Coronavirus in Tunisia: Navigating Through the Crisis
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In late December 2019, China began reporting cases of unknown pneumonia in the city of Wuhan. Within a few days, Chinese researchers stated that they identified a new virus, which is part of the coronavirus family. The World Health Organization named the virus COVID-19 and in March declared the outbreak a pandemic. Today, the virus has spread to more than 170 countries, killing around 300 thousand people and infecting approximately 4 million. So far more than 1.5 million patients have recovered worldwide.

The Middle East and North Africa has not been spared by the pandemic. While the region already faces multiple challenges, including conflict, economic crisis, political tensions and crumbling health systems, the pandemic is only going to ramp up the existing difficulties. Thus, under such challenging circumstances, addressing the pandemic will certainly be a daunting test in many countries.

Tunisia is among the countries in the region that have been affected by the pandemic. Despite the fact that the number of people who have contracted the virus remains relatively low in comparison with the other countries in the region, the government has been introducing new measures on an almost daily basis to contain its spread.

This info pack examines the responses taken by the government to manage the coronavirus crisis. While it evaluates the new challenges created by the pandemic, particularly with regards to the economy and healthcare system, it also looks at the possible impact on the political situation in the country.
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A proactive response to the crisis

The new coalition government found itself amid an unprecedented crisis the same week after winning a parliamentary vote of confidence as the first coronavirus case in the country was confirmed on 2 March, after a Tunisian citizen tested positive upon his return from Italy.

Following the developments in other countries’ closely and, more importantly, being well aware of the limitations of the public healthcare system in the country, Tunisia’s leadership has opted for a proactive approach in an effort to halt the spread of the virus.

Since late January, incoming passengers have been subject to health screening at the borders with thermal cameras and have been asked to self-quarantine. However, because most of the people who were diagnosed with the virus were coming from abroad, by mid-March Prime Minister Elyas Fakhfakh announced the suspension of all international flights and sealed the country’s national borders with the exception of repatriation flights. Fakhfakh also closed down schools, restaurants, and mosques, banned public gatherings, and postponed all cultural and sporting events.

In addition to these gradual steps, an overnight curfew was introduced as a complementary measure. Moreover, after the confirmation of first death in the country, on 20 March, President Kais Saied announced a total lockdown would be put in place. Asking citizens to remain in their homes unless in cases of extreme necessity, he also tasked the armed forces to take to the streets to ensure that citizens comply with the order.

After more than a month, as of May 4, Tunisian government has announced the partial lifting of the lockdown in three phases due to their success in containing the spread of the disease. However, Minister of Health stated that if there would be a second wave of infections, a total lockdown would be resumed again and obliged citizens to wear masks and comply with social distancing.

As of this writing, according to official figures, there are 1,032 confirmed cases of Covid-19 in the country with the Tunis region taking the lead. While the virus has killed 45 people, so far 740 Tunisians have recovered.

A healthcare system in need of reform

The main reason behind the country’s quick and strict measures in response to the crisis was to reduce the flow of patients in an effort to avoid overwhelming hospitals. Tunisia not only suffers from an aging health infrastructure, but a lack of medical equipment is also a grave concern.

As of mid-March, there were 331 intensive care beds in the country, meaning that there are only 3 beds available for every 100,000 citizens. That being said, public health authorities are working to increase the hospital capacity. For example, field hospitals have been set up and retired doctors hired to treat the patients in an effort to overcome this problem. This also demonstrates the acute shortage of medical personnel. Thus, if the current number of medical staff who have been contaminated by the virus increases with reduced ability to provide treatment the situation could significantly worsen.

Another problem is the huge disparity between the country’s coastal and interior regions. While the public healthcare services suffer from a lack of equipment and poor infrastructure in big cities, the situation is more dire in the interior of the country. For example, the governorates which are situated in the interior of the country do not possess any intensive care units.

