Socio-historical analysis of socio-politico-economic and security consequences of Covid-19 pandemic in Northeast Nigeria

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Abstract

This paper examines the social, political, economic and security consequences the novel covid19 pandemic in the Northeast Nigeria. The Covid-19 pandemic has drastically affected the lives of the Nigerians. The virus has persistently affected businesses, especially Small and Medium Enterprises (SMEs), and individuals like never before. Pandemics require social distancing and social isolation to avoid their contagious spread within human populations. This dangerous spread of pandemics threatens human existence, where the social fabric is porous. Scholarly literatures were reviewed, using conceptual method to sociologically analyse the contents. The author suggested that mixed methods should be explored in future studies on the coronavirus for in-depth responses among the victims of the virus.

Keywords: Covid-19 Pandemic, Security, Consequences, Nigeria.

1. Introduction

At the global view, various countries have been struggling to fight the Covid-19 pandemic. The most affected countries are currently experiencing economic declines, while many have been hit by total economic shutdowns. In Nigeria, the Covid-19 pandemic has affected a great number of businesses. The most affected sector of business is that of the Small and Medium Enterprises (SMEs). Many finances also dwindled as a result of the persistent ravage by the novel pandemic. At the peak of the pandemic, the SMEs experienced decline in growth, due to the imposed their restrictions of human movement on the conveyance of goods and services as a result of the Covid-19 pandemic (Olusanya Faboyede, 2022; Adekoya & Aibangbee, 2020). The Covid-19 also known as Coronavirus is a contagious respiratory disease that spreads from one individual to another. The novel Coronavirus identified in Wuhan, China during an investigation claimed to have had its origin in pangolins/bats. Its earlier transmission to

human beings was said to have been in a local seafood market in Wuhan, China (Akpoveta & Joy, 2020). Since the first reports about it, the virus swiftly spread from person-to person contact.

This paper was meant to study the social, political, economic and security

political, economic and security consequences the novel covid19 pandemic in Nigeria. The Covid-19 pandemic has drastically affected the lives of the Nigerians.

Objectives

- 1. To study the extent of the Covid-19 pandemic spread in the Northeast Nigeria.
- 2. To examine the social, political, economic and security consequences of Covid-19 pandemic in Nigeria.
- 3. To proffer solutions to the

Research Questions

- 1. What is the extent of Covid-19 pandemic spread in the Northeast Nigeria?
- 2. Are there any social, political, economic and security consequences of Covid-19 pandemic in the Northeast Nigeria?
- 3. What are the proffered solutions to Covid-19 pandemic spread in the Northeast Nigeria?

2. Literature Review Brief History of Pandemics from Ancient Times to Date

The imagination of the entire populace of the globe has been occupied with the Covid-19 pandemic. There have been various epidemics from the ancient times to date. The pandemics affected humanity and influenced its civilisation immensely century after century. Pandemics are sometimes as a result of technological advancement and also act as an exposer of the inequalities embedded in human societies (Harris, 2000; Morens, 2009).). It is demanded that once a pandemic occurs, social distances and isolations are imposed

to avoid contraction (Procopius, 1967). However, the current pandemic known as Covid-19, is affecting Nigeria, among other nations socially, politically, economically and otherwise. It might be too early to discuss about the effects of Covid-19, but due to lack of knowledge about when the pandemic would be over, it becomes pertinent to actually look deeply into its effects in human societies. Accordingly, some scholars are of the view that the Covid-19 pandemic, is likely to exist for years, unless it is tackled (Brito, 2020). It is asserted that the Covid-19 has no cure, as put by Otache (2020). Therefore, it is highly essential to discuss its effects to enable the stakeholders take all necessary actions to reduce its effects. Some of the effects include job loss among people, increase in unemployment. Prior to the pandemic, the rate of unemployment in Nigeria was 23.1% (Innocent, 2020; CSEA, 2019; National Bureau of Statistics, 2018; NSEG, 2019). More so, because of the pandemic, the unemployment rate raised to 33% by the end of the ear 2020, therefore the Nigerian economy has been drastically affected.

