

**COVID-19 Pandemic in Enugu State and Nigeria: A Commentary**

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**Abstract.** This article is an x-ray of the COVID-19 pandemic in Enugu State, Nigeria, and by extension Africa. The article traces the diverse dynamics that the COVID-19 pandemic threw up in the course of the trajectory of the pandemic in the Enugu State, Nigeria, and Africa. Relying on anecdotal evidence and published literature the article gives an overview of the situation of the pandemic in Enugu state and Nigeria in terms of the responses of the government agencies to the outbreak of the pandemic as well as the diverse responses of the population of citizens of Enugu State and Nigeria to the COVID-19 pandemic, which sometimes also produced popular misconceptions. The article also highlights the pitfalls and perversions that are attendant to the state and federal governments' COVID-19 response policies and their implementation. Similarly, the article briefly dwells on the racist practices of some countries such as the People's Republic of China and some European countries against Africans, Nigerians, and Enugu State citizens, which were conveniently perpetrated under the cover of COVID-19 pandemic response policies. The article conclusively offers suggestions to improve the policy response of Enugu State, Nigeria, and Africa to future pandemics of the type of COVID-19 in particular and all other forms of disruptive biological or environmental occurrences in the future in general.

**Keywords:** Africa, COVID-19 pandemic, COVID-19 policy pitfalls, Enugu State, Nigeria, Responses to COVID-19

Enugu state is one of the thirty-six states of Nigeria, located in the southeast geopolitical zone of Nigeria, and has a projected population of six million people as of 2019 (Ministry of Information, 2019). The People's Republic of China witnessed an outbreak of the novel COVID-19 in December 2019. The COVID-19 disease is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and would go on to affect almost all countries of the world after the initial outbreak in The People's Republic of China, which subsequently spread to every part of the globe including Nigeria and Enugu State.

Enugu State reported its first case of COVID-19 on March 27<sup>th</sup>, 2020, and as of 25<sup>th</sup> June 2020, the Nigeria Center for Disease Control would report for the State 174 cases with 138 of the cases in hospitalization, 31 of the cases recovered/discharged, and 5 deaths (NCDC, 2020). To control the spread of COVID-19, the Enugu State government imposed on March 23, 2020, following the rest of Nigeria, a stage five COVID-19 lockdown with inter-state border closures and strict curfews (Premium Times, 2020). Offices were closed and movements restricted except for those on essential services. To ease the effects of the lockdown on the citizens, the state government shared palliatives mostly food items to some of the citizens. The government also organized awareness programs using mostly state-controlled radio stations to create awareness about the disease in the state.

Though there is not much work on the effects of COVID-19 on mental health in the State, we observed increased fear and anxiety among the people of the State as people were afraid of the specter of being taken to isolation centers and subsequently stigmatized. Everybody was seen as a "suspect", and this caused strained relationships among friends and family members alike. This is one area that social workers and psychologists in Nigeria could do a lot of work to enhance the coping capacity of the Nigerian population in general and the

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people of Enugu State in particular. The writers hope to be able to take up some of these emergent challenges subsequently and earnestly hope those policymakers and governments at the state and federal levels would factor in the role of social workers and psychologists in dealing with future pandemics and massive disruptive social and environmental upheavals going into the future.

Anecdotal evidence shows that people in the state have various perceptions about the COVID-19 pandemic. For instance, some believed that COVID-19 did not exist, some others believed that the disease cannot survive in hot climatic conditions, while others had the misconception that COVID-19 is a disease of the rich. This is because the majority of those affected and announced by the media are rich politicians and government officeholders.

In the area of religion under the COVID-19 pandemic in Enugu State and the rest of Nigeria, there were changes in religious activities in the State and elsewhere in Nigeria. The duration for religious services at churches and other religious worship centers decreased from three or four hours to only one hour per service. This was to decrease the duration of contact among people and to lessen the chances of community transmission of the COVID-19 disease among religious worshippers. However, some people would believe that they cannot contract the disease because of their religious beliefs. This made such individuals less likely to follow the scientifically proven stipulations for containing the diseases.

Culturally, the COVID-19 pandemic affected two major areas of the ceremonial cultural life of the people in Enugu State and other states in Nigeria, namely: marriage and burial. Marriages and burials were previously organized with large fanfare, pageantry, and large numbers of attendees. However, currently in the wake of the COVID-19 pandemic, they are now organized with only very few people present (mostly the parents and inner family members in the case of marriages and very close relatives in the case of funerals). In Enugu State, also, people are now often buried as soon as they die without much ceremony and celebrations or protracted storage of the corpses in mortuaries. The writers have observed that many people in Enugu State did not comply with the lockdown measures. Most of them came out during the lockdown to source food for their families. Most residents in the state are daily paid workers and need daily income to survive. Also, the palliatives from both public and private donors that the government was supposed to distribute were hijacked by high-ranking government officials and either sold to make a profit or hoarded in warehouses, thus the palliatives did not get to the preponderance of those that needed them in the State as also happened in other states of Nigeria.

