AN ASSESSMENT OF COLLABORATIVE AND HUMANITARIAN AID MANAGEMENT OF COVID 19 PANDEMIC IN NIGERIA

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ABSTRACT

The rapid spread and devastating effects of Covid-19globally, led the World Health Organisation (WHO) to call for more global collaborations and humanitarian services if the war against the disease must be won. Here in Nigeria, despite several measures adopted in curtailing the disease, the cases of Covid-19 patients have been on the increase leading to the second and third wave of Covid-19 in the country. It is based on the above that this study assessed some of these measures to determine if there has been adherence to the advocacies of the WHO. The study utilised the secondary method of data collection and also used Qualitative desk evaluation and observations as its tools of evaluation. The study is based on the theory of obligation. The study found that the challenges to adherence to the WHO's advocacy are insufficient funding, insecurity and lack of data. The study concludes that the measures adopted in Nigeria to combat COVID-19 have greatly adhered to the World Health Organisation's advocacy for global collaboration and humanitarian activities in tackling Covid-19. To improve on the collaborative and humanitarian efforts in tackling Covid-19, the study recommended among others that Nigeria government should scale up the security apparatus and individuals to adhere to government protection measures against the

Introduction

Globally, over the years, there have been various collaborations and humanitarian activities in times of crisis. Crisis comes in various forms, be it earthquakes, accidents, fire outbreaks, epidemics, pandemics, terrorist attacks, tsunamis, plane crashes, ship wrecks, etc. Most times, these collaborative and humanitarian activities are carried out to alleviate the pains and sufferings of people affected by the crisis.

There is presently a global crisis, which is the outbreak of a disease known as coronavirus diseases, also called COVID-19. According to the World Health Organisation (WHO) (WHO, 2020), Covid-19 also referred to as Coronavirus disease 2019 is an illness caused by a novel coronavirus now called severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2; formerly called 2019-nCoV).

The devastating effects of the disease worldwide have led the World Health Organisation to advocate for more global collaborations and humanitarian services if the war against the disease must be won (WHO, 2020 and Yemisi, 2020). This call became necessary as the disease has rapidly spread to all the continents of the world, and has affected people and economies of nations, it has led to death, loss of jobs and the fear of the unknown.

The emergence of Covid-19 has demonstrated that public and private institutions must be able to react rapidly and collaboratively to save their citizens. It is currently projected that Africa will have its fair share of the worst effects of Covid-19 by the end of the pandemic, meaning there will be a high rate of fatality if the virus spreads to the continent (The Economist, 2020). Nigeria, as the largest black nation with an estimated population of 209,209,476 people as of 7th February 2021 (World Population Review, 2021) might have a very high fair share of the fatality. The present capacity of the Nigerian government is grossly insufficient to tackle the needs for diagnostic tests and other healthcare products and equipment (Ughulu, 2020). How Nigeria manages the negative effect of COVID-19 outbreak will depend largely on measures adopted before, during and after the outbreak.

Covid-19 needs optimum measures to tackle and minimize its negative effects globally. Here in Nigeria, several measures have been put in place in combating the disease in the country. despite these measures, the rate of the confirmed cases of the disease has been on the increase leading to a second wave of the disease and now the delta variant has been reported in the country (NCDC, 2021). It is based on the above, that this study examines these various measures to determine if there has been adherence to the advocacies of the WHO. Given the above, the following research questions were formulated: How is Nigeria adhering to the WHO's advocacy of collaboration and humanitarian assistance in the fight against Covid-19? What are the constraints against collaboration and humanitarian assistance in combating Covid-19 in Nigeria? How are these constraints to be surmounted?

The main objective of this study is to assess the various measures adopted in Nigeria to combat Covid-19, to determine if these

measures adhere to WHO's advocacy for collaboration and humanitarian assistance in combating Covid-19. The other objectives are to know the constraints against collaboration and humanitarian assistance in combating Covid-19 in Nigeria and how the constraints could be surmounted?

The methodology adopted in this study followed the qualitative approach of desk research, entailing a review of literatures relating to the study. The secondary data (internet, published articles, and books) was relied on as the technique for extracting information relevant to the thematic aspects of this study. Qualitative desk evaluation and observations were utilized to analyse the data collected based on which conclusions were drawn and recommendations made.

