# Globalization and its Paradox

## The Mapping of Covid-19's Global Transmission

Seventh South-South Forum on Sustainability Global University E-Lecture, Friday July 17<sup>th</sup> 2020

Eka Swadiansa
Office of Strategic Architecture
admin@studio-osa.com

### Contagion: Speed and Magnitude

December 31<sup>st</sup> 2019, WHO China Office detected the first then unknown Novel Coronavirus confirming 44 active cases in the next three days. January 7<sup>th</sup> 2020, Chinese authorities identified the pneumonia symptomatic virus as a new type of Coronavirus with genetic sequences shared to the international community five days later.

January 13<sup>th</sup>, Thailand Ministry of Public Health reported the first imported case. January 15<sup>th</sup>, Japan Ministry of Health, Labour and Welfare reported the first imported case in Western Pacific; five days later, Republic Korea National IHR Focal Point reported the second. In that same day –January 20<sup>th</sup> the WHO officially declared the Novel Coronavirus (2019-nCoV) outbreak status– with 282 confirmed cases in 4 countries.

January 21st, WHO published the first 2019-nCoV Situation Report based on previous date's data. Two days later, Situation Report No.3 marked the first report to be published at the same day as its data gathering date; with confirmed case already surpassed 500 (581) cases, and USA confirmed the first case in America. The next day, Viet Nam and Singapore reported their first case; and the day after –just five days after the official out-break date– France reported the first European transmission, while Australia and Nepal made up the ninth and tenth country in the worldwide list with total contagion number already surpassing 1,000 (1,320) cases.

January 26<sup>th</sup>, Malaysia made 7<sup>th</sup> imported transmission in the Western Pacific, with global accumulation surpassed 2,000 (2,014) cases. One day later –exactly a week after the outbreak–Canada listed second in America, and the next day Germany also listed second in Europe. At the same day, Cambodia and Sri Lanka respectively made eight and third imported transmissions in Western Pacific and South East Asia, with global case accumulation scored over 4,000 (4,593) – doubling in just two days.

January 28<sup>th</sup>, UEA marked the first entry in Eastern Mediterranean region (Middle East); with more than 6,000 (6,065) cases confirmed worldwide, adding roughly 1,500 cases in that day alone. The next day, the Philippines, India and Finland became the seventeenth, eighteenth and nineteenth country in the list; while globally accumulated cases had added roughly 2,000 confirmed cases. The day after, Italy added as the twentieth country in the list; while global transmission growth kept on adding approximately 2,000 cases per day until it surpassed 20,000 (20,630) accumulation mark on February 4<sup>th</sup> – just 15 days after the first outbreak.

In the first week, mortality rate went at relatively slower pace than its case transmission's counterpart. However after reaching 56 deaths a week later, it gained speed by making  $100^{th}$  (106) death in the next two days. From January  $28^{th}$  on, mortality rate kept on rising; listing  $200^{th}$  (213) and  $300^{th}$  (305) deaths in just another three and two days. Despite of the steeping mortality curve however, the first death outside China was not recorded until February  $2^{nd}$ , or exactly two weeks after the outbreak. The third was recorded the following day, fourth to eighth in the next five days and ninth to eleventh two days later. Then from February  $22^{nd}$  on, death rate outside China escalating like how it had been within China since January  $22^{nd}$ .

After marking the twentieth country mark on January 31st, Russian Federation, Spain, Sweden and UK reported their cases to make up the list of twenty four member states; followed by Belgium four days later. This '2019-nCoV-positive transmission' list then –stabilized at 25 to 30 member states for another twenty one days– adding only Egypt on February 15th, Iran on 20th, Lebanon and Israel on 22nd as well as Kuwait on 24th. However, despite of the 'stabilized number of member states'; within the 3 weeks period death rate kept on climbing in average of 653 new deaths per day in the first week, to 1,408 in the second and 2,242 in the third. With the exception of February 17th entry; within the same time frame, global new cases curve had actually started to flattening, averaging at 3,309 new cases per day in the first week, to 1,884 in the second, and 1,129 in the third.

Nonetheless something happened on that date of exception when it recorded the addition of 19,572 new cases in just a single day. Later on, an even worse case happened in March 19<sup>th</sup> which recorded 91,539 new cases and 2,250 new deaths in that day alone. In one way, the tolls were so great that WHO published two Situation Reports in that same date; one at 00:00 CET (Report No. 59), and another one at 23:59 CET (Report No. 60). In another way –it was the changing administrative time of data input– that may had caused the reporting of such great numbers of casualties. Either ways, the numbers are still considerably high even for sum-med up of one and a half day period.

February 25<sup>th</sup>; five weeks since the first outbreak, global situation was starting to go out of control. Four new countries: Afghanistan, Bahrain, Iraq and Oman were added to the list that date. Middle East was rapidly turning into Corona-virus red zone. The next day four more enlisted; Austria, Croatia and Switzerland marked as Europe's eleventh to thirteenth member states; while Algeria recorded the first imported case in Africa. The day after nine more followed, Brazil and Pakistan listed as third and tenth transmission in America and Middle East; while Denmark, Estonia, Georgia, Greece, Norway, Romania, and North Macedonia were making the already red zone Europe even more alarming. February 28<sup>th</sup>, fortieth day after the outbreak; Belarus, Lithuania, Netherlands, New Zealand and Nigeria added up the global contagion list to 52 member states. At the same day, WHO risk assessment level went from: 'very high in China, high in regional (Western Pacific) level and high in global level' – to 'very high in all levels'.

