

Disease and Dis-Ease amid Covid-19: Public Policy Measures by BRICS Countries

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Abstract

Since the emergence of COVID-19 in Wuhan China in early 2019, the global spread of this virus has impacted markets, health systems and general households across the world. Even with draconian containment measures, such as monitored movement restrictions, closed borders and various lockdowns, the disease has appeared highly difficult to contain. Within a few months, it reached all BRICS countries, affecting more than 39.7 million people, which accounts for 26.3 per cent of global infections, declaring it a global pandemic by the WHO. Unfortunately, the rapid spread and imposing nature of this virus have not provided countries with enough time and space to reflect on the far-reaching consequences that arise from poor public policy measures as well as disease control measures by their respective health systems. As a result, a lot of dis-ease amongst the public, government policy implementers and health care providers have been raised. This has negatively impacted people's day-to-day activities and lives. Increased mortality rates amongst the elderly have been a growing concern as well as the increasing effects on all other age groups across BRICS countries. Using a comparative study approach, this paper seeks to analyse the effects of Covid-19 and the dis-ease that arises from its proximity in BRICS countries. Additionally, the paper will provide a qualitative overview of public policy approaches comparing the member countries and addressing the effects of this pandemic and the dis-ease it has caused amongst BRICS countries.

Keywords: BRICS, Public Policy, Health system, COVID-19, government, Disease and Dis-ease World Health Organization, Dis-ease

Introduction

The COVID-19 pandemic has brought about significant changes in societies worldwide, causing tremendous human suffering and disrupting the foundations that uphold societal well-being (WHO 2020). Currently, there are close to 233,297,307 confirmed cases worldwide, with the scale of contagion continuing to rise in BRICS countries. As a result, the pandemic has had severe impacts on income, employment, and health, causing increased anxiety and negatively affecting people's living arrangements and livelihoods. These changes have also led to social and governmental trust issues and affected personal security, calling for immediate government intervention to alleviate the disease caused by the pandemic. The pandemic has resulted in dis-ease, characterized by the inability to control emotions and physical shock, as people struggle to adapt to the new age brought about by COVID-19. For instance, home schooling will have long-term impacts on children and youth, which will largely depend on their socio-economic background and the support provided by decision-makers and communities (French and Monahan 2020:1-4).

The COVID-19 pandemic has posed several challenges, including disrupting the immunization efforts aimed at saving the lives of infants and children globally. This has put millions of children, both in developed and developing countries, at a heightened risk of contracting diseases. The World Health Organization (WHO) has been documenting charts since May 2020, providing an overview of the prevention and treatment services for non-communicable diseases (NCDs) since the pandemic began. To mitigate the risks posed by the pandemic, countries must evaluate the impacts of the disease and develop balanced countermeasures that address all aspects of people's lives, particularly the most

vulnerable populations. Moreover, it is essential to integrate the distributional impacts effectively to respond efficiently to the pandemic's challenges. All of these efforts must be accomplished while racing against the clock in a highly challenging and uncertain environment.

BRICS is a group of countries that have emerged as global superpowers alongside the United States since 2001. These countries are recognized as the five largest economies in the world in the 21st century. The term "BRICS" was coined by Goldman Sachs in 2001, advocating that these countries should focus on establishing a fair international governance system that aligns with their interests. Despite the challenges posed by the COVID-19 pandemic, the BRICS countries have shown resilience and commendable vitality in maintaining their momentum towards effective cooperation. They have worked together to combat the coronavirus and are gradually rebuilding their economies.

The aim of BRICS countries during this pandemic is to secure new prospects and maintain a responsible role in addressing existing government deficits and common challenges. They aim to create new global supranational governance structures to counter Western hegemony within the UN. The paper aims to outline the comparative measures taken by each country in achieving this goal. These measures include protecting people's health, practicing multilateralism to maintain international order, and improving global economic recovery. It is important to note that overcoming the pandemic is a marathon, and no country should slack in their efforts to balance routine COVID protocols with emergency measures. The paper will use a qualitative approach to compare the methods taken by each government. The structure of the paper will begin with an in-depth understanding of COVID-19, BRICS countries, and the policy measures taken by their governments. It will also provide an understanding of the concept of dis-ease used in the study. The paper will then examine the critical observations of the pandemic and the methods used to deal with it, such as lockdown, economic, and health measures. Sustainable measures that BRICS countries can take will be outlined as recommendations, followed by a conclusion of the study.

Background

The COVID-19 pandemic has caused widespread devastation to global economies and healthcare systems, threatening to undo years of progress made since the Great Recession. Governments worldwide have implemented various measures to contain the spread of the virus, which has left a trail of destruction in its wake. This pandemic is the latest addition to a growing list of novel diseases that have emerged in recent times, posing a significant challenge to global health. The World Health Organisation has declared COVID-19 a public health emergency, prompting international concern and response. Unfortunately, the pandemic has been more severe in southern regions, while some developed countries have restricted vaccine exports, resulting in vaccine hoarding. In contrast, BRICS countries have attempted to vaccinate their own populations while also assisting other countries in curbing the spread of the virus. In response to the unjust hoarding of vaccines, the World Trade Organisation has made early decisions to waive intellectual property rights for the COVID-19 vaccine.