Table 1: Epidemics/Pandemics from ancient times to 2020; pandemics in italics

Disease	Year of occurrence	Type (WHO)	Geographical distribution	Death toll
Plague of Athens	430 BC	Epidemic	Athens	100,000 thousand
Antonin plague (?small pox)	165-180 AD	Pandemic	Europe, North Africa	5 million
Cyprian plague (?small pox)	250 – 271 AD	Epidemic	Rome	190,000 thousand
Justinian plague	541 – 8th century AD	Pandemic	Europe, Asia, Africa	50 million
Small pox	6th century AD – 20th century	Endemic	All continents	300 million
Japanese small pox	735 – 737 AD	Epidemic	Japan	1 million
Black Death	1346 - 1353	Pandemic	Europe, Asia, North Africa	200 million
Small pox	1492 – 19th century	Epidemic	Aztec, Maya and Inca empires	56 million

Disease	Year of occurrence	Type (WHO)	Geographical distribution	Death toll
Cocoliztli	1543 - 1548	Epidemic	Aztec empire	15 million
The Italian	1629 - 1631	Epidemic	Verona, Bologna,	1 million
plague		-	Milan, Venice and Florence	
Great plague of	1665 - 1666	Epidemic	London	100,000
London	1003 1000	Epideillie	London	thousand
Great plague of	1723 - 1728	Epidemic	Marseilles and	100,000
Marseilles	1/23 - 1/20	Epideinic	Provence	thousand
	1770 1772	Emidamia		100,000
Russian plague	1770 - 1772	Epidemic	Russian empire	*
Cuant Na ::41.	1775 1792	T:J	IICA Massissa 1	thousand
Great North	1775 -1782	Epidemic	USA, Mexico and	130,000
American small pox			Canada	thousand
Yellow fever	1793 - 1889	Epidemic	Philadelphia,	150,000
		•	Haiti, Savannah	thousand
			GA, New Orleans,	
			Norfolk VA,	
			Bermuda, Texas	
			and Louisiana and	
			Panama	
Cholera	1817 – present	Pandemic	All continents	1 million
pandemics	day			
The third plague	1855 - 1912	Pandemic	All continents	12 million
Russian flu	1889 - 1890	Pandemic	Europe and Asia	1 million
Spanish flu	1918 - 1919	Pandemic	All continents	50 million
Asian flu	1957 - 1958	Pandemic	All continents	1 million
Hong Kong flu	1968 - 1970	Pandemic	All continents	1 million
AIDS/HIV	1981 – present	Global	All continents	25 million
	day	epidemic		
Swine flu	2009 - 2010	Pandemic Pandemic	Asia, Europe and	200,000
·			Americas	200,000
CoVid-19	2020	Pandemic	All continents	333, 500 as of 22.05.2020

Adopted from Dasgupta & Crunkhorn (2020).

Dasgupta and Crunkhorn (2020) noted that the plague of Justinion was the first plague epidemic circa recorded from 541-542 AD. The epidemic was the classical Yersinia bacterial pest contacted via rodents. Justinian was among the strongest Roman emperors in Byzantium in Asia and Eastern Europe having Constantinople as his capital during his reign. The organism was said to have been imported from Eastern Asia channeled via the Egyptian ports such as Pelusiaum close to the current Port Said.

The plague was devastative in much parts of Europe and Western Asia, encompassing the Persian Sassanid Empire. It affected about 40% of the population of Constantinople. About 50% of the Eurasian population with the death toll of not less than 30-50 million people and persisted up to the 8th century. The Antonine plague is another epidemic that affected the humanity from 165-180 AD in Rome (Littman & Littman, 1973). The Roman Empire was under the leadership of Marcus

Aurelius Antoninus who was then lodging campaigns on Dacia, Parthia and Armenia. When the Roman armies returned, they imported the disease into Rome, Western and Eastern Europe with the total death toll of about 5 million. It significantly affected trade with the Chinese Empire (Gibbon, 1988). This brought to the drastic decline in revenue and perpetuated the weakening of the Roman Empire. As claimed by the Claudius Galenus the (Court physician) to Marcus Aurelius, the disease was small pox, not plague (Dasgupta & Crunkhorn, 2020).