Literature Review

Humanitarian aid

Heather Rysaback-Smith (2015) defined humanitarian aid as the act of providing material assistance to people in need, often in the form of food or material aid provided during famine, drought or natural disaster. According to the Swedish government humanitarian aid is considered as efforts to save lives, alleviate suffering and maintain human dignity for the benefit of people in need who are, or are at risk of becoming, affected by armed conflicts, natural disasters or other disaster situations, which are severe impediments to populations or entire communities' supply and survival mechanisms (MFA, 2010). From the above definitions, it suffices that humanitarian aid is any action, assistance or deed rendered to individuals that are in need in order to reduce the sufferings of such individuals.

Collaboration

Collaboration is important for human and capital development in a developing country like Nigeria. Harvey (2012) emphasizes that it is not enough to just co-exist in the same community, but to ensure that communication is on-going every day, he explained further that exposure to another perspective or outlook can lead to strong thought-provoking discussions, ideas and activities. Harvey submits further that by working together as citizens in a community, it will be possible to learn from each other.

Kajberg (2009) explained that collaboration is a strategic means of tackling problems like skill incompetence, funding, shortage of manpower etc. in a community. He explained further that the dawn of the digital age and the constantly changing global outlook make collaboration inevitable. Al-suqri (2010) described collaboration as "co-operation". Collaboration has become a twenty-first-century trend. The need in society to think and work together on issues of critical concern has increased (Austin 2000; Welch 1998) shifting the emphasis from individual efforts to group work, from independence to community. It is evident from the above definitions that collaboration is co-operation, partnership, networking and alliance between individuals, organization, etc. to jointly tackle problems and challenges.

It is working with others to carryout tasks and to realize shared goals. It is a recursive process where two or more people or

organizations work together to realize shared goals, it is the collective willpower to reach an identical objective.

Covid-19

Mackenzie and Smith (2020), states that Covid-19 is an on-going pandemic that started as an outbreak and was epidemiologically connected to a wet animal whole sale market in Wuhan City, China. Covid-19 is a pandemic that has created widespread panic posing socio-economic, health and political challenges like drifting nations' economy into recession, reducing participatory and democratic governance, reducing social relations due to social distancing, lock-down policies and movement restrictions among others.

Covid-19, does not move on its own, it can only move and spread when humans are in close physical contact, when an infected person coughs or sneezes. The covid-19 common symptoms are coughing, cold, difficulty in breathing, high body temperature and fatigue. The older and elderly people are more vulnerable to this pandemic, due to weak immune system as a result of old age and pre-existing health conditions. The virus' manifestation period in an infected person ranges from one to fourteen days.

The pandemic has gained its place on the dark side of world history for various reasons: unexpected onset, fast global transmission, errors in recognition and management, politically inspired neglect or minimization, and different variants. The already dramatic infection and mortality figures have led to desperate and extreme government decisions globally.

Presently, there is no official curative medicine but vaccines have been recently developed against the disease (vaccinateyourfamily, 2021). Nevertheless, people are advised by medical experts to maintain general good hygiene like washing of hands frequently, sanitizing of hands, and avoidance of crowded places, people are advised most times to stay indoors.

The presence of coronavirus disease in Nigeria was officially announced by Nigeria Centre for Disease Control (NCDC) on 27 February, 2020. The Nigeria index case was a 44-year-old Italian citizen who on 24th February arrived in Nigeria through the Muritala Muhammed International Airport, Lagos at 10pm on 24th February 2020 aboard Turkish Airline from Milan, Italy. The Italian man travelled from the Airport to his company site in Ogun state on 25th February. On 26th February, he was at the staff clinic in Ogun where the managing physician made some high index suspicion. He was referred to the Infectious Disease Hospital (IDH) Lagos where COVID-19 was confirmed on 27th February (NCDC, 2020). Another patient discovered to have been in contact with the first patient in a neighbouring state to Lagos state (Ogun) was also identified.

