The Geopolitics of the North African Response to the Coronavirus Pandemic: Opportunities and Challenges

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Abstract
The sudden outbreak of the Coronavirus in January 2020 took the world by surprise. Initial state-response was mired by confusion, uncertainty, apprehension, and near demoralization. However, several countries around the world, including some Middle Eastern and North Africa countries (MENA) took the challenge seriously in the early stages and set an example to be emulated globally. The objective of this article is to examine the response of the North African countries to the pandemic, examine the opportunities and the challenges facing the region, and add up the lessons learned in order to be better prepared for impending crises facing the nation-state, the region at large, and the international community. This survey article seeks to highlight the common denominators whenever possible and examine country-specific conditions that determine the success or the failure in dealing with the Corona Crisis in Middle East and North Africa.

Keywords: Middle East and North Africa (MENA), Geopolitics, Coronavirus, Pandemic, Regional Rivalry, International rivalry, The war in Libya, Western Sahara, Economic contraction, Growth

Introduction
January 30, 2020 was unlike any other day at the World Health Organization (WHO). Fears of the spread of a catastrophic pandemic were confirmed. The WHO declared Covid19, a virus that originated in the Chinese city of Wuhan a month earlier, a global Public Health Emergency of International Concern. The WHO informed members of the international community and called on nations to respond promptly to the threat. As in other parts of the world, North African countries responded by weighing in many factors like healthcare sector capacity, national resources, government efficiency, level of popular awareness of public pandemics, regime legitimacy and public support of the state, leadership, social and political cohesion, fragmentation, conflicts, and civil wars. These considerations limited state response on a national level, and because support continues to be insufficient and poor in most of the region, and regional coordination is completely absent, the situation in North Africa is worsening day by day. The North African region’s individual country domestic politics, along with regional rivalries and international relations, determine state response to crises and how each nation will handle a formidable challenge such as the current epidemic has provided. Regional politics are shaped by the interests of major actors in global politics such as the US, China, Russia, and the EU. A host of challenges and opportunities in dealing with national and regional crises is compounded by the complex geostrategic location of the region, its centrality to international affairs, and the intense rivalry between contending forces within its borders. The current Coronavirus contagion is teaching us -among other lessons-to develop regional mechanisms to combat the spread of diseases and cross-border crises. Hence,

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regional health security needs to be a priority on the agenda of the North African countries, as it must be as such on the agenda of the international community as well. In fact, in examining the eco-political outlook of the MENA region in 2022, the Economists identified the Covid-19 as a major challenge facing the region, in addition to conflicts and wars on national and regional levels.\(^2\)

North Africa is home to 246,222,458 people. It has an immense economic potential, a rich culture and history, and a strategic location. This geostrategic context played a pivotal role throughout history in shaping the modern process of state formation, and the economic development and stability of the entire Mediterranean nations and the Middle East at large. Over the past 500 years, the region was under systematic European influence, colonization, direct, and indirect rule. In fact, the bulk of its current challenges are inherent to its colonial and post-colonial experiences. Algeria, a case in point, is still suffering from its colonial legacy seven decades after the departure of French colonial rule. Algeria’s lingering colonial mentality hindered the construction of a functional government, crippled the process of state formation, and failed to build a stable economy. Not only that, but currently the nation deals with the agonizing role of the military in politics, resource-curse politics, regional and international rivalry over control of the region. The combination of all these factors has deeply affected the state’s ability to respond to a crisis such as the Coronavirus.

The table below illustrates the population, area, GNI per capita, real GDP annual percentage change in 2020, the size of GDP, growth rates in 2021, and forecasted growth rates, the expenditures on healthcare as percent of the GDP and per/capita expenditures on health annually. The figures below show that all countries in the region are experiencing negative growth rates. The situation is catastrophic in Libya, where war conditions compounded with the plague are bringing economic ruin to the country. But the most astounding case is Algeria, Africa’s largest country, and one of the wealthiest countries worldwide, with immense natural resources, and a territory largely unexplored. It enjoyed sustained oil exports over the past seven decades that accumulated massive capital for a corrupted elite. In fact, Algeria’s destitution is elite made; the wealth of a nation was deposited in the personal accounts of heads of the army, security agencies, presidents, and their entourage in Western banks in Western countries. Algeria is on the brink of bankruptcy. In 2013, its foreign reserves stood at $92.35 billion. In 2020, they dropped to $36.12 billion, and as such they were unable to meet the basic needs of the population for a year and a half. In 2021, Algeria’s reserves are expected to drop even further to $12.83 billion.\(^3\)

Meager financial resources in the region -less than 8% at best of the GDP- were allocated to healthcare per/person when compared to developed economies, which explains the healthcare sector’s inability to withstand a major crisis. The year 2021, was challenging to Algeria. The IMF’s end of 2021 report highlighted the fact that, though Algeria’s “economy is gradually recovering from the concomitant Covid-19 pandemic and oil shocks in 2020…the pandemic has increased Algeria’s ongoing economic vulnerabilities following a succession of adverse shocks since 2014…the economy is projected to recover in 2021 and 2022, but the outlook remains uncertain and challenging”\(^4\) on a regional level, the Algerian-Moroccan conflict complicated any potential


\(^3\) FRED Economic Data, Algeria’s Foreign Reserves, retrieved on June 24, 2020 at: https://fred.stlouisfed.org/series/DZAFAFARUSD

regional response to the pandemic, and other major crises facing the North African region such as the war in Libya, the Western Sahara conflict, and the ongoing instability in Tunisia. Moreover, Algeria faced unprecedented ecological catastrophe in the summer of 2021, wildfires in its northern provinces. Algeria requested international support to put out the fires and mobilized national resources toward this end. Algeria accused Morocco of providing material support to saboteurs, whom Algeria accuses of setting off the fires, therefore, contributing to its decision to cut off diplomatic relation with Morocco. Algeria accused The Movement for Self-Determination of Kabylia responsible for the catastrophe (MAK), which Algeria classified as a terrorist organization.

<table>
<thead>
<tr>
<th>Country</th>
<th>Population In millions</th>
<th>Area/sq.km</th>
<th>GNI/Per Capita in US$</th>
<th>Real GDP/Annual Percent Change in 2020</th>
<th>Economic Growth Rates-2021</th>
<th>Economic Growth Rates-2022</th>
<th>GDP in US billions</th>
<th>Total Expenditure on health as % of GDP/2017</th>
<th>Per/Capita Expenditure on health in US$/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>43,053,054</td>
<td>2,400,000</td>
<td>4,010</td>
<td>-5.1</td>
<td>4.1</td>
<td>2.0</td>
<td>171.767</td>
<td>6.4</td>
<td>258.5</td>
</tr>
<tr>
<td>Egypt</td>
<td>100,388,076</td>
<td>1,001,450</td>
<td>2,800</td>
<td>-2.0</td>
<td>3.3</td>
<td>5.5</td>
<td>303.081</td>
<td>5.3</td>
<td>105.8</td>
</tr>
<tr>
<td>Mauritania</td>
<td>4,525,698</td>
<td>1,030,700</td>
<td>1,720</td>
<td>-1.8</td>
<td>2.7</td>
<td>4.1</td>
<td>7.89</td>
<td>4.4</td>
<td>48.8</td>
</tr>
<tr>
<td>Morocco</td>
<td>36,471,766</td>
<td>446,300.00</td>
<td>3,090</td>
<td>-6.3</td>
<td>5.3</td>
<td>3.2</td>
<td>119.87</td>
<td>5.2</td>
<td>161.0</td>
</tr>
<tr>
<td>Libya</td>
<td>6,678,567</td>
<td>179,954.00</td>
<td>6,400</td>
<td>-31.3</td>
<td>78.2</td>
<td>NA</td>
<td>26.197</td>
<td>5.0*</td>
<td>806</td>
</tr>
<tr>
<td>Tunisia</td>
<td>11,694,721</td>
<td>163,610.00</td>
<td>3,500</td>
<td>-9.2</td>
<td>2.9</td>
<td>3.5</td>
<td>41.805</td>
<td>7.2</td>
<td>250.6</td>
</tr>
<tr>
<td>Sudan</td>
<td>42,813,237</td>
<td>1,861,484</td>
<td>1,560</td>
<td>-3.6</td>
<td>0.1</td>
<td>3.5</td>
<td>26.156</td>
<td>6.3</td>
<td>193.8</td>
</tr>
<tr>
<td>Western Sahara</td>
<td>597,339</td>
<td>266,000.00</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Table: 1.0 Vital Statistics of North African Countries**

