

Nigerian Government and the challenges of mitigating the effects COVID-19 pandemic**¹Chigozie Rita Umeh, ^{*1}Obidebube, Emerem Jennifer & ²Ugwunnadi Chinasa Maryrose.**¹School of General Studies, Social Sciences Unit, University of Nigeria Nsukka²Department of Adult Education and Extra-moral Studies, University of Nigeria Nsukka**Abstract**

The outbreak of the Coronavirus disease (COVID-19) in Wuhan, China, in 2019 is a tragic historical event that has repercussions around the world, posing health concerns that require policy attention. Given the preceding, this article examines the Nigerian government's response to COVID-19 and the difficulties it faces in reducing its effects on citizens. The study was founded on the theory of emergency management. Data was gathered from secondary sources and then examined using content analysis. The study also discovered that the Nigerian federal government implemented several strategies to mitigate the health and economic consequences of COVID 19. The paper finds that the government has been unable to offer welfare to everyone in need due to corruption and politics in the distribution system. The paper recommends among other things, that the Nigerian government reduce misuse of public funds by committing to transparency, strengthening anti-corruption institutions, and being deliberate in its acquisition of medical equipment to equip its healthcare system, ensuring that the healthcare system can provide healthcare services to its citizens continuously.

Keywords: *Coronavirus disease(COVID-19), Nigerian Government, challenges and mitigation, policy.*

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Introduction

The outbreak of the Coronavirus disease (COVID-19) in Wuhan, China, in 2019 is a tragic historical event that has repercussions around the world, posing health concerns that require policy attention. As Sohrabi et al. (2020) highlighted, it had spread globally within three months, causing the World Health Organization (WHO) to declare COVID-19 a threat to global health. According to Ebenso and Otu (2020), the Nigerian Center for Disease Control initially detected Coronavirus disease-19 (COVID-19) on January 28 2020, in an Italian person who arrived in Nigeria on February 27, 2020. The Global Humanitarian Response Plan for COVID-19 (2020) stated that the implications of COVID-19's progression into a pandemic are a clarion call for a change in attitudes, mindsets, and behaviours toward global health emergencies.

According to WHO data, 1,978,769 confirmed COVID-19 infections and 125,196 deaths by early April 2020, with cases reported in "213 nations, regions, or territories." While recent data indicate 202,296,216 confirmed COVID-19 cases and 4,288,134 deaths worldwide as of August 9, 2021, Africa accounted for 5,137,017 confirmed cases and 122,025 deaths (World Health Organization, 2021). Two hundred fifty-five thousand six hundred thirty-three cases have been confirmed, 249,825 cases have been discharged, and 3,142 deaths have been registered across 36 states and the Federal Capital Territory as of the time of this writing, April 18, 2022. The 27 new cases have been recorded in six states: Lagos (18), the Federal Capital Territory (FCT) (4), Delta (2), Kaduna (1), Oyo (1), and Rivers (1). (Nigeria Centre for Diseases Control, 2022). Local, national, and global measures are required to rescue lives, societies, and economies. In light of the above, this article explores the Nigerian government's response to COVID-19 and its challenges in mitigating the impacts on the citizens.

Beyond its poor health consequences, the COVID-19 pandemic had a detrimental effect on the world's economic, education, and food systems, of which Nigeria is a part. COVID-19 caused unprecedented upheaval to the global economy and harmed the means of sustenance and livelihood for millions of people worldwide. As a result, the world's nations have implemented a number of public policy initiatives to contain the disease's spread and mitigate its effects on the population. These measures include obligatory self-isolation/quarantine for individuals returning from high-risk nations, prohibition or restriction of public gatherings, lockdowns involving the closure of schools and businesses, and a stay-at-home order (Onyishi et al., 2020). Nigeria's government was not left out of this clarion cry for governments worldwide to respond to COVID 19's repercussions, and it also outlined policy steps. As a result of those mentioned above, the study's aims are as follows: The study's objectives were to (a) Explore how the Nigerian government has responded to

the effects of COVID-19. (b) Investigate the challenges of Nigerian government efforts in responding to the effects of COVID-19.

