have discovered the herbal cure to some ailments but the application is discouraged by the state. An example was the herbal solution in Tanzania for the control of Covid-19.

Finally, the foregoing suggested framework of statehood for Africa constitutes a significant shift away from the prevailing anti-social parameters that characterize the state in Africa. There is no how under the present anti-people governments and state dependency in Africa, the state in Africa can enhance effectiveness and efficiency. Therefore, the framework suggested here, is a way forward in facing the dynamics of globalization challenges in public health and other sectors of the state in Africa.

### **Conflict of Interest Statement**

The research findings do not conflict with the interests of the authors.

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