COVID 19 and Its Effects on Economy, Implications for Future Preparedness with Lens in Planning Perspective

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Abstract

Since the World Health Organization declared Covid-19 a global pandemic on the 11th of March 2020, Tanzania is still struggling from its aftermath including economic setback. This paper examines the COVID 19 and its effects on economy, implications for future preparedness with lens in planning perspective. In order to thoroughly asses the economic impact of COVID 19 to Tanzania, a case study has been carried out at Iringa region because it is among the most hit regions in the country. The study adopted qualitative and quantitative research methodologies on assumption that this social study is a complex and dynamic. Qualitative research was found relevant to represent informants' voices pertaining to COVID 19 and its impact to economy in Tanzania. A quantitative data collection method was also incorporated in this study to utilize a survey method. Self-administered questionnaire was distributed to respondents. The study indicated that in general COVID-19 has affected the micro and macro economy trend in Tanzania. Specifically, sector economic growth has been hit hard by COVID-19 pandemic. The government can implement immediate development policy initiatives for empowerment of small-holder farmers to produce food for the domestic economy. Tanzanians need to increase their awareness on protection measures.

Keywords: COVID 19, Economic Performance, Sectorial Economic Risks, Public Finantial and Government Budget.

Introduction

In December 2019, a pneumonia outbreak was reported in Wuhan China. A new corona virus was identified as the cause of a disease outbreak. The outbreak was traced to a novel strain of corona virus which given the interim name 2019-nCoV by the World Health Organization, later it was renamed SARS-CoV-2 by the International Committee on Taxonomy of Viruses. The Wuhan strain has been

identified as a new strain of Betacoronavirus from group 2B with approximately 70% genetic similarity to the SARS-CoV. The virus has about a 96% similarity to a bat corona virus. So, it is widely suspected to originate from bats as well (Fan and Zhao, 2019 & Monto, 2020). In March 2020, the World Health Organization declared the COVID-19 outbreak a pandemic. World Health Organization and public health group including the United States of America Centers for Disease Control and Prevention are monitoring the pandemic and posting updates on their websites including issuing recommendations for preventing and treating the illness.

The term ‘Corona virus’ is derived from Latin word ‘Corona' which means Crown’. The name was coined by June Almeida and David Tyrrell who first observed and studied human corona virus. The word was first used in print in 1968 by an informal group of virologists in the journal Nature to designate the new family of viruses (Kahn & Mentosh, 2005). The name refers to the characteristic appearance of viruses which have a fringe of large, bulbous surface projections creating an image reminiscent of the solar corona. This morphology is created by the virus spike peplomers which are proteins on the surface of the virus. The scientific name corona virus was accepted as a genus name by the International Committee for the Nomenclature in 1971 (Almeida, 1968 & Masters, 2006). As the number of new species increased, the genus was split into four genera, namely Alphacoronavirus, Betacoronavirus, Deltacoronavirus and Gammacoronavirus. The common name ‘corona virus’ is used to refer to any member of the subfamily Orthrocoronavirus. As of 2020, 45 species are officially recognized.

The most recent common ancestor of all corona viruses is estimated to have existed as recently as 8000 BCE. Some models place the common ancestor as far back as 55 million years or more, implying long term co evolution with bar and avian species. Bats and birds as warm blooded flying vertebrates are an ideal natural reservoir for the corona virus gene pool. The large number and global range of bat and avian species that host viruses has enabled extensive evolution and dissemination of corona viruses. Many human corona viruses have their origin in bats. The virus has about a 96% similarity to a bat corona virus. The earliest reports of a corona virus infection in animals occurred in the late 1920s when an acute respiratory infection of domesticated chickens emerged in the North America (Wertheim, 2013). In 1931 the first detailed report which described a new respiratory infection of chickens in North Dakota wasmade. The infection of new-born chicks was characterized by gasping and listlessness with high mortality rates of 40 – 90%. In the rate 1940s, two more animal corona viruses that causes brain disease and mouse hepatitis virus were discovered. Human corona viruses were discovered in the 1960s using different methods in the United States and United Kingdom.