Conceptual Elucidations

According to World Health Organization (WHO,2020), Coronaviruses are a broad family of viruses that have been linked to illnesses ranging from the common cold to Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). Coronavirus disease 2019 (COVID-19) is viral pneumonia characterised by a dry cough, fever, sore throat, body ache, and diarrhoea. In December 2019, the Coronavirus disease (COVID-19) caused by infection with the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) emerged in Wuhan city, China, and since then there has been a global spread of the disease to pandemic proportions, McGoogan (2020). According to Rohwerder, (2020), the virus went from a discrete outbreak in Wuhan, China, to clusters of cases in some nations and then to a pandemic, with most countries reporting cases and many experiencing substantial outbreaks in just 11 weeks from January to mid-March 2020. According to Brodin (2020), the severe form of COVID-19 occurs in three phases—viral, pulmonary and final hyper-inflammatory phase, that can result in severe acute respiratory distress syndrome (ARDS), decreased heart function, and death. Patients with a severe type of COVID-19 are frequently required to be incubated and placed under a ventilator. Also Ruan(2020) opined The chance of survival following SARS-CoV-2 infection for people less than 60 years is ~95% in the absence of abnormal conditions, but this chance decreases considerably if the patient has underlying health conditions.

COVID-19's socio-economic impact on Nigeria

According to Ossai (2021), a sizable portion of the Nigerian populace relies on daily revenues from informal labour and has little or no savings. Additionally, many received no financial assistance from the state during the lockdown. Thus, a significant issue during the lockdown

period was a lack of the conditions or resources necessary for the population to self-isolate comfortably. According to the Global Humanitarian Response Plan for COVID-19 (2020), when schools close, kids lose opportunities to study, and the most vulnerable pupils may be unable to return to school. This results in inferior educational outcomes and longer-term earnings prospects for individuals and their families and diminished overall human capital for the economy of the nations where they work and live. By mid-March 2020, 862 million children were anticipated out of school. Constraints on human movement and an unexpected economic glut resulted in a significant downscaling of economic activity in containing the spread of COVID-19, which had a significant impact on informal companies (ILO, 2020).

Table 1: Movement Restriction in Nigeria During the Covid-19 Pandemic

S/N	Affected sector	Impact
1	Aviation sector	Massive flight cancellations, NCAA suspends all international airports
2	Banking sector	Senior staff works from home. Few branch staff available to attend to depositors
3	Civil servant sector	Suspension from work for about 30 days for remote quarantine
4	Markets Major	food markets were partially closed
5	Religious sector	All religious services were banned during the pandemic. A Christian pastor was arrested for holding a church service during the ban.
6	Sports	All sporting events were cancelled
7	All sectors	Series of nationwide stay-at-home lockdown was officially enforced from

		30th March-April 12th, April 13th -26th April 2020
8	Eleven (11) businesses excluded from the ban	(i) private security companies, (ii) medical establishments, (iii) broadcasters, (iv) food processing & distribution companies, (v) petroleum distribution and retail entities, (vi) power generation, transmission & distribution companies, (vii) hospitals, (viii) telecommunication workers, (ix) health care manufacturing & distribution companies, (x) print media staff, (xi) electronic media personnel.

Source: Adapted from , Nwobi, Melugbo & Umeh 2021.

From the table above, we could see these several services and activities were restricted are not without socio-economic impacts. Nwobi, Melugbo & Umeh (2021) assert that this in the general COVID-19 affected every nook and crannies of the nation. Similarly, Adegbami & Adesanmi, (2020) demonstrated that COVID-19 not only caused an unprecedented disruption to the global economy, but also harmed the means of subsistence and livelihood of a large number of people worldwide.

Theoretical framework

The study is founded on David McEntire's 2004 Emergency Management Theory. This theory asserts that catastrophic emergencies are an inescapable fact of life in society and have a tendency to have irreversible consequences unless responsible, immediate, and urgent measures are taken to address the issues of preventing, responding to, recovering from, and mitigating these emergencies.

