

TACKLING THE PAINS OF CORONAVIRUS LOCKDOWN THROUGH PALLIATIVES IN NIGERIA: ADDRESSING THE GAPS AND CRITICAL STRATEGIC ISSUES

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Abstract

On March 11, 2020 the World Health Organization (WHO) upgraded the status of the novel coronavirus, also known as COVID-19 outbreak, from epidemic to pandemic. Ever since then, the world has been reeling from the catastrophic spread of the virus. Consequently, Nigeria rolled out a couple of measures to reduce the spread of the virus in the country in keeping with WHO guides. In addition, the Federal Government and most States in the Federation declared lockdown in the state and closure of states and national borders. The study investigated the effectiveness and interrogated the template used in distributing the palliatives to the poor. The results showed that the templates used in the distribution of the palliatives were highly ineffective and that inadequate data base and politics negatively impacted on the implementation of the palliatives meant for the poor. The study recommended among others that for strategic reasons, sufficient and disaggregated data should be generated, updated, and stored for future use in Nigeria for the purpose of bringing the warmth of governance to all who are in need.

Keywords: COVID-19, Lockdown, Palliatives, Gaps, Politics, Nigeria

1. Introduction

Coronavirus disease (COVID-19) is an infectious disease caused by severe acute respiratory syndrome. The disease was first identified in December 2019 in Wuhan, China. The disease has since spread globally to more than 200 countries. On March 11, 2020 the World Health Organization declared the disease as pandemic. Common symptoms include fever, cough and shortness of breath (WHO, 2020). Other symptoms may include muscle pain, diarrhea, sore throat, loss of smell and abdominal pain. While majority of the cases result in mild symptoms some progress to viral pneumonia and multi organ failure and in many cases results to death (WHO, 2020). At the time of writing this paper COVID-19 has no known cure. In addition to the vaccine, WHO still recommends washing of hands with soap and running water; avoiding touching eyes, nose and mouth; practicing respiratory hygiene; using alcohol-based hand sanitizer; maintaining social distancing (maintain at least 1 meter between yourself and anyone who is coughing or sneezing).

Considering the rapid spread of the virus globally, it became necessary for countries to lockdown so that people stay at home to reduce the spread. Consequently, Nigerian central government and some state governments ordered lockdown and citizens were asked to stay at home. As a matter of fact, the military, police, Nigeria Security and Civil Defence Corps (NSCDC) and other paramilitary agencies used considerable force to keep citizens out of the streets and enforced the ban on social gatherings and religious services. As a follow up the President and Commander of the Armed Forces, His Excellence Muhammadu Buhari GCFR, constituted a Presidential Task Force (PTF) headed by the secretary to the government of the Federation. All State governments also formed their respective task forces. In particular, the PTF terms of reference include strengthening the national response strategy particularly in area of testing, containment and management of COVID -19 and building awareness among the populace. According to Ajimotokan (2020), the PTF can also advise government to declare national emergency as part of containment measures when necessary and direct deployment of any relevant assets, when deemed expedient. All the State task forces also had their own variants of measures to combat COVID-19.

A direct implication of the lockdown is the associated hardship forced on the citizens especially the vulnerable, the aged, the poor, the poorest of the poor who are on subsistence living. Over 124 million Nigerians live without sufficient means to support themselves (NBS, 2019). In view of the imagined pain likely to be suffered by the above group during the lockdown, the Federal Government of Nigeria (FGN) directed the Ministry of Humanitarian Affairs to pay the poorest of the poor who have been receiving ₦5000 (USD 11) a month, four months stipend of ₦20,000 (USD 44) in advance.

As kind as this may look, the gesture is not only unreasoned but selective. The beneficiaries are those who have been receiving the package since the last five years. The lockdown affects everybody, especially the vulnerable and the poor in all the 36 State and Federal Capital Territory (FCT) Abuja. Although in varying degrees and proportion poverty, is wide spread and any palliative should be designed and structured to reach majority of deserving citizens not a few or a section of the country within this period of uncertainties and existential threat posed by COVID-19 lockdown.

The implementation of the presidential directive has started but it throws up a couple of questions; what is the template used in distributing the palliative? Which are the states involved and why? Can a significant percentage of the poor and needy benefit from the palliative? Is there any existing disaggregated data that can guide the officials in implementing the directives? Is the distribution of the palliatives politicized? We shall attempt to provide answers to the above questions.

The general objective of the study is to assess government's role in tackling the pains of COVID-19 lockdown through palliatives. The specific objectives of the study are to; investigate the effectiveness of the modalities used in implementing the distribution of the palliatives at the COVID-19 lockdown; interrogate the data used in the exercise; find out how politics affected the distribution of the palliatives and package a way forward that will strengthen the strategic interest of Nigeria in the future.

2. Study Methodology

The study used qualitative descriptive approach, utilizing robust data from official documents and evidence from official documents and relevant agencies. The key

agencies in this regard are; Ministry of Humanitarian Affairs, Disaster Management and Social Development; National Coordinator, National Social Safety-Nets Coordinating Office (NASSCO), National Emergency Management Agency (NEMA), State Emergency Management Agency and Local Government Committees on COVID-19 pandemic. Key senior officials of the agencies were interviewed and observations were also made at the centers where the palliatives were distributed. Data collected from the mentioned sources were presented in tables and figures and descriptively analyzed. Discussions of the findings were anchored on evidence and arguments based on conflict theory as updated by Jim Chappelow (2019) to drive our points home.

3. Literature Review and Theoretical Platform

Coronavirus disease 2019, or COVID-19, is a disease that cause respiratory tract infection. It affects the upper respiratory tract (sinuses, nose and throat) or lower respiratory track (windpipe and lungs). COVID-19 is one of seven types of coronavirus, including the ones that cause severe diseases like Middle East Respiratory Syndrome (MERS) and sudden acute respiratory syndrome (SARS) (WHO 2020).