**Sources:**
- IMF-Real GDP/Annual Percent Change at: https://www.imf.org/en/Countries/SDN
- Total Expenditure on health as % of GDP and per/capita, 2017 WHO at: https://apps.who.int/gho/data/node.main.SDGCHEPERCAPITA?lang=en
- * Figures for Libya, in 2014 as no statistics are reported because of the civil war.
Despite the regional rivalries between Morocco and Algeria, despite the gravity of the Western Saharan conflict, despite the ongoing civil and proxy war in Libya, despite the economic and internal security challenges facing Tunisia, despite the countless number of challenges facing the Sudan, despite the economic, demographic, domestic and political challenges that are facing Egypt, and despite the economic and domestic challenges that Mauritania is facing, the Coronavirus pandemics demonstrated that regional coordination is a must. Cross-border challenges such as plagues, security and economic challenges can only be dealt with on a regional level. Within this perspective, it is incumbent on the North African countries to establish the North Africa Crisis Management Center (NACMC), and The North African Taskforce for the Coronavirus Pandemic. The NACMC would be a permanent institution coordinating the response of the current crisis on issue-specific cases. The NACMC as an entity is to be entrusted with the efforts of regional coordination of the major challenges facing the region. Member states of the NACMC would establish the headquarters in Tunisia - a neutral capital, mandate handling of regional cross-border crises, and contribute to its functionality. The African Union nations might want to establish crisis management centers on a regional level, such as:

- The North Africa Crisis Management Center
- The Southern African crisis Management Center
- The East Africa Crisis Management Center
- The West Africa Crisis Management Center
- The Central African Crisis Management Center

The advantages of a regional response are immense. A center that deals with eight countries for example, would be more effective than one dealing with 54 countries and four territories across the continent of Africa, given the wide margin of its diversity. Countries would benefit tremendously from exchanging aid, expertise, and equipment regionally. Morocco is in a better position to provide expertise and equipment to neighboring Libya, Sudan, and Mauritania. Similarly, Egypt has medical personnel, while Algeria can provide some financial resources to build regional capacity.

Response to the Coronavirus should not be limited to the health aspect of the crisis. For instance, the region receives millions of tourists annually, and as a result it enjoys favorable economic growth. A successfully managed health crisis will have a positive spill-over effect on other sectors such as economy and culture, leading to some degree of regional cooperation and necessary to mitigate such contraction on a regional level. A united North Africa would be in a much better position to design a regional response than an individual nation could, as in the case of the Coronavirus pandemic, or the overall regional health security condition. Table 2.0 below, illustrates the spread of the virus in North African countries in terms of number of cases, deaths recovery, active, critical, number of tests, and the preparedness of the healthcare sector to withstand a pandemic.

**Table 2:** Illustrates total number of cases, deaths, recovery, active, critical, number of tests per/1 million, and healthcare sector preparedness to a pandemic as of January 13, 2022, in comparison with the world cases.

<table>
<thead>
<tr>
<th>Country</th>
<th>Total Number of Cases</th>
<th>Deaths</th>
<th>Total Recovered</th>
<th>Total Active Cases</th>
<th>Critical</th>
<th>Cases/Impop</th>
<th>Deaths/Impop</th>
</tr>
</thead>
</table>

https://vc.bridgew.edu/jiws/vol23/iss3/11
The North African countries scored low on the 2022 Johns Hopkins University Global Health Security Index. The table below illustrates some major indicators that pertain to the region in terms of world ranking, index score out of 100%, income, and healthcare sector preparedness to deal with a pandemic.

Table 3.0 North Africa’s Rating on the 2022 Johns Hopkins Global Health Security Index

<table>
<thead>
<tr>
<th>Country</th>
<th>World Ranking out of 195 countries</th>
<th>Index Score/ out of 100% preparedness</th>
<th>Income</th>
<th>Healthcare Sector Preparedness/panemics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>163</td>
<td>26.2</td>
<td>Upper Middle Income</td>
<td>Least Prepared</td>
</tr>
<tr>
<td>Egypt</td>
<td>153</td>
<td>28.0</td>
<td>Lower Middle Income</td>
<td>More Prepared</td>
</tr>
<tr>
<td>Mauritania</td>
<td>163</td>
<td>26.2</td>
<td>Lower Middle Income</td>
<td>Least Prepared</td>
</tr>
<tr>
<td>Morocco</td>
<td>108</td>
<td>33.6</td>
<td>Lower Middle Income</td>
<td>More Prepared</td>
</tr>
<tr>
<td>Libya</td>
<td>172</td>
<td>25.3</td>
<td>Upper Middle Income</td>
<td>Least Prepared</td>
</tr>
<tr>
<td>Tunisia</td>
<td>123</td>
<td>31.5</td>
<td>Lower Middle Income</td>
<td>Least Prepared</td>
</tr>
<tr>
<td>Sudan</td>
<td>152</td>
<td>28.3</td>
<td>Lower Middle Income</td>
<td>Least Prepared</td>
</tr>
<tr>
<td>Western Sahara</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>
Sources: this table is constructed from data accessed on January 20th, 2022, and provided by The Johns Hopkins-Global Health Security Index at: https://www.ghsindex.org/#l-section--map

In fact, health security cannot be separated from other vital social indicators especially in the area of education. This is another national concern during a pandemic. Covid-19 in the spring of 2021 has evidenced a great digital divide in delivering effective distance education. North African and Middle Eastern countries, even those with substantial economic resources, flopped in this attempt. Millions of children without laptops and internet connections were not able to continue their education. The alternative to internet would be to deliver education via national television stations or establish educational TV networks. The digital gap in the Middle East and North Africa, strikes the overwhelming majority of the population, not privileged children who have access to the internet and own a computer.

The table below illustrates the percentage of youth below 24 years in North Africa, and the estimated number of computers needed for these students to join distance education.

Table 4.0 Population composition in North Africa and the Digital Divide

<table>
<thead>
<tr>
<th>Country</th>
<th>Population In millions</th>
<th>Population Growth Rate 2019/2020</th>
<th>Percentage of the Youth to the National Population/less than 24 Years</th>
<th>Estimated number of computers needed in millions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>42,228,42</td>
<td>1.85</td>
<td>43.51</td>
<td>18,158,04</td>
</tr>
<tr>
<td>Egypt</td>
<td>102,130,000</td>
<td>1.94</td>
<td>51.63</td>
<td>52,086,300</td>
</tr>
<tr>
<td>Mauritania</td>
<td>4,403,319</td>
<td>2.74</td>
<td>57.27</td>
<td>2,521,780</td>
</tr>
<tr>
<td>Morocco</td>
<td>36,029,138</td>
<td>1.20</td>
<td>43.59</td>
<td>15,492,529</td>
</tr>
<tr>
<td>Libya</td>
<td>6,678,567</td>
<td>1.38</td>
<td>48.86</td>
<td>3,205,712</td>
</tr>
<tr>
<td>Tunisia</td>
<td>11,565,204</td>
<td>1.06</td>
<td>37.37</td>
<td>4,279,125</td>
</tr>
<tr>
<td>Sudan</td>
<td>41,801,533</td>
<td>2.42</td>
<td>62.95</td>
<td>25,916,950</td>
</tr>
<tr>
<td>Western Sahara</td>
<td>597,339</td>
<td>NA</td>
<td>55.73</td>
<td>328,536*</td>
</tr>
</tbody>
</table>

Percentage of youth to the national population/less than 24 years old, CIA, country profile at: https://www.cia.gov/library/publications/the-world-factbook/
Estimated number of computers is calculated 1 laptop/child as of the total population in millions. Western Sahara in thousands as of the population.

The table above shows the percentage of youth in national population as being the largest in Mauritania and the Sudan, estimated at 57.27% and 62.95% respectively. There are millions of children out of school in North Africa, and their ability to receive quality education is drastically compromised. North African countries are ill equipped to provide distance learning because technological platforms either nonexistent or inadequate at best. There are major challenges facing education in North Africa in the future including the improvement of internet services and networks, better computer availability and accessibility, more virtual schools, and well-equipped
and tech-savvy teachers. It is essential to state here that, “a great deal of development aid to Africa has gone into the educational sector, but with only limited success.”

### People’s Democratic Republic of Algeria

Algeria is the worst hit Coronavirus case in North Africa, the third after Iran and Turkey in the Middle East. In fact, Algeria has started the new year of 2022, with the Fourth Wave of the pandemic, a wide spread of the virus across the country. It also has the highest mortality rate (13%) of Arab and North African countries. Algeria’s challenges during this pandemic are worsened by popular protests that have lasted over a year, by the constant conflict between state and civil society, the weak institutions of its healthcare sector, the collapse of oil prices that limit the state’s financial capabilities, the economic decline, and the informal nature of its economy estimated at 57%, a digital gap and the resulting inability to provide an acceptable level of distance education, the absence of regional coordination, and a protracted conflict with its western neighbor, Morocco, over Western Sahara, and not least, the repercussions of the war in neighboring Libya.

Algeria’s struggle to respond to the current crisis is the latest link in a chain of failures of the state over the past seven decades. At the heart of Algeria’s predicament lies the role of military dominance in politics. Within less than three years of its agonizing independence from France, the first military coup occurred in 1965. This intervention set the stage for a cycle of violence over political successions. Algeria today confronts the same challenges of the early 1960s: it still suffers from the legacy of the post-colonial state, the conditions of state formation, political consolidation, articulating the role of the military in politics, political diversity, pluralism, and from an overall chronic crisis of legitimacy and economic accumulation.