#### Contagion: the Next 35 Days

The rapidly growing numbers of 'country-debut' in the list, had went from 0-52 countries in the first 40 days to 53-206 countries in the next 35 days. Indeed, from the forty first (February 29<sup>th</sup>) to the seventy fifth (April 3<sup>rd</sup>) days after the outbreak; global transmission rate had averaged at 4.5 new countries per day. If this figure to be broken down further; the first 2 weeks of this period (forty first to fifty fourth

days after the outbreak) had added average of 5 new countries daily, followed by 8, 3 and 1 country(s) per day in the following third, fourth and fifth week. At first glance, the declining numbers of 'debuting-country(s)' might had suggested the flattening of the global virus transmission's curve. However, things had not been that simple.

The WHO surveillance report based its subject not only in country-based subject of nationality, but also in the categories of 'territory and area'. Different to the earlier listed new contagion; most of the later listed subjects –in the next 35 days list– were mostly consisted of countries with considerably smaller population (hence also cases/deaths ratio), plus territories and areas mostly with even smaller populations. To be more precise, out of the 154 debut in the next 35 days list, 29 subjects fell in the territory /area categories.

Therefore, the overall global case/death-growth had not been very much affected by the new territorial/areal subjects. On the contrary, it was mostly the growth within the earlier countries (local transmission in the previous 40 days list) and the (much) later heavily populated countries that were –by this time– making significant impact to the overall list. Conclusively; the fact where global casualties had kept on climbing even when fewer and fewer new subjects were making debut in the list was suggesting, how actually only few number of countries were making deep impacts globally.

Anyway, total contagion subjects went from more than 50 (52) to more than 100 (102) countries/territories/areas in just 9 days; to more than 150 (151) and 200 (201) in another 8 and 11 days. By the time contagion level was –declared very high worldwide– global confirmed cases had reached +100k (101,923) on the forty eight days after the outbreak. However, it only took another 12 days to reach +200k (209,839) then further 5, 2 and 2 days to reach +300k (332,930), +400k (413,467) and +500k (509,164). Eight days later (April 4<sup>th</sup>), the figure doubled and broke the first million milestone (1,051,635). Global death tolls on the other hand, recorded even more alarming rate. Reaching +3k (3,043) deaths by forty third days; it respectively went to +4k (4,012) and +5k (5,392) in just 8 and 4 days. The tolls doubled to +10k (11,183) in just 7 days, then further doubled to +20k (20,834) in 6 days and doubled again to +40k (40,598) in another 6 days; before then reaching the +50k milestone (50,322) exactly seventy five days after the outbreak (April 3<sup>rd</sup>).

The case/death rate however, had made significant change in its distribution ratio, especially in the categorization in between cases and deaths in China against (the) rest of the world. Where the list of the first forty days had largely dominated by entries from China, the tables were quickly turning in the next thirty five days. Within that 35 day time frame – China's records had only grown in average of 0.13% new cases and 0.49% new deaths per day, against respectively 16.47% and 21.32% growth rate in the rest of the world.

Furthermore, in-detailed rest of the world's weekly surveillance however, had confirmed how global curve was in fact starting to flatten already. Beginning with 19% and 17% in the first 2 weeks, rest of the world's cases then peaked at 20% weekly growth in the third week, before then falling to 15% and 11% in the remaining 2 weeks. Likewise; weekly death rate grew from 25% to 27% in the first and second week, before then falling to 24%, 17% and 13% in the following third, fourth and fifth week. In the end, both rest of the world's total confirmed cases and death tolls overtook China respectively in the fifty sixth and fifty fourth days after the outbreak.

#### **Information and Perception**

The above paragraphs are portraying narrations with very limited analysis. Analysis of which in smaller scales (i.e. national level), might be interpreted in various different ways, even in contrast to each other. As it had been proven by numerous previous SSFS7 speakers –Covid-19 crises are evidentially utilized to encapsulate certain 'political and economic agendas' across the globe– by both sides of the table: of ruling parties and opposing powers. Through presentations of convincing infographics, these 'half-baked' data are often used to provide pseudo-scientific grounds; which might not necessarily be providing the wrong information, but may very much be portraying one-sided perception and leads to the provision of misleading conclusions. This E-Lecture will emphasis on 3 different aspects:

- 1) Exhibiting few samples of the misleading one-sided data in the national (local transmission) level, and how (political) narration often be ripen from it.
- 2) Zooming out to give brief overview on how the virus had actually spread globally, followed by providing very brief case studies in the continental and back to national levels to show how virus transmissions had behaved differently in different characteristic of geographies.
- 3) Drawing some conclusions by returning to the global level and suggest how the Covid-19 crisis might forever change our perspective towards globalization.