To give a statistical overview, COVID-19 presents with a range of clinical severity, with 80% of cases being mild to moderate, 15% being severe, and 5% being critical. The overall fatality rate is estimated to be between 0.5% to 2.8%, but this rate is higher for individuals in their 80s, with a range of 3.7% to 14.8%. These severe cases have put a significant strain on healthcare systems worldwide (Dash D, Sethi and Dash 2021:101).

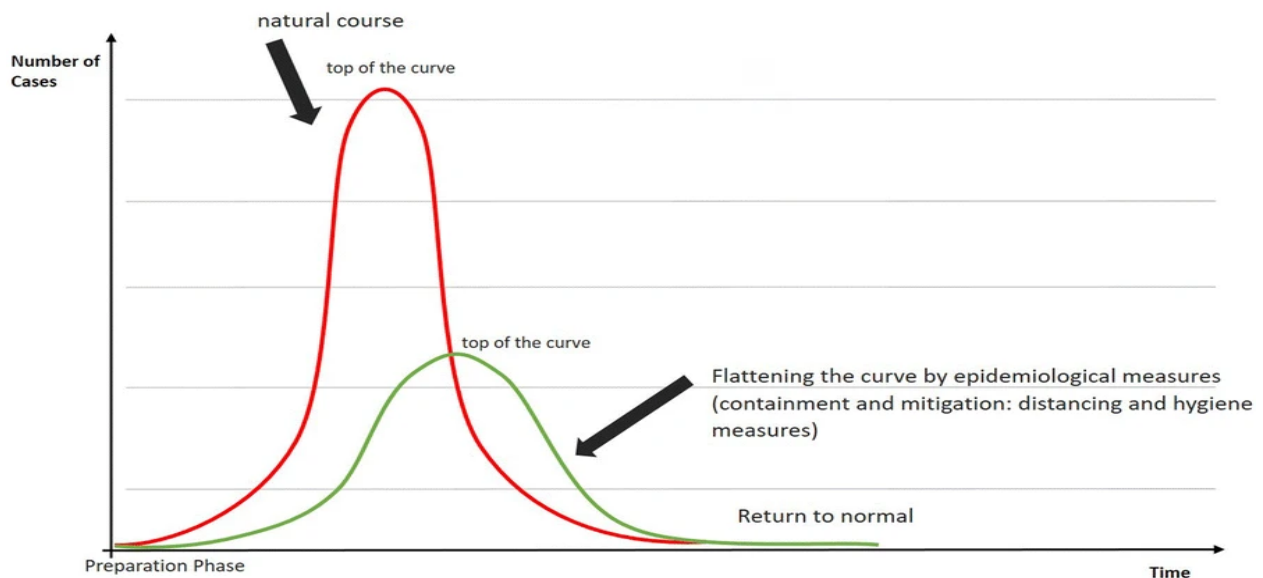
The pandemic has created a multitude of challenges, such as restricted contact and reduced interactions in day-to-day life, isolation, and economic and health issues. These challenges have caused an increase in anxiety levels due to the lack of peer contact and fewer opportunities for stress regulation, which is a major concern for social activities. Furthermore, there are elevated

risks of parental mental illnesses, domestic violence, and child maltreatment. Leisure time activities have been limited, which has resulted in reduced social interactions for children on school premises, playgrounds, and sports clubs. According to Abdullah A. Balkhair (2020:33), limited social relations have led to structural and dimensional issues, and people no longer have social support from their respective groups, thereby increasing the social strains that existed prior to the pandemic. Social isolation has increased the risks of inflammation to the same degree as physical inactivity during adolescence, and it has also contributed to hypertension levels exceeding those caused by clinical risk factors such as diabetes in the elderly.

The graph below provides a brief description of the mental health challenges faced by children and adolescent teenagers during the covid-19 pandemic.

Figure 1: Challenges and burden of the Coronavirus 2019 (COVID-19) pandemic for child and adolescent mental health: a narrative review to highlight clinical and research needs in the acute phase and the long return to normality | Child and Adolescent Psychiatry and Mental Health.

3 phases of the pandemic



Source: Fegert, J.M., Vitiello, B., Plener, P.L. and Clemens, V., 2020.

The pandemic has severely restricted social interaction, with contacts limited to only immediate family members. This has negatively impacted children and adolescents, as peer contact is important for their well-being. Educational systems globally have resorted to alternative measures, such as online learning, with traditional education systems being locked down. Closing of schools negatively impacts school curriculum and structure, with multidimensional assessments of social relationships being impacted for a substantial amount of time. More than 160 countries have used social distancing measures, impacting close to 87% of students across the world. Reduced levels of interaction could increase mortality rate by 91% amongst severely isolated individuals, exceeding the effects of many other risk factors of mortality such as obesity and physical inactivity, and being immediately comparable to that of smoking.