The Algerian Revolution and war of independence is the classic case studied in modern history and literature, and a model for national liberation movements around the world. Algerians earned the respect of the world by sacrificing over three million martyrs to bring an end to French colonialism, but soon after their hope to build a unique developmental model was shattered by a military coup, followed by unprecedented squandering of national wealth, catastrophes of state legitimacy, and economic devastation.

Algeria’s response to the pandemic is not only restricted by an internal environment of conflict between state and civil society, or state malfunction, but also by regional wars and conflicts. The nation is directly influenced by the civil-proxy war in Libya and the instability in neighboring Tunisia characterized by revolution, rebellions, terrorist attacks, assassinations, and political violence. Other regional crises pertain to Mali and the endless confrontation with terrorist organizations at home and in the Sahel region. However, the four-decades confrontation with Morocco over the annexation of Western Saharan territory is undoubtedly the most critical regional challenge Algeria faces. Tindouf-Algeria is home to the Sahrawi Arab Democratic Republic’s government in exile, and the second home of the Sahrawi people, a community of refugees estimated at 173,600. Algeria is the main supporter of the Polisario and the Sahrawi people in their forty-year struggle for self-determination.

Most recently, Algerian president Tebboune highlighted the (un)willingness of Algeria to seek credits from the IMF in fear of pressure to compromise on key issues such as Western Sahara.

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and Palestine. In its statement to the Non-Aligned Movement Virtual Summit, on May 4, 2020, Morocco accused Algeria of supporting separatism instead of dealing with the Coronavirus pandemic at home. This accusation was in response to the statement made by President Tebboune who called for an emergency UN Security Council meeting “to adopt a resolution asking for an immediate cessation of hostilities throughout the world…without losing sight of the situation in the occupied lands, as is the case with Palestine and Western Sahara.” Most certainly, this statement has infuriated Morocco, which stated that, “despite the exceptional circumstance, a neighboring country continues to fuel separatism and divert resources from its population to acts of regional destabilization.” Additionally, drawing similarities between Palestine and Western Sahara on one side, and between Morocco and Israel on the other side is difficult for Morocco to swallow, to say the least.

Healthcare is the top priority challenge Algeria faces in response to Covid-19. The pitiful conditions of the nation’s healthcare infrastructure, such as inadequate facilities and trained medical personnel’s en masse emigration, are the outcome of decades of negligence, corruption, mismanagement, and embezzlement of public funds. It is scandalous that a wealthy country such as Algeria is unable to provide the population with facemasks, test kits, and medical gear for healthcare providers. By January 2022, Algeria ranked 173/195 on the Johns Hopkins Health Security index, with a low health security score of (26.2), with a -0.06 change since 2019. The table below illustrates Algeria’s poor healthcare system and its (in)ability to respond to pandemics, 19.6% compared to the world score average of 38.4%, associated with higher percentages in health risk estimated at 51.4%.

Table. 5.0 Algeria’s Health Security Index- Johns Hopkins University, 2022.

<table>
<thead>
<tr>
<th>Algeria</th>
<th>Country Score/100</th>
<th>World Average Score/100</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention Ability</td>
<td>15.3</td>
<td>28.4</td>
</tr>
<tr>
<td>Ability to Detect</td>
<td>12.6</td>
<td>32.2</td>
</tr>
<tr>
<td>Ability to Respond to Pandemics</td>
<td>25.6</td>
<td>37.6</td>
</tr>
<tr>
<td>Health System/Robust – Sufficient</td>
<td>15.0</td>
<td>31.5</td>
</tr>
<tr>
<td>Health Norms</td>
<td>38.9</td>
<td>47.8</td>
</tr>
<tr>
<td>Health Risk</td>
<td>49.7</td>
<td>55.8</td>
</tr>
<tr>
<td>Health Security Index Score</td>
<td>26.2</td>
<td>38.9</td>
</tr>
<tr>
<td>Country rank</td>
<td>163/195</td>
<td></td>
</tr>
</tbody>
</table>

Source: This table is constructed from data provided by the Johns Hopkins 2012 Health Security Index at: https://www.ghsindex.org/country/algeria/

Algeria’s ability to respond to the pandemic is also restricted by the popular protest known as Hirak (movement for change), ongoing since February 22, 2019, and failure to utilize the “national solidarity moment” generated by the extraordinary conditions of epidemic to articulate

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7 Antonio N. Amuedo, May 7, 2020 in Atalayar, Morocco Accuses Algeria of “Feeding Separatism” and Diverting Resources to Destabilize the Region”, retrieved on June 23, 2020 at:https://atalayar.com/en/content/morocco-accuses-algeria-feeding-separatism-and-diverting-resources-destabilise-region
a state-civil society agenda. The government is accused of taking advantage of the crisis to settle political grudges with the civil society. The security agencies’ grip on power and their harsh treatment of the movement have not abated, even though the conditions of the pandemic require a national reconciliation rather than a conflict-escalation approach. The Algerian youth have been protesting consistently over a year to dislodge the military and the corrupted ruling elite that dominates politics since Algeria’s independence. Their efforts were successful in forcing President Abdulaziz Bouteflika out of office and in delaying presidential elections twice, but the regime countered with the controversial presidential election of Abdelmadjid Tebboune on December 12, 2019.

Tebboune served as Cabinet Minister and Prime Minister under the Bouteflika administration. The military and the ruling elite rallied behind his election utilizing the deep state instruments for this goal. In other words, he is the product of the same regime that Hirak is attempting to topple. His election demonstrated once again that the regime continues to rely on coercion as the main instrument for legitimacy, and to pursue regional conflict escalation as a diversion method. In fact, Tebboune’s election brought no solace to the ailing country; rather, it aggravated the already tense relations between state and civil society. 8

COVID-19 presents a promising opportunity as well for reconciliation between state and civil society relations. Observers noticed that Algerian security agencies are taking advantage of the limitations the virus imposes to end the protest by incarcerating prominent figures in the Hirak. Some were also prosecuted in March and April, the peak months of the pandemic in the country, which made observers question the priorities of the regime. This would be a “ideal” moment for the government to demonstrate goodwill toward the legitimate demands of the movement and utilize its power for mobilization to articulate a national response to the contagion. Instead, even the Algerian general amnesty excluded those incarcerated for protesting. It has become clear that ending the protest movement is more crucial to security agencies than containing the pandemic. Authorities are convinced that the total and “renewable” periods of lockdown imposed by the state give security agencies the margin of time and space necessary to stifle the Hirak, but it is expected that the movement will gain more vigor after the Coronavirus subsides. Algeria opted for a militant course of action compared to other African and Arab countries. However, this sense of militancy on the part of the state impedes its ability to face the pandemic and mitigate its impact on the population.

Some observers described the Coronavirus as a “godsend for Algeria’s government to introduce restrictive measures beyond those needed to contain the COVID-19,” 9 while others described the government’s response as “ politicization and weaponization.” 10 During the peak of the pandemic months, early 2020, the Hirak charted for itself a social and a charitable path. It has been concentrating on delivering a positive message of social solidarity and articulating an effective methods of mass communication via social media and virtual mobilization and protest. Additionally, by promoting “virtual brainstorming debates” the movement urges deep thinking

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8 For an in-depth analysis of the relationship between the state, civil society and external interests in Africa see Alex Thomson, 2016. An Introduction to African Politics, Routledge: UK.
and a “revolutionary reflection” period, rather than conceding, as the state wishes. The standoff between state and civil society seems to lead toward future collision rather than reconciliation. By January 20, 2022, Algeria’s vaccination rate was 11% of the population despite the availability of jabs. The government reinstated the public schools’ closure in its efforts to respond to the Fourth Wave of Corona in the country.

**The Arab Republic of Egypt**

Egypt reported its first Coronavirus case on February 14, 2020 and imposed its first lockdown on March 24. In these thirty-eight days, authorities were paralyzed by the onset of a viral pandemic among a population that exceeds 100 million juxtaposed to the now highlighted abysmally inadequate healthcare infrastructure. Anxiety was growing as Egyptians were given minimal and inaccurate information on how the virus spread, how to prevent contagion, and how to treat it. The government denied the existence of the virus for over five weeks. This delay undermined the authorities’ articulation and coordination of a unified multi-agency response to the infection. An alternate response could have been designed as early as January 27 when Egyptian authorities suspended flights outbound and inbound from China. A proactive approach was necessary, but in February there was still obscurity, uncertainty, and confusion for most countries in the Middle East and around the world, as nations struggled to comprehend the scope of the pandemic. Countries that lagged in quarantining the population bore a heavy toll of casualties, as in Italy, the UK, Spain, the US, and Brazil. Egypt’s case resembled Italy because both countries receive millions of tourists annually. Egypt received 12 million tourists in 2019, especially European and Chinese tourists. Tourism as a sector accounts for over 10%, of its GDP annually. In fact, the early cases detected in Egypt were in the tourist industry.