The second wave of the disease in Nigeria was announced on 17th December, 2020 since the number of COVID-19 cases detected in the country from November to December, 2020 indicates that a second wave of the outbreak has begun (PTF, 2020).According to the Nigeria Centre for Disease Control (NCDC) (NCDC, 2020), the country recorded the highest number of

1,145 new COVID-19 cases on 17 December, even as a few prominent public officials have tested positive for the disease. To curtail the disease after the second wave President Muhammadu Buhari has signed the COVID-19 Health Protection Regulations 2021 policy, citing powers conferred to the Presidency, by Section 4 of the Quarantine Act, Cap. Q2 Laws of the Federation of Nigeria 2010 (NCDC, 2021).

Theoretical Framework

The framework of analysis within which this study operates is the theory of obligation. The theory of obligation was propounded by Peter Van Arsdale and Regina Nockerts in their article titled "A theory of obligation" in 2008. The theory is centered on the foundational assumption that there exists a moral imperative to humanitarian and collaborative assistance to the structurally dispossessed and functionally abused. The moral imperative to assist others has been codified in international human rights laws which have been widely ratified and have garnered global (even if often rhetorical) attention and support (Donnelly, 2006).

A theory of obligation structures response to the moral imperative to give aid. At its simplest, obligation is found in basic human interactions and expectations. Theory of obligation has two major components: a moral/ethical element which informs decisions as to which issues are appropriate for humanitarianism and which actions are morally permissible in pursuing them; and a pragmatic element which guides us in evaluating the most effective use of available resources. The overlap between the two components, the morally possible and the materially possible, consists of those actions that we are obligated, as representatives of humankind, to pursue.

The morally possible component of the theory of obligation is broken down into four constituent parts: burden sharing, personal responsibility and institutional accountability, sympathy and compassion, and non-neutrality. While the Materially Possible component of the theory of obligation is also broken down into three constituent parts: pragmatism, felt needs, and the networks of service providers and associated infrastructure.

Relating this theory to the study, it is evident that humanitarian and collaborative provision and maintenance of infrastructure and services is made up of various factors which include but not limited to the morally possible and the materially possible components of the theory of obligation. These components are separately and jointly utilized in collaborative and humanitarian activities. Therefore, an effective assessment of humanitarian and collaborative management of Covid-19 in Nigeria can be carried out in the light of the components of the theory of obligation. When the humanitarian and collaborative management of Covid-19 is pursued within the bounds of both the morally and materially possible components of the theory of obligation, we are capable of achieving great things.

Assessment of Collaborative and Humanitarian Aid Management of Covid 19 in Nigeria

Some measures adopted in Nigeria in adherence to WHO's advocacy of collaborative and humanitarian services to win the way against covid-19 are assessed below:

Flying Doctors. Flying Doctors is a healthcare investment company founded in 2019, the company collaborating with WHO and Nigeria's Centre for Disease Control (NCDC), has set up mobile booths for COVID-19 testing in the country (WHO, 2020). The booths, operates in the country's worst-affected states, where the sample collectors are separated from the people being tested, thus protecting frontline health workers and also saves time and money. Between 80 and 100 samples are collected per booth every day, although the number varies among states. Working with various foundations, the organization has made its testing free to encourage people to turn up.

MacArthur Foundation. This is a Nigerian civil society and media organization fighting against mis and dis-information about the Covid-19 pandemic, by providing accurate information to the public about the dangers of the virus and how to keep safe, tracking funds allocated for Covid-19 response and recovery, and providing equipment and platform for some of the most vulnerable members of society and frontline workers (MacArthur Foundation, 2020).MacArthur's Nigeria office is providing more than $900,000 in grant support to various organizations responding to the pandemic in Nigeria.The activities of the foundation will help to curtail the spread and negative effect of covid-19 in the country.

Forus International. This is a Network of Non-Government Organizations that undertook a survey to track the impact of the pandemic on the non-profit sector. The Nonprofit Covid-19 survey incorporates the responses generated from 115 organisations working on issues ranging from health, education, environment and human rights, spread across Nigeria (Forus, 2020).The Nigeria Network of NGOs hopes that the findings from the survey may prove helpful to donors, government and the private sector, in supporting the civil society ecosystem to build back better and to ensure that beneficiaries continue to enjoy the services they provide. Forus International launched a COVID-19 taskforce in May 2020 giving members a platform to learn and share their experiences with the COVID-19 pandemic. Additionally, Forus International launched a network-wide survey to identify the main impacts of the COVID-19 pandemic on the work of Forus national platforms and regional coalitions, and their members.