The second plague pandemic was the 'Black Death' that simmered when it hit Justinian years. Just like other organisms it developed into much more various virulent The organism spread across forms. medieval globe through to Mongolia, Europe, Asia and North America from 1345 with the total number of peoples' death almost 200 million in different regions. In the 14th century, there was a combination of passion and plague (Joshua, 2013; James, 2011). The major sting of second epidemic extended to 8 years. The pandemic reappeared in the early part of the 19th century in all parts of Europe and Asia. The fourth episode of pandemic was that of cholera in 1817 to the present day. Not less than six pandemics of cholera were recorded, caused by the bacterium vibrio cholera (Edward, 1988). This pandemic is being spread by the fecal-oral route. The 7th pandemic of cholera is still ongoing. A typical example of pandemic that can indicate the ability of science and public health action can control the spread of any pandemic is how they were able to discover the causation and measures of how to (Marcus, contain it 2011). This development made the death toll decline. British India had the origin of the first pandemic in 1817 and continued to 1823, in the "Gangetic basin" contracted from Calcutta in 1817 as a result of conquering a large portion of India by the British East

India Company. The influx of the British personnel alongside military trooping to India at the end of the Anglo-Mysore War 1799 towards Southeast Asia in continuation of trading with the colonies strikingly infiltrated with the pandemic and struck the regions up to the Mediterranean coast. The second pandemic of 1829 to 1849 spread to Russia eventually to Europe, and went through Irish immigrants then to the Americans. The third pandemic was from 1845 to 1862 and the most devastating of all the pandemics that ravaged the entire continents. The fourth pandemic of 1865 to 1875 widely spread among the Muslim pilgrims and hardly hit Mecca, then Europe. While the fifth pandemic (1881-1896) affected Asia, South America and some parts of Europe such as Britain and Germany, and America, because of an improved sanitation and investigation to identify the source via quarantine (Dasgupta & Crunkhorn, 2020; Levenstein, 1996).

The third plague of 1855-1912 ushered in pneumonic and the bubonic type of Yersinia that brought about "mass flight, riot, social hysteria, scapegoating, and economic disruption". The cholera pandemic claimed not less than one million, hence the scientific development that prevent its escalation to the death toll of plague. Certain disease like syphilis, tuberculosis and small pox involved all classes of societies. The origins of cholera were gutters and sewers in the hygienically poor residential areas (Wong & Fung, 1988). The flu also known as influenza of 1889 to 2010 was discovered in the last two centuries. The Russian flu pandemic of 1889 to 1890 commenced in Asia Minor with a widespread to Russia, through to Petersburg passing via Constantinople. The pandemic reached to Paris within a couple of weeks and spread across the whole of Europe with a death toll of one million (Kempińska-Mirosławska & Woźniak-Kosek, 2013). This pandemic became

widely spread due to the rise in the global population and the gigantic transport revolution since it coincided with the development of railways. It was also the pandemic that was first scientifically covered accurately using epidemiological data in the media (Edward, 1988).

The Spanish flu is reckoned as a collateral of the World War First due to mass movement of military troops and camps across Europe. It was suspected to have emanated from the British military based hospital in France, in 1918. The camp was where war casualties exposed to gas attacks were kept and fed with poultry and piggery (Lotfy, 2015; Oxford, 2005). The other couple of flu pandemics encompassed the H₂N₂ elements of the influenza virus. It was also the same with the Asian flu of 1957 to 1958 alongside the Hong Kong flu of 1968 to 1970. Both of them claimed not less than one million people each. The two diseases occurred in scientific virology, bacteriology and epidemiological levels. The reality attached to vaccination was unveiled; while herd immunity innovated. Therefore, the two pandemics were like the present Covid-19 virus mostly affecting people having pre-existing lung malfunctions. The next pandemic was the swine flu which occurred in 2009 to 2010. This pandemic was estimated to have consumed about 200,000 lives about 13 vears ago. The swine flu had its causality from H₁N₁ influenza virus (Kilbourne, 2006; Jilani, 1980). The origin of the flu was traced to Asian or Mexican pigs which migrated through humans to other parts of the world (Brabanti & Dean, 2018). However, nowadays, there are some scientific methods encompassing armamentarium fighting for various pandemics which made the death toll very minimal. From the discourse, it is apparent that the current Covid-19 pandemic is a mixture of various pandemics from the ancient times to date in terms of its effects on the civilisation of mankind and natural

history of diseases. The dynamism in pandemics is an indication that it has reached to its zenith. It can be adduced that even the future diseases are most likely to have similar epidemiological patterns (Dasgupta & Crunkhorn, 2020).