Nearly six weeks from the early detection of the first cases in February, the Ministry of Health denied the existence of infections, stating that, “there are no actual or suspected cases of corona in Egypt.” This was the critical period, but this trend of denial was not unique to Egypt; Spain, Italy, the UK, and the US were in identical conditions. Had the state been more transparent, it could have put an end to the pandemic in February. The unclear and uncertain state response in the months of January, February and up to the end of March shaped the popular view of the Egyptian people about the virus and the (in)ability of the government to combat it.

Several factors determine and measure the level of efficiency of state policies in combatting the plague. First, even though Egypt have had medical schools much earlier than neighboring Middle Eastern and African countries, with a long tradition of acceptable health care service, its public healthcare system deteriorated over time. One scourge of Egypt’s modern healthcare is the physician “brain drain” that bleeds out much needed expertise. A percentage estimated in hundreds of thousands of its most skilled medical doctors is practicing abroad. The country scored poorly on the Johns Hopkins 2019 Health Security Index, ranking 87/195 with an overall score of health security at 39.9. Egypt scored average and below average compared to world average scores.

| Table. 6.0 Egypt’s Health Security Index - Johns Hopkins University, 2022. |
|--------------------------|--------------------------|--------------------------|
| Egypt                    | Country Score | World Score/100 | Average |
| Prevention Ability       | 15.7          | 28.4            |         |

Ability to Detect | 18.9 | 32.2
---|---|---
Ability to Respond to Pandemics | 20.9 | 37.6
Health | 18.8 | 31.5
Health Norms | 33.3 | 47.8
Health Risk | 60.3 | 55.8
Index Score | 28.0 | 38.9
Ranking/195 | 153/195

Source: This table is constructed from data provided by the Johns Hopkins 2022 Health Security Index at: https://www.ghsindex.org/country/egypt/

Secondly, neither the public or private sector, nor the military or healthcare systems individually can handle a widespread crisis. Egypt would stand a fair chance if the three parties - military, public and private healthcare systems - acted in unison and worked together to articulate an integrated national approach to pandemics. Jordan and Morocco are an example of how this effort was orchestrated.

A third aspect of government response is transparency in matters related to the pandemic, especially reporting accurate numbers of infected cases. Lack of clarity bred suspicion, rumors, and societal confusion, and led to unbridled speculation on social media. Speculators were subjected to state sanctions and arrests on the grounds of undermining national unity and spreading false information. In fact, some local and international media outlets voiced concerns about the accuracy of number of cases reported in the country after the publication of a peer-reviewed article by The Toronto General Hospital Research Institute, stating that, based on its modules, Egypt had 19,130 cases while the government only reported 495 cases on March 15.

A fourth element, Egyptian society feeds on social media and on traditional sources of information like radio, TV, and newspapers, as well. Egyptian socio-popular narrative is also expressed in verbal communication, sarcasm, humor, and satirical anecdotes more than any other people in the Middle East and North Africa. This is an environment conducive for the spread of rumors and sarcasm. The government attempted to manipulate the narrative of the Coronavirus, controlling the flow of information on the number of affected cases, preparedness, resources, and combat plans. Furthermore, government media outlets denied space to alternative sources of information to avoid influencing public opinion on government response to the crisis. Transparency is a much more effective strategy. An open approach, coupled with popular national mobilization, might have yielded unprecedented positive outcomes, as Morocco, Tunisia, Jordan, Kuwait, the UAE, Bahrain, Sudan, and other countries in the Middle East and North Africa demonstrated.

Egyptians are patriotic in nature. They refer to their country as ‘Mother of Mankind.’ The Covid-19 crisis is a great opportunity for the government to rally the people on patriotic grounds and expand its regime legitimacy, support, and establish national reconciliation. It is a chance to tap into human resources and create a sense of social solidarity.

Egypt’s poor and vulnerable are estimated to be at around 33 million citizens, one third of the entire population of the country, is hit hard by the virus. This segment relies on informal economic activities for sustenance. It is estimated that 50% of Egypt’s economic activity is conducted within the informal sector, and employees in this “shadow economy” are resentful of curfews and lockdowns. They also live in crammed dwellings in marginal neighborhoods of major cities like Cairo and Alexandria, making them extremely susceptible to contracting the virus. This is yet another opportunity for the government to expand the social safety net for its most vulnerable populations.
citizens by providing them employment benefits, including them in the social security system and
emergency assistance programs, local development programs, poverty-alleviation programs, and
relief efforts. Civil society also has an opportunity to partner with the state or take the lead,
especially in entirely ignored regions. In general, charitable organizations in Egypt are ahead of
the government in providing some assistance to the poor. International organizations have also
stepped up their programs in Egypt, especially UN affiliated agencies. The World Bank and the
the World Health Organization have also provided some financial support.

The meager economic gains achieved in five years of austerity programs are now seriously
compromised by the economic shutdown, by small and medium businesses going bankrupt, rising
unemployment rates, and by the dwindling tourist industry. In fact, the first cases of the virus were
detected in this sector. Finally, while Egypt has made significant progress in responding to the
crisis, currently it is facing the Fourth Wave of the spread of the virus across the country in early
January 2022. It’s ability to contain the latest variant (Omicron) is limited by Vaccine-Hesitancy
(VH) among the population.

The State of Libya

Libya recorded its first Coronavirus case on March 24, 2020. Libya has been torn by a
decade-long civil and proxy war in which the warring factions seem currently to be more interested
in territorial gains than in containing the spread of the pandemic. In fact, Eastern and Western
forces have been exchanging higher than normal levels of armed reprisal, aiming at a total control
of Tripoli. The war has also caused increased restrictions on the press where journalists and even
medical doctors cannot report accurate statistics on the contagion in territories under the militias
and the two warring governments.

An end to the war in Libya is not in sight. The broader geopolitical context of the conflict
is complicated. There are domestic factors at play, a fragmented country polarized by the
emergence of two rival governments, militias, and armed coalitions. The legacy of the Gaddafi
regime still looms over Libya a decade after its collapse. One of the outcomes of the 2011 Libyan
revolution was the abhorrent polarization of the country into four regions that are seemingly
incompatible. Division and animosity make it impossible to form a national government, not to
mention national cohesion, power consolidation, and a potential peace process.

European rivalry over interests in Libya is the single most detrimental factor in the
prolonged conflict. The European Union fails to articulate a clear strategy toward Libya because
of the incompatibility of interests among France and Italy in Libya. In fact, the two countries have
competing interests and adversarial perspectives when it comes to military support to combatants.
Italy is on the side of the Government of National Accord, while France strongly supports General
Khalifa Heftar to protect its strategic interests -energy, resource extraction, military bases and
security, and trade. Italy, a former colonial power also has similar strategic interests -energy,
markets, raw materials, uranium deposits, and curbing illegal immigration.

The flawed and dysfunctional healthcare system is its second most detrimental factor. The complexity of the Libyan conflict, with unyielding geopolitical interests and a fragile healthcare
infrastructure, spells disaster in combatting the spread of the Corona pandemic. Libyan militia is
restricting international humanitarian organizations’ efforts toward civilians. Combatants target
healthcare facilities, hospitals, clinics, water sources, and power stations in total disregard for the
basic needs of the population. Libya’s healthcare sector is undermined by decades of corruption
and mismanagement. Over the past five decades, the country also experienced a brain-drain
phenomenon: the overwhelming majority of Libyan doctors, nurses, and paramedics left the
country to practice in Europe, the US, Canada, Australia, New Zealand, and the Arab Gulf region.
Healthcare in Tripoli is already under enormous stress from war casualties. Hence, the arrival of the virus compounds that much more the need for healthcare professionals. The table below illustrates Libya’s overall ranking on the Health Security Index in all categories: 168/195, the lowest in North Africa. Its ability to prevent, detect, and respond is extremely poor and much below the average globally. This is a clear indication of the dysfunctional and fragile status of its healthcare.

Table. 7.0 Libya’s Health Security Index- Johns Hopkins University, 2022.

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<thead>
<tr>
<th></th>
<th>Country Score</th>
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<td>Ability to Respond to Pandemics</td>
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<td>37.6</td>
</tr>
<tr>
<td>Health</td>
<td>13.0</td>
<td>31.5</td>
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<tr>
<td>Health Norms</td>
<td>31.3</td>
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<tr>
<td>Health Risk</td>
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<tr>
<td>Ranking/195</td>
<td>172</td>
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</table>

Source: This table is constructed from data provided and accessed on January 13, 2022, by the Johns Hopkins-Health Security Index at: https://www.ghsindex.org/country/libya/

The systematic attacks on what remains of Libya’s healthcare services, hospitals, and clinics, is in clear violation of international law. It is also a violation of the ceasefire. Probably, the most devastating factor undermining Libya’s ability to pursue a peaceful path in resolving the ongoing conflict is the division between its two main regions, East and West, and the existence of two rival governments in Tripoli and Tobruk, each of which has its own policies and limitations in dealing with the Covid-19. Therefore, this political and territorial division, and the catastrophic conditions of the war create an ideal environment for the proliferation of the virus.