In December, 2019, a pneumonia was reported in Wuhan, China (New York Times) on 31 December 2019, the outbreak was traced to a novel strains of coronavirus (World Health Organization (WHO), 2020). As at June 28, 2021, Nigeria has 167,467 coronavirus confirmed cases, 2,119 confirmed death and 163,949 recovered cases (Worldometer, 2021) . **stop**

Nigeria confirmed the first case of the new coronavirus on Friday 27th February, 2020. The first index case was an Italian business man who entered Nigeria on Tuesday 24th February 2020 on a business trip (<https://www.wsbtv.com/news/world/nigeria>). Since then case confirmations have increased and deaths also recorded. As of 21st April, 2020 more than 16 States and FCT have recorded COVID-19 cases with Lagos and FCT ranking highest. President Muhammadu Buhari addressed the nation on 29th March, 2020 and mapped out plans of the government to curb the coronavirus in Nigeria. The President directed the lockdown of Lagos, Ogun and the FCT for 14 days (Shaba, 2020). Other State governments also directed the lockdown of their States including border

closures. This means that all movements were totally restricted and people are expected to stay at their homes, no travelling, no schools, business and offices are mandated to remain closed. Both commercial and private jets also barred from taking off.

While this seems to be commendable because it will prevent the virus from spreading, at the same time, it is worrisome because such action will further aggravate colossal poverty and hunger. For instance, in 2018, the World Poverty Clock declared Nigeria as the poverty capital (Oluwasanmi, 2020). Thinking in the same direction, Shaba (2020) noted that the next few weeks will be challenging for the poor masses in Nigeria. Not because of the immediate lockdown and the impending increase in the number of coronavirus cases, but mainly due to the consequences of the lockdown on the poor households.

Although the President directed a couple of palliatives, researchers, NGOs, policy makers think that the palliatives were without considering contextual factors. The president merely replicated the Western styled method of curbing the pandemic (Shaba, 2020). Poverty profile in Nigeria is worrisome. To complicate this, data on the poor is unreliable because most of the information is based on 2006 census projections which have not been steady. Even though the truth is that there has been no base line household study, what is doubtless is that poverty is on the increase. Report has it that in 2018 over 86.9 million Nigerians are now living in extreme poverty. This represents nearly 50% of its estimated population of 180 million people (Kazeem, 2018). The World Bank (WB) adjusted upwards its measurement of extreme poverty. From the USD 1.25 yardstick that was set in 2008, the new definition of extreme poverty is living on or below USD 1.90 a day (Sampson, 2015).

The geography of poverty in Nigeria generally indicates that there is poverty in the 36 States of the Federation and FCT with varying degrees. The 2019 Nigeria Poverty Statistics by the six geopolitical zones shows poverty rate as follows:

Table 1: Nigeria Six Geopolitical Zones Poverty Statistics

S/No	Geopolitical zone	Poverty Rate in Percentage (%)
1.	South West	19.3
2.	South South	25.2
3.	South East	27.4
4.	North Central	42.6
5.	North East	76.8
6.	North West	81.1
	Total	272.4

Source: *Nigeria Poverty Statistics (2019) & Compiled by the Authors.*

The above table clearly shows that North West and North East with 81.1 % and 76.8 % respectively has the highest poverty rate among the six geopolitical zones. However, with regards to the 36 States, and FCT, Zamfara has the highest (91.9 percent) while Lagos is lowest (8.5 percent) (UN Global multi-dimensional poverty index Report, 2019). The disparities in socio economic profile in Nigeria including the observed inequalities is historical. Even though it is not the focus of this study, it is worth mentioning considering the political economy of Nigeria and the continual oppression of the ruling elite predominated by the Hausa/ Fulani. Ironically, the poorest region in Nigeria belongs to the Hausa/ Fulani ethnic group.

Nigeria has historically experienced much ethnic conflict amongst her over 250 ethnic groups and two major religions (Islam and Christianity). With the return of civilian rule in 1999, militants from religious and ethnic groups have become markedly more violent. While this unrest has its roots in poverty and economic competition (BBC news Report, 2012), its economic human damages further escalate the problem of poverty. For instance, ethnic unrest and the displeasure of local communities with oil companies has contributed to the conflict over oil track in Niger Delta, which threatens the productivity of oil trade (WB, 2012). Civil unrests also have contributed to the adoption of populist policy measures which work in the short run, but impede poverty alleviation efforts. This is why we adopt the conflict theory as a theoretical platform of this study to which we now turn.

4. Theoretical Platform

The researchers adopted the conflict theory. Conflict theory whose original proponent is Karl Marx and Modified by Ashley Crossman (2019) and Jim Chappelow (2019) is our theoretical framework of analysis. It states that tensions and conflicts arise when resources, status, and power are unevenly distributed between groups in the society and that these conflicts become the engine of social change. In this context, power can be understood as control of material resources and accumulated wealth, control of politics and the institutions that make up society, and one's social status relative to others. According to conflict theory, those with wealth and power try to hold on to it by any means possible chiefly by suppressing the poor and powerless. A basic premise of conflicts theory is that individuals and groups within society will work to maximize their own benefits. Other assumptions of the theory as summarized by Chappelow (2019) are that: Conflict theory focuses on the competition between groups within society over limited resources; it views social and economic institutions as tools of the struggle between groups or classes, used to maintain inequality and the dominance of the ruling class. Given conflict theorists assumption that conflict occurs between social classes, one outcome of this conflict is a revolution. The idea is that change in a power dynamics between groups does not happen as a result of adaptation. Rather, it comes about as the effect of conflict between these groups. In this way changes to a power dynamic are often abrupt and large in scale, rather than gradual and evolutionary (Chappelow, 2019).