Social Effects of Covid-19 Virus in Nigeria

World Health Organisation (WHO). reported limited inter-human transmission as a result of close contacts. However, on 21 January, human to human infection of the virus was confirmed. After three days a quarantine complete of Wuhan commenced. A widespread infection was discovered among the medical staff in China. China was drastically infected, followed by other sister nations (Snowden, 2019). Therefore, mortality rate raised in China alongside Italy's fatality rate two weeks after the commencement of the quarantine exercise. The efforts by the Chinese government were neglected by the western governments who utterly dismissed the ongoing events in China. This western negligence of the Chinese experience and efforts to save the situation resulted in downplaying the Chinese's scientific prowess and concentrated more on the economic aspects than human life (Ranabir, 2020). Restriction of movement brought about escalation of family discomfort due to lack of essential commodities among households. State and federal governments restricted their citizens to avoid the persistent spread of the virus among citizenry. What prevailed in Nigeria in the advent of the pandemic reflected the events in the seventeenth century. In Nigeria, people were confined in the hospitals and in other facilities established for the purpose of deterring victims from mixing with other people including their family members (Adekoya & Aibangbee, 2020). People of the high society were the earlier victims of the pandemic, because they travelled abroad where they contacted the virus from those victims onboard the same flight with

them on their way back to Nigeria (Abiove, Ogunniyi & Olagunju, 2020). However, the Nigerian masses had earlier believed that the pandemic was for the rich, despite all the awareness by the authorities. In Lagos state and other states of Nigeria, the experience of the people of the lockdown was highly devastating, because it had a disproportionate effect on the poor individuals depending on daily wages for their livelihood. This sector of the population did not receive any economic relief packages from the government (Obiakor & Adeniran, 2020). There were strong barriers for people to access testing and treatment. There was also inadequate education on the Covid-19 pandemic campaigns for the benefit of the rural population. Security Ooperatives used excessive coercion to force people stay at home. The security forces killed about 18 people between 30th march and 13 April 2020 (National Human Right Commission).

There have been the processes identification, confinement, boundary marking and schemes exclusion of amounting to segregation. Michael (2007) noted that towards the end of the 17th Century, one of the actions taken to strictly control the spread of any plague is to partition and or close the entire infected area/town visited by the plague. People are to be restricted not to leave the confined area or town on the pain of death. The area is to be divided into different quarters (Latta, 2013). Each street of such town must be placed under the surveillance of official from an authority whose duty is to lock up the doors of all the houses from the outside (Obiakor et al., 2020). All the families resident in the town are expected to make their own provisions, while each family member would be given bread, wine and other things without communicating with the personnel in charge of the supplies. Other items like fish, meat and herbs are to

be hoisted into the house by the use of pulleys, baskets and other containers, while inspection is to be ceaselessly continued (Akpoveta et al., 2020). The gates would be guarded by a group of respectable people and militia at the town hall and the affected quarters. They are stationed at strategic points to ensure a prompt obedience of all the citizens in the collaboration with the authority of the magistrates in case of thefts, extortions among other social disorders. The officials were also to inspect in order to discover anyone who was hiding the corpses and or the victims of the disease. According to Foucault, "Everyone was locked in his cage, everyone at his window, answering to his name and showing himself when asked." The strategy exclusion operated by way participation of the communities and population groups to identify and exclude the potential victims of the plague. The vigilantes were to defend the communities by erecting gates and guard them in order to prevent outsiders from trespassing the infected areas or communities (Onyekwena & Ekeruche, 2020).

Nigeria recorded the first case of Covid-19 pandemic in February 2020 according to Nigerian Centre for Disease Control (NCDC, 2020). The Nigerian government took various measures to curb widespread of the virus. The steps taken included lockdowns in almost all states of the federation, where all residents were required to close all businesses and to stay indoors, apart from essential services (Onyekwena et al., 2020). This caused the Nigerian economy to shrink by about 6% (Human Rights Watch, 2020). The targeted groups meant for the economic assistance were not able to get the relief materials and were virtually left at the mercy of personal struggle to fend for themselves in search of food and other basic necessities. Prior to the pandemic, not less than 90 million Nigerians were living in extreme poverty

on below \$1.90 per day; about 5 million more were expected to be pushed into poverty by Covid-19 as projected by the World Bank. The pandemic exposed the level of unpreparedness of the Nigeria's healthcare infrastructure. The situation indicated that Nigeria was lacking the necessary equipment for the poor and the vulnerable to have access the Covid-19 testing and treatment (Human Rights Watch, 2020).