The Islamic Republic of Mauritania

Nouakchott reported its first Coronavirus case on March 13, 2020. The country’s healthcare sector is weak in nature but is exacerbated by the pandemic. The government devotion of some financial resources to the healthcare sector, to meet the challenge has resulted in an immediate imbalance in its national budget, estimated at $370 million. That step prompted a request for and approval of an emergency loan from the International Monetary Fund estimated at $130 million. The Corona crisis is hitting Mauritania harder than neighboring countries, given the weakness of its economy and its heavy reliance on food imports. The informal nature of its economy renders the population vulnerable at times of economic contraction and economic crises. Its 2020 growth rate is expected to be within the negative margins, estimated by the IMF at -2%. Therefore, socio-economic challenges are mounting. Mauritania scored poorly on the Global Health Security Index, ranking 157/195, in the lowest category. Its ability to prevent pandemics is very low (9.9), much below the international average. It also scored much lower on other indicators, as the table below illustrates.

Table. 8.0 Mauritania’s Health Security Index- Johns Hopkins University, 2022.
In terms of geopolitical challenges, Mauritania’s main security threats originate in neighboring Mali where terrorist organizations are operating. The latest threat resulted in a wave of refugees estimated to be 1300, mostly women and children, who entered the country between February 9 and March 12, 2020. While the government quarantined the refugees and provided them with some basic needs, the potential for diseases among refugees is still high, and will most likely increment the spread of coronavirus.

Mauritania’s efforts in containing the pandemic are hampered by its inability to control its borders. It needs the support of neighbors like Algeria, Mali, Senegal, and Morocco to combat the infiltration of terrorist organizations, and the high probability that they will carry the virus throughout the region. Another related security challenge pertains to Western Sahara and the absence of resolution to the conflict so far.

A third threat comes from European residents and tourists who travel back and forth between the two regions, ignoring the quarantine rules. Nouakchott deported some unruly Europeans from France and Spain. Mauritania called on the European countries to collect their citizens.

A fourth factor that limits Mauritania’s ability to respond to the pandemic is monetary in nature. Nouakchott appealed to its traditional allies and friends for assistance, and the USAID provided an estimated package of $250,000. China, France, the United Arab Emirates, and Saudi Arabia sent tons of medical equipment, masks, and protective gear to Mauritania to assist in confronting the infection. The World Health Organization is aiding Mauritania in dealing with the pandemic. It is essential to allude to the fact that, a country-specific approach is the answer for countries with deficient healthcare who are unable on their own to meet the challenge. The poor healthcare sector in Mauritania, the poor overall infrastructure, and the weakness of the state to tackle a pandemic like the Coronavirus necessitates such approach. That does not diminish the value of regional cooperation as well.

Three regional organizations can assist Mauritania in dealing with the health challenge: the Arab League, the African Union, and the European Union. The Arab League’s health ministers are tapping into their financial resources and have been in contact to contain the threat in the region. Yet, a regional answer to coronavirus has not emerged. Similarly, calls for an Africa-continental approach has not materialized. The geographic proximity of North Africa to southern Europe forms one-zone for the pandemic. Clearly, the EU’s priority is to deal with the infection in its

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### Table: Health Security Index for Mauritania

<table>
<thead>
<tr>
<th></th>
<th>Country Score</th>
<th>World Score/100</th>
<th>Average</th>
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<td></td>
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<tr>
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**Source:** This table is constructed from data provided by the Johns Hopkins 2022 Health Security Index at: https://www.ghsindex.org/country/mauritania/
territory, but the spread of the virus in neighboring regions will only exacerbate Europe’s efforts to eradicate it at home.

The US, France, and China, three major international actors, should not overlook Mauritania’s geostrategic location, especially under the conditions of the current crisis. The American presence in Mauritania and in the northwestern part of Africa is necessary for combatting the threat of terrorist organizations hindering the stability of the region. France is a former colonial power and a powerbroker in the country, while China has a growing economic portfolio of interests unmatched by any of its rivals. Chinese corporations are present in mineral extraction, in the construction sector, and in offshore fishing. In fact, Mauritania’s coastline converges southwestern Atlantic with northern Atlantic currents creating a rich environment for the fishing industry. China signed a controversial 25-year bilateral industrial fishing agreement with Mauritania in 1991 (renewed in 2012) worth $100 million. The agreement was forced through parliament despite opposition and popular disapproval because it debilitates Mauritania’s fish reserves and threatens its local fishing sector. Obviously, domestic, regional and international factors do hinder the ability of Mauritania to face major challenges such as pandemics. Its geopolitical environment, and inability to control its borders, represents a hurdle for the containment of Coronavirus pandemic.

The Kingdom of Morocco

The Kingdom of Morocco announced its first Coronavirus infection on March 2 and recorded its first fatality on April 10, 2020. This represents a low mortality rate compared with neighboring countries and the rest of the world. Soon after the detection of the contagion, the government implemented a crisis management plan, declared a health emergency in mid-March, provided free testing, imposed a travel ban and a nationwide curfew, and mobilized its military and security agencies to implement the directives. Additionally, the government mobilized the private, public, and military healthcare institutions to support the infected. It also pursued a transparent campaign to disseminate accurate information to the public and curb the spread of rumors. This explains the fact that, Moroccans followed government instructions, especially those towards the curfews, with some exceptions. The Moroccan Institute for Policy Analysis conducted a poll between March 14 and 19, revealed that “82% of Moroccans completely avoided leaving their homes, and 88% would not consider any form of traveling at this time.” An impressive accomplishment in a society that highly values social and family relationships.

The government of Morocco devoted 2.7% of its GDP to establish a national fund to deal with the pandemic. The King, members of the cabinet, the parliament, the business community, and the public contributed to the fund, accumulating over €3 billion. Cabinet ministers and public officials took the Coronavirus test and announced the results to the public to demonstrate transparency. Morocco’s Government declared a state of emergency, pursued a campaign for social distancing utilizing social media (Facebook, Twitter, Instagram, etc.), and imposed a four-week curfew starting March 20, 2020. Not only that, but to contain the spread of the virus in penitentiaries the government freed over 5000 prisoners of petty crimes. It also imposed a severe travel ban even though tourism contributes to the economy over 10% directly to the GDP, and up to 15% indirectly. The sector employees over 10 million Moroccans.

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Morocco’s overall Health Security Index is assuring. In most categories, it is within or above the world average as illustrated in Table 8.0. Morocco scored better than any of its neighbors in North Africa, with a world ranking of 68/195. Its ability to detect and respond to the pandemic is relatively high compared to the region and the Greater Middle East.

Table 9.0 Morocco’s Health Security Index - Johns Hopkins University, 2022

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<tr>
<th>Country</th>
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<td>Ability to Respond to Pandemics</td>
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<td>Health</td>
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Source: This table is constructed from data provided by the Johns Hopkins Health Security Index accessed on January 13, 2022, at: https://www.ghsindex.org/country/morocco/

Morocco produces sufficient facemasks for the entire population, estimated at 10 million daily and has stored an estimated 50 million mask part for its strategic reserves. The government has also digitalized its emergency response, using a tracking application developed by the General Directorate for National Security.

Morocco’s labor force is most impacted by the epidemic, reflecting negatively on the economy. The Moroccan Economic Monitoring Committee created a digitalized system in which informal sector laborers eligible for assistance enter their Social Security Numbers (SSN) and receive a code that enables them to withdraw an amount of money from financial institutions across the country. Laborers with SSN can access the system through their cell phone and register for future benefits with the Social Security Department. While the informal sector in Morocco accounts for 38%, the IMF stated that, “only a minority of workers are covered by social security, which also contributes to greater informality in the labor market. The current social protection system is highly fragmented.”

The pandemic is also affecting Morocco’s tourist economy. Morocco received 13 million tourists in 2019. It established its legitimacy in international tourism as an attractive destination, but by March 15, Rabat announced a shutdown of its airports and ports, and suspension of inbound and outbound flights from major destinations in Europe, the Americas, the Middle East, and Africa. The closure left thousands of tourists stranded. However, step by step, Morocco managed to repatriate most of them, except those who preferred to stay in the country given the bleak outlook and quick transmission of the virus in Spain, France, and the UK. Spain, who occupies two Moroccan cities since 1492, is managing the Ceuta and Melilla border crossing, where thousands of Europeans left Morocco on ferries toward Spain and other European destinations. Special charter jets and flights were also arranged to evacuate tourists from other parts of the world.

Moroccans demonstrated unprecedented levels of hospitality to tourists stranded in the country. Instead of viewing the situation with a business-oriented mentality of hiking prices and taking advantage of foreigners, they opened their homes and schools to house stranded tourists, offered hotels free of charge, and provided them with shelter, food and healthcare services. While Corona has dealt the tourism and hospitality sector a blow, it is expected that it will recover within two to three years. Currently, the government is attempting to mitigate the impact of the pandemic by encouraging domestic tourism, similar to other countries such as Tunisia, Egypt, and Jordan.

