

**New
Internationalist**



Coronavirus and the world

New Internationalist Intermediate + Ready Lesson

This lesson:

- Dictation
- Vocabulary
- Reading
- Discussion
- Writing



First, a dictation – about coronavirus in Sierra Leone

(leave spaces for anything you can't write)

Now check what you've written:

In early April, Sierra Leone had its first case of coronavirus, one of the last countries in the world. A low-income country, it has little intensive care, with only 18 ventilators and a population of six million. Most of the population cannot afford to 'stay at home' or observe social distance.

If many people get Covid-19, it will be terrible. So Sierra Leone is testing, tracing and isolating to try to keep people out of hospitals. Borders and the airport are closed, and there are short lockdowns for the whole country.

Sierra Leone is still in the early stages of the pandemic. When someone tests positive, they go into quarantine. If they have no symptoms, they go to community care centres – that were used for Ebola – because it's impossible to self-isolate in most homes. If they get sick, they go to isolation wards in hospital, then to Covid-19 treatment centres.

Because of this quick action, so far the number of cases and deaths is low. But infections are rising. We speak to a market trader, a junior doctor, a community activist and an aid worker about Sierra Leone's fight against Covid-19 – and the great challenge of fighting a virus without the drugs to treat it.

How many words do you know related to coronavirus? – can you explain what these mean?

pandemic

intensive care

virus

to trace

quarantine

to isolate

social distancing

lockdown

ventilator

sanitiser

Match:

1/ pandemic

2/ virus

3/ quarantine

4/ social distancing

5/ ventilator

6/ intensive care

7/ to trace

8/ to isolate

9/ lockdown

10/ sanitiser

a) A machine to help you breath artificially

b) To find someone you need from information

c) A set time to stay at home or alone eg. 2 weeks

d) To make someone stay alone

e) Chemical hand-wash

f) The section of a hospital that looks after people who are dangerously ill

g) A time of emergency when people must not leave an area eg. their home

h) Keeping a physical distance between people eg. 2 metres

i) An infectious disease

j) A disease you can find over a whole country or the world

KEY:

1/ pandemic j

2/ virus i

3/ quarantine c

4/ social distancing h

5/ ventilator a

6/ intensive care f

7/ to trace b

8/ to isolate d

9/ lockdown g

10/ sanitiser e

a) A machine to help you breath artificially

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Read these 5 short texts, 4 about Sierra Leone and 1 about Brazil, and match the ideas:

a) Theresa the flip-flop seller

b) Marta, Chief Medical Officer

c) Mohamed, activist

d) Mamadu, doctor

e) People in Brazil

1/ Many people don't wear masks or social distance because they don't trust the government

2/ People steal if they don't have food and police beat people who go out

3/ Rich people brought coronavirus, but poor people suffer far more from it

4/ Charity money has meant that coronavirus medicines are free

5/ They just don't have enough basic resources and have to rely on donations

a) **FLIP-FLOP SELLER** *Theresa Jusu is a 31-year-old market trader from Koindu, Sierra Leone, on the border with Guinea and Liberia.*

Since coronavirus, the government closed the border markets. People like me who live on the border make money by selling at the markets, and Sunday was our market day. People travelled far to come to the busy Koindu market.

The Guineans sold pepper and onions, cows' milk and textiles. You could buy greens, potato leaves, cassava leaves; I sold clothes and flip-flops, maybe 10 a day.

Now people only want to buy food. So, I sell rice and oil at the local market. I get it on credit from shopkeepers, sell it and keep any profit. But sometimes I sell nothing.

With my money, I support my four children and my younger sister and her child, who are living with me. Before, we would eat two meals a day – breakfast and dinner – now only one.

People are scared of the coronavirus in Koindu, because of Ebola. But we understand now that people are surviving – they go into 14-day quarantine and then they come home. With Ebola, they never came back.

