

EFFECT OF COVID-19 OUTBREAK ON SOCIOECONOMIC DEVELOPMENT IN NIGERIA

Mufutau Akanmu Popoola, Shittu Muili Olawale & Hamzart Kabirat Abosedo

Research Scholar, National Open University of Nigeria, Nigeria

ABSTRACT

This study investigates the issue of COVID-19 in Nigeria, its effect on the socioeconomic and the likely causes that worsen the crisis of corona virus (COVID-19). The findings shows that the socioeconomic downturn in this country was triggered by a combination of an increases in the price of basic needs and spillovers from the COVID-19 outbreak, which led to the total lockdown that Germaine in Nigeria and other parts of the World, demand for basic needs continues, particularly food but there is halt in its production and other agricultural produces, also stopped economic activities from taking place when social distancing policies were fully enforced by the government at various level. The government responded to the crisis by providing financial assistance to businesses and a small number of households that were affected by the corona virus (COVID-19) outbreak.

KEYWORDS: *Corona Virus, Epidemic and Pandemic*

Article History

Received: 29 Apr 2020 | Revised: 30 Apr 2020 | Accepted: 30 Jun 2020

INTRODUCTION

The issue of COVID-19 (Corona virus), when occurrence of cases of an illness, particularly health related behavior, or other health related issues in a community or region clearly in excess of normal expectancy it will be considered as epidemic, but Martin, (2005) and Tausch, (2015) in their respective study viewed it as pandemic. Ozili and Arun, (2020) observed that COVID-19 pandemic has had far-reaching effects on the global economy systems, the food industry, event industry, education and global trade. Ozili and Arun, (2020) in their study on globalization issues, and explained that there are expectations of spillover effects to emerging and developing countries due to their over dependence on developed countries for the importation of goods and services. A recent literature has emerged that examine the effect of COVID-19 pandemic on economic activities, such as Altig, (2020); Atkeson, (2020); Fernandes, (2020); Mckibbin and Fernando, (2020). Still researcher aim to analyze the effect of COVID-19 Pandemic on socioeconomic development in southwestern Nigeria particularly Lagos state as the highest populations that are infected in the region. Therefore, this study will fills the gaps in existing literatures by delved into vivide investigation of the pandemic (COVID-19) within southwestern Nigeria. Ebere, (2020) explained that 'the corona virus disease of 2019 (COVID-19) pandemic gripped the world with a shock, thereby overwhelming the health system of most nations'. The COVID-19 (corona virus) which is an infectious disease that became an important health threat that ravaging the entire world with numerous health and economic challenges. This disease occurred first in Wuhan, China in late 2019 and since then has spread to almost all continents in the world WHO, (2020). Jimoh, (2020) also affirmed this view. Marbot, (2020) explained that Nigeria is also among the vulnerable African

nations, given the weak state of the health care system.

Statement of the Problem

The effect of COVID-19 outbreak on socioeconomic development in southwestern Nigeria, particularly Lagos state

Research Questions

Does COVID-19 outbreak has effect on socioeconomic development in southwestern Nigeria, particularly Lagos state?

Research Objectives

To examine the effect of COVID-19 outbreak on socioeconomic development in southwestern Nigeria, particularly Lagos state

Scope of the Study

This research centered on thorough investigation on the issue of COVID-19 outbreak in southwestern Nigeria and its effect on socioeconomic development in southwestern Nigeria, particularly Lagos state. Justification for using Lagos state as a Case study because National population census reports, (2006) revealed that Lagos was highest in term of population in southwestern Nigeria.

Limitation of the Study

Insufficient relevant literature, and Financial constrain affected this study.

Negative attitudes of respondents to dish out real information as a result of fear of unknown.

LITERATURE REVIEW

The COVID-19 (coronavirus) which is an infectious disease that became an important health threat that ravaging the entire world with numerous health and economic challenges. This disease occurred first in Wuhan, China in late 2019 and since then has spread to almost all continents in the world WHO, (2020). Jimoh, (2020) also affirmed this view. Marbot, (2020) explained that Nigeria is also among the vulnerable African nations, given the weak state of the health care system. Ebere Roseanne Agusi et al. (2020) explained further that human survival has often been threatened by diverse plagues since existence. According to WHO, (2020) World Health Organization explained that COVID-19 is a viral infection that causes respiratory illness. This disease is basically transmitted from person to person through contact with drop letofan infected person. The first confirmed incident of the COVID-19 in Nigeria was announced on February 27, 2020, on arriving of an Italian citizen to Nigeria through the Lagos Airport tested positive for the virus. On March 9, 2020, a second case of the virus was reported in Ogun State, a Nigerian citizen in transit from Milan to Lagos who had contact with the Italian citizen thereafter, the Nigerian Health Minister announced that 60 persons who had contact with the index, Italian patient were under isolation, 40 persons in Ogun State and 20 in Lagos State. However, there has been an increase in confirmed cases and consequent mortality. As of May 16, 2020, according to report from Nigeria Centre for Disease Control (NCDC), there have been 5621 confirmed cases, 3973 active cases in 34 states including the FCT with 176 deaths and 1472 recoveries. Although in Nigeria, there are still communities without healthcare facilities, apart from the scarcity of health workers, even many other Africa countries, this corroborate the view of Amzat, (2011), this led to the fear of general public about this infectious deadly disease. The NCDC, (2020) disclosed that all confirmed cases of COVID-19 in the country between February 27 and March 17 the first 30 days were imported by returning travelers. As of March 27, one