During the pandemic attack, the other factions of Boko Haram such as the socalled Islamic State of West Africa (ISWAP), persistently launched attacks against civilians alongside military and humanitarian targets. About 365 civilians had been killed between January and September 2021 in northeastern Nigeria. In August 2021, the Borno state government returned some of the internally displaced people back to their local communities in Kukawa local government area of the state. There were other security challenges in the northwest and south involving intercommunal clashes which consumed hundreds of civilians by kidnappers who kidnapped for ransoms, vigilantes, criminal gangs, cattle-raiders and herder-allied armed groups. There was a pervasive sexual violence affecting women and girls where many were also killed. In Nigeria, children's education during Covid-19 period and beyond 2020 was affected immensely because they could not go to school due to lockdown. Prior to the pandemic, the World Bank, and Yusuf, Abubakar & Jibril (2022), found that Nigerian children could not read, write or do basic mathematics" thereby affecting them in the future of their learning. Therefore, with advent of the pandemic, children were seen playing on the streets and engaging in petty trades (Yusuf et al., 2022).

Political and Bio-Ethic of Covid-19 Pandemic

The corona pandemic outbreak in Wuhan, China plunged the Western World into dilemma as to whether the disease is directly related to the Chinese food habits, biological warfare experiments or due to dearth democratic experience. They also pondered towards lack of transparency in the Chinese political system. The West was unsatisfied with the effort of the Chinese government to offer the historical genesis of the pandemic, despite their positive moves to exchange information with the entire world concerning the viruses. They implored the world to comprehend their little knowledge and earlier unpreparedness and their adequate readiness to assist scientifically and medically by providing all necessary available equipment, the West satisfied. The was never Covid19 pandemic, also known as Wuhan Virus, Corona Virus, Chinese Virus, among other names given, had taken china by surprise due to lack of a modern medical and or scientific approach, coupled with the lack of a powerful conglomerate of capitalists or bourgeoisie and insularity of system in Beijing. Therefore, it became apparent that China has not been adequately westernised. Despite all these, the WHO (World Health Organisation) appreciated Chinese response to the outbreak of the pandemic. China faced a lot of criticisms and allegations across the globe for concealing the outbreak of the pandemic for weeks. However, the whole issue was smeared with some elements of racism in the liberal response to the question of whether China was covering the virus from the rest of the world. The Chinese Party and the incumbent government in China were to be accountable for the massive cover up of the virus at the initial state of the outbreak. *The* Guardian and New York Times were part of the building up the news of cover up (Samaddar, 2020). A large spread of obfuscations was effected in order to confuse the public around the globe.

A patient with medically a and scientifically undiscovered viral pneumonia was hospitalised on the 1st of December 2019 in Wuhan, China. The patient was not exposed to the Wuhan Seafood Market. A male doctor of the Hubei Hospital of Integrated Traditional Chinese and Western Medicine submitted a comprehensive report to Wuhan Municipal Health Commission on pneumonia patients with a strange cause. Further investigation on 28th December, three (3) more patients who had relationship with the Seafood Market were exposed. The news was trending on social media indicating about seven (7) cases of a newly discovered virus almost a replica of SARS. The Wuhan Municipal Health Committee of a strange viral disease. The following day, a commercial laboratory issued out a set of genome results to the Chinese government. The results necessitated the closure of the Seafood Market, the potential cause of the outbreak. After WHO was informed about the exposure of the strange disease (Mysterious pneumonia) cases in Wuhan a couple of days later on 3rd January, the Chinese government reported that the about 44 suspected patients infected with the strange virus. Again, the virus was classified as highly pathogenic. All laboratories were also ordered to transfer the samples to superior laboratories or destroy them (Akpoveta et al., 2020).

Ethically, health issues are to be treated uniformly, not on the lines of segregation, caste/race, occupational cadre, but on the ambience of managing human societies as an entity. This task of defending humanity can be achieved by the use of healthcare workers, waste processing and reprocessing workers. These are the workers that are in greater danger of being infected by plagues, who must also be engaged in keeping themselves safe. There must be surveillance methods fighting pandemic in sanctioning the required toughness of the society, due to the fact that both the

government and the citizenry bestowed their trust in them. The government must be able to provide the required number of protective regalia and ventilators. They should also arrange for foods and work while at work during the lockdown. This is where the bio-politics comes in to play a crucial role. Many suspected cases of the disease were confined by the health workers while doubting their status as carriers of the virus (Adekoya et al., 2020). The principle of solidarity was lacking in the approach to dealing with the plague in Nigeria. A great number of the suspected infected people were given foods, milk, medicines and sanitation by the health workers. The care workers needed much more of the requirements to enable them sustain their duties in fighting the epidemic.