Because of Ebola, we know how to protect ourselves. At the market, there are handwashing places, some people have sanitizer. And they were giving out African-made masks for free. I got one, but there were not enough for everyone.

There have just been short lockdowns so far. If people are hungry, they start stealing food from houses. And if you go out, the police will beat you. Sierra Leone doesn't have the economy to pay people, but at least the government should give them something to eat.

b) **INFECTIOUS DISEASES SPECIALIST** *Marta Lado is the Spanish Chief Medical Officer at the NGO Partners in Health, now at 34 Military Hospital in Freetown.*

The response to Covid-19 was fast, and it was easy because of our experience with Ebola. We knew how to manage a crisis. But just because we had Ebola doesn't mean we can deal with any pandemic. The problem is that in a poor country without resources you can never really be 'ready'.

In Europe, hospitals had too many people. But they had a system. Our health system is weak. In 34 Military Hospital we have 10 ventilators. But to put someone on a ventilator, you need to sedate them first. We don't have sedation drugs, we don't have an intensive care specialist or specialized nurses and we don't have enough nurses to look after a patient on a mechanical ventilator. But before that, the thing that will kill the patient is probably the lack of insulin, antibiotics or steroids – or even intravenous cannulas. So – what can I do with a ventilator?

We have no basics. Most of the hospitals here don't have oxygen. They might not even have running water, or electricity to be open for 24 hours. Patients need to pay for their own medication to treat common conditions. Now, if you add Covid...

We are dealing with it, but people have to fight to get things: doctors buy drugs for their patients, friends with private pharmacies donate drugs, the Lebanese community gives us cylinders for oxygen, the Indian community pays for some medication. We have to beg for help because the country doesn't don't have the money to buy these things.

I'm not blaming anyone. But we need to see that Sierra Leone doesn't have the money. Later, when this is over, we have to think about how to improve the basics so next time this happens we don't have no resources.

c) **COMMUNITY ADVOCATE** *Mohamed Camara is an activist and On Our Radar reporter from Magazine Wharf slum community in Freetown.*

In my community, houses are close together. Social distancing would be a very difficult. Often seven or eight people live together in one small room. We are close, we see each other as family and we share what we have. So far, we've had no cases in Magazine. But if there is a Covid-19 case in our community it will spread like a fire in the Amazon. We had one of the worst outbreaks of Ebola here, and we were the last area to be 'Ebola-free'.

This environment is not safe and not hygienic – that's how I got polio as a child. Drains from Freetown empty out into Magazine Wharf; it's muddy, people raise pigs in the rubbish. In the rainy season, it's flooded, and this can cause cholera.

The three-day lockdown was a bit crazy here because people need the money they earn each day. The government just does things without helping. If there's a total lockdown, there will be chaos if people have no way to survive. We also had 14 days of restricted movement. Most people make a living from small trade, fishing or cutting firewood so it's very difficult for them if you stop them moving. And food prices are going up a lot.

People are suspicious – that's another problem. They aren't often wearing masks and social distancing because they don't trust the government. People are saying that each president brings a virus: first Kabbah: HIV, Koroma: Ebola, now Julius Bio has come with coronavirus. They think the government wants to get rich, not to protect them. When the election comes, they say, we will vote these guys out.

d) **JUNIOR DOCTOR** *Mamadu Baldeh is head of the Infectious Diseases Unit at Connaught Hospital, Sierra Leone*

We have 10 beds in the Infectious Diseases Unit. This is our isolation ward. So, we try to work quickly: test people, send them to treatment centres or the general ward, then send them home.

We don't have too many Covid-19 cases yet. But work is hectic. In one day, I see about 10 new patients, and send 10 more patients away. Everything has to move fast and everyone is very tired - at the beginning I was even sleeping at the hospital.

Now there are two more doctors with me, and we work on rotation. My facility is full now, - but if more patients come in, we might need another isolation facility. Ours is already the biggest isolation ward in Sierra Leone. We have some Protective Personal Equipment (PPE) but sometimes not enough eg. boots or gloves.