We also observed in Enugu State that some people did not comply with the safety measures of wearing face masks and maintaining physical distancing because of the belief among some people that the COVID-19 disease is not real. The health institutions witnessed a decrease in the number of patients in the hospitals. This is attributed to the fact that people are afraid of being tagged COVID-19 patients by the medical facilities leading to inevitable stigmatization. Similarly, medical facilities and hospital workers rejected sick people because of irrational fear of being infected with the COVID-19 disease, and in some cases, families experienced avoidable deaths of loved ones.

Enugu State would also set up three isolation and treatment centers for the COVID-19 disease. Hotlines would also be set up and citizens would be encouraged to report all suspected cases to the center using the hotlines. Upon invitation, suspected cases were taken by approved health officials to the centers for treatment. However, as has been found by recent studies carried out on the same Enugu State bureaucratic manpower that is tasked with administering the State's response to the COVID-19 pandemic albeit, on a different subject matter, the bureaucratic manpower in the State possesses limited and differential knowledge on technical issues that may also have some implications for their level and form of knowledge on COVID-19 (see Arukwe & Offor, 2021; Arukwe, Offor, & Chime, 2021) especially with COVID-19

disease being an emergent and highly technical phenomenon that therefore requires the highest levels of knowledge and updated procedures to be able to have the chances of successfully tackling it. Hence the need as has been correctly observed by Arukwe and Offor (2021) and Arukwe, Offor, and Chime (2021) to also factor in a continuing education mechanism for the bureaucratic personnel tasked with administering Enugu State's response to the COVID-19 pandemic to ensure that they possess the right knowledge on COVID-19 so as to work with the right scientific approaches rather than the often questionable and contentious approaches. The same of course also goes for all the other states of Nigeria. This is in the light of the slippery slope that COVID-19 "scientific" information has become throughout the pandemic.

The current preferred strategy of those in the government of imposing a total lockdown has proved ineffective in fighting COVID-19 in Enugu State and other states of Nigeria because both the government and people are not prepared for it given the differing socio-cultural milieus between some parts of the world such as western Europe and the US where the perennial lockdown strategies have been applied with limited success as against the situation in Enugu State, Nigeria and indeed the rest of Africa. In the first instance, there is no organized welfare scheme in the state to cater to the people and most of the residents are daily workers who earn income on a daily basis. The government should therefore adopt a model of response to the COVID-19 pandemic that is heterodox and suits the economic condition of the people in Nigeria and Enugu State. It has to be one that does not produce scenes for the enactment of cultural racism and biomedical imperialism or simply 'copy and paste' policies such as lockdowns and the cocktail of other such policies that the government in Nigeria and Enugu State like to copy but which have been shown in practice to not seat well with the African cultural, economic, political, and social milieus even as the African politicians and political office holders are bent on mindlessly copying these solutions that have been formulated for the benefit of European and American economies and their environment by European and American intellectuals, corporations and governments (Arukwe, 2022a).

Consequently, contrary to the situation in places like Madagascar, where the government led the initiative to produce an African home-grown remedy to COVID-19 called COVID Organics (Arukwe, 2022a; Shaban, 2020), or in Uganda where the Ugandan private sector working through Jena Herbals, Uganda, led the initiative to develop another African home-grown remedy to COVID-19 called Covidex (Arukwe, 2022a; Athumani, 2021; Voice of America, 2021) there was no known initiative by the Enugu State government to encourage the evolution of home-grown, self-reliant initiatives to tackle the COVID-19 pandemic. Not much was also done in this regard by the Nigerian federal government as they rather assumed the default approach of actively discouraging such local initiatives while at the same time actively encouraging foreign-mediated or imported solutions with all their incongruence with the domestic environment. This had the effect of leaving Enugu State and indeed other states in the Nigerian federation at the mercy of foreign pharmaceutical corporations and the foreign governments in the metropolitan homes of these pharmaceutical corporations as well as their agents operating in and around governmental corridors globally.

The hostility of European and American controlled international health organizations towards such African home-grown solutions like the COVID Organics and Covidex coupled with the negative stereotyping, discrimination, and stigmatization of Nigerians including Enugu State citizens internationally with the progression of the COVID-19 pandemic and the outbreaks of the various variants of COVID-19 present instances of the enactment of aspects of what Arukwe (2022a) has correctly described as "cultural racism" and "biomedical imperialism". It is ironic that while the People's Republic of China is responsible for the outbreak of COVID-19 and its subsequent spread to other parts of the world, the officials of

the communist state of the People's Republic of China would racially target Africans most of whom were Nigerian and some of whom are from Enugu State living in and arriving in China during the outbreak of the COVID-19 pandemic for racist treatments and persecution under the cover of the narrative that they were "importing" COVID-19 into China (Aljazeera, 2020; Arukwe, 2022b). As Arukwe (2022b, pp. 104-105) has reported,

