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The columnist
Can local honey help with hay fever, asks **James Wong** p24

Letters
Fukushima's real impact was in the evacuation p28

Aperture
Catching bats to study viruses that could harm us p30

Culture
A gripping account of Earth's extinct humans p32

Culture columnist
Simon Ings on a film about an analogue champion p34

Comment

A too familiar threat

Understanding how covid-19 has been perceived in West African nations like Ghana is crucial to tackling it, says **Ama de-Graft Aikins**

IN A comedy sketch that recently went viral on Ghanaian social media, Coronavirus arrives late to a meeting. "What's up, fellow deadly diseases," Coronavirus says, as Malaria, Cholera and AIDS jump up from their seats and rush for their face masks.

The sketch illustrates how some people in Ghana are making sense of the pandemic. While covid-19 is new and unique, for some it feels like just another on a list of long-standing and omnipresent threats to public health.

Social psychologists often use the term "familiar alien threats" to describe situations that people actively distance themselves from in their minds because they represent disruption or danger. But these threats still change the way we think, feel and behave.

In 1918, the Spanish flu came to colonial Ghana through European travellers. It quickly spread across the country, killing an estimated 100,000 people in six months. This was preceded by a plague pandemic, and was followed by epidemics of smallpox, yellow fever and sleeping sickness.

Ghana and other West African countries have since had serial public health crises, including HIV and AIDS, Ebola virus disease and swine flu, and the silent epidemic of chronic diseases, such as diabetes. Social responses to covid-19 are being shaped by this deep collective knowledge of sickness, debility and death.

MICHELLE D'URBANO

In March 2020, covid-19 arrived in Ghana's capital Accra via Asian and European countries where it was endemic. Because early hospital admissions and deaths were linked to international air travel, many Ghanaians distanced themselves from the domestic threat by describing covid-19 as a disease of a privileged urban class.

As infections spread and preventive measures were imposed, public understanding and practices developed in ways that mimicked responses to previous public health threats.

Popular artists evoked collective memories of past health crises and reminded people about inequitable official responses. On social media, conspiracy theories about anti-African vaccines used the same emotive language that fuelled protests against Ebola vaccine trials in 2014. Stigma and secrecy around coronavirus infection emerged. People started to experiment with faith healing, herbal cures and home remedies. As a professional woman in Accra told me: "Nobody goes to the hospital... When you have symptoms, you boil cloves, lemon, ginger and garlic and drink it like tea."

At a deeper level, the idea of Africa as a conduit for infection is an enduring familiar alien threat in the global imagination. Social responses to covid-19 are also shaped by awareness of this idea.

From the 1880s to 1970s, colonial medical treatments of infectious diseases in West Africa led to advances in tropical medicine and laboratory sciences. But this history was marred by unethical and racist practices, such as toxic treatments for sleeping sickness forced on hundreds of thousands of people. During the Ebola crisis that began in 2014, West Africa was stigmatised and exoticised by global media, causing a negative financial impact on tourism, higher education and industries with international ties.

During covid-19's first wave, global health experts predicted huge numbers of African deaths, even as local scientists developed effective methods for testing, prevention and treatment. These forms of defamiliarisation devalue complex African realities and compound mistrust of Western interventions, like vaccination drives. But they also force critical self-reflection and new ways of engaging with the world, from independence movements in the 1940s to the current "decolonise global health" movement.

Equitable healthcare, social protection and global cooperation will play a large part in fighting the covid-19 pandemic. Understanding social responses to it is equally important. ▮

Ama de-Graft Aikins is British Academy Global Professor at University College London