The conflict theory helps us to understand the dynamics and intrigues and manipulations of fiscal resources in Nigeria. The ruling Hausa/Fulani of Northern Nigeria origin who have been ruling the country for upwards of 30 years use their power to allocate resources selectively in the interest of the North to the exclusion of the south hiding behind different facades such as number superiority and high level of poverty. The ruling elites want to hold power perpetually in Nigeria and believe they can suppress the powerless *ad infinitum*. There is no doubt that there is an on-going competition between the North and the South over resources and political space which has always led to bad blood and acrimony. The dominance of the North over the south results in social and political inequality and observable inequity. The conflict theory informs that the effect of

long standing suppression, oppression and discrimination will always tend to violence, change and revolution. The signs are already in the horizon.

5. Findings and Discussion

5.1 Modalities and Template for Distributing Palliatives at the COVID-19 Lockdown

President Muhammadu Buhari's speech of 29th March, 2020 contained a couple of directive on alleviating the pains of the lockdown. We are however focusing on the palliatives directed to the poor who are the most pained casualties of the lockdown considering that over 124 million Nigerians live without sufficient means to support themselves (NBS, 2019). The President directed that the Conditional Cash Transfers (CCT) of ₦20,000 which represents four month advance payment of the ₦5000 stipends be paid to the vulnerable.

The National Cash Transfer office (NCTO) came up with more clarifications that only one million vulnerable Nigerian households on the National Social Register (NSR) would get the N20,000 palliative from the Federal Government to cushion the impact of the lockdown necessitated by COVID-19 pandemic (Falaju, 2020).

The National Coordinator, National Social Safety-Nets coordinating Office (NASSCO) informed that the National Cash Transfer Office (NCTO) had worked with various state Governors to develop the NSR of the poor and vulnerable people in 35 States and the Federal Capital Territory (FCT) besides Ogun State.

The National Coordinator of NASSCO also stated that the cash transfer that was kicked off by the minister of Humanitarian Affairs, Disaster Management and Social Development was for existing beneficiaries of the cash transfer program. The coordinator also disclosed that at the moment, the cash transfer is paying one million poor and vulnerable households. He revealed that a plan to rapidly increase the number to two million in the next payment round in May was on ground (Faluja, 2020). According to the Coordinator, the government is also using the NSR to provide food rations to those who are not in the cash transfer but have children of school age. The coordinator who also said that the school feeding program will go on also indicated that the Buhari

government would intensively expand the list to include urban poor adding that the number in the register would hit four million households by June 2020.

Thus, the modalities and template for distributing the palliatives to alleviate the pains associated with the lockdown was the CCT. Those to benefit from N20, 000 palliative are those who were captured in the NSR in the 35 States of the federation and Federal Capital Territory (FCT). As at 31st March, 2020, we had 2,644,495 households and 11,045,537 individuals contained in the NSR.

So many questions arise from the above arrangements by the agents of the federal government. Firstly it is said that only one million vulnerable households on the NSR would get the N20, 000 palliatives to cushion the impact of the lockdown for a start. What happens to the remaining poor Nigerians who are equally on lockdown that are over 100 million? Secondly, it was also said by the NCTO that it had worked with state Governors to develop the NSR in 35 States and FCT. What were the criteria and qualification to be included in the list? Again, records on this is unclear and incomprehensive. These were attempts made in 2016. Poverty profile had changed since then in Nigeria. In Enugu State where we quickly visited, only two local governments (Awgu and Igbo Eze South) were captured. Others were still at pilot stage.

Thirdly, the school feeding program was also allowed to run. This is as fraudulent as it is contradictory. The schools were asked to close down and all pupils were expected to be home. Where are the pupils to be served food? These imaginary contracts are avenues the elites siphon public fund, empower themselves to remain in power for oppressive purposes. Fourthly, government hopes to expand the SIR to include urban poor from May and reach four million pupils by June, 2020. Government appears to have forgotten that people are already locked down. Should they wait for palliatives and food till then in their houses or where?

We therefore feel that the modalities for implementation of the palliative are unwholesome, ineffective and less than satisfactory. Even where government succeeds in distributing palliatives to the targeted one million people, it just scratches the matter as this represents only one percent of the citizens that need help at this critical time.

This probably was why the National Assembly led by the Senate President and Speaker of the House of Representative on 4th of April (2020) openly faulted the Conditional Cash Transfer (CCT). The Senate President openly faulted the sharing of ₦20,000 largesse as palliatives to select families across the nation, to cushion the effects of the lockdown, which President Muhammadu Buhari ordered in Lagos and Ogun States, as well as the Federal Capital Territory (FCT) saying “there was an urgent need to redefine the social Intervention Program (SIP) to make it more efficient. According to Lawan (2020,p.2) “I think time has come for us to redefine the implementation of the social intervention program. Probably going out to the communities to give them N20,000 per person might not be the best way to go. It is still an effort but I think we need a better approach that will be more efficient”.

Also the leadership of the National Assembly led by the Senate President and the Speaker of the House of Representatives at a meeting with the Minister of Humanitarian affairs, Disaster Management and Social Development on 7th April, 2020 queried the billions of naira spent on Social Investment Program (SIP) of President Buhari saying the monies were not properly accounted for (Itua, 2020).

The above reactions coming from no less dignitaries as the Senate President and Speaker of the House of the Representatives who are the arrow heads of Nigerian Parliament strengthens and confirms our position that the modalities for the implementation of the palliatives to cushion the pain of the lockdown associated with COVID-19 are ineffective, unwholesome and may not have yielded any significant impact on the poor and vulnerable who are upwards of 100 million spread all over Nigeria including the urban areas. Besides, CCT programs aim to reduce poverty by making welfare programs conditional upon the receiver’s actions. The government only transfers money to persons who meet certain criteria. CCT seek to help in poverty alleviation, as well as breaking the cycle of poverty through the development of human capital. CCT is therefore inappropriate in implementing the distribution of the palliatives as most individuals who are locked down at home need one kind of palliative or the other. Lockdown is emergency situation but CCT is not designed for emergency.