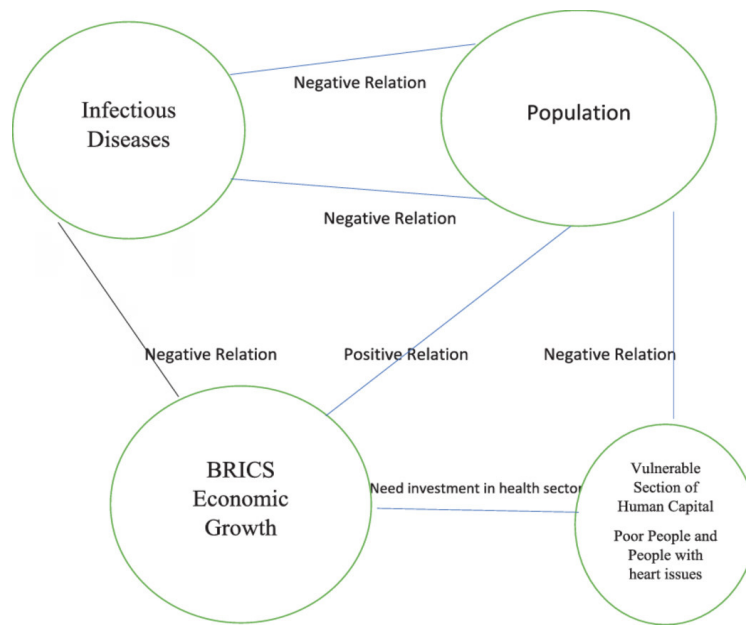
The pandemic has caused economic shutdowns, which have led to significant changes in the psychosocial environment of affected countries. International travel has become a rare event, even though in 2018, over 4 billion people, or roughly 60% of the world population, travelled

internationally via commercial flights. The emergence of local pathogens has become a significant threat to public health, as they can spread across borders at an alarming rate. A prime example is the COVID-19 pandemic, which started with a seemingly small number of pneumonia cases connected to seafood markets in Wuhan, China but quickly became one of the worst pandemics in human history. As of 9 April 2020, an estimated 1.4 million infants in 177 countries have been affected, with more than 85,000 deaths worldwide. Primarily, the mandate of BRICS countries is one that contributes significantly to the development of humanity and establishing a more equitable and fairer world. As of 30 April 2020, BRICS countries were estimated to have 39.77 million people infected with COVID-19, meaning that more than a quarter of the world, which is 26.3% of the global total, had been impacted and suffering from grave human loss, economic and social challenges. COVID-19 has contributed to the gradual economic meltdown in the emerging economies such as Brazil, Russia, India, China and South Africa - which have been acknowledged as the engine of global economic growth for the past two decades (BRICS Report 2020). These emerging economies have experienced grave financial vulnerability due to the fall in primary exports resulting from the drastic decline in global demand.

Russia, the host country of the 2020 BRICS summit, has the third highest number of reported COVID-19 cases (around 370,000) after Brazil (around 440,000). Despite this, the core objective of the BRICS countries during the pandemic is to work collectively to overcome it. China, which has been praised for its response to the pandemic, has become a leading country in the fight against COVID-19, providing over 350 million doses of vaccine to the international community and proposing a forum for vaccine cooperation. BRICS members and other organizations, such as the HKEX, have joined forces in a unified effort to combat the pandemic. The interconnectedness of BRICS countries and their vulnerable populations is shown in a graph that depicts the rate of infectious disease and its impact on human capital. The graph also illustrates the relationship between epidemic infections, population health, investment in the health sector, and economic growth, highlighting how economic growth can help mitigate health issues and benefit the population and their respective health systems.

Lastly, multilateralism is an essential foundation for a functioning international system. However, this principle is being undermined by practices that are masked as multilateral but prioritize one's interests over the international system. Therefore, it is crucial to uphold the true essence and philosophy of multilateralism. The role of BRICS countries is to propose the UN Charter and reject any form of exceptionalism and double standards that may arise. By doing so, BRICS countries can safeguard the international order within the framework of international law. This approach allows for extensive consultation and joint contributions to combat any form of hegemony that may emerge during this crisis. As a result of the COVID-19 pandemic, critical observations have been made on the various policy measures of BRICS countries, including health, education, and economic measures. These observations highlight the challenges that have emerged within BRICS countries and their impact on policy measures. These issues will be further explored in the following section. (French and Monahan 2020:5).

Figure 2: BRICS Countries interconnectedness: population, infectious diseases and Vulnerable sections of human capital

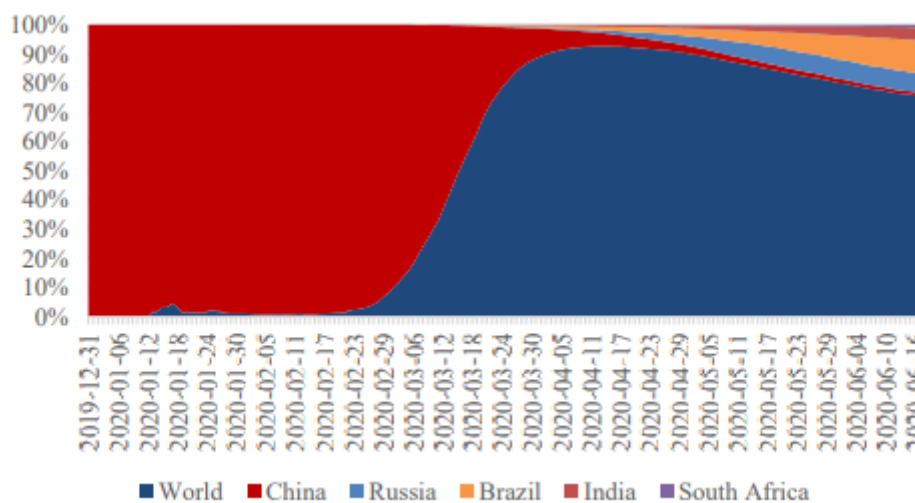


Source: Dash, D. Dash, A. and Sethi, N. 2021.