Until now, we have lost 11 people to Covid-19 in my unit. At first, people were dying because they didn't have money to pay for their medication. Since then a Sierra Leonean journalist called Vickie Remoe has raised money through a public campaign and - thank God - Covid medicines are free to patients.

But donations can't fix everything. Right now, you see ambulances everywhere. Now we have oxygen. We need to make sure they don't disappear after Covid.

We need a national effort, to improve all aspects of the health sector: resources, budget, staff. Many Sierra Leonean doctors who train here leave in frustration. But I trained in Venezuela and I saw the dedication of the Cuban doctors who do so much with few resources. And then I came back to serve.

e) Coronavirus in Brazil

Four things in the news on the same day:

- 1) Brazil's Ministry of Health said on 6 May that Brazil had 8,536 deaths from Covid-19. It was probably a lot more. But most victims were poor people from big cities.
- 2) The Brazilian Institute of Geography and Statistics (IBGE) wrote that the richest 1 per cent of the population earned 33 times more than the poorest 50 per cent in 2019.
- 3) The mayor of Belém, capital of Pará state, said that the jobs of domestic workers were 'essential' during the pandemic, so employers could call them back to work before the end of quarantine.
- 4) Brazilians heard that many more rich patients were demanding flights with intensive care facilities (ICU). The rich wanted to leave Belém, with a weak local health system, and fly to São Paulo and Brasília. In the North of Brazil – where Belém is – the average monthly income of the poorest half of the population is \$107. To pay for a flying ICU from Belém to Brasília costs over \$6,794. This is 63 months' wages of the poorest half of the population.

In 2016, the public health system was already bad. Unions said that Congress should spend more on public health. Some people said they should tax rich people to get money for public health, but the rich laughed at this idea. Now the rich fly to other cities because the health system is so bad, and poor people die. And how did the poor get the virus? The first person to die of Covid-19 in Rio de Janeiro was a domestic worker who travelled 120 kilometres a week to the house where she worked in rich Leblon. Her employer had been to Italy and was waiting for the result of a coronavirus test – it was positive. The employer did not tell her that she thought she had Covid-19. When inequality is so deep, it is difficult for people to see that others are equal to them. People think the government exists to serve the rich and control the poor.

Many people say that President Jair Bolsonaro is one of the world's worst leaders at fighting the Covid-19 pandemic. He calls it a 'little flu' and 'a fantasy'. When the number of dead reached 10,000 on 9 May, the President said he was going to have a barbecue with guests. People said he was insensitive, so he went for a jet ski ride.

KEY:

- a) Theresa the flip-flop seller 2
- b) Marta, Chief Medical Officer 5
- c) Mohamed, activist 1
- d) Mamadu, doctor 4
- e) People in Brazil 3

- 1/ Many people don't wear masks or social distance because they don't trust the government
- 2/ People steal if they don't have food and police beat people who go out
- 3/ Rich people brought coronavirus, but poor people suffer far more from it
- 4/ Charity money has meant that coronavirus medicines are free
- 5/ They just don't have enough basic resources and have to rely on donations

Speaking:

1. What is your experience of coronavirus? And people in your country?
2. What have been the main negatives?
3. Have there been any positives?

Writing:

Read the 5 articles again and then write a similar short article, called:

‘Coronavirus in the UK’ or ‘Coronavirus in xxxxx (your country)’

- 120 – 180 words
- Check your grammar, spelling and punctuation
- Make it interesting!

Follow-up

Read the original (more difficult) versions of the articles:

- <https://newint.org/features/2020/06/11/feature-first-ebola-then-covid-19>
- <https://newint.org/features/2020/06/11/view-brazil>

And choose more simple articles to read from:

<https://eewiki.newint.org/>

and click on the link at the bottom to read the original articles too