5.2 Implementation of the Palliatives Based on National Social Register (NSR) Data

The National Social Register (NSR) is data register established for the poor and vulnerable Nigerians to ensure effective implementation of poverty alleviation programs of the federal government. The development of the NSR which started in 2016 is being coordinated by the National Social Safety Nets Coordinating Office (NASSCO). The Agency which is saddled with the responsibility of building a data base of poor and vulnerable households and coordinates social protection programmes in Nigeria said the “Register is available to be mined for COVID-19 response measures targeting the poor and vulnerable” (NASSCO,2020).

According to the special adviser to the President on social investments, “The process for objective identification of the poor and vulnerable households is as provided in the financing Agreement (FA) signed between Nigeria and the World Bank. The process involves a poverty mapping for the local government areas (LGAs) in each State, community mobilization, targeting and identification supported by trained enumerators at state and LGA levels after which each of the households identified by the communities is visited and data collated, which information includes fields such as the size of household, age, gender, persons with disability (if any) assets, vocation of head of household educational qualification (if any) dwelling house conditions, etc. As at March 31, 2020, the NSR comprised 11,045,537 individuals from 2,644,495 households, collated from 34 States and FCT, 453 LGAs, 47698 communities. Each and every beneficiary has a generated unique number and can be tracked” (Uwais, 2020). See Table 1 below:

Table 2: The National Social Register of Poor and Vulnerable Households (PVHHS) Distribution by States in Nigeria as at 31st March, 2020.

S/No	State	Households	Individuals
1.	Abia	14,246	152,605
2.	Adamawa	52,471	196,401
3.	Akwa Ibom	95,667	405,822
4.	Anambra	43,146	121,539
5.	Bauchi	47,712	275,007
6.	Bayelsa	51,727	184,876
7.	Benue	141,983	628,463
8.	Borno	7,130	33,728

9.	Cross River	27,604	148,482
10.	Delta	30,338	80,644
11.	Edo	43,260	144,676
12.	Ekiti	15,119	51,865
13.	Enugu	6,886	27,013
14.	FCT	41,485	156,260
15.	Gombe	31,982	156,553
16.	Imo	24,426	82,216
17.	Jigawa	168,542	656,757
18.	Kaduna	90,794	358,486
19.	Kano	151,315	763,919
20.	Katsina	176,724	807,200
21.	Kebbi	219,102	932,460
22.	Kogi	96,646	447,470
23.	Kwara	96,335	417,358
24.	Lagos	14,434	52,319
25.	Nasarawa	149,693	542,774
26.	Niger	63,957	329,593
27.	Ondo	25,312	89,519
28.	Osun	64,931	218,872
29.	Oyo	28,382	99,569
30.	Plateau	156,058	585,289
31.	Rivers	73,601	267,812
32.	Sokoto	3,347	18,435
33.	Taraba	39,646	106,691
34.	Yobe	31,665	163,711
35.	Zamfara	291,629	1,341,153
	Total	2,644,495	11,045,537

Source: *The National Social Safety Nets Coordinating Office (NASSO) (2020)*

Based on the NSR and in keeping with the directive of Mr. President, on 1st April, 2020 the Minister of Humanitarian Affairs Disaster Management and Social Development commenced the disbursement of ₦20,000 (approximately \$50) Conditional Cash Transfer (CCT) to poor homes starting from FCT (Agbedo, 2020).

Since then, the Ministry has been disbursing the ₦20,000 to few households in few States claiming that the remaining households will be reached soon. Although table two shows that 2,644,495 households consisting of 11,045, 537 will benefit, most of the states are yet to be reached example Enugu and Ebonyi States. From our contacts and interviews, considerable well-meaning and significant groups feel that the distribution of the palliatives is selective, lacks transparency, lacks clear guidelines, based on

questionable database, lacks sufficient coverage and capable of causing conflict and crisis. Table 3 shows summary of some comments.

Table 3: Comments of Notable Groups over the Distribution of Conditional Cash Transfer (CCT) Palliatives at COVID-19 Lockdown and their Recommendations

S/No	Group	Comments over Distribution of CCT Palliatives (Summary)	Recommendations and Stand of Group (Summary)
1.	Nigeria Governors Forum	The distribution of the palliatives is selective	Involve the Governors fully in the process and reform the system
2.	House of Representatives caucus	The Distribution of the palliatives is selective and partial. It does not cover enough grounds.	Ensure even and wide-spread distribution.
3.	Senate President	The distribution is unfair. Distributing N20,000 to the poor is not the best at this time	Reform and change the strategy for more poor Nigerians to benefit. It should be based on legislation
4.	Rivers State Indigenes	The distribution of the palliatives is selective and unacceptable.	Spread the palliatives to more people.
5.	Ohaneze Ndigbo Youth (Igbo Socio-cultural association)	It is a skewed program that give the impression that Igbos are second class citizens or not wanted in Nigeria.	President should ensure that no part of Nigeria is left out of the CCT palliative
6.	Human and Environmental development Agency (HEDA)	No clear guidelines for the distribution of the palliatives	Make the guidelines clear for the understanding of the all citizens.
7.	League of Anambra State Professionals (LAP)	The distribution lacks fairness and transparency	Show more transparency. The figures are conflicting
8.	Christian Association of Nigeria (CAN)	The distribution lacks transparency. It lacks coverage	Government should make the process more transparent and extend the palliatives to all the needy
S/No	Group	Comments over Distribution of CCT Palliatives (Summary)	Recommendations and Stand of Group (Summary)
9.	Committee of Youths mobilization sensitization (CYMS)	The distribution neglected the youth, hence the crisis, conflicts and riots in the urban areas	Factor in the youths in the distribution of the palliatives
10	Centre for	The palliative distribution appear	Federal and State

	Transparency Advocacy (CTA)	to be politicized	governments should not politicize the distribution of the palliatives meant for all.
11.	Socio-Economic Rights and Accountability project (SERAP)	The database upon which the palliatives are predicated are unreliable. The distribution lacks transparency	Provide more details for Nigerians to see.
12.	The indigenous people of Biafra (IPOB)	There is lopsidedness in government on-going disbursement of the palliative to the exclusion of the south East geopolitical zone.	The distribution of the palliative is a humiliation of the Igbo and this is capable of creating more crisis.