In 2020, the impression of the People's Republic of China by Nigerian youth was impacted considerably by the viral videos that were coming out of the city of Guangzhou in which Africans were seen being targeted for dehumanizing and racist treatments by Chinese officials who forcibly evicted them from their sundry accommodations including hotel lodgings and arbitrarily quarantined some of them and subjected them to mass coronavirus testing. Ironically the Africans were being accused of 'importing' the coronavirus into the country even after they had followed the pandemic control protocols at the period such as testing, masking, and isolation. Nigerians making up a preponderant degree of African residents of Guangzhou were largely affected by this rather racist profiling and targeting. A fast-food chain in Guangzhou even put-up signage in one of its restaurants that told black people they were banned from entering the restaurant. The social media outrage among people in Nigeria was so strong that the normally unresponsive Nigerian government summoned the ambassador of the People's Republic of China in Nigeria and the Nigerian foreign minister put out a statement condemning what he called the 'extremely distressing' and 'unacceptable' footage appearing to show Nigerians in the People's Republic of China being maltreated because of the pandemic.

Similarly, when the discovery of the Omicron variant of COVID-19 was announced by South African scientists, even though it would be found that this variant was already spread to several parts of the world before the discovery by the brave and ethical scientists in Africa thereby making its actual origins unknown, the European, American, and some Asian countries, as well as the international health organizations they control, would severally levy travel embargoes against all countries of the Southern African region, then eventually extending it to other African countries from almost all of the other regions. Ironically, all the other variants of COVID-19 up to the Delta variant before the Omicron variant that were discovered by scientists from different countries of the world did not attract the same racist immediate decisions to isolate African countries despite the large volumes of death and devastation that were associated with those previous variants as against the Omicron variant that hardly resulted in any deaths (Baroud, 2021).

What the foregoing indicates is that despite how far into civilization the world claims to have come, the warped, colonially inspired and colonially constructed narrative of Africans as deplorable and congenitally guilty of some original sin, hence they must be victimized at every slight opportunity that presents itself to the rest of the world, is still very much alive and well in this day and age. As Arukwe (2021) has correctly noted, this proclivity to racially profile, marginalize and dominate African humanity in the service of a colonial empire and hegemony is central to the mentality of some European scholars, organizations, and governments who have over the years sought to propagate an erroneous impression of Africans and their true contributions to supposed world or global events and this needs to be urgently corrected especially by authentic African scholarship. With the convenient hiding of the true and positive contributions of Africans to the successful evolution of contemporary history, it becomes also convenient and somewhat justifiable to deplore, victimize, exploit, and discriminate against Africans under varying global conditions and especially during disruptive conditions like the outbreak of COVID-19 and other forms of social upheavals when the racist treatments against Africans almost become an acceptable part of the prevailing relationalities. Most recently, for instance, with the ongoing Russian invasion of Ukraine and

the massive refugee situation it has created it has once again proven this to be the unwritten rule where officials of both Ukraine and other European countries like Poland, etc. have been caught racially profiling and maltreating African students formerly residing and schooling in Ukraine who became refugees from the same Russia-Ukraine war as the other refugees from Ukraine and other European countries yet they must be racially profiled and discriminated against to satisfy the warped racist colonialist attitudes of European authorities and governments that have failed to come to terms with the reality of the present world (see Christian Science Monitor, 2022; CNN, 2022).

In conclusion, the COVID-19 pandemic has changed all aspects of lives on the planet, in Africa and in Nigeria and Enugu State in particular with fundamental implications for the social welfare and health policies as well as overall social organization as we know it moving into the future. The pandemic has among other things shown the need to effectively set up and equip social agencies to meet the needs of the people and also make provision for virtual transactions in all sectors of the economy to avoid collapse of the state and culture. The COVID-19 pandemic has also underscored the importance of the progressive acquisition of knowledge by those in bureaucratic roles, positions, as well as the public political and technical offices that are constitutionally tasked with ensuring the wellbeing of the citizens by enacting and implementing policies for the public good including those that address globally disruptive conditions such as those engendered by the COVID-19 pandemic. It is only our sincere hope that none of the foregoing lessons would be lost on those who are in positions of making public policy and those in positions of public offices and mandated by the people to enact and execute such policies in Africa, Nigeria, and Enugu state in particular. On a broader note, the COVID-19 pandemic has above all underscored the need to fundamentally address the underlying driving forces for racism and racial profiling against Africans and Black people globally as the racist nature and proclivities of the power structures and governmental authorities in different parts of the world including in Europe, America and in the People's Republic of China that was the origin of the pandemic in the first place became exposed for the whole world to see under the conditions of the COVID-19 pandemic.

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