Critical Observation of the COVID-19 Pandemic

The COVID-19 pandemic has had several negative impacts on society, including psychological effects of social distancing and quarantine measures, which have drastically affected household and individual circumstances. These effects are seen in increasing rates of job loss, decreased housing quality, deteriorating mental health, personal safety concerns, family separation, and illness. Additionally, the sudden loss of loved ones has played a significant role in changes in people’s behaviour and negative contributions to overall productivity (Abebe 2020:22). The diagram below illustrates the total number of COVID-19 reported cases in all BRICS countries between December 2019 and June 2021 (Dash, Sethi, and Dash 2021: 101-202).

Figure 3: Total number of COVID-19 cases reported per country 31 December 2019 and 17 June 2021



Source: Fonseca, P., et al. 2020.

What is dis-ease in the context of this paper?

The COVID-19 pandemic has caused widespread negative impacts on society, including not only the disease itself but also the dis-ease that comes with it. The loss of many lives across the world has led to increased anxiety and fear in people, with many seeking information but struggling to take appropriate steps to protect themselves. The constant stream of news reports about the outbreak can cause overwhelming pressure in the workplace, leading to negative reflections and constant uneasiness. People in rural areas have struggled to provide support to those infected with COVID-19, exacerbating urgent mental health and neurological issues. Many have felt displaced and alone, battling anxiety and uneasiness. The concept of dis-ease arises from these circumstances, referring to the occurrence of displacement, lonesomeness, and anxiousness during the pandemic. Therefore, it is important to evaluate the resilience of the economies of Brazil, India, China, and South Africa in the presence of COVID-19.

Collective Methods to Contain the COVID-19 Pandemic

To understand the policies adopted by BRICS countries in their fight against the pandemic and the underlying socio-political issues, it is important to first have a brief overview of the current national situations and infection rates. As of early June 2020, Brazil and Russia were witnessing a sharp increase in the number of infected individuals. Meanwhile, India had climbed up to the ninth position in terms of the global number of infections, with 180,621 cases reported in June 2021. China and South Africa followed with 84,126 and 29,240 cases respectively (Fonseca et al., 2020:191). This surge in cases raised concerns, prompting China to call for a Cooperation Action Plan aimed at tackling the pandemic through a scientific and technological approach.

Despite the severity of the economic impact of the COVID-19 pandemic on BRICS countries, various measures have been explored and implemented to mitigate its effects. The World Health Organization (WHO) launched the Solidarity trial, an international clinical trial seeking to establish clinical treatments for COVID-19 on a multinational basis. This trial is a significant effort towards changing the speed at which the virus is claiming lives. The pandemic has negatively impacted the manufacturing and services sectors, including the education, hospitality, health, travel, banking, and media industries. Travelling statistics in South Africa indicate a 71.0% decrease between 2019 and 2020, with an overall decrease of 50.7% over a 15-year period. To address these challenges, BRICS countries have established macroeconomic policies aimed at gradually implementing economic partnership for 2025. These policies will contribute to trade investments and investment liberalization, highlighting the early realization of all Agenda 2030 sustainable development goals.

The COVID-19 pandemic has been rapidly increasing, affecting world energy markets and impeding global oil prices, oil and natural gas demand across the world, according to the Organisation for Economic Co-operation and Development (OECD) (2020:1). BRICS countries have established methods to promote "BRICS Plus" cooperation format, which enhances the act of solidarity and effective coordination among countries. The New Development Bank membership expansion should continue to be encouraged to increase wider coverage and benefit more countries during this time (Isheloke 2020:22). The following section will examine the various approaches taken by BRICS countries in response to the COVID-19 pandemic, focusing on whether their measures are clear, coherent, and coordinated. Lockdown measures, health measures, and economic measures will be compared across these countries in order to gain an understanding of how they have managed to contain the disease and handle the dis-ease experienced by their people.

Brazil

Brazil, being one of the BRICS countries, has faced challenges in the healthcare system due to its devastating loss of life and a shortage of healthcare resources. (Armijo 2007:17-23). Brazil, despite being one of the leading pillars in multilateral negotiations, faced a severe crisis during the pandemic. The country struggled to control the virus's spread, leading to a massive loss of life and a healthcare system that was overburdened. The pandemic's economic impact was also severe, affecting industries such as tourism and hospitality, which are vital to the Brazilian economy.

Lockdown Measures

In terms of similarities, all BRICS countries attempted to implement strict lockdown measures as a means to slowly contain the spreading virus and to protect the most vulnerable. As such, these governments also encouraged the use of masks and social distancing to prevent the spread of the virus. In Brazil, there was a focus on clear and concise evidence-based communication to the public, while in Russia, the government introduced a digital pass system and QR codes to ensure compliance with lockdown measures. However, there were also differences in their approaches, Brazil placed more emphasis on primary care response and surveillance strategies in certain areas, Brazil also faced challenges in maintaining social distancing due to a high number of people unable to work from home. This is because many Brazilians work in jobs that require physical presence, such as informal labour and service industries. These jobs often pay low wages and do not offer the option of remote work. As a result, many workers continued to go to work during the pandemic, increasing their risk of exposure to the virus. Additionally, some Brazilians rely on public transportation to get to work, which also increases the risk of exposure to the virus.