Causes and Symptoms of COVID-19

During the COVID-19 pandemic, you may have heard that corona virus disease 2019 is similar to the flu (influenza). COVID-19 and flu are both contagious respiratory diseases caused by viruses. The virus that causes COVID-19 and the flu spread in the

similar ways. They have some common symptoms. They can both spread between people who are in close contact. The viruses spread through respiratory aerosols released through talking and sneezing. COVID-19 and the flu have many signs and symptoms in common such that both diseases can range from no symptoms to mild or severe symptoms (Formi, 2017). Both COVID-19 and the flu can lead to serious complications, such as acute respiratory distress syndrome, brain inflammation, death, heart attacks, organ failure, pneumonia and stroke. Many people with the flu or mild symptoms of COVID-19 can recover at home with rest and fluids, although some become seriously ill from both COVID-19 and flu that demand them to stay in the hospital.

Symptoms of COVID-19 and flu appear at different times and have some differences. COVID-19 symptoms appear in 2 to 14 days after exposure. COVID-19 appears to be more contagious and to spread more quickly than flu. Severe illness such as lung injury is more frequent with COVID-19 than with influenza. The mortality rate also is higher with COVID-19 than the flu. So far in 2020, more than 16 million people have had COVID-19 in the United States of America (Geller, et al, 2012). More than 290,000 people have died of COVID-19 in the United States of America in the 2020. By comparison, during the 2019 – 2020 flu seasons in the United States of America about 38 million people had the flu and about 22,000 people died of the flu. COVID-19 can cause different complications from the influenza such as blood clots and multisystem inflammatory syndrome in children (Newman, 2011 & Naskalska, 2019). Flu symptoms usually appear about one to four days after exposure and can be treated with antiviral drugs. The flu vaccine doesn't protect you from getting COVID-19. The research also shows that getting the flu vaccine does not make you more likely to get COVID-19 or respiratory infections.

The virus that causes COVID-19 spreads easily among people and more continues to be discovered over time about how it spreads. Data have shown that it spreads mainly from person to person among those in close contact. The virus spreads by respiratory droplets released when someone with the virus breathes, coughs, sings and sneezes. These drops can be inhaled, nose or eyes of a person nearby. In some situations, the COVID-19 virus can spread by a person being exposed to small droplets or aerosols that stay in the air for several minutes or hours called airborne transmission (Woo, 2010 & Corman, 2018). It's not yet known how common it is for the virus to spread this way. It is also spread when a person touches a surface or object with the virus on it and then touches his or her mouth, nose or eyes, although this isn't considered to be a main way it spreads. Some reinfections of the virus that causes COVID-19 have happened, but these have been uncommon.

COVID-19 symptoms can sometimes persist for months. The virus can damage the lungs, heart and brain which increase the risk of long term healthy problems. Symptoms of corona virus disease 2019 may appear 2 to 14 days after exposure. This time after exposure and before having symptoms is called the incubation period (Hui, 2020). Early symptoms of COVID-19 may include a loss of taste. Common signs

include chest pain, chills, cough, diarrhea, difficulty breathing, fever, headache, muscle aches, pink eyes, rash, tiredness and vomiting. Consider, in the list is not all inclusive imply children have a similar symptoms to adults. Old people have a higher risk of serious illness from COVID-19. Other conditions which may increase the risk of serious illness include asthma, cancer, high blood pressure, liver disease, never system conditions, overweight, obesity and sickle cell disease. During the pandemic, it's important to make sure that health care is available for those in greatest need.

Materials and Methods

This paper examined the COVID 19 and its effects on economy, implications for future preparedness with lens in planning perspective. This paper it assessed the COVID 19 and its effects on economy, implications for future preparedness with lens in planning perspective. In order to thoroughly assess the economic impact of COVID 19 to Tanzania, a case study has been carried out at Iringa region as among the most hit regions in the country. The study adopted qualitative and quantitative research methodologies on assumption that this social study is a complex and dynamic. A sample of 120 of respondents participated in the survey, 98 properly completed and returned the questionnaires.

The study adopted qualitative and quantitative research methodologies on assumption that this social study is a complex and dynamic. Qualitative research was found relevant to represent informants' voices pertaining to COVID 19 and its impact to economy in Tanzania. A quantitative data collection method was also incorporated in this study to utilize a survey method. Self-administered questionnaire was distributed to respondents. Data analysis was conducted using statistical techniques, including percentages and frequency distributions. The responses pertaining to respondents' socio-demographic characteristics provided a platform to learn the level of respondents understanding on Covid 19 and its impact to the economy in Tanzania.