Social solidarity tops the list of the Moroccan response to the pandemic. The country is witnessing a revival of “patriotism” demonstrated by citizens rallying behind the flag, the government, and the healthcare sector. This sense of patriotism is coupled with a sense of “religious” and spiritual solidarity in the holy month of Ramadan. To demonstrate social solidarity and soften the impact of the closure of mosques in Ramadan, Moroccans prayed on the roofs of their houses, reciting the holy Quran, calling for Allah to lift the pandemic in the holy month. Most notably, business owners transformed their shops to produce facial masks for healthcare workers, and average citizens donated food and aided the less fortunate. A related factor to the national campaign to counter the virus is the immediate transformation of some industries to produce health technologies necessary to combat the pandemic, like facemasks, ventilators, sanitizers, and other equipment.

The King of Morocco, Mohammed VI, called for a unified African continental approach to the crisis in 2020, but Rabat’s ability to lead this charge is limited by the four-decade conflict over the Western Sahara territory, its prolonged struggle with Algeria, and its dispute with Spain over Ceuta and Melilla. While the virus outbreak represents a geostrategic liability to Rabat, it may also provide Morocco with an opportunity to settle some regional conflicts and engage in a conflict resolution process with neighboring Algeria. The calamity may also worsen regional conflicts. It has led to a realignment of Morocco with Israel, and therefore, escalating the conflict with Algeria, which views such step as a major threat to its national security. Algeria has recently conducted live ammunition maneuvers viewed by Morocco as provocative and a policy of diversion from domestic crises. While Morocco made no clear indication to escalate into an all-out war, it may act under pressure from its military and security agencies, and therefore escalate the conflict leading to another unwanted regional conflict in North Africa.

The Republic of Tunisia

The first case of Coronavirus was detected in Tunisia on March 2, 2020. On the Global Health Security Index, Tunisia ranked poorly, 123/195. It also scored below world average in all categories, except the ability to respond to the pandemic, which is marginally above average, while scoring above average in the health risk category. These figures are most certainly unsatisfactory, but they are an expected outcome after decades of negligence and corruption in the healthcare system.

<table>
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<tr>
<th>Table. 10.0 Tunisia’s Health Security Index- Johns Hopkins University, 2022</th>
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<tbody>
<tr>
<td><strong>Tunisia</strong></td>
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<tr>
<td>Health</td>
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<td>Ranking/195</td>
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**Source:** This table is constructed from data provided by the Johns Hopkins Health Security Index – accessed on January 13, 2022, at: https://www.ghsindex.org/country/tunisia/

Tunisia’s response to the pandemic in 2020 was shaped primarily by its domestic political environment, by the socio-economic and political developments occurring over the past ten years, governed by the ongoing process of transition to democracy, a growing sense of regime legitimacy, and a vibrant civil society. It is also shaped by its parliamentary life, the relative independence of the judiciary, a professional armed force, and popular participation in public affairs. Tunisia enjoys an active and educated public opinion informed by a large segment of the cyber generation youth, and the role of an expanding middle class. The positive interaction and mobilization of these forces produced immediate results in combatting the Coronavirus.

The government of Prime Minister Elyes Al Fakhfakh assumed responsibility on February 26, 2020, an outcome of an agonizing process of coalition building and struggle among the competing political forces in the country. Soon after, and due to the “stay home” mandates, Tunisia’s parliament delegated some of its powers to the executive, permitting the PM to govern by decree. The legislative sought to empower the executive to make decisions much faster to deal with the crisis. In fact, both the legislative and the judiciary transferred to virtual status, and gave the office of the executive, President Kais Saied, and the prime minister immediate power to mobilize state and society to combat the contagion. The executive has a wide range of agencies at its disposal such as the armed forces, security agencies and civil defense forces, the national Security Council, the National Coronavirus Response Authority, the Response and Rescue Organization, the National Committee for Disaster Prevention, the Response and Relief Organization, the Regional Committee for Disaster Prevention, and several other agencies.

State and civil society are working rather harmoniously, compared to neighboring countries like Algeria, Libya, or Mauritania. Tunisia established a ‘virtual war room’ to deal with the health crisis, and mobilized government and non-governmental organizations, scientists, and medics. Tunisian scientists developed their own respirators to meet the growing demand and manufactured reasonable quantities of facemasks. The authorities also digitalized the crisis response using E-Government to provide services for the public, as well as using the available technology of drones and robots.

The Tunisian government devoted $850 million to tackle the social and economic impact of the crisis, expanding poverty-alleviation programs, providing unemployment benefits to eligible segments of society, reducing taxes and interest rates. However, the ability of the state to provide services is shaped by its economic outlook. It is expected that the Tunisian economy will contract by 4.3%, and the unemployment rate will rise to 25%. The government requested IMF support, which granted an emergency loan for Tunisia to deal with the Coronavirus of $745 million. On April 20, the World Bank also approved $35 million to boost the healthcare system in fighting the pandemic.

There are several other noteworthy aspects of Tunisia’s immediate first response to Covid-19. First, Al Fakhfakh portrayed the pandemic as a “war” against an invisible enemy that threatens the nation and the world. His words were flanked by an emotional statement by health minister Habiba Zehi Ben Romdhane who broke into tears during a press conference, saddened by the
growing number of early infections and deaths. Such vivid messages were bound to mobilize the public. Secondly, the state declared a strict lockdown, imposing sanctions, and arrests for violators. In other words, the leadership formed a unified front with a strategy activating financial, economic, and coercive measures to deal with the threat. A third positive aspect is the scientific slant in the mobilization process. While Tunisia is well-known for its politicization of public discourse, in this case it concentrated on the medical narrative rather than the usual political bickering and settling of political scores.

A fourth aspect is that Tunisian civil society demonstrated a strong sense of solidarity. For example, the business community activated its resources to produce facemasks, disinfectant gels, medical gear, and distributed foodstuff for the needy. The cyber generation provided hopeful messages, battled false online news, and disseminated accurate information regarding the virus.

Lastly, in terms of geopolitics, because Tunisia is located on the fault lines of an international migration route, regional conflicts, and violent extremism and terrorism. Its national government and process of transition remains fragile. Any added stress to the regional environment is bound to exacerbate such vulnerability. A case in point is the decade-long attrition and proxy war in Libya. As a result, Tunisia’s national security is threatened by the increase of illegal immigration, street violence, and the growing presence of terrorist organizations, home-grown or regional. To deal with these issues, the country needs urgent support from the international community, but so far, due to the ongoing conflict between France and Italy over energy interests in Libya, the European Union, which is most affected by these forces, has only offered a fragmented response.

The above-mentioned optimism in 2020 withered away by unfortunate political developments in Tunisia in 2021. The political forces in the country continued to clash within the parliament, primarily between the Islamists and nationalists leading to a stalemate and violence. On July 25 the president suspended the parliament and centralized most of state powers and authorities strictly within the office of the presidency. Such step alarmed Tunisian and the international community of the return of dictatorship to the country. Since then, protest, clashes and violence have become part of the daily life in Tunisia. Such societal tension most certainly impacted the ability of the government to deal with the Coronavirus pandemic. By January 2022, Tunisia seems to be facing major challenges in dealing with the crisis, particular in testing, tracing, and vaccinations. Such challenges are associated with political unrests, and near economic collapse.

The Republic of Sudan

Sudan ranked 185/195 on the Global Health Security Index, marking it as one of the most vulnerable countries to pandemics, with very low ability to detect and respond to diseases. This is a natural outcome of decades of systematic corruption, and mismanagement on the side of military regimes governed the country since the 1958. Sudan was also under stringent sanctions over the past three decades, and therefore, the Sudanese healthcare system and infrastructure deteriorated incrementally. Hospitals suffered shortages of equipment, medicines, and healthcare professionals. Sudanese doctors were renowned in Middle Eastern medical establishments, and the school of medicine at Khartoum University was a source of national pride. Once the wealthiest country in the region in terms of natural resources, minerals, and agricultural potential, the Sudan went bankrupt, impoverished by a power-hungry regime that failed on every front. The Sudan falls into the WHO’s category of most vulnerable countries; hence, unable to meet the Coronavirus challenge on its own. It has appealed to international organizations like the World Bank, the IMF, and donors.
Table. 11.0 Sudan’s Health Security Index- Johns Hopkins University, 2022

<table>
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<tr>
<th>Country</th>
<th>Score</th>
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<tr>
<td>Ability to Detect</td>
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<td>32.2</td>
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<tr>
<td>Ability to Respond to Pandemics</td>
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<td>37.6</td>
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<tr>
<td>Rank/195</td>
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</table>

Source: This table is constructed from data provided by the Johns Hopkins Health Security Index accessed on January 13, 2022, at: https://www.ghsindex.org/country/sudan/

One detrimental situation is the Sudan’s laboratory testing capacity and unavailable testing kits, one of lowest rates -150 tests per day for 39 million people. This is a terrifying figure underscores the likelihood of a much higher number of infected but undetected cases. The minimum capacity should be 40,000 test per day, nearly impossible to achieve on short notice. The WHO has an active program, and Medecins Sans Frontieres runs hospitals and clinics in the country. On April 22, 2020, the United Arab Emirates also provided essential support by delivering a shipment of seven tons of medical supplies, mainly test kits. This is part of the UAE’s outreach efforts, where it delivered 277,000 tons of medical supplies to 25 vulnerable countries around the world.15

Understandably, the Sudan’s mixed government response will determine the political future of the country. The civil government’s failure to deal with the outbreak will erode its legitimacy and give the military the opportunity to accomplish the goals of the 2019 military coup. Prime Minister Abdullah Hamdouk is under scrutiny from the public, the donor community, the international and human rights organizations, neighboring countries, and leading figures in the international community. He must demonstrate a high level of leadership under the conditions of this unfolding crisis. Any wobbly response will create the impression that he is incompetent to lead, which will be detrimental to Sudan’s future. The process of transition from military to civilian political leadership is attainable with the international community’s support, otherwise this will be another squandered opportunity, as in 1964, 1985, and 1989 of Sudan’s modern history.