Source: *Compilation from Interviews and Significant Contacts by the authors, (2020).*

Going through table 3, it is observable that significant groups in the society are not satisfied with the template used in distribution of the palliative, hence the negative comments even from the top hierarchy of the national assembly. We think the failure is largely due to lack of reliable data upon which the palliative was predicated upon.

This was probably why (Clement, 2020) strongly feels that Nigerian’s database is posing a daunting challenge to Federal Government effort in providing palliatives to poor Nigerians due to the impact of the coronavirus pandemic. As we noted earlier, Mr. President ordered Conditional Cash Transfer (CCT) to vulnerable Nigerians for the next four months, as well as sharing of 70,000 metric tons of grains from the National Grain Reserve (NGR) as part of the palliative measures for the COVID -19 pandemic.

However, there are questions as to how the Federal Government through the Ministry of Humanitarian Affairs arrived at the 10.6 million number of vulnerable Nigerians which it earmarked to provide conditional cash transfer as there is no legitimate data to prove who is vulnerable and who is not vulnerable currently in the country especially in the face of economic hardship being faced by Nigerians due to the impact of the virus.

Currently, economic activities are on standstill and Small and Medium Enterprises in the country are feeling the brunt. In the same category are Nigerians who do menial jobs on a daily basis and rely on daily pay for their survival, who have now

been asked to stay at home without food and money to sustain themselves and their families.

These category of people include a large number from the informal sector like petty traders who are considered as providing non-essential services, cleaners, sales boys/girls, taxi drivers and other commercial taxi, tricycles and motorcycles operators. For these category of people above, many analysts and public affairs commentators believe that they should be captured by the Federal government as vulnerable and given palliatives to survive until the pandemic fazes off.

A renowned economist and professors of capital markets, Uche Uwaleke said there is no specific data that captures two categories of Nigerians which are the poor and unemployed. Due to the Nigeria's defective database, he said it is virtually impossible to effectively implement the different palliative measures put in place by the Federal Government. According to him, in the United States and other developed nations, food items and other palliatives are delivered at the door steps of vulnerable citizens, but Nigeria has not built its database to that extent yet, adding that the number of vulnerable Nigerians must have surpassed the figure announced by the Federal Government.

Nigeria as you know is declared the poorest in the world by World Poverty clock despite our huge potentials as we have about 90 million (49%) of our entire population of 200 million living in extreme poverty. Unemployment is over 20 per cent and it is estimated that over 140 million Nigerians which forms majority of the country's population cannot afford \$2 equivalent of N760. Therefore the method used to arrive at that 10.6 million may not really be accurate," he stated (Uwaleke, cited in Clement, 2020).

The good intention of government notwithstanding, the data in use upon which the palliatives is predicated is faulty. Besides, the data was generated in 2016. Since then the poor and the vulnerable have increased exponentially. The palliatives are therefore likely to by-pass the needy who are at home obeying the lockdown directive of government during the COVID -19 pandemic. Even where all the individuals (11,045,537) in the NSR are reached as indicated in table two, this represents only 8.91%

of the over 124 million Nigerians who live without sufficient means to support themselves. The implementation of the palliatives doubtlessly is seriously marred by lack of national database.

5.3. Politicization of COVID-19 lockdown palliatives

There are allegations and counter allegation of politicizing the palliatives meant for all Nigerians. Irrespective of political inclination, ethnic origin and political party affiliation, the coronavirus affects all citizens equally. However, as shown in table 3 many groups feel that the distribution of the palliative are selective and favors the ruling ethnic group which is Hausa/Fulani of Northern Nigeria. The groups and commentators argue that the NSR favors the Northern region more than the South. Besides, beneficiaries of CCT based on NSR started earning N5000 per month since 2016 whereas some of the states in the south benefitted from the CCT only in December, 2019. Examples are Enugu State (Two Local Government Areas, only) and Anambra State (One Local Government Area, only). Lagos, Ogun, Ekiti are yet to be captured in the database of NASSCO. The latter states are from the southern part of Nigeria.