Results

The data indicated that mean age of respondents to be 31.1 and the majority of them were females (54%) and males constitute 46%. Moreover, 62% of respondents are married and most (65%) of them reported to have children. In addition, the educational status of respondents reveals that 13 % of them are degree holders, followed by college diploma graduates (45%) and secondary education graduates (42 %). The data also indicated that 75 % of the respondents were informed of COVID-19 and 47% knew someone who caught the disease and died. The data collection process involved. Questions such as "Are you aware of Covid19?", "Have you been regularly wearing a mask?", "Do you frequently wash your hands after touching objects?", "In what ways Covid19 has affected your social economic life? What could be the impact of Covid 19 to the national economy of Tanzania?" About 95% of the respondents were aware of Covid 19 protection. The shared economic impact of Covid 19 to Tanzania is elaborated in the subsequent sections.

Tanzania Economic Performance and Prospects before COVID 19

COVID-19 pandemic is not only a health crisis but also a development crisis that is threatening to leave deep social, economic scars for years to come, particularly in developing countries like Tanzania'' (UNP, Tanzania February 2020). In reality COVID-19 pandemic is a planning crisis as well that has caused a U-turn from implementation of planned development programs to conditional plans for addressing COVID-19 menace (PO-RALG, 2020). Global and Regional Growth Prospects before COVID 19 in January 2020 indicated a global growth to be rising from 2.9 percent in 2019 to 3.3 percent in 2020. African economic growth specifically nations within East African Community (EAC) recorded an increasing growth with Rwanda recording the highest growth of 8.6%, followed by Tanzania with 7.0%, Kenya 6.3% and Uganda 6.1% (Wang, 2020 & WTO, 2020). This is largely a result of increased foreign direct investments, manufacturing activities and expansion of free trade within the region (ESRF, 2020).

Before COVID 19Tanzania has been one of the fastest growing economies in the region with strong macroeconomic progress holding high growth rate because the sectors with greatest contributions to the national economy (agriculture, 28.2% and construction, 13%) experienced strong growth (Charton, 2019). In 2018/2019 for instance, agriculture grew at 5.3% as a result of favorable weather conditions and the construction's growth of 12.9% as consequence of infrastructure investments, particularly roads, railway and airports (MoF, 2020). The Government focused on improved business environment for attracting the foreign direct investment in priority areas including agriculture, construction, manufacturing, mining, oil and gas, telecommunications and tourism.

COVID-19 and Its Effects on Economy

The setback in Planning due toCOVID-19 has eventually affected the micro and macro economy trend in Tanzania. COVID-19 impediment in economyhas many manifestations to mention a few these include aversion behavior. The government and the public take to avoid catching the virus, has an economic impact. This aversion behavior comes from three sources. First, at the beginning of COVID-19 impediment the governments imposed some bans including partial lockdowns and enclosure of schools and institutions, local and international movements though closure of flights and public transports on road transport facilities. In this regard economic growth stunted and has continued to weaken. Second, firms and institutions take proactive measures to avoid infection including closure of businesses. Therefore, workers are laid off and therefore distorting the money circulation in the economy. Third, individuals reduce trips to the market, travel, going out, and other social activities. This shortcoming has affected all sectors of the economy and in turn translating into reduced income both through the supply side and the demand side (reduced demand from consumers, thus hurting the business mobility and improvement). Household planning distortion, families' budgets have been distorted as a result of the above mentioned aversion actions.

Sectoral Economic Risks

In education, taking a case scenario from RUCU as one of the academic institutions in Tanzania, it has been economically hit hard by COVID-19 crisis.The crises include ad hock re-planning process to serve its population several re-planning measures had to be in place on the expense of our SP (2016/17 - 2025/26) implementation. The revised plans focused on addressing actions to phase one COVID-19 pandemic. These includes the cost of vacating all students from the university main campus, arrangement of indefinite vacations to all employers, sanitizer systems installation for the public and cost of closing all the university economic business. These ad-hock planning have caused an economic draw back to the university as majority of the projects and programmes have to be suspended for a while and the funds directed to Covid-19 related issues. This environment pushed the university to review its plans and budgets as measure for economic adjustment after COVID-19 pandemic. The already emerging COVID-19 impact will be even more exacerbating long term academic performance due to economic setbacks at different levels of RUCU family living standards.

In health sector, COVID-19 has direct economic impacts on lives lost and thus reduced labor force for implementing the planned development activities. Furthermore, there have been severe shocks in the hospitals due to skewed medical resources expenditure in order to address the COVID-19 pandemic. This challenge exacerbated the household income contributions to the economy. Likewise, old family's members who stand high risk of catching the virus prefer to stay at home rather than working outside their locality and thus increasing the families' financial burden (WHO, 2020).