month after the first case, ten states in Nigeria had 81 clinically confirmed cases. Three patients had fully recovered, and one death was reported. At this time, Lagos State had the highest number of cases (52; 64.2 %).

Epidemiological Description

A 44-year old Italian citizen was diagnosed of COVID-19 in Lagos State. The case is the first to be reported in Nigeria since the first confirmed case was reported from China in January 2020. The case arrived the Murtala Muhammed International Airport, Lagos at 10pm on 24th February 2020 aboard Turkish airline from Milan, Italy. He traveled on to his company site in Ogun state on 25th February. On 26th February, he presented at the staff clinic in Ogun and there was high index of suspicion by the managing physician. He was referred to IDH Lagos and COVID-19 was confirmed on 27th February. Contacts of the index case were identified as follows: 21 contacts identified in Lagos state, 40 contacts identified in Ogun state. The initial sample of a symptomatic contact in Ogun tested negative. A follow up sample will be collected.

Causes of the Spread of COVID-19 in Nigeria

According to Ibekwe, (2020) viewed that in Nigeria, the country's existing health facilities and equipment including ventilators and PPE are grossly inadequate to handle the medical emergency due to COVID-19, Mac-Leva, (2020) and also supported this view. Although the number of isolation facilities and capacity for intensive care units (ICU) in the country is growing, they are inadequate as many states are still struggling to set up isolation and treatment facilities. Beyond the shortage of personal protective equipment (PPE), health workers also face high risks and challenges. They are always on the front line taking care of the numerous COVID-19 patients increases their exposure to infection, Amzat, (2018) also revealed related view. As the front line soldiers, all health workers should be covered by life insurance. Given the altruistic behavior of health workers, their protection should be paramount in the fight against COVID-19. It is also vital to provide PPE for health workers in the regular health centers, not only those staffing the isolation centers.

Since COVID-19 identified with a symptom complex, i.e. like malaria and other diseases, individuals with unsuspected COVID-19 might report at health facilities where health workers and other patients might be exposed to COVID-19. Also, in the absence of PPE for the regular health workers, suspected COVID-19 cases might be rejected, which might lead to an upsurge in mortality from non COVID-19 diseases. There are concerns that the fragile health system might be unable to care for a high incidence of COVID-19 infection, which could lead to dreadful consequences in terms of morbidity and mortality. Many western countries (including Italy, the USA, and Spain) seem to have been overwhelmed by thousands of daily deaths. Again, the pressing concern is that the last burden of COVID-19 might be in Africa, and Nigeria could carry the most onerous burden if more effective precautions against the virus are not continuously enforced. The rush to fully reopen the economy might be a significant factor in a possible uncontrollable rise in cases after the first 100 days of COVID-19 in Nigeria. Evidence from the relaxed lockdown supports this fear if the economy is prematurely reopened without substantial precautions. Public health gains should be prioritized along with, if not prior to economic gains. Amzat, (2018) explained that, there is a gross shortage of health facilities and health workers in rural areas where more than 60 % of Nigerians reside. It is identified that those health workers that are available to take charge of taking care of any infectious patients are not provided with adequate equipments and consequently infected. Shaban, (2020) also explained further that healthcare personnel representing 6.5 % of the positive cases reportedly contracted COVID-19 in Nigeria. A rural COVID-19 outbreak might spell doom for any community in Nigeria as well as Africa. At present, the urban outbreak is overwhelming some countries.