Operational Humanitarian Country Team (OHCT).

Operational Humanitarian Country Team (OHCT) in Nigeria formed a Joint Support Framework to warrant a coordinated method to manage the COVID-19 emergencies across the country. This framework targetsreinforcingongoing multisectoralactivities to addressextended humanitarian crisis and influence

collaborations for actual response to the COVID-19 pandemic (Health Cluster, 2021). The aims of the Joint Support Framework supports the COVID-19 Global Humanitarian Response Plan (GHRP) to contain the spread of the COVID-19 pandemic and reduce morbidity and mortality; reduce the deterioration of human assets and rights, social interconnection and livelihoods; protect, assist and advocate for internally displaced people, refugees, migrants, and host communities predominantlysusceptible to the pandemic.

Civil Society Action Coalition on Education For All (CSACEFA). The Coalition at communities, states and national levels are in the forefront of sensitizing the public on the COVID-19 pandemic. The team is also providing Psycho-Social and palliatives support (Health Cluster, 2021). This intervention has helped citizens to come to understand how the virus behaves and the various preventive and safety measures to take. Their activities has helped to lessen fake news related to covid-19 in Nigeria.

Nigeria Solidarity Support Fund. The Federal Government in partnership with the Global citizen (private sector entity) launched the Nigeria solidarity support fund to aid the fight against COVID-19 in the country. The Nigeria Solidarity Support Fund provides immediate support in the country's response to COVID-19. The fund intendsto raise $50 million for coronavirus relief efforts in the country. The fund plays a vital part in tackling COVID-19 in Nigeria by helping to track and treat cases and improve access to healthcare (Omolaoye, 2020). The fund is supported by stakeholders in the public and private sectors, as well as Nigerians in the diaspora. The fund organizes Nigerians in and outside the country,global partners, philanthropic and private sectors in the fight against COVID-19 in Nigeria**.**

Private Sector Coalition Against COVID-19

(CACOVID). The Private Sector Coalition Against COVID-19 (CACOVID) is a Private Sector Task Force collaborating with the Federal Government, the Nigeria Centre for Disease Control (NCDC) and the WHO with the sole aim of combating Coronavirus (COVID-19) in Nigerian which was unveiled on March 27, 2020. CACOVIDis tasked with drawing resources across industries for technical and operational support while providing funds and advocacy through wide awareness drives to prevent panic and resulting chaos (CACOVID, 2020).The Coalition is also providing and equipping medical facilities like isolation and treatment centers across states in Nigeria. This will involve the creation of testing, isolation and treatment centers, and include the provision of Intensive Care Units (ICUs) and molecular testing laboratories. CACOVID is collaborating with the Government to provide direct support to private and public healthcare's ability to respond to the crisis by providing funds**.**

Nigeria Centre for Disease Control (NCDC): Prior to the confirmation of the first case in Nigeria, NCDC with support

from its partners, (Ministry of Health, Presidential Task Force on Covid-19, Private sector entities, Non-governmental organisations) began preparedness activities. The NCDC began working with states and hospitals to map out and create isolation and treatment centresto manageCOVID-19 cases. NCDC also began training health workers across Nigeria on infection prevention and control (IPC), case management, risk communication, surveillance and other areas of epidemic preparedness and response. The agency began to provide medical supplies, such as personal protective equipment states. In addition, NCDC developed preparedness guidelines and plans that unified an all-inclusive 'One Health' approach (NCDC, 2021). Since the establishment of the Presidential Task Force on Covid 19, NCDC has been working under the Presidential Task Force on COVID-19 (PTF-COVID-19). This has resulted in a multi-sectoral response to the pandemic in Nigeria**.** The NCDC has led Nigeria's public health response to COVID-19. The NCDC also helped the scaling up of Nigeria's public health infrastructure, like the establishment of more public health laboratories across the country, with at least one public health laboratory for COVID-19 testing in each state. NCDC is also working in solidarity with National Primary Health Care Development Agency (NPHCDA) to ensure a successful COVID-19 vaccination programme in Nigeria.

