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More eyes on COVID-19: Perspectives from History

The need for history in a time of plague

Despite the backward-looking, frozen-in-past-time connotation which the term ‘history’ invariably conjures up, it is necessary to recognise that history or, more precisely, our knowledge (such as it is) of the past, is closely tied to the present too. Not only does it explain how the present has been reached – every current problem has its source in the past – but it is also able to offer comparative historical examples, helping us to keep the present in perspective. To use a motoring metaphor, history provides both a rear-view mirror that shows us where we come from and by what route, and side-view mirrors that reveal where we are on the road in relation to others. To embark on a trip without either would be as foolhardy as drafting policies in a vacuum, without the benefit of memory or an awareness of the wider context.

The critical value of having such historically informed perspectives is well demonstrated when this lens is applied to the COVID-19 pandemic enveloping our country, for South Africa is no stranger to pandemics and so ought to be able to draw on these historical encounters to good effect today. These predecessors of COVID-19 include repeated epidemics of smallpox in the 18th and 19th centuries, bubonic plague (1901–1907), so-called ‘Spanish’ flu (1918–1919), polio (1944–1963) and ongoing HIV/Aids (1982–).

Studying these makes clear that severe pandemics invariably produce at least five broad reactions or results because of the direct, frightening threat which they pose to life:

1. they highlight the basic features of any society and its modus operandi, especially its shortcomings and fault-lines, in ways which are difficult to ignore;
2. they reveal underlying social and cultural attitudes which are not normally on public display;
3. they accelerate trends and tendencies already in train but not yet at full pace;
4. they introduce new, unanticipated developments into society; and
5. they trigger a zeal for medical research and for reform of the deficiencies exposed by the epidemic experience, although usually the latter is short-lived.

Knowledge about these earlier pandemics and the responses they evoked also give us a yardstick by which to judge what is novel and distinctive about a new pandemic and what is not.

Even though COVID-19 is still raging about us, all of these predictable reactions and results are already manifest in South Africa in some way – for instance, the manner in which dire poverty and overcrowding have been highlighted as a standard part of the daily experience of many South Africans, both at home and aboard public transport; the attitude of finger-pointing beginning to emerge towards ‘others’ who have been identified as COVID-19 positive, in the course of which the mantra of social cohesion has been superseded by that of social distancing; the way in which lockdown measures have accelerated the failure of already faltering companies like SAA and Edcon, tipping them over the edge, while at the same time calling forth an unprecedented roll-out of social relief by the state to the unemployed; how apparently sound small businesses and cultural institutions and activities have been very hard hit financially out of the blue, some to the point of collapse; how modes of social gathering have been altered, possibly forever; and how politicians have been vocal about their commitment, in President Ramaphosa’s words, ‘to forge a new economy and not merely return the economy to where it was before COVID-19 struck’. How lasting such commitments are, time will tell.

All of the above – and more – chime in exactly with the kind of responses which a historical study of previous epidemics would have led us to anticipate and prepare for. Moreover, such a study of the Spanish flu and the way in which that catastrophe (which killed 6% of the South African population in 6 weeks) accelerated the slow-moving process of creating a national department of health for the first time in 1919, should alert us to the likelihood that the COVID-19 disaster will be followed by a push to implement a national health insurance system in South Africa speedily.

In other words, history can not only explain the backstory to the present and put a current situation into perspective, but can also be a good guide to the future. The best futurologist is an historically informed one. To put it more felicitously (and with a revisionist nod to George Orwell’s 1984): ‘Who understands the present, shapes the future; who understands the past, shapes the present.’