Sudan’s overall response to the current infectious disease is shaped by its geostrategic environment, by domestic, regional, and intentional factors. In the past two decades, The Sudan went through internal instability, rebellions, and a genocide. The recent 2019 military coup put an end to three decades of General Omar Hasan Al Bashir’s corrupted military junta. Under his rule, the Sudan was reduced to a position of subservience, and placed on the list of countries that support international terrorism. A civil war led to the cessation of South Sudan in 2011, and an escalation of the conflict in Darfur led to a genocide. There were also rebellions in the eastern part of the country, with support even in the north, the center for regime power.

Sudan’s economy was crippled by international sanctions imposed by the US, the EU, and the UN due primarily to the genocide in Darfur. Sudan was totally isolated from the international

community, and its circle of friends was very limited. International financial institutions excluded the Sudan from the trends of investment and growth.

The regime’s most catastrophic choice was to fragment the country. Sudan’s chronic crises date back to the colonial era and the post-colonial state. Colonial administrative structures, cultural differences, and a religious divide created the necessary conditions to split the country in two. While southern forces declared beforehand their intention to preserve the territorial integrity of the Sudan, the central government produced the necessary conditions for the south to secede after a national referendum was approved by 99% of the population. The Republic of South Sudan became the latest country to join the international community on July 9, 2011. Remarkably, General Bashir joined the independence celebration representing “his” country at the festivities.

When it comes to political violence, the most devastating event was associated with the regime’s response to the protest in the western region of Darfur in 2003. The demonstrations aimed to draw the attention of the state to deteriorating public services, and the abject poverty among the population. The people of Darfur demanded equal share with other regions in terms of development, employment opportunities, education, healthcare services, and infrastructure projects. Darfuran movements were “rising up against the Sudanese government’s economic, political and asocial marginalization of populations living in the peripheries of Sudan and beyond the government center in Khartoum.” The regime opted for a security approach using overwhelming force against the protesters, and soliciting the support of local militia. This led to a genocide that killed over 300,000 people, according to the United Nations, after which the regime was placed under stringent international sanctions.

Sudan’s regional geopolitical outlook is also challenging. Some steps to confront regional threats include its partnership with Saudi Arabia and the UAE, and its attempt to reconcile the dispute with Egypt over the border region of Halyeb. However, existentially, the threat comes from Ethiopia over the Renaissance Dam. Israel is also a security threat to the Sudan. This explains the fact that, the Head of Sovereignty Council, General Abdulfattah Al-Burhan, met with Israeli Prime Minister Benjamin Netanyahu on February 4, 2020, in Uganda. Over the past two decades, Sudan has been subjected to repeated Israeli attacks of suspected locations allegedly providing weapons to the Palestinians. The transitional government in Sudan is also convinced that improving ties with Israel, initiating negotiations, utilizing the Israeli lobby in Washington DC to influence the administration and Congress will most certainly yield positive results toward removing American sanctions.

Khartoum enjoys the support of two leading Arab countries: Saudi Arabia and the UAE. In the national interest of both countries (as well as of the Arab world), they pledged to support the political and economic transition to stabilize and develop the Sudan. UAE corporations are willing to invest in the country’s agricultural sector, real estate, infrastructure, tourism, and the manufacturing sector, as well. Saudi Arabia’s business community as well, is willing to invest in the Sudan. However, regional, and international support for the Sudan is critically hampered by the clashes between the civilian and the military components of the transitional authorities in the Sudan. The military’s second coup in October 2021, and the resignation of the civilian Prime Minister Abdullah Hamdok on January 3, 2022, brought the country to unprecedented level of stalemate and at the brink of total collapse. Sudan’s strategic location and its outlet at Red Sea

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provides the opportunity to play a vital role in the development of the region, in the Central and northern African regions, and throughout the continent.

**Sahrawi Arab Democratic Republic or, The Western Sahara Region**

Western Sahara is a disputed region, according to the United Nations. Most of the territory is under Moroccan rule, while 10% is under the rule of the Sahrawi Arab Democratic Republic (SADR). The leading national liberation movement Polisario (from the Spanish abbreviation of Frente Popular de Liberación de Saguía el Hamra y Río de Oro) acts as a well-organized government with a head of state, a cabinet, ministries, and departments. This organizational structure is unique to the Sahrawi people. In fact, the Sahrawi population of 163,600 has lived in the Tindouf Refugee Camp in Algeria, across the border from Western Sahara over the past 45 years.

In 1976, upon Spanish decolonization of the territory, Polisario declared the new Sahrawi Arab Democratic Republic (SADR), and over 85 countries recognized its independence. On February 22, 1984, SADR became a member of the Organization of the African States (OAS). The King of Morocco, Hassan II, objected to the independence of Western Sahara, withdrew from the OAS the same year, and called upon the people of Morocco to march into the territory. Accordingly, 350,000 Moroccans entered the region in what became known as the Green March. This step antagonized the OAS, Algeria in particular, and many other countries around the world. The United Nations attempted to resolve the conflict as early as 1976, a process that culminated with the establishment of the UN Mission for the Referendum in Western Sahara (MINURSO) in 1991.

The current Coronavirus pandemic represents both a challenge and an unprecedented opportunity to resolve the conflict. A closer cooperation between the parties could mitigate the impact of the outbreak on the Sahrawi people, both in the Tindouf Camp and at home. The camp urgently needs medical equipment and resources. The UN has recently appealed for financial support, requesting $15 million to meet the urgent needs of the refugees.

The disease provides opposing parties the opportunity to show goodwill and work together to meet the urgent needs of the suffering Sahrawi refugees, and not least, to demonstrate willingness to resolve once and for all the conflict that has divided this part of Africa over four decades. Proposals for a resolution are already on the table, but they are still antagonistic. Morocco advocates autonomy within the kingdom, while the Polisario and Algeria advocate for independence and self-determination. A resolution will most certainly bring about an unprecedented level of regional cooperation between Algeria and Morocco. Its spillover will affect North Africa and the Middle East as well.

If reconciliation does not happen now, there is the possibility of conflict escalation. The Polisario, sole representative of the Sahrawi, recently expressed its disappointment in the role of the UN and the international community in resolving the conflict peacefully. The UN has never been able to resolve this conflict through UN resolutions, like a referendum for self-determination. Morocco claims sovereignty and has recently made some gains toward the legitimization of its control over the territory. Since the return of Morocco to the AU in 2017, several African countries opened consulates in the Western Saharan capital Laayoune, while many other African and Arab countries reject Morocco’s claim such as South Africa, Kenya, Botswana, Ethiopia, Libya, Mali, and Namibia. Algeria proved its unwavering support of the Sahrawis over the past forty years, and

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18 For more information on the UN’s mission in Western Sahara check the website of the MINURSO at: https://minurso.unmissions.org/background
consistently commits to their self-determination, and their right to reinstate their own government in the territory.

There is no doubt that, the incompatibility of conflict-resolution schemes renders the Western Sahara as one of the most challenging conflicts in post-colonial Africa. Sahrawis are faced by the uncompromising Moroccan claims of sovereignty over the region. This claim added to other regional challenges in North Africa fuels animosity between the two traditional rivals, Morocco, and Algeria. As far as Mauritania is concerned, Nouakchott has relinquished its territorial claims over Western Sahara as early as 1979, however Mauritania remains one of the key players to the resolution of the conflict. In terms of the continued role of the UN and its involvement in the conflict, the Security Council called on the parties to the conflict to resume peaceful negotiations on April 9, 2020. The UNSC reiterated previous resolutions calling for roundtable negotiations to bring about an end to the conflict.