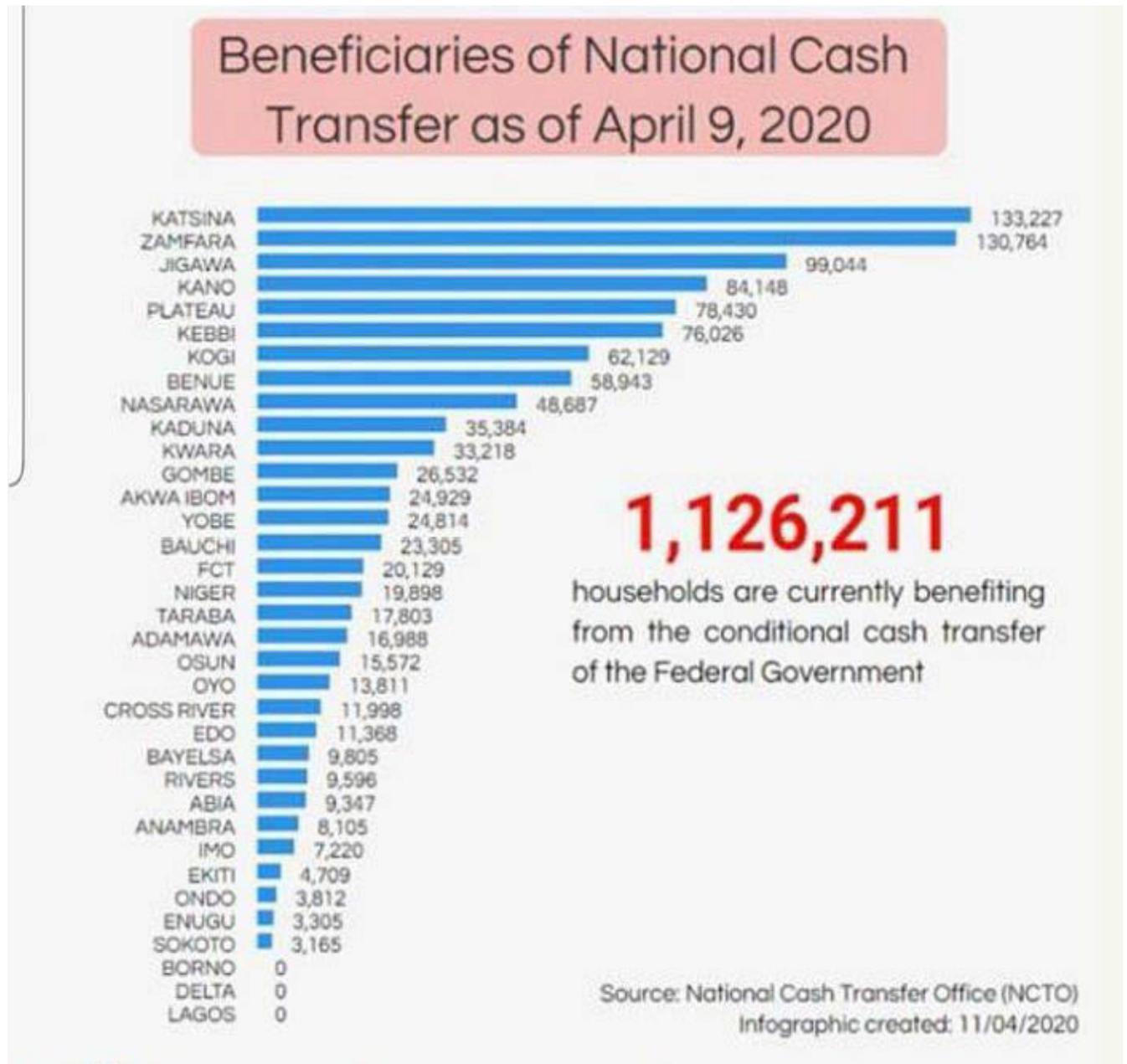
That is probably why the leading opposition party in Nigeria, the Peoples Democratic Party (PDP) had at the outset of the implementation of the CCT described the program as a hoax. The party, in a statement issued by its National Publicity Secretary, Kola Ologbondivan accused the ruling All Progressives Congress (APC) of using ghost beneficiaries to siphon government resources. The PDP claimed that not even a handful of Nigerians had acknowledged receiving any social palliative from the government despite claims by officials of having paid out billions of naira to individuals and households.

The party also faulted cash disbursements to beneficiaries describing it as fraudulent “Such was part of the design to use few unsuspecting Nigerians to circumvent the system, muddle up financial documentation and accountability processes and facilitate the siphoning of huge chunk of the palliative fund. Such practice directly points to fraudulent diversion of funds by APC leaders,” PDP said (Agbedo, 2020, Jimoh, 2020).

In a Guardian Editorial of Wednesday, April 15, 2020 the renowned editorial team observed that “the deployment of relief materials by the Federal Government appears to be a mirage or at best very un-transparent. There have also been questions about the conditional cash transfer in relation to effectiveness and spread. The question arises as how reliable the data of poor persons, used in the implementation. There is also the question of the part of the country where these supposedly vulnerable Nigerians come from. These concerns are awash in the social media with perception that the palliatives are restricted to certain sections of the country. This is dangerous and unacceptable”.

A critical look at figure 1 below lends credence to the position of the Guardian team. There is lopsidedness in the distribution of the palliatives.

Figure 1: Beneficiaries of National Cash Transfer as of April 9, 2020



Source: National Cash Transfer Office (NCTO), (2020).

Katsina State has the highest number of recipients numbering 133,227 while Sokoto State has the least of recipients of 3,165. Lagos, Delta and Borno states had zero beneficiaries because the state were yet to finalize their register. The glaring picture is

that the discrepancies are much and suspect supporting the nation that the beneficiary list is politicized. This hunch has been supported and underscored by many groups.

An observer group, Centre for Transparency Advocacy (CTA) warned the Federal and state governments against politicizing the COVID-19 issue that is at the moment ravaging the world. According to the group, if not checked properly, there are moves by some politicians under the aegis of providing palliatives to Nigerians across the States to score political points. In a statement by CTA Executive Director, Faith Nwadishi, the group is expressing fears that the volume of donations coming from both local and foreign organizations may be mismanaged if Nigerians fold their arms and simply watch the process, adding that strong indications have emerged that some states may be juggling figures in order to receive more attention, money and materials from the Relief Fund and palliatives.

The CTA has also said that the most worrisome at the moment is that Nigeria as a country has recorded more deaths of citizens from alleged killings by security agents especially the Police and the Nigerian Army than the deaths from the coronavirus. The statement read, “The government at all levels should not politicize the COVID-19 Pandemic matters as this will not help in any way in the fight against this deadly virus. CTA has observed lately, that there is a gradual politicization of the pandemic across the states and we must guard against”.The disease is not a respecter of person and all hands must be on deck to fight it. It will be dangerous to juggle figures as it seems in some states in order to receive more attention, money and materials from the Relief Fund and palliatives. This is a dangerous trend and must be halted immediately if it is so.

In this critical period, transparency and accountability should be the watchword. The relief Funds and materials must be properly accounted for, distributed judiciously and equitably in a transparent manner. This is not the time to play politics but time to be humane and serve humanity in all honesty. The Trader money and Cash Transfer program should not be confused with the COVID-19 palliative as currently in play. The COVID-19 Relief Fund should be separated and vulnerable citizens should benefit from it. This is not the time to curry political favors but to serve Nigerians and save us from

the pandemic! “CTA commends the Nigeria Center for Disease Control especially, the Director-General Dr. Chikwe Ihekweazu for being on top of the issues as well as the Federal Task Force on COVID-19. “We are also specially commending the health care providers who have made themselves available at this time by risking their lives to make the rest of the citizenry safe and the Lagos State government on the actions it has taken so far. We, therefore, recommend that other states adopt this model and be more proactive in responding to cases”.