Economic measures

Brazil focused on supporting vulnerable populations by allocating a large amount of funding from public and central banks, loosening fiscal targets, and simplifying custom clearance for imported goods. Additionally, the Brazilian government loosened labour laws, reduced taxes and contributions, and provided financial support to the airline industry (Cotta, Naveira-Cotta and Magal 2020:220). This was done to help mitigate the economic impact of the pandemic on workers and businesses. These measures were aimed at supporting the most vulnerable populations, including informal and self-employed workers, and preventing widespread unemployment. The financial support provided to the airline industry was necessary to help prevent the collapse of the industry, which could have further negative economic impacts on the country. Additionally, the government aimed to maintain the fast flow of goods, commodities, and raw materials by simplifying and accelerating customs clearance of various imported goods to combat the pandemic. Moreover, Brazil focused on supporting vulnerable populations and maintaining jobs.

Health measures

The government of Brazil maintained the following health measures at the beginning of the outbreak, routine hand washing and sanitizing, the use of facemasks and social distancing in order to prevent close contact and virus transmission. Non-pharmaceutical interventions need to be looked at across the states, and the social assistance programs need a better target approach in order to meet the various needs of the vulnerable populations (Moodley, Obasa and London 2020:1-2). Brazil maintained these measures from the beginning of the outbreak, while Russia only implemented them during the first and second waves of the pandemic. Brazil recognized the need for a better-targeted approach to social assistance programs to meet the needs of vulnerable populations as such many people would be easily infected which was a slight oversight issue on the country's health

measures. The health system in Brazil took measures to increase testing in order to ensure the progressive monitoring of the epidemic spread. Contact tracing was also implemented to isolate patients with COVID-19 in designated health facilities or within their home space. (Cotta, Naveira-Cotta and Magal 2020:220)

Russia

In contrast, Russia has established a unified federal headquarters to monitor and prevent the disease's spread, which is responsible for coordinating work that would help the government. (Konarasinghe 2020:13). Russia, on the other hand, established a unified federal headquarters to prevent the spread of the virus, which has been successful in monitoring the situation and providing recommendations to state bodies. The country also closed down travel channels from foreign nations, including China, to prevent the virus's spread. The political sensitivity of the constitutional referendum in Russia also posed challenges for the government to contain the virus.

Lockdown measures

On March 10th, Moscow's mayor, Sergei Sobyenin signed a decree, which banned the people of Russia from participating in events with a maximum capacity of 500 participants. This decree also suggested the sort of management that will be undertaken in the quest to encourage social distancing. The Russian government introduced a digital pass system and QR codes to ensure compliance with lockdown measures. Russia, there was a focus on a centralized federal headquarters to coordinate efforts across the country. Moreover, Russia, the government faced backlash over its handling of the pandemic and the distribution of vaccines. Despite Russia being one of the first countries to develop a COVID-19 vaccine, Sputnik V, the distribution of the vaccine was slow, with reports of shortages and delays in delivery (KPMG 2020). Moreover, there were concerns about the transparency of data related to COVID-19 cases and deaths in Russia, with some experts suggesting that the official numbers may be lower than the actual figures.

Economic measures

In contrast, Russia's economy was destabilized by the significant drop in global hydrocarbon demand and the price war between Saudi Arabia and Russia. To address this, the Russian government implemented macro-fiscal stabilization efforts, banking sector clean-up, enhanced regulation and supervision, and promoted economic diversification. The Russian government also sought to level the playing field for different private sector organizations to boost potential growth. To boost potential growth as part of their efforts to promote economic diversification. Russia's heavy reliance on the energy sector makes its economy vulnerable to fluctuations in global oil prices, which can have a significant impact on its overall economic stability. To mitigate this vulnerability, the Russian government has been working to diversify the economy and create opportunities for growth in other sectors. By levelling the playing field for different private sector organizations, the government aims to create a more competitive business environment, which can encourage innovation and investment in new areas, ultimately leading to increased economic growth and stability (Aslund 2020:536). Moreover, Russia undertook significant macro-fiscal stabilization efforts to improve its fiscal position and promote economic diversification.