In preparation for COVID-19, the Nigerian government launched a vast awareness and sensitization campaign through the National Orientation Agency and National Emergency Management Agency (UN News, 2020). Before the first case was confirmed in Nigeria, NCDC initiated preparations with its partners. The NCDC worked with states and hospitals to map out COVID-19 isolation and treatment centres. NCDC began training health workers in all states on case management, IPC, surveillance, risk communication, and other aspects of epidemic preparedness and response. NCDC preparedness guidelines and strategies included a One Health approach (NCDC, 2021). In response to the Federal Government's management measures against COVID-19, the government established the Presidential Task Force on COVID-19, headed by Boss Mustapha, to work with the Nigeria Centre for Disease Control (NCDC) and the Federal Ministry of Health (PTF, 2020); All international flights were banned, except for emergency and essential flights (Onyeji, 2020, 2020), non-essential activities were locked down (Mondaq, 2020), interstate travel was banned except for essential needs, large gatherings outside of the workplace were banned, and COVID-19 testing labs were established (NCDC, 2020). The Presidential Task Force on COVID-19 has been providing regular updates to the public to combat fake news and panic.

In applying the recovery principle to the Federal Administration's management of COVID-19 in Nigeria, the government gradually eased the economy's lockdown. Through PPP and the Federal Ministry of Humanitarian Affairs, Disaster Management and Social Development, the government gave unconditional cash transfers to impoverished households and the vulnerable, as well as food supplies as palliatives. On the principle of recovery, Nigerian government gradually eased the lockdown and made provisions of food items as palliatives to the poor citizens and provide. The government, through the Central Bank of Nigeria (CBN), issued a credit relief package worth \$136.6 million to various firms affected by the coronavirus

pandemic restriction. On the mitigation principle, there is continuous awareness and sensitization campaign on personal hygiene by the Federal government. A lot of resources have been invested on COVID-19 vaccines to be produced by researchers.

Methodology

The study adopted an ex-post factor research design to explore past events to understand the current happenings. It also explores the relationship between variables in a study which had already occurred without determining the causality.

The data for the study were generated from secondary sources such as textbooks, Journal publications, official publications, conference papers, international databases, official documentaries and internet sources.

Data analysis

The data for the study were analyzed qualitatively using content analysis techniques and logical deductive reasoning using historical and interpretative methods.

DISCUSSION AND FINDINGS

Measures taken by Nigerian Government in responding to COVID-19

Since the outbreak of the COVID-19 pandemic in Nigeria in February 2020, the Nigerian Federal Government has taken steps to contain the virus's spread and protect Nigerians from its adverse effects. According to the WHO's Global Humanitarian Response Plan for COVID-19.(2020), on February 3 2020, WHO published a Strategic Preparedness and Response Plan (SPRP) outlining the immediate actions necessary to halt further transmission of COVID-19 within China and the spread of the virus to other countries, as well as to mitigate the outbreak's impact in all countries. According to Kapata (2020), Nigeria was one of the first countries to notice the risk and begin planning ahead of the epidemic curve just one week after China first reported COVID-19 instances. According to the Nigeria Center for Disease Control (2020), the

National Emergency Operation Centers were immediately activated to level 3 to trace and test all his contacts in reaction to the crisis. Three weeks later, the Presidential Task Force on Covid-19 was established. Also, The Federal Government of Nigeria, through the Presidential Task Force on COVID-19, the Federal Ministry of Health, and the Nigeria Center for Disease Control, has been working closely with relevant ministries, departments, agencies, partners, and other stakeholders on a daily basis to coordinate and review national response strategies and implementation activities in order to contain the spread of COVID-19 effectively. According to Ebenso&Otu (2020), the country immediately installed surveillance and temperature screening equipment at airports using equipment purchased during the Ebola outbreak, collected passenger contact information, and interrogated travellers from COVID-19 hotspots. According to Ikeyi, Taofeek, and Orjiat(2020), as part of Nigeria's effort to contain the spread of Coronavirus ("COVID-19" or the "disease") in the country, the President enacted the COVID-19 Regulation 2020 (the "Regulation") according to the authority conferred on him by sections 2,3, and 4 of the Quarantine Act. Among other things, the Regulation imposed many restrictions on the movement of people and products virtually throughout the country, particularly in rural areas (namely Lagos state, Ogun state, and the Federal Capital Territory). Additionally, the UK Government (2020) and the National Center for Disease Reduce (NCDC) indicated that many non-pharmaceutical techniques had been used to minimize the importation of new cases and control local outbreaks. These measures include: staying at home, travel bans to and from high-risk countries with community transmissions of COVID-19, border controls, state-level training and capacity building of health personnel on infection, prevention, and control; case management; intensified risk communication, community engagement, heightened surveillance, field epidemiological investigations, and rapid identification of suspected c According to Wilder-Smith and Freedman (2020), these procedures have been the cornerstone of epidemic prevention for decades. They include physical separation techniques