That being said, while the number of patients who are infected is relatively low and concentrated in the coastal areas, the real number could be higher due to a lack of extensive testing capacities. For example, during the month of
March, less than 5000 tests were carried out and only conducted on those coming from abroad. If tests came back positive, contact tracing would be conducted. To solve this problem, the Ministry of Health recently announced that over 500,000 rapid testing kits would be available in the country. The ministry also stated that more laboratories would be opened to increase capacity to analyse test results and overcome geographical proximity. As of now, not only people with symptoms but also people who have potentially come in contact with the infected are being tested.

Financing pre-existing deficiencies, which have been brought to the forefront by the crisis, is another crucial issue. Currently, the Ministry of Health receives around 7 percent of the national budget ($166 billion), two-thirds of which are allocated to salaries. Since the ministry does not have the means to acquire new medical equipment, the government set up a voluntary donation fund. So far, donations have reached more than 190 million dinars (approximately $60 million) to be spent on acquiring necessary supplies such as intensive care beds, respirators, and ventilators. Even though this amount may not create a significant difference, it will none-the-less provide some sense of relief.

Adopting a strategy of anticipation and transparency, the Ministry of Health has also been giving press conferences almost on a daily basis to raise awareness and to inform citizens. All in all, being aware of the limitations within the healthcare system, Tunisians are, to a large extent, supportive of the public healthcare measures taken by the government. According to a recent poll, the approval ratings of both Prime Minister and Health Minister have risen considerably among the citizens.
Pushing the limits of a struggling economy

The Tunisian economy is already in a dire situation due to persistent problems with an unemployment rate of 15 percent, poverty, regional inequalities, and a soaring foreign public debt that was around 80 percent of the GDP before the crisis. Like elsewhere, the coronavirus pandemic has exacerbated existing economic and financial pressures, with the economy being effectively shut down due to the general lockdown.

In early March, Prime Minister Fakhfakh stated that they are expecting the growth rate to fall from 2.7 percent to 1 percent for this year due to the pandemic. However, after the latest developments, the International Monetary Fund (IMF) anticipates a far graver picture with a contraction of 4.3 percent.

In a bid to mitigate the socioeconomic repercussions of the pandemic, Prime Minister Fakhfakh announced a relief fund of 2.5 billion dinars ($850 million). Almost half of the funds have been allocated as emergency loans for companies to keep businesses running while tax debts and payments have also been postponed.

The measures also include a monthly financial assistance of 200 dinars ($60 dollars) to the families in need and those who lost their jobs, along with the distribution of food packages that will continue to be delivered until the end of the month of Ramadan. Electricity, water, and telephone lines will also keep operating even if the bills cannot be paid by residents.

Daily wage earners and those working in the informal sector are affected the most as a result of the lockdown. According to the data of the International Labor Organisation (ILO) the informal sector covers almost half of the workforce in the country. Under lockdown, these people are left with no means to provide for their families. Resulting tensions have led to protests in different parts of the country as people gathered in front of their local government offices demanding the distribution of the promised financial aid, chanting that if they will not die from the virus, they will die from hunger.

The private sector is also struggling to cope with the crisis. According to the Tunisian Union of Industry, Commerce,
and Handicrafts (UTICA), around 60 percent of companies will not be able to pay the salaries of their employees in May, and if the situation continues the number is expected to increase up to 80 percent in the following months. To support the companies, the Ministry of Social Affairs pledged to pay 200 dinars from the salaries of the employees for April.

While the state has been making an effort to alleviate some of the financial burden faced by Tunisians, questions remain regarding how the government will be able to continue to finance this costly process. In all likelihood, the country will inevitably have to turn to external sources of support in order to handle the situation.

So far, the International Monetary Fund (IMF) has already approved a $745 million emergency loan to Tunisia along with the European Union, which also granted $273 million. In addition, Italy announced a donation of $55 million and the Jeddah-based Islamic Development Bank has stated that it could lend the country $280 million.