“CTA is concerned about the highhandedness and abuse of rights of citizens by security agents that are enforcing the lockdown order by the Federal and state government. It should worry every right-thinking Nigerian that the country has recorded more deaths of citizens from the security agents especially the Police and the Nigerian Army than the deaths from the Coronavirus This is vile, unacceptable and should be condemned entirely. We call on the security agencies to respect the rights of the citizens while trying to enforce the lockdown working within the mandate of the operational order and ethics of their profession. In like manner, we also call on the citizens to respect the security agents and adhere to the lockdown order. We appeal to citizens to stay at home even though we recognize the hardship many citizens are facing especially those who depend on the daily income for a living.

According to Nwadishi, the “CTA has observed that the fight against the Corona Virus has reached a frenzied stage though attracting donations from individuals, corporate organisations and from the international community in cash, equipment, materials and personnel. There are donations ranging from 11 billion Naira from NNPC, materials from Chinese Billionaire Jack ma. A big boost came from top Nigerian Billionaires under the umbrella name of the Nigerian Private Sector Coalition against COVID-19. Their efforts have yielded more than 15 billion Naira in donations and recently, 50 million Euros was donated by the European Union. These donations are aside what the Federal government announced as its budget for the pandemic and its intention to set up a 500 Billion Naira fund to tackle the disease. As welcome as this may be we call for transparent and judicious utilization of the fund (Umoru, 2020).

The operation of the social investment scheme, part of which is the CCT, in providing palliatives to the people have been, according to *The Guardian* Editorial team (2020) seriously indicting on the integrity, competence and fairness of the operators of the scheme. The distribution mode has been questionable. The spread of the distribution has been skewed in favor of certain sections of the country and hardly could many poor persons that supposedly benefitted be clearly identified. The data in circulation, on the palliatives or CCT to the poor smacks gross nepotism.

It is our strong belief that politics, especially ethnic politics affects the implementation of the distribution of the palliative rendering the exercise less than satisfactory. The ruling elites use the opportunity of the COVID-19 lockdown palliatives to maximize their own benefits. Chappelow (2019) was correct when he opined that conflict theory can explain the competition between groups in the society over limited resources. Socio-economic institutions that are replete in Nigeria society today are tools of economic struggle between groups and classes used to maintain inequality and the dominance of the ruling class.

The conflict theory which is the theoretical platform of this paper helps us to understand the intrigues associated with the ruling Hausa/Fulani's grip of power and its deployment in every event in Nigeria. But the effect of long-standing suppression, oppression and inequity will always tend to violence, change and revolution. These have already started. The violence, open resistance and cry of injustice in many cities in Nigeria during the lockdown are signs of possible revolution in a time not too far from now in Nigeria.

6. Moving Forward

Nigeria has no reliable database to be deployed as the need arises. Aside the conflicting figures of the poor, the extremely poor, etc. There is little disaggregation of data in the data bank. The experience of the COVID-19 has exposed the weakness of Nigeria in that direction. At the outset of COVID-19 and when it became necessary to give out palliatives owing to the lockdown government including state governments did not know the category, configuration and profile of the people to benefit from the palliative. The Federal government resorted to NSR which was compiled in 2016. As at

April, 2020 not all states have compiled their own list. It is therefore absolutely necessary for government to be more serious with data collection, processing and storage. National data should not only be updated but disaggregated. The last national population census was carried out in 2006. Since then, population figures have been based on projections and at time guess work. There is need for a reliable population census as data from the exercise can always be of help in national and strategic issues including planning.

Distributing ₦20,000 (which is about \$50) to the poor for four months amounts to impoverishing the already poor. We recognize that this is a time of emergency, so people need money when they are at home. But distribution of money is not the best of strategies. At a time like the lockdown, food and materials supply are more effective. There should also be sufficient supply of water and electricity. As remarked by the Guardian team, government needs to know that its effort in providing palliatives for the poor members of the society during the period of lockdown falls short of what other governments across the world are doing for their citizens. The Federal and state governments should synergize better. There should be better coordination and cooperation between the two tiers of government for effectiveness in the palliative distribution. The program needs to be reviewed. The government needs to redeem its image by carrying out total overhaul of the program. There is need for expert's advice on evaluation.

In the interest of peace and to prevent more conflict and crises, distribution of palliative must be fair, transparent and based on a template that is clear to all. Information regarding the distribution must be liberally available to the people to reduce rumor and frustration.

At a time like the lockdown, the unemployed and youth are more vulnerable, frustrated and reactive. If government does not focus on them, it provides opportunity for them to pull down the state as it were. Their interest should be of interest to government, otherwise the consequences will be grave.

Finally, the distribution of the palliatives should be depoliticized. It should not be handed over to politicians, otherwise they will favor those that claim they voted for them.

Selective distribution is dangerous. All the needy should be the beneficiaries and not a select few.

7. Conclusion

Nigeria, like other affected countries directed a lockdown to prevent the spread of the deadly coronavirus. There was therefore a need to alleviate the pain of citizens that were asked to stay at home. Hence the Federal Government rolled out a couple of palliatives including conditional cash transfer to the poorest of the poor. The good intention of government notwithstanding, the palliative measures were ill-planned as sufficient thoughts were not deployed.

A look at the modalities for the implementation of the distribution of the palliatives show a wide gap. The template used is not only ineffective but unwholesome. It did not yield significant impact on the poor and vulnerable who number more than 100 million spread all over Nigeria. Data used for the distribution of the CCT was based on the National Social Register (NSR), which was selectively compiled. The NSR did not capture the needy at this point in time. Meanwhile, the CCT was based on NSR. The distribution of the palliatives was therefore not only selective, un-transparent but highly ineffective. The database is questionable and the guidelines are unclear.