Tourism and Hospitality Industry

Tourism and hospitality industry stand to be the major sources of employment, tax revenue, and foreign exchange earnings to Tanzania. For instance, 2019 before COVID-19 a total value of foreign exchange from tourism amounted to USD 2.557bn1.This represented 25.79% of all goods and service exports and thus positioning the GDP at 17.5%. The onset of COVID-19 has substantially derailed the growth of the national economy where most of countries curtailed the movement of people from COVID-19 countries (Goldsmith, 2004 & Zhu, 2020). Consequently, Tanzania also restricted arrivals from the affected countries, including Italy and China. In recent years, had been a major source of tourist industry. Reduced number of tourists implies depressed hotel activities. Furthermore, fall in income due to strong backward and forward economic linkages, negatively affected internal and regional transport business such as charter flights, food and beverages industry, culture and art, all of which have some implications to security of jobs, government tax revenue, foreign exchange earnings and household food security.

Transport and Storage

Transportation and storage sector employ 521,698 Tanzanians and contribute 6.48% and 3.2% of Tanzania Mainland and Zanzibar GDP respectively (UNDP, 2020). The sector also generates significant foreign income which is estimated at 14.56% of

Tanzania Mainland total forex revenues. Road transportation is the most dominant sub-sector, facilitating movements of people and goods within Tanzania and to neighboring countries. Observed setback within public road transportation sector relates to the government's health and cautionary guidelines. Through Land Transport Regulatory, the government has ordered level sitting and provision of sanitizers or hand washing facilities by bus operators. These measures reduce income due to fewer passengers per route. In the case of inter-regional buses and trains, profitability declines due to lower business volumes as more people avoid non-essential/ urgent trips. The poor in this regard are affected disproportionately because many reside far from the city centers.

In the aviation sector, there has been a sharp decline in revenue in airlines and airport cargo handling companies as well as related service providers due to the drop of the number of passengers following border entry restrictions and consequential flights suspension by most international airlines. In marine transportation, countries all over the world responded by restricting transportation of both passengers and goods ships as a way of containing the spread of COVID-19 (Namendys-Silva, 2020). Consequently, Tanzania has witnessed a drastic reduction in the number of ships into the country. This analysis suggests that marine transport disruption will lead to reduced exported goods (from the manufacturing and agricultural sectors as well as imported goods through ports and most impacted being Dar es Salaam The impacts on the storage sector are linked to reduced traffic in cargo vessels.

Wholesale and Retail Trade

The sector employs about 2,528,771 Tanzanians in the labour force majority in the informal sector with a high proportion of women. This sector contributes 9.12% of the GDP and about TZS 71.6 billion in domestic VAT revenue and TZS 6,776.8 billion in international trade taxes. Since the outbreak of the COVID-19 virus, the sector has been adversely affected through the limitation of a number of global, regional and domestic channels (Cui & Shi, 2019). About 20 percent of the countries Tanzania imports from have some sort of restriction on exporting essential supply for businesses to Tanzania. This is especially true for pharmaceuticals and non-perishable goods that are highly demanded. These businesses include suppliers of stationeries, uniforms, textbooks, street vendors, kiosks, and small restaurants that earn most of their income from sales made to students and general community. The other challenge is difficulties in cross border trading which accounts for 60-percent of Tanzania's total export value (UN-Women organization, 2020). Women are the most affected as they constitute 70-percent of all cross-border traders.

Agriculture

This sector provides direct livelihoods to a majority Tanzanians, 66% of whom with farmers below 20 hectares and categorized as small-scale farmers (0.1 - 4.99 ha: 31%) and medium scale farmers (5-20 ha: 35%). The sector's average share of contribution to the nation's real GDP from 2014 to 2018 was 22.42% (BOT, 2019). The sector is responsible for producing more than 90 percent of food requirement and it is a prime

supplier of basic raw materials needed by the agro-processing industries. In 2018 the country earned USD 556.614 million from exporting crop, livestock and fisheries related products to diverse countries in Asia, Middle East, Europe and the United States. Currently Tanzania is likely to suffer from the impact of COVID-19 regarding to international trade for agricultural products. There is already a reduction of export earnings due to declining export orders of the commodities, especially those whose main export destinations are outside the EAC and SADC regional economic blocks. The reduced foreign exchange revenue is likely to affect the nation's ability to import essential food items, leading to price hikes and thus affecting food security for the majority low- and middle-income citizens. Reduced income for farmers growing cash crops and for urban poor will likely cause food insecurity as a result of weakened purchasing power.