Reddington Hospital. As part of its input towards mitigating the negative effects of the dreaded Covid-19 pandemic in Nigeria, Reddington Hospital offers free medical treatment to all international air travellers arriving in Nigeria at the Armoured Shield Medical Centre provided the PCR test is done at ReddingtonZaine Laboratory, which is accredited as a private COVID-19 facility to test and treat patients in Nigeria (Prnewswire, 2020).In the event of a positive Covid-19 test, the facility offers free doctors' consultation, home isolation treatment and 50% discount of hospital treatment at the Armoured Shield Medical Centre which allows for a seamless treatment and management of Covid-19 positive patients under Biosecurity environment.

Ministry of Humanitarian Affairs, Disaster Management and Social Development.

The Ministry of Humanitarian Affairs, Disaster Management and Social Development has adopted a multi-faceted approach, which will focus on the poor and vulnerable, the elderly, refugees, IDPs, persons living with disabilities, trafficked persons, and petty traders, among others, in its response to COVID-19 in the country. The efforts of the Ministry are part of the ongoing interventions of the Presidential Task Force on covid-19, but, with a focus on the vulnerable groups in the country. The Ministry's COVID-19 Response Committee comprises all the agencies supervised by the Ministry, working jointly and speedily to deliver emergency relief to vulnerable segments of the society (Abdullateef, 2020). The

National Emergency Management Agency (NEMA) under the Ministry in collaboration with NAPTIP, the North East Development Commission (NEDC) and the four components of the National Social Investment Programmes (NSIPs) namely N-Power, Conditional Cash Transfer (CCT) Government Enterprise and Empowerment Programme (GEEP) and the National Homegrown School Feeding Programme (NHSFP) led in providing services and relief to most vulnerable groups and prioritized prevention and community engagement and increase sensitization to curtail spread of COVID-19.

Effect of Collaborative and Humanitarian services in Curtailing COVID-19 in Nigeria

Some effects of the collaborations and humanitarian activities in curtailing COVID-19 in Nigeria are presented below:

Less panic and fake news on COVID-19: There is less panic among the people of Nigeria in respect of COVID-19, fake news and rumours have greatly curtailed, as people now know some basic facts about the virus and how to keep safe. This has been made possible through the massive awareness and sensitization campaign (Africa News, 2020). This has helped in curtailing the fatality rate due to contact of the virus, despite the predictions of experts that the virus will lead to high mortality in Africa countries.

Sense of Belonging in a Time of Crisis: The distribution of palliatives is aimed at providing food and other essentials to economically vulnerable Nigerians. The huge impact of this exercise on the people of Nigeria could be seen from the fact that the whole country is covered (Ashike, 2020). This has given citizens of the country a sense of belonging at this time ofglobal crisis as no part of the world is left out.The palliatives intervention is borne out of the need to ensure people that are economically disadvantage are able to feed while staying at home during the lockdowns, mostly people whosefeeding depends largely on daily income. Palliatives were needed at such time with the widespread fear that people could die from hunger virus, even if they managed protect themselves from Coronavirus.

Job Creation: Collaboration and humanitarian activities' intervention in the fight against COVID-19 has helped to keep the economy running, while preserving means of livelihood (Ashike, 2020). It has, in some cases, created jobs, at a time thousands of jobs have been lost around the world.

Improved Healthcare Facilities and Boost Health Workers' Morale: The donations of medical equipment and Personal Protection Equipment (PPEs), have helped to keep the health workers safe and boost their morale (CACOVID, 2020). The various collaborations and humanitarian activities have raised the standard of healthcare delivery in the country in relation to the fight against the virus, with available treatment and care that can be compared to what obtains in other climes.

Support Government: The various collaborations and humanitarian activities have taken a huge burden off the shoulders

of government in a fight that is bound to stretch resources to no end, especially as no one can predict its duration (BusinessDay, 2020). These activities have greatly helped the government to fill the vacuum created because the government alone could not manage the disease in the country it needed to partner and collaborate with the society to win the battle against covid-19. In sum these activities has helped to curtail the negative effect of the pandemic in Nigeria.