Ethnic politics appear to affect the implementation of the distribution of the palliatives, rendering the exercise less than satisfactory. The ruling elites use the opportunity of the COVID-19 lockdown palliatives to maximize their own benefits not only in regards to the CCT but hundreds of billions of Naira donated by wealthy Nigerians, corporate bodies and development partners.

The mishandling of matters relating to the palliatives associated with COVID-19 as it appears, amounts to cultivating conflict. On maturity, the fruits will be distasteful. Government at all levels has for too long neglected areas that impact on the welfare of ordinary people. The COVID-19 phenomenon should have a positive effect in redirecting government both at the Federal and state levels on priorities.

Declaration of interests

The authors declare that there are no conflicts regarding the paper.

Authors' contributions

F.N.Onah, Ph.D: Gathered the study materials, developed the introduction of the work, research methodology and presentation of the published work.

C.O.Ugwuibe, Ph.D: Developed the initial draft, investigation process of the paper and editing.

F.O.Onah, Ph.D: Did the critical review as well as teased the overarching argument of the study, management and coordination responsibility of the research activity planning and execution.

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REFERENCES

- Agbedo, O. (2020). COVID-19 tangle over fiscal discrepancies in NSIP'S budget implementation. *The Guardian* www.guardian.ng retrieved on 11th April 2020 1.42am, Abuja.
- Ajimotokan, O. (2020). Nigeria: government inaugurates presidential task force on coronavirus. *This day* <https://www.allafrica.com/view/group/main/mein/id/0072392.html>
- BBC (2019) Nigerians living in Poverty rise nearly 61% *BBC News Report 2012* <https://www.bbc.com/news/world-africa-177015873>
- Chappelow, J. (2019). Conflict theory. *Investopedia*. <http://www.investopedia.com/terms/conflict-theory.asp>.
- Clement. P. (2020). Poor database hinders palliative distribution to Nigerians. *The Daily Times* 6th April, 2020 <https://www.dailytimes.ng>.
- Crossman, A. (2019). Understanding conflict theory. *Thoughtco*. <http://www.thoughtco.com/conflict-theory-3026622>.
- Falaju, J. (2020). Only one million households are entitled to N20,000 largesse. *The Guardian* Monday 6, April 2020. www.guardian.ng.
- Itua, F. (2020). NASS fumes over multibillion social investment scam *Daily Sun*, www.sunnigeriaonline.com
- Jimoh, A.M. (2020). How COVID-19 exposed FG'S SIP as fraud, by PDP. *The Guardian* April 7 Tuesday, April, 7. www.guardian.ng
- Johns Hopkins University (2020). COVID-19 global cases by centre for systems science and engineering (CSSE) Johns Hopkins University, retrieved 2020-04-07.

- Kazeem, Y. (2018). Nigeria has become the poverty capital of the world. *Quartz Africa* <https://qqz.com/africa/1313380/nigeria>.
- Lawan, A. (2020). COVID-19 Patient's death creates tension at LUTH. *The Guardian* Sunday, April 5, 2020. www.guardian.ng.
- National Bureau of Statistics (NBS) (2019). Poverty Statistics in Nigeria. Abuja <https://www.nigerianstat.gov.ng>
- National Cash Transfer Office (NCTO) (2020). Beneficiaries of national cash transfer as of April, 2020 retrieved from www.icirnigeria.org on 19/04/2020.
- National Social Safety Nets Coordinating Office (NASSCO) (2020). National Social Register of the poor and vulnerable Households by States. April, 2020.
- Oluwasanmi, F. (2020). Who are the poorest of the poor in Nigeria? <https://politicsnigeria.com/new-corona-hunger>
- PTF (2020). Nigeria confirms 1st case of new virus in sub-saharan Africa <https://www.wsbtv.com/news/world/nigeria>.
- Sampson, E. (2015). SDGs and extreme poverty: From alleviation to eradication? *Zenith Economic Quarterly*. 11(4). 18-29
- Shaba, F.F. (2020). COVID-19 lockdown: Poor masses and their empty stomachs. *PM News* www.pmnewsnigeria.com/category/news
- The Guardian Editorial (2020). *The Guardian* Wednesday, April 15 and 22. Available at www.guardian.ng
- The National Social Safety Nets Coordinating Office (NASSO) (2020). COVID-19: NASSCO releases register of poor, vulnerable households in Nigeria *Vanguard* April 10 2020 2.28pm.
- Tolulope, A. (2018). Nigeria poverty statistics and poverty rate in Nigeria 2019, *Kikiotoh News*, December 30.
- Umoru, H. (2020). COVID-19: don't play politics with palliatives, CTA warns Federal, state government. *Vanguard*. April 17, 2020 <https://www.vanguardng.com/2020/04/COVID-19>.
- UN (2019). The 2019 global multi-dimensional poverty index (MPI) *Human Development Reports* hdr.undp.org/en/2019-MPI.
- Uwais, M. (2020). Presidency: Lawan, Gbaja lied on N2trn SIP fund in Olaoye (2020) *New Telegraph* April 9, 2020 <https://www.Newtelegraphing.com>.
- WHO (2020). Laboratory testing of human suspected cases of novel coronavirus infection interim guidance, 10 January 2020, retrieved 2020-01-14.
- WHO (2020). Novel coronavirus 2019, Wuhan, China. [www.edc.gov\(CDC\).2020-01-23](http://www.edc.gov(CDC).2020-01-23). Retrieved 2020-01-23.

WHO (2020). WHO statement regarding cluster of pneumonia cases in Wuhan, China.
www.who.int. 2020-01-09 retrieved 2020-01-10

Worldometer (2021). Total Coronavirus cases in Nigeria. Available at:
<https://www.worldometer.info/coronavirus/country/nigeria/>.

World Bank (2012). Nigeria trade summary 2012 data. *World intergraded trade solution*
<https://wits.worldbank.org/countryprofile/en/country/NGA/Year/2012/summary>.