Effect of COVID-19 on Socioeconomic Development in Lagos State Nigeria

Today, it's understandable that Nigeria has been battling with series of economic crisis from economic recession in 2008/2009 to 2021, such as global economic meltdown, Ebola, laser viva, novel COVID-19 pandemic, Sanusi, (2010), Adeniran and Sidiq, (2018) were both also revealed similar views. All Nigerian business icons, if not the World can not withstand the effects of novel COVID-19 pandemic, no country in globe that free from the pandemic World meter, (2020) revealed. Ozili, (2020), also explained that COVID-19 pandemic and lockdown restrictions have socioeconomic consequences for African countries. And Nigeria is included, findings shows that Lagos dominates the Nigerian modern economy and cultural life to a greater extent than New York City does in the United States. Like New York, Lagos, ostensibly a Yoruba city, attracts residents from all over Nigeria, and is a travel hub for people in West Africa. Nobody quite knows how many people live there (a credible estimate is about 22 million) or even what the boundaries of the metropolitan area are. Usually the city and state of Lagos are joined together, and adjacent Ogun state. The city is built on islands in a lagoon and adjacent swamps. Potable water and drainage is always an issue. While there are pockets of wealth, poverty is ubiquitous. Most Lagosians live packed together in slums. The informal economy is far larger than the formal one; everybody has a hustle, and much of that activity involves face-to-face contact. This means of livelihood is now threatened by the lockdown. Hence, on the order of total lockdown brought about harsh economy to the Mercies. International and local flights was also banned, all commercial activities was completely on hold. Nigerian President Buhari and the Presidential Task Force on COVID-19 (PTF) have approved measures to being phase two to ease the lockdown, which has been in place since March 29, 2020. The guidelines for phase two, which was placed from June 02, 2020 to June 29, 2020, includes the following:

The nationwide curfew remains in place but the time has been changed to 10:00 P.M. to 4:0 A.M. daily. Healthcare workers and journalists are exempted from his curfew.

Banks may resume normal working hours

Government offices will be open between 9:00 A.M. and 2:00 P.M. Monday to Friday.

The ban on interstate movement remains in effect except for agricultural produce, petroleum products, manufactured goods, and essential services.

All airports remain closed to domestic and international travel, except for emergency flights. The PTF is considering plans to reopen airports for domestic flights by June 21, 2020 if proper protocols are put in place by the aviation industry.

Face masks or coverings are mandatory in public settings and hand washing / sanitizing practices must continue to be followed.

Ban on gatherings of more than 20 people outside of a workplace.

Relaxation of restrictions on places of worship based on guidelines issued by the PTF and State governments.

Finally, the COVID-19 outbreak resulted to end of operation of some investors, operating one are afraid of contacting diseases and many people lost their employment to covid-19 pandemic in Lagos state and other part of the

country, which led to severe economic crisis or another recession, caused by the closure of both internal and external trade affected as a result of market failures, Chauffour and Farole, (2009), Francois and Woerz, (2009), Gomulka and Lane, (1997), Hart and Tindall, (2009), Jones, (2016), Mendis, (2002), Petrakos, (2014), and Stiglitz, 2008).

THEORETICAL REVIEW

The concept of social distancing in infectious diseases control was adopted as much literature has not been revealed on this issue of COVID-19 outbreak in Lagos state, but still relied on the concept of social-distancing revealed by World Health Organization WHO, (2020) and NCDC, (2020) revealed that social distancing combined with good respiratory hygiene and hand washing are considered, the most feasible way to reduce or delay a pandemic that is on course. The Centers for Disease Control and Prevention (CDC) described social distancing as a set of methods for reducing frequency and closeness of contact between people in order to decrease the risk of transmission of disease. In the course of the 2019-2020 corona virus pandemic, the CDC revised the definition of social distancing as remaining out of ate settings, avoiding mass gatherings, and maintaining distance (approximately six feet or two meters) from others when possible. Therefore, in basic terms, social distancing entails physical distancing.

CONCEPTUAL REVIEW

Corona virus: According to WHO, Corona virus disease (COVID-19) is an infectious disease caused by a newly discovered corona virus.

Epidemic: When diseases spread to a large number of people within a short period of time it is called epidemic. According to WHO, (2020) World Health Organization explained that when occurrence of cases of an illness, specific health-related behavior, or other health-related issues in a community or region clearly in excess of normal expectancy it will be considered as epidemic.

Pandemic: Referred to that time an epidemic spread to multiple countries or regions of the world

METHODOLOGY

This paper contains various aspects of Coronavirus and its effects on socioeconomic development by reviewing existing literature and information. The data used for this research is secondary type. Series of studies on COVID-19 are collected from various websites, both international and local journals, newspapers, magazines, government publications among others. This research adopted data provided in the NCDC COVID-19 Situation Report and used as data analysis simply because NCDC is the government agency that keep custody of reliable data related to novel infectious disease (COVID-19) here in Nigeria particularly Lagos state.

DATA ANALYSIS

The Table 1 shows revealed that Lagos state reported more cases of COVID-19 outbreak than any other states within the southwestern states which includes Ekiti, Lagos, Ogun, Ondo, Osun and Oyo state Nigeria. It also shows that Lagos state reported more cases of COVID-19 than any other in Nigeria. This report indicated the fact and figure of those that contacted COVID-19 within southwestern Nigeria, Ekiti state 381 cases, Lagos state 23,850 cases, Ogun state, 2,258 cases, Ondo state 1,728 cases, Osun state 947 cases and Oyo state 3,742 cases. Therefore, this led to strict presidential order on Lagosians to observed permanent lockdown which resulted to total shutdown of economic activities in Lagos state.