In this regard, it is important note that the state was already in need of 3 billion dollars to meet its expenditures even before the onset of the crisis. The fact that the current economic circumstances may mandate loan programmes means that the situation is likely to push the country further into a debt cycle. Thus, an ailing economy will remain as the key challenge in post-pandemic Tunisia.

Towards a new political predicament

Since the 2011 revolution, coalition governments have become a trademark of Tunisian politics. Following each election, discussions have revolved around possible points of contention and cooperation among the political partners. Similarly, the diversity of the current cabinet has yet again sparked a new round of debates on whether these political parties will be able to come to agreement in finding solutions to the most pressing problems in the country such as unemployment, poverty, and corruption.

In this regard, the coronavirus outbreak represents the first, and most urgent, challenge that the government has had to address since taking office. While so far there seems to be a consensus and unity among the parties in terms of giving support to policies meant to tackle the spread of the virus and to minimise the socioeconomic impact of the crisis, the proposal to grant exceptional measures to Prime Minister Fakhfakh has brought political divisions within the coalition to the surface.

The proposed bill is based on the article 70 of the constitution, which gives the Prime Minister the right to issue laws without consulting the parliament for a period of two months. According to Fakhfakh, exceptional measures are a “necessary weapon” to be able to implement decisions faster and more effectively. However, not all the parties have given support to the proposal. Opposing the bill, the Ennahda party argued that the Prime Minister already has the necessary powers to tackle the crisis without the need to activate the rule by decree clause.

Given the country’s history of dictatorship, Fakhfakh has assured the party that he is aware of the concerns and pledged that his work will be subject to the review of parliament along with promises to waive the exceptional measures granted to him if the emergency ends prior to the two-month deadline. On the 4 April, despite initial reservations, the proposal was passed by parliament with a vote of 178 to 17.

It is not only Fakhfakh who exercises special powers. President Saied has also been acting based on article 80 of the constitution, which grants him legislative powers amid a crisis situation that “prevents the normal functioning of the state”. Thus, the measures taken by such as introducing curfews and deploying the army to the streets to ensure the compliance of the citizens with the lockdown have been implemented within this framework.

Even though the waters seem to have settled down at the moment, this jockeying for power between the parliament, Prime Minister, and the President raises the question who is actually leading the country in the midst of the pandemic crisis? While differences between the coalition partners have been an initial concern, in the current political atmosphere the political battle among the three branches of the government could present a far bigger challenge in the long run.
Conclusion

The new coalition government that was formed after months of negotiations has found itself facing an unprecedented crisis with the coronavirus pandemic. Following the situation around the world closely and being aware of the serious deficiencies in the public healthcare system, the government has chosen to act proactively. Within this framework, a number of gradual measures, such as closing borders, introducing a nationwide lockdown have been introduced to contain the spread of the virus.

The pandemic has created a new set of daunting challenges in the country, particularly with regards to economy and the public healthcare system. In an attempt to overcome the shortages in the healthcare system and to bridge the inequalities between the interior and coastal areas, field hospitals have been set up, new laboratories opened, funds have been raised to buy equipment and rapid testing kits have been ordered. To mitigate the socioeconomic impacts of the crisis, the government has introduced relief funds to save the businesses from bankruptcy and to provide financial assistance to people in need. While economic measures have provided a certain sense of relief, due to an already stumbling economy, the government has had to rely on external actors, such as the IMF, to sustain this costly process. Thus, as difficult as it has been during this process and while the real challenge will continue to be the economy in the post-Covid period, with the gradual attempts to resume ‘normalcy’, the damage will be seen more clearly.

Looking at the political arena, despite their differences and concerns the parties that make up the coalition have been supportive of the decisions and measures taken to tackle the coronavirus crisis. However, even though the probable points of contention and cooperation in this diverse cabinet have been the focal point of discussions, during this process another, and perhaps more important, challenge has taken the lead. The power struggle between the President, Prime Minister and the Parliament has overridden other concerns. Therefore, while it remains to be seen how the political dynamics will differ in the aftermath of the pandemic, this competition among the three branches of government will present a far more serious challenge for the country.