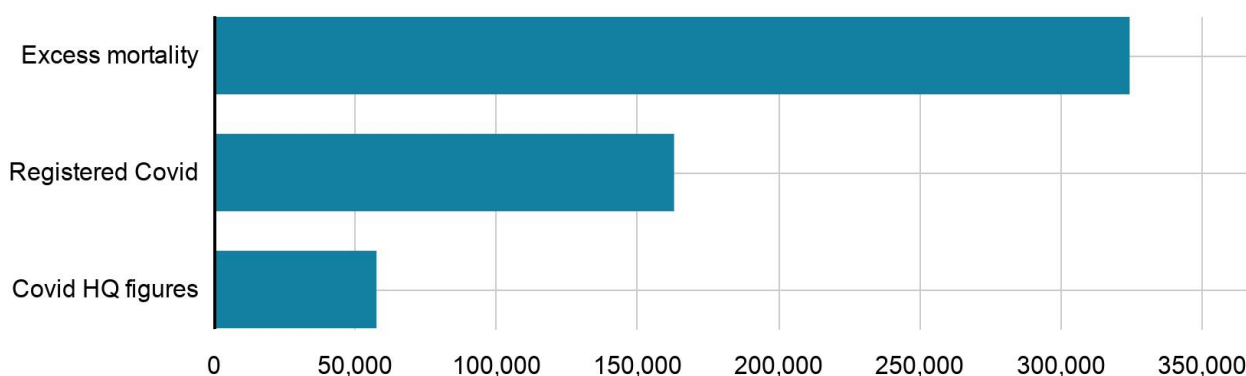
Health measures

Russia emphasized routine hand washing and sanitizing, the use of facemasks, and social distancing in order to prevent close contact and virus transmission. Russia increased testing to 2200 per day, implemented contact tracing to isolate patients with COVID-19, and distributed PPE equipment

and ventilators for intensive care units. The health system also took measures to strengthen disease surveillance systems and increased testing to ensure progressive monitoring of the epidemic spread. Contact tracing was used to isolate patients with COVID-19 in designated health facilities or within their homes. The government distributed personal protective equipment (PPE) and ventilators for intensive care units. These measures aimed to control the spread of the virus and prevent large death tolls.

Figure 4: Death rates in Russia

Deaths in Russia in 2020



Source: Rosstat and Government Covid HQ

BBC

Source: BBC 2021

India

Compared to other BRICS countries, India faced a significant challenge in reporting and managing the COVID-19 pandemic. The first case of COVID-19 was reported in India on 30 January 2020, and the number of cases continued to increase during the second wave of the pandemic. However, official statistics in India have been a challenge for doctors due to political pressure to downplay the severity of the pandemic. This made it difficult for healthcare workers to accurately report and manage the pandemic in the country.

Lockdown measures

India has reported 16 million COVID-19 infections, though the actual number of cases is likely much higher due to challenges in accurately reporting cases. India implemented a strict national lockdown in March 2020 to curb the spread of the virus, but this had significant economic impacts, particularly on migrant workers and the unorganised sector. Job losses were concentrated mainly in the agricultural and construction sectors, affecting those who rely on daily wages. The government outlined economic packages for the unorganised sector, but with few benefits and several conditionalities. (Sridhar 2020). According to the 2018 Periodical Labour Force Survey, compared to other BRICS countries, India's measures to combat COVID-19, such as social distancing and effective hygiene practices, aimed to flatten the curve and reduce the number of infected individuals. However, this approach may prolong the time it takes to return to normalcy. The challenges in accurately reporting cases and the economic impacts of the lockdown have been major issues in India's response to the pandemic. Temporary measures used to limit and delay COVID-19 infection rates through confinement and social distancing measures may have immediate health benefits, but also have various effects on health (Thiagarajan 2021:20).

Economic measures

According to the International Monetary Fund the Indian government implemented several measures to curb the spread of COVID-19, including a ban on selected food products like betel leaf and betel nut. In addition, imports of luxury vehicles and motorbikes were suspended. As economic activities gradually resumed, the government announced relaxation measures for non-hotspot areas, with nodal authorities managing migrant workers. Some geographic areas were designated as orange zones, indicating a reduced severity of the virus, and allowing for graded relaxations in economic activities (IMF Policy Response Report 2020:5-6). However, entertainment areas like cinemas, theaters, and festivals remained closed for eight months and were only allowed to operate at 50 percent of their seating capacity. While these measures helped to control the spread of the virus, they had unintended consequences, both positive and negative, such as increased pollution, more time spent with family, and income and job losses. The long-lasting effects on the economy and the well-being of the people will likely be felt for a long time and pose indirect risks to health systems (Worldometer 2020). Compared to other BRICS countries, India's economic measures included both specific bans on certain products and targeted relaxation measures for non-hotspot areas, while entertainment areas remained closed for an extended period (BBC 2020).

Health measures

In comparison to other BRICS countries, India implemented routine health measures such as hand washing, sanitizing, and the use of facemasks to prevent the transmission of the virus. However, testing was limited, and a significant number of people who were tested were admitted to hospitals, which contributed to the surge in cases. While the first lockdown helped to reduce transmission rates, it was only a temporary measure, according to a report by the International Justice of Infectious Diseases. The authors recommended ramping up testing and self-isolation to prevent secondary infections (Chaudhary, Sodani and Das 2020: 169-172). India has the largest pharmaceutical manufacturing capacities in the world and has contributed to vaccinating one billion people in 278 days, according to the BBC. The Serum Institute of India launched a vaccination campaign in March 2021, beginning with essential workers and leading political members before expanding to the general elderly population. However, the healthcare system in India, which is largely privatized, has struggled to provide adequate support for its people, contributing to the drastic spiral of COVID-19 cases in the country.

In contrast, other BRICS countries have implemented various health measures to manage the pandemic (BBC, 2020). Brazil, for instance, provided free healthcare services and conducted a significant number of tests to detect the virus. Russia has developed a vaccine and implemented strict measures such as mandatory mask-wearing, while China, which was the first country to be hit by the virus, implemented strict lockdowns and mass testing. South Africa has ramped up testing, implemented strict lockdown measures, and provided healthcare services to those in need (Thiagarajan 2021:22).