to reduce encounters between possibly infected but unidentified and consequently not segregated individuals and other group members. Specifically, the lockdown policy paper outlined control tactics such as social isolation, allowing critical services to run during the period, prohibiting large gatherings, and restricting movement (Presidential Task Force on COVID-19, 2020a). Additionally, Africanews (2020). Captured that social and religious meetings have been temporarily prohibited, schools and businesses have been closed, and mobility restrictions and partial lockdowns have been implemented in the Federal Capital Territory, Lagos, and Ogun states. Additionally, the Federal Government of Nigeria strengthened its social safety net and welfare programmes in an effort to alleviate poverty and ameliorate the adverse effects of the unintended partial lockdown on the livelihoods of the poor and vulnerable households in impacted states. The Nigerian Center for Disease Control (2020) said that the government has also created and extended diagnostic capacity for COVID-19 in seven laboratories during the last two months, with plans to expand to 13 other locations in the coming weeks.

The Federal Government of Nigeria, as part of the efforts taken by the Nigerian government to alleviate the impact of COVID 19 on its inhabitants, The government, through the Central Bank of Nigeria (CBN), issued a credit relief package worth \$136.6 million to various firms affected by the Coronavirus pandemic restriction. According to the Governor of the Central Bank of Nigeria (2020), the money will benefit households, small and medium-sized enterprises, hotels, healthcare merchants, airline service providers, etc. Additionally, the apex bank announced a cut in loan interest rates from 9% to 5%, retroactive to March 1, 2020. Additionally, on April 6, 2020, the United Nations (UN) and the Nigerian government created a basket fund that will serve as a conduit for funds from various partners. The basket fund's objective is to increase the efficiency and efficacy of the country's response to the COVID-19 epidemic (UNAIDS) (2020). After the Nigerian Federal Government adopted these measures to mitigate the effect

of COVID-19 on its citizens, the critical question is how these measures are being implemented, whether they are meeting the objectives of their establishment, and whether there are impediments to their effective implementation.

The Nigerian government and the challenges of responding to the effects of COVID-19

According to the Centre for Policy Impact on Global Health (2020), the federal government has implemented many strategies to reduce the health and economic consequences of COVID 19. However, the financial packages they have announced would primarily benefit workers in the formal sector. Likewise, social welfare programmes such as food aid and cash transfers have historically been insufficient and inefficient. The government has been unable to offer food assistance to everyone in need due to corruption and politics in the distribution system. Numerous Nigerians who adhered to the COVID-19 lockdown policy lacked the food and cash necessary to keep their family alive (Human Right Watch, 2020b). Nwobi, (2021) noted that despite the Ministry of Education's directive to migrate to online teaching and learning, educational activities were severely disrupted due to a lack of infrastructure necessary to carry out the directive, as well as a lack of facilities, a poor internet network, and an unstable power supply required to operate virtual classes.

Similarly, the Center for Policy Impact in Global Health(2020) noted that evidence-based regulations such as physical separation and "test and trace" measures had been applied at the federal level and in several states. However, adoption occurred against underdeveloped health systems, sluggish emergency response, and suboptimal data/information monitoring systems. These shortcomings resulted in implementation gaps. According to Adegami and Adesanmi (2020), the distribution of palliatives by the Ministry of Humanitarian Affairs and Disaster Management is also a source of contention. To mitigate the impact of the lockdown on the poor and vulnerable, the Federal Government of Nigeria provided for the payment of N20,000

Conditional Cash Transfers (CCT) to each person. According to the Minister of Humanitarian Affairs and Disaster Management, over 2.6 million households have benefited from the palliative, but over 11 million vulnerable people in 35 states remain unaffected. However, the criteria for distribution of palliative goods have been questioned in the intervening years. It is consistent with the Center for Policy Impact in Global Health's report (2020); the federal government and a few state governments have launched health and social welfare measures (dubbed "palliatives") to assist disadvantaged people. These palliatives are food assistance, cash handouts, and economic stimulus programmes. However, many of these welfare programmes are insufficient or have significant flaws, including the politicization of food aid, opaque accountability procedures, and partial exclusion of the informal sector from some stimulus packages. Indeed, there is a body of evidence regarding the dominant response to COVID-19, in which policies are formulated and implemented in an excessively centralized, opaque, top-down manner, frequently involving military force and community abuse, despite available data demonstrating long-term harm to public health and human rights (Loewenson, 2020).