Table 1: States with Reported Laboratory Confirmed COVID-19 Cases, Recoveries, Deaths, Sample Tested and Active Cases**DATA ANALYSIS****GENERAL FACT SHEET – DATA AS AT 6th DECEMBER 2020**

Table 1: States with reported laboratory-confirmed COVID-19 cases, recoveries, deaths, samples tested and active cases

STATES	CONFIRMED		RECOVERIES		DEATHS		TESTING		ACTIVE CASES
	Total	Last Week	Total	Last Week	Total	Last Week	Total	Last Week	
Abia	926	0	908	0	9	0	10,274	323	9
Adamawa	261	0	238	0	19	0	3,661	652	4
Akwa Ibom	358	19	321	10	9	0	3,797	47	19
Anambra	285	0	265	0	19	0	3,155	66	1
Bauchi	782	12	742	16	14	0	10,746	319	30
Bayelsa	458	13	387	5	21	0	5,860	1,058	42
Benue	501	5	460	0	11	0	5,608	318	25
Borno	745	0	705	0	36	0	14,241	134	4
Cross River	90	0	78	0	9	0	1,905	28	3
Delta	1,824	0	1,737	0	49	0	13,558	38	38
Ebonyi	1,055	0	1,019	0	30	0	6,387	23	6
Edo	2,717	21	2,581	8	112	0	20,487	520	11
Ekiti	381	16	351	16	6	0	7,640	223	24
Enugu	1,332	0	1,290	0	21	0	9,399	145	21
FCT	7,279	509	6,273	271	83	0	97,471	5,323	678
Gombe	938	0	857	0	25	0	25,687	199	56
Imo	681	19	645	32	12	0	12,370	1,678	37
Jigawa	336	5	308	0	11	0	3,056	19	12
Kaduna	3,387	323	3,048	222	47	0	33,622	1,803	191
Kano	1,819	24	1,713	8	54	0	58,528	762	36
Katsina	1,064	34	1,000	17	24	0	24,935	200	23
Kebbi	93	0	84	0	8	0	2,611	502	1
Kogi	5	0	3	0	2	0	386	16	0
Kwara	1,110	8	1,039	0	29	0	8,008	430	34
Lagos	23,850	612	23,114	929	227	7	203,403	9,669	833
Nasarawa	521	28	325	0	13	0	7,936	222	155
Niger	298	0	282	6	12	0	8,101	216	10
Ogun	2,258	35	2,085	56	33	0	34,469	3,508	161
Ondo	1,728	0	1,585	0	40	0	9,911	87	103

NCDC COVID-19 Situation Report | covid19.ncdc.gov.ng

STATES	CONFIRMED		RECOVERIES		DEATHS		TESTING		ACTIVE CASES
	Total	Last Week	Total	Last Week	Total	Last Week	Total	Last Week	
Osun	947	1	924	3	21	0	6,103	249	4
Oyo	3,742	21	3,348	5	45	0	28,276	565	333
Plateau	3,914	56	3,725	55	34	0	40,012	586	154
Rivers	3,045	60	2,870	47	59	0	71,595	4,406	103
Sokoto	171	6	150	2	17	0	10,497	872	0
Taraba	175	16	157	18	6	0	4,152	193	14
Yobe	100	0	84	0	8	0	3,599	451	8
Zamfara	79	0	73	0	5	0	1,152	7	1
Total	69,255	1,843	64,774	1,726	1,180	7	812,598	35,857	3,184

NCDC COVID-19 Situation Report | covid19.ncdc.gov.ng**CONCLUSIONS**

After rigorous study of the effect of COVID-19 outbreak on socioeconomic development in southwestern Nigeria, particularly Lagos state, this research therefore concludes that Lagos state encountered highest cases of COVID-19 in southwestern Nigeria, even Nigeria at large. Hence, resulted to harsh socio economic due to observation of COVID-19 protocol to prevent the spread which brought about presidential order on social-distancing and lockdown. After rigorous study of the effect of COVID-19 outbreak on socioeconomic development in southwestern Nigeria, particularly Lagos state, this research therefore concludes that Lagos state encountered highest cases of COVID-19 in southwestern Nigeria, even Nigeria at large. Hence, resulted to harsh socio economic due to observation of COVID-19 protocol to prevent the spread which brought about presidential order on social-distancing and lockdown.

RECOMMENDATION

Having conduct a thorough investigation on effect of COVID-19 outbreak on socioeconomic development in southwestern Nigeria, particularly Lagos state, therefore government at all level should take a proactive measure and gives prior attention to health security to reduce the spread to the nearest minimal.

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