China

China was the first country to experience the COVID-19 pandemic, and the government took immediate and strict measures to control its spread. The Chinese government implemented a quick quarantine in Wuhan, which was the epicentre of the pandemic. Hubei, the province in which Wuhan is located, was put under strict lockdown to prevent the spread of the disease across the mainland and beyond. China mobilized its resources to strengthen the support to the people affected by the pandemic (Sokhey 2021:2).

Lockdown measures

The Chinese people showed great support towards the government, following the guidance and restrictions that were outlined. Communication was one of many string suites highlighted by the Chinese government. People were well informed every day on the life changing dynamics of this pandemic and the different efforts taken by the government to resolve this crisis. With the government's efforts yielding great response, the people's confidence in the government anchored the government exceptionally well. (Thiagarajan 2021:24). China isolated people by closing off cities and regions, while maintaining the free and essential flow of medical supplies. Moreover, Hubei province, the epicentre of the outbreak, boosted its treatment capacity by receiving 346 medical teams and 42,000 medical staff from other provinces. China implemented lockdown measures in response to the COVID-19 pandemic, China's measures were more successful in controlling the spread of the virus. South Africa faced challenges with enforcing the restrictions and addressing socio-economic factors that hindered compliance, and the vaccine rollout has been slower than desired (Biswas, Majumder and Dawn 2021:279). China's counter-epidemic approaches and measures have proven to be successful measure. This is because the rates of infections only peaked early during the rise of this pandemic, but later subsided. By 23 March 2020, the domestic transmission of this deadly virus had been blocked, this was noted by a statement released written by Premier Li Keqiang. To date, China has begun an orderly resumption of the working environment, as well as the production section, while establishing measures that can prevent a domestic rebound in the number of infections as well as imported cases.

Economic measures

In China, government-led investments and global demand for Chinese goods were the contributing factors to economic restoration. The government also allocated close to \$99.5 billion for epidemic prevention and subsidy control, which helped in maintaining economic recovery. However, the hospitality and transportation sector experienced critical restrictions and productivity levels. The government-maintained efforts to keep consumption levels below pre-pandemic levels (Ayonumbi 2021). China focused on the importance of investments in their respective economies. China concentrated on maintaining economic recovery through government-led investments and global demand for goods. However, the hospitality and transportation sector has experienced critical restrictions and productivity levels. On 23 February 2021, the Ministry of Finance in Yuan allocated close US\$99.5 billion for epidemic prevention and subsidy control. These economic approaches have assisted in maintaining economic recovery in China to date (Ayonumbi 2021).

Health measures

China's response to the COVID-19 pandemic was characterized by its speed and efficiency in implementing various measures to prevent and control the spread of the virus. One of the measures implemented was temperature screening at public places such as airports, train stations, and other transportation hubs, which helped to detect individuals with fever, a common symptom of COVID-19. The Chinese government established specialized hospitals with advanced medical facilities and also carried out large-scale screening and testing efforts in a bid to identify all those affected. The government's structures maintained solidarity and transparency, enabling the effective implementation of anti-epidemic measures and the availability of essential items. China has also vaccinated a significantly larger proportion of its population, with 700 million people already vaccinated, as part of its quest to prevent further infections. As a result of these efforts, China emerged as a leader in controlling the growing number of COVID-19 cases during the first few months of the outbreak. After six months, the country had registered 83,221 reports of COVID-19 cases, ranking 19th globally. Additionally, close to 78,377 recoveries were recorded, which translates

to a recovery rate of 94 percent (Worldometer, 2020). The Wuhan Houshen Mountain Hospital was one of two hospitals that received a 300 million allocation to treat patients with COVID-19, and hospitals also used the funds to purchase essential medical equipment and provide facilities for centralized treatments (Ayonumbi 2021).

South Africa

South Africa, one of Africa's leading markets, responded swiftly and aggressively to the crisis. Since March 2020, the South African government has introduced unprecedented measures that may encourage effective measures to assist South Africa in the quest to improve COVID-19 circumstances. This includes the implementation of a nationwide lockdown, precocious safety measures, and emancipation from various physical economic activities. Additionally, South Africa has spearheaded an international alliance for the effective distribution of vaccines across Africa (Popkova, DeLo and Sergi 2021:104).

Lockdown measures

South Africa implemented a nationwide lockdown on March 27, 2020, which was one of the strictest in the world. The lockdown consisted of five levels, with level five being the most restrictive and level one being the least. During level five, only essential workers were allowed to leave their homes, and all non-essential businesses and activities were closed. The government also implemented a curfew from 9 pm to 5 am, and all gatherings, including religious gatherings, were banned. As the number of cases began to decrease, the government gradually lifted the restrictions and moved to lower levels. However, the lockdown measures in South Africa were not as successful as those in Russia and China. Moreover, there were also challenges enforcing the lockdown measures and addressing socio-economic factors that made it difficult for people to comply with the restrictions. Additionally, there were reports of corruption and mismanagement of funds allocated for COVID-19 relief efforts, which further hindered the country's response. (BBC 2020). South Africa has been working to secure vaccines and has spearheaded an international alliance for the effective distribution of vaccines across Africa. The country has administered over 5 million vaccine doses as of April 2021, but the rollout has been slower than desired due to supply constraints and logistical challenges (BBC 2020).