Additionally, certain facilities in other states have been designated as COVID-19 isolation centres. However, most of these institutions lack basic infrastructure such as appropriate water supply, ventilators, and air circulation systems, which are vital in managing COVID-19, particularly in severely ill patients (Adhikari, 2020). It is worth noting that the Medical Doctors, under the auspices of the National Association of Resident Doctors (NARD), have declared an indefinite nationwide strike during the ongoing pandemic. At the same time, all resident physicians, medical officers below the rank of Principal Medical Officer (PMO), and house officers in all Federal and State Hospitals in Nigeria already joined the strike action on Monday, June 15, 2020. According to Reuters, the union has complained about insufficient

protective equipment for treating COVID-19 patients and has stated that ten doctors have died thus far from the highly infectious respiratory disease.

Additionally, the federal government mandated mandatory health screenings at airports and border crossings, a 14-day self-quarantine period upon arrival for travellers who do not exhibit symptoms, and isolation measures for travellers who exhibit COVID-19 symptoms. However, health screenings were not conducted due to a lack of capability and resources. Acaps Thematic Report (2020) stated that insufficient knowledge on the spread of COVID-19 in Nigeria and poor diagnostic capability and protective equipment availability make it challenging for humanitarian organizations to respond to the pandemic owing to the increased risk of getting the virus.

As a result of the above, it is clear that the Nigerian government faced limits in terms of actions taken to mitigate the impacts of the Covid-19 pandemic on its inhabitants. The primary constraints are related to implementing its Covid-19 policy response and guideline, which are necessary to ensure that its objective is met. We suggest that in order for any policy conclusion to be adequately implemented, a robust governance system and strong structures are required. The Nigerian government is urgently required to take the necessary steps to ensure that it continues to cushion the effects of COVID-19 on its citizens through more practical policy alternatives and monitor the implementation of its COVID-19 policy guidelines.

Conclusion

The development of COVID-19 stunned and confused the world's nations, particularly Nigeria, with its adverse health, economic, and policy consequences. The Nigerian Federal Government became obligated to mitigate the impact of COVID-19 on its population. Thus, this study aimed to examine the Nigerian government's mitigating measures against COVID-19 and to

ascertain the obstacles to their implementation. The study discovered that the Nigerian government responded to COVID-19 by implementing various policy actions. The paper finds that the government has been unable to offer welfare to everyone in need due to corruption and politics in the distribution system.

Additionally, implementation occurred against underdeveloped health systems, sluggish emergency response, and suboptimal data/information monitoring systems. These shortcomings resulted in implementation gaps. We claim that in order for any policy guideline to be implemented correctly, a robust governance system and strong structures are required.

Recommendations

- The Nigerian government should deliberate in acquiring medical equipment by equipping its healthcare system and ensuring that it has the necessary ability to provide healthcare services to affected citizens continually.
- The government should collaborate with informal groups such as trade organizations and religious leaders to provide financial assistance to persons in precarious employment.
- The Nigerian government's commitment to transparency should reduce the misuse of public funds, and strengthening anti-corruption institutions should be a priority during and after COVID-19.
- The Nigerian government should learn how to provide the best working conditions for its health personnel in order to avoid health workers going on an indefinite strike to urge their demands.
- In a similar vein, the Nigerian education system requires intervention; the government should follow their deal with the ASUU by 2020 to end the current ASUU strike of 2022.
- Because the COVID-19 had a detrimental effect on Nigerian institutions' learning process and outcomes, both postgraduate and undergraduate, the government must prioritize funding the Nigerian education system to keep up with the post- COVID-19 age.

- Nigerian authorities should demonstrate good governance by providing essential social and welfare services to citizens, particularly in this post- COVID-19 period.

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