The Security Council’s announcement has attempted to draw the attention to the conflict in Western Sahara, however the challenge is that amidst the Coronavirus crisis, neither the international community nor the parties to the conflict have demonstrated willingness to move forward with negotiations. Contrary, the threat of the spread of the virus across North Africa, especially in Algeria, Morocco and Western Sahara would seems to escalate the conflict. Under the conditions of a protracted crises of legitimacy and economic decline in Algeria, a year-long popular protest, the regime may explore external threats as a mechanism to unify a divided country. As mentioned before, Algerian armed forces conducted maneuvers with live ammunition close the borders of Morocco on May 5, 2020 at the peak of the Coronavirus pandemic. The same day, during the annual meeting of Non-Aligned Movement, which was hosted by Azerbaijan under the banner of United Against COVID-19 Summit, Morocco and Algeria traded accusations over Western Sahara. The Algerian President referred to “occupied lands, as is the case in Palestine and Western Sahara.”19, while calling for the end to hostilities globally. Morocco responded in kind, launching a direct attack on Algeria. Its Foreign Affairs Minister accused Algeria of “fueling separatism”. He stated that, “despite the exceptional current circumstances, a neighboring country continues to fuel separatism, in violation of the of founding principles of NAM...this country, instead of using its resources to improve the precarious situation of its population in the context of the COVID-19, diverts them to fuel regional destabilization.”20 On another occasion, and when asked by the media about the possibility of resorting to international financial institutions to mitigate the decline of the prices of oil and its impact on the economy, and assist Algeria in dealing with the COVID-19 pandemic, Algerian president Tiboune made a clear reference to Western Sahara. He stated that, “you will no longer be able to defend causes like the Palestinian cause and the Western Saharan Conflict.”21

On May 13, 2020, Algerian media reported that in a conversation with some Moroccan citizens seeking his support for repatriation because of the Coronavirus, The Moroccan Counsel General in the Algerian city of Oran described Algeria as an “enemy”. The next day, the Moroccan ambassador was summoned by the Algerian Foreign Affairs Ministry who denied the incident. Clearly, the two countries are escalating the conflict rather than deescalating it.

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19 The NAM statement of morocco at the Middle East Online: https://middle-east-online.com/en/moroccan-fm-slams-algeria-nam-summit-over-western-sahara
20 The NAM statement of morocco at the Middle East Online: https://middle-east-online.com/en/moroccan-fm-slams-algeria-nam-summit-over-western-sahara
21 Dialogue between the Algerian President and the media on https://www.youtube.com/watch?v=DKnCq4ZHNIY&feature=youtu.be
Rabat has utilized the Corona pandemic to strengthen its credentials in Africa. The King’s call for a unified African response to the crisis aims at just that. Morocco continues to underline a Neo-Pan-Africanism approach in its foreign policy, grounding it in its national interests and national security, i.e., influencing and shaping the African Union’s views on the Western Saharan conflict. Most notably, renaming its foreign affairs ministry to the Ministry of Foreign Affairs, African Cooperation and Moroccans Abroad. Rabat has made some gains in this aspect convincing some African countries to open up diplomatic posts in what it calls Morocco’s Southern Provinces. While such advances are viewed damaging by the Polisario and Algeria, both are determined that a full-scale support for Morocco’s perspective on the conflict never materializes. Both the Polisario and Algeria protested such diplomatic moves and sought a UN clear position on the Morocco’s efforts to alter the status of the territory, by a de facto strategic change on the ground. This explains the fact that, the overwhelming majority of the African states, as well as member of the international community continues to view Western Sahara as an occupied territory. To prevent a full-scale recognition of Morocco’s sovereignty over Western Sahara, there is no doubt that Algeria is willing to engage in a regional war. In fact, a war at this point would serve the Algerian regime well, at a time it suffers from a crisis of legitimacy. Such crisis is a natural outcome to six decades of mismanagement, corruption, and bureaucratic elites’ rivalry over state resources. A war over Western Sahara would unify the country, rally Algerians behind the flag, and diffuses state-civil society tension.

The Polisario has expressed its dismay over lack of progress in the negotiations and the seemingly lack of interest on the part of the international community in resolving the conflict. It is obvious to observers that, Morocco is taking drastic efforts to establish its sovereignty over the territory, while the UN in particular has not demonstrated major objection to Rabat’s efforts. It is no secret that Morocco’s foreign affairs ministry had made it abundantly clear that it will not spare any effort to strengthen its claims over Western Sahara.

Morocco has become innovative as well in creating stakes for its strategic partners in Western Sahara such as the EU, and China. Rabat has been giving concessions especially in the fisheries sector to the EU, and China with the aim of mobilizing support for its views on the Western Saharan conflict. In so doing, Morocco aims also to undermine the traditional alliance between Algeria and China. Western Sahara is a very rich territory with abundance of phosphate, uranium, gold silver, and potentially its shores are rich with crude oil and natural gas.

China has already had a 25-year fisheries agreement with Mauritania, and another concession from Morocco would strengthen its gains in northwestern Africa fishing sector. Similarly, the EU aims at dominance in the fisheries sector as well in northwestern Africa and the shores of the Atlantic. The EU member states are driven by national interest consideration rather than commitment to the principles of self-determination, decolonization, human rights, or defense of indigenous people’s rights as they may claim from time to time. That applies to the EU at large and to individual European players in the conflict as well such as Spain, France, Italy. The exception here is the European Court of Justice. The court ruled on February 27, 2018, that the Fisheries Partnership Agreement between the European Community and the Kingdom of Morocco signed in 2005 that the bilateral agricultural agreement between Morocco and the EU violates international law as it included Western Sahara within the agreement. The court stated that, “the territory of Western Sahara is not covered by the concept of “territory of Morocco.” Therefore, the court confirmed the status of the territory as a disputed region. China as well, is driven by its

national interests, though maintaining a delicate balance between its historical ties with Algeria and its growing portfolio of interests with Morocco.

Sahrawis are magnified by what they call the “colonial” mentality governs the Moroccan presence in the territory, namely resource-extraction policy. Similar to European colonial experiences in Africa, Western Sahara is exposed to a massive process of resource-extraction designed to create stakes for European, Chinese and American corporations in the phosphate, oil and gas, minerals, and fishing sectors to ensure political support to the Moroccan perspective on the conflict. Sahrawis see their land and wealth ripped off, while they suffer unemployment, poverty, diseases, and misery in refugee camps since the 1980s. This situation in particular has mobilized a large segment of the Sahrawi youth to enlist in the Polisario, train and prepare for the upcoming confrontation with the Moroccan army.

In this complex realist world of contending interests, the fear is that the Sahrawis would give up totally on the international community. The relative peace among Sahrawis should not be misinterpreted as incompetence in waging a war of liberation. Contrary, the Sahrawis are capable to wage such war, and in so doing, they will not be left alone. The Polisario had committed itself decades ago to the peaceful resolution of the conflict, however, the pandemic may convince Sahrawis of the futility of the peace process and compels the movement to pursue the armed struggle option to accomplish its independence. In fact, this is exactly what occurred in response to the UN’s announcement on May 5, 2020. The Polisario expressed its disappointment in the UN, its mission, and its role in resolving the conflict. The growing impatience among the youth segment in Tindouf is also noticeable especially over the past two years, 2020 and 2021. Furthermore, developments in Western Sahara are reflection to the Algerian-Morocco geopolitical conflicts. However, the role of United Nations, the European Union, the African Union (AU), and the Arab League remains necessary to advance the cause of peace. Probably, the AU is currently in a much better condition to launch a peace process if compared by other regional or international organizations. African crises require an African solution, with the support of the international community.

Conclusion

The Coronavirus outbreak has tested the North African region, its governments, and the resilience of its people. The individual nations’ ability to respond to the epidemic is shaped by a host of domestic, regional, and international factors. On a national level, success or failure is measured by the availability of resources necessary to withstand the crisis. While some countries such as Morocco and Tunisia mobilized their national resources and strengthened coordination between state and civil society, Algeria’s response is married by a prolonged civil conflict, while the protracted attrition war in Libya impairs state and civil society response. Mauritania’s response is limited by its insufficient resources and a weak healthcare sector, though both state and civil society are struggling to coordinate national efforts and seek international support. In Sudan, a dysfunctional public healthcare sector, the consequences of the military coup, the civilian-military coalition government, and international sanctions have also impaired an efficient response to the crisis. Such conditions render unstable the governing national unity coalition. Egypt took a proactive stance to contain the zoonotic disease since the mid-2020 to the present. Moroccans call for a unified continental response across Africa but have not produced any substantial institutional response.

There is no coordination among North African nations because each has its own unsurmountable challenges, and there is no institutional regional framework. Albeit the countries
are intrinsically linked by cultural, ethnic, geographical, and historical considerations. Individual nations are cooperating with the European Union, the World Health Organization, the World Bank, the International Monetary Fund, the Arab league, and the African Union, but the whole of North Africa lacks a crisis management center, which is necessary to combat cross-border challenges. In fact, the contagion necessitates regional coordination, but regional response is absent.

The Coronavirus pandemics will not disappear soon, nor will it be the last crisis facing the region. Therefore, regional cooperation is a must, and a North African Crisis Management Center can be a solution to design and implement regional-level responses to cross border calamities. Other instruments would include a unified media awareness campaign, regional economic cooperation, border control, and combatting regional security threats. While such cooperation may seem challenging because of the various geostrategic conflicts in the region, it is essential for the collective national self-interests and national security.

Endnotes/References