Economic measures

On the other hand, in South Africa, the government implemented a recovery plan that focuses on employment-oriented strategic localization, reindustrialization and export promotion, energy security, reduce youth unemployment, and green economy interventions. The government provided loans at 0.2 percent to assist firms and organizations that were starting new businesses. This benefited the introduction of SMMEs in the South African value chain economy. The government established an Agricultural Disaster Support Fund for smallholder and communal farmers, which aimed to prevent any cases of food insecurity (Kanu 2020:27). South Africa prioritized infrastructure led economic reconstruction and recovery with investment in infrastructure that would stimulate various sectors of the economy. (Sarkodie and Adams 2020:100-105). The South African government established an Agricultural Disaster Support Fund for smallholder and communal farmers. This fund sought to assist farmers who had already been farming for at least 12 months, farming on Vegetation, livestock or poultry were amongst the many funded projects in order to prevent any cases of food insecurity. Support for the local beneficiation of minerals, the building of minerals value chains and strengthening broad-based industrialization is one of the key measures taken by the government (Kanu 2020:28).

Health measures

When examining the impact of various intervention measures on the outbreak dynamics in South Africa, it becomes clear that the country experienced the highest number of cases in sub-Saharan Africa both before and after the national lockdown was implemented. Similar health measures were implemented in South Africa to prevent the spread of COVID-19, including routine hand washing and sanitizing, the use of facemasks, and social distancing. The country's medical industry established specialized medical facilities to treat infected individuals and provided a comparatively high capacity of intensive care units to respond to the outbreak. The government also distributed large amounts of personal protective equipment to healthcare workers and scaled up the testing process, while also launching awareness campaigns and implementing infection prevention and control measures. Decontamination and disinfection of contaminated areas were also made top priorities during the pandemic (Kanu 2020:33). Despite these efforts, South Africa faced challenges related to its healthcare infrastructure and limited resources. The shortage of healthcare workers and personal protective equipment proved to be a significant challenge, despite efforts to scale up testing and establish additional medical facilities. Nevertheless, the country did provide a high capacity of intensive care units and embarked on awareness campaigns and infection prevention and control measures.

Conclusion

This cooperative effort between all BRICS countries has respected the use of bilateral and multilateral discussions. The current COVID-19 pandemic and the global impacts that arise from its proximity, are ones that can remain a reminder of the potential determinants of various emerging infectious diseases. Fortunately, the world today (governments and health institutions) has gradually equipped itself to confront the pandemic, which has infiltrated health systems and communities across the world. COVID-19 is undoubtedly a pandemic; humans are currently living in an era that poses immense uncertainty and an unprecedented global health crisis. BRICS countries have attempted to secure new prospects amidst change, they've done so by collective research and maintaining global solidarity in addressing existing government deficits. Moreover, they seek to tackle the existing common challenges: health, economic, unemployment, and negative variations of GDP. The paper used a comparative methodology in order to understand the different efforts taken by the different countries in order to curb this crisis. Additionally, the paper effectively outlined the background of the crisis and who the BRICS member states are and what their roles in their respective countries are and as a unit. The paper has applied the term dis-ease as an approach to understand the uneasiness experienced by people across the world, more specifically those in BRICS countries. The recommendations that follow, simply acknowledge that which has already been used or done in order to better the pandemic and provide further measures and approaches to add on to existing frameworks and approaches. Although it remains a challenge to foresee the final outcomes of this pandemic, a new chapter in the history of infectious diseases has been established and continues to write itself until the vision of conquering this pandemic becomes a reality.

BRICS countries have actively worked towards sustainable methods to improve how they assist their people. While it is commendable that BRICS countries have prioritized positive mental health, education, economic expansion, and political integration during the pandemic, it is important to critically examine the effectiveness of their efforts. As such one can deduce that these countries were ready for health and economic change but lacked in most lock down measures. Some scholars would even suggest improvement for BRICS governments to provide online resources that allow for engagement with active advice and general practitioners. This can aid frontline workers in identifying individual risks, including mental and physical health issues such as loneliness, and provide different options for treatment and referrals.

In response to the COVID-19 pandemic, BRICS countries have been focused on improving their public service delivery measures. To achieve positive mental health, education, economic expansion, and political integration, each government should prioritize the following recommendations:

- BRICS countries should provide online resources that offer active advice and engagement with general practitioners. This will help frontline workers to identify people's individual risks and provide appropriate treatment and referrals for issues arising from loneliness or mental health concerns other measures, such as renewing prescriptions, offering telemedicine consultations, and establishing continuity of psychological and psychiatric treatment measures where applicable, should also be considered. (Dash D, Sethi and Dash 2021:101).
- BRICS Governments should have implemented a short and effective quarantine measure that does not impose undue economic strain. This is particularly important for underdeveloped countries, as economic growth and prosperity are closely linked to education and production industries (Chaudhary, Sodani and Das 2020: 172).
- It is essential to provide people with as much information as possible about COVID-19. Governments should dominate media and social conversations with accurate and up-to-date information. Effective communication strategies are critical for preparing and responding to the pandemic.
- Government departments that oversee Adequate supplies of medical materials should be provided to support healthcare workers and their essential services. Special attention should be paid to the psychological well-being of healthcare workers.
- When possible, rely on approaches that encourage altruism rather than compulsion. This will help to create a more cooperative and supportive environment for public service delivery during the pandemic.

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