Public Financing and Government Budgeting

One of the most difficult challenges the Government is facing and will continue to face is around public budgeting and social service delivery as a result of COVID 19 crisis. Tanzania is experiencing implications of COVID-19 through a variety of channels. For example, trade as the global value chains are being disrupted by factory shutdowns and delayed resumption of operations, foreign financial flows are being shifted away from corona virus-affected countries and domestic human and financial increasingly underutilized as factories are idled and people stay at home. Also, transport and tourism being major revenue sources is shrinking as demand declines and expanding travel restrictions and sharp drops in commodity prices to harm export earnings.

COVID-19 pandemic has undoubtedly increased demand for public expenditure on health mainly in procurement of medicines, medical equipment, sanitizers, ventilators, beds etc. Furthermore, there is increasingly spending on preventive measures, public health and education measures. As COVID-19 spreads, treatment costs on more sick people will most likely increase. While pressure on increased public expenditure on health sector mounts, the cash flows in government revenues are declining due to decrease in a variety of direct and indirect taxes, levies, fees and others following compression in business margins, slowdown of business activities, retrenchments, salary losses and closure of income generating avenues in the informal economy. The analysis indicates that COVID-19 will have a considerable devastating impact on the economy, affecting incomes of enterprises and individuals and ultimately government revenue collections and its ability to provide social and economic services. The impact of COVID-19 will be even more exacerbating on poor and vulnerable women and youth in the informal sector, rural communities and people living with disabilities as well as marginalized urban dwellers. The aversion measures being undertaken coupled with the regional countries measures and the global recession consequences are all adding to the already domestically depressed situation.

Implication for Future Preparedness

Such hard times require some hard decisions as well to mitigate the economic impact of COVID-19 on total collapse of the economy and alleviate the pain being suffered by the vulnerable segments in the country. The measures will include actions at international level. An international collective action for global economic recovery and revision of MDGs is needed to promote real-time surveillance against COVID-19 impact. More plans to focus on global investment in vaccine development and distribution. Proactive international actions not only to save lives but also to protect economic prosperity need to be in place and re-directing trading to win more accessible markets within the EAC/SADC especially for agricultural exports.

Tanzania can learn to adapt and live with the virus in a way that is not detrimental to the economy. The government can implement immediate development policy initiatives for empowerment of small-holder farmers to produce food for the domestic economy. This will result in jobs protection and create new avenues of government revenue. Supporting the private sector to invest in local manufacturing is key to promoting agriculture and food systems. Rescuing fragile businesses by providing essential services needs to be focused on supporting the most vulnerable segments of the society to sail through this difficult economic phase. The revision of financial regulations to encourage soft loans on promoting small scale businesses managed by the majority Tanzanians and this implies the banks to reduce discount rates, lower the minimum reserve requirement ratio and restructure the loans for severely affected borrowers and maintaining multiple competing changes. The government needs to increase the Public health funding to local and community health centers to operationalization of mass testing of COVID-19. Revising education policy at different levels for encouraging knowledge to promote self-employment rather than waiting for government employment opportunities which are very scarce.

Conclusion

The disease can cause severe medical complications and leads to death in some people, although most people with COVID-19 have mild to moderate symptoms. A number of vaccines using different methods have been developed against human corona virus SARS-CoV-2. Antiviral targets against human corona viruses have also been identified such as viral proteases, polymerases and entry proteins. Drugs are in development which targets these proteins and the different steps of viral replication. The United States of America Food and Drug Administration has given emergency use authorization for three COVID-19 vaccines, the Pfizer - BioNTech COVID-19 vaccine, the Modern COVID-19 vaccine and the Janssen and Johnson COVID-19 vaccine. A vaccine might prevent you from getting COVID-19. Standard precautions to reduce your risk of COVID-19 include avoiding mass gatherings, public transport, taxis and ride-sharing if you’re sick, sharing bedding, dishes and towels and close contact especially if you have a risk of serious illness, touching your eyes, mouth and nose and use an alcohol-based hand sanitizer that contain at least 60% alcoholic. Wear a cloth face mask when you’re in public spaces. Taking these prevention measures can help you stay healthy and reduce risk of becoming ill with COVID-19.

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