Constraints of Collaborative and Humanitarian services in Combating Covid-19 in Nigeria

Lack of sufficient funds: insufficient funding has hit the nonprofit sector hard (Forus, 2020). Insufficient funds is impacting negatively on its daily activities, compelling organisations to minimise their activities in the field and sometimes shut down completely.

Insecurity: Persistent armed conflict in some parts of the country is resulting in widespread displacements, food insecurity and many victims of violence. A shift away from infrastructure leads to an increased risk of communicable diseases, water-borne diseases and poor sanitation (Health Cluster, 2021, CACOVID, 2020).The high rate of kidnapping and insecurity currently in some parts of the country have negatively affected collaboration and humanitarian services in the fight against COVID-19 pandemic in Nigeria. This might hinder some prospective beneficiaries' access to available infrastructures and services.

Lack of data: In Nigeria, little or nothing is known, said or done about social security, about how to secure the individual against want, poverty, destitution, disease and idleness which may be pushed to him by the vicissitudes of social life and varied hazards (Nwabueze, 1989). This is supported by Yemisi (2020) stating that one of the fundamental problems of Nigeria Social Protection policies and programmes in the effort of curtailing COVID-19 is poor and vulnerable Data coverage and records. Lack of adequate data on individuals in the country has greatly impeded the activities of NGOs in knowing the right places to render humanitarian services.

Discussion of Findings

The study assessed some measures of curtailing the COVID-19 pandemic in Nigeria to ascertain if these measures adhered to the WHO's advocacy for collaboration and humanitarian assistance in tackling COVID-19. The study found that there have been various collaborations between the government and private sector, non-governmental organisations and different private sector entities. These various collaborations have provided different humanitarian services and infrastructures in order to combat the COVID-19 pandemic in Nigeria. These services and infrastructures include: Contact Tracing, provision of Health facilities and equipment; Public Service Messaging and Social Behaviour Change Campaign; Supply and Distribution of Palliatives; Sensitisation and awareness campaign and Provision of Funds.

The various activities of the collaboration and humanitarian assistance in curtailing COVID-19 in Nigeria are in alignment with the morally possible and materially possible components of the theory of obligation in the sense that these activities reflect burden sharing, personal responsibility, institutional accountability, sympathy, compassion, non-neutrality, pragmatism, felt needs, and the networks of service providers and associated infrastructure.

The study also found that the major challenges against adherence to the WHO's advocacy of collaboration and humanitarian services in tackling the COVID-19 health pandemic in Nigeria are insufficient funding and insecurity.

Conclusion

From the findings above, the study concludes that there have been various collaborations and humanitarian activities in operation to combat the COVID-19 health pandemic in Nigeria. These activities have helped to keep businesses going and also attest to the ingenuity of Nigerians when it comes to responding to disasters.

These collaborations and humanitarian activities have reduced huge burdens off the shoulders of the government in a fight that is bound to stretch resources to no end, especially as no one can predict its duration. These activities have raised the standard of healthcare delivery in the country in relation to the fight against COVID-19, with available treatment and care that is comparable to what obtains in other climes.

These collaborations and humanitarian activities in the fight against COVID-19 have had a positive effect and gone a long way in slowing the spread and ameliorating the negative effects of COVID-19 in Nigeria. The study thus concludes that the measures adopted in Nigeria to combat COVID-19 have greatly adhered to the World Health Organisation's advocacy for global collaboration and humanitarian activities in tackling Covid-19.

Recommendations

From the findings above, the following recommendations are proposed:

a. There is hardly any meaningful development in an environment laden with instability and insecurity. Government should scale up the security apparatus to be able to carry-out their functions effectively. A secured and politically stable environment will go a long way in promoting collaboration and humanitarian services.

b. It is further recommended that the Nigeria government should adopt certain proactive policy measures to provide enabling environment for local and foreign investors and open up businesses to improve individuals' take home pay.

c. The Nigeria Social Protection Policies and Programmes should be revised and strengthened for wider coverage, accurate data collection and implementation. This will enable PPPs to know the downtrodden in the society and how to reach them for necessary empowerment.

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