In various states of Nigeria, the foodstuffs stored for the populace were left stashed in the warehouses undistributed during the lockdown. Eventually, the hungry citizens hidden materials realised the commenced breaking, packing and carting them to their homes to feed. They believed that the politicians reserved them for their political campaigns in 2019. Ethically, the relief materials were meant for onward distribution for the populace, but left the beneficiaries at the mercy of hunger as a result of the total confinement without enjoying the released relief materials by the federal government of Nigeria. The protective materials used in controlling inhaling oxygen equally not made available to the citizens, rather made the prices highly exorbitant for Nigerians to buy from the capitalistic vendors of health materials.

Economic Effects of Covid-19 Pandemic in Nigeria

Nigeria, the largest economy and most populous country in Africa has played and still plays a significant role for economic sustainability, development and growth of the continent. The growth of the Small and Medium Scale Enterprises (SMEs) has been drastically affected by Covid-19 outbreak. The pandemic continued country, while ravaging the **SMEs** struggled to survive due to fall in production and lack of good market condition. The situation harshly affected the population as a result of the lockdown put in place as a measure to restrict public movement to avoid large spread of the disease Covid-19 disease. About 1.4 million to 2.1 million (25% to 36%) small businesses were expected to permanently close if there was no intervention, because of the disruption within the four months of the Covid-19 virus (Olusanya, 2022). The immediate effect of the Covid-19 pandemic was and still the rampant unemployment as a result of the failure of the small scale situation businesses. The caused a pervasive poverty among Nigerians which pushed Nigerian entrepreneurs and their dependents to experience grievous fracture in their social mobility. Not less than 75% Nigerians are engaged by small scale business operators. During the moments of the pandemic, there was a high rise of unemployment to above the statistical indices of 23.90 percent of 2011, as indicated in the report of the National Bureau of Statistics.

Historically too, as from 2006 up to 2011, the rate of unemployment in Nigeria was at average 14.6% of (https://www.statista.com >statistics). This rate of unemployment is an indication of the number of people in search of employment in Nigeria. Similarly, those who lost their jobs were expected to increase rate of social problems in the country. This is a threat to national security and economic development. Social vices such as kidnapping, armed robbery, duping, assassination became pervasive in Nigeria (Ozili, 2020). Again, losses of revenues, idle inventories, and capacity wastages caused a lot of developmental setbacks. All financial institutions have been faced with the syndrome of monetary losses such as

the capital loans alongside the interests unrecovered due to failure of the businesses. The workers lose their values and unable to get employed and become demoralized. (André, 2020). The Covidpandemic drastically rattled economic sector of Nigerian state and exposed serious loopholes in the nation's social protection system. The northeastern region of Nigeria is affected by the security challenges caused by the armed conflict with the insurgent group of Boko Haram since 2009. There are more than 7.5 million Nigerians needing humanitarian assistance (Human Rights Watch Report, 2021).

Small Scale Enterprises and the Nigeria's Economy in the Covid-19 Pandemic Era

Olusanya (2022) argued that the small businesses are playing essential role the operation of country's economy. The pervasiveness of small businesses are not well recognised among the citizenry, because the new products produced by the big businesses out rightly overshadow the products produced by them. The small businesses are the foundation of Nigerian economy. This solid foundation perpetually thrives on the local economic framework of local products (Ozili, 2020). Contrarily, Lenon (2020) noted that the small scale businesses assist the sustenance of bigger industries in the developing nations and for them to thrive in the course of innovating new projects. When the economy started recovering, not only the unemployed, but even those employees elsewhere started seeking for jobs at various organisations 2020). Previous studies (Lenon, recessions indicated that the unemployed were amounting to 17.5% less than their new ones. This has a concern for women. because they are greatly forced to drop out of the workforce due to pressurized wages (André, 2020).

The small businesses are the creators of 'unique entrepreneurial' opportunities for

minorities, migrants and women. The families who own businesses are apparently upwardly mobile than the ones employed by owners of businesses. Therefore, a widespread and permanent exits among businesses is tantamount eliminating the physical capitals and investments in them from tables in the restaurants to the machineries. Many big companies solely depend on businesses as their suppliers (Michael, 2007). They are also their direct customers for services, their many customers' employers and they are often forming a significant percentage of industries of various capacities. Therefore, there are some implications for businesses and government during a pandemic like the Covid-19 virus (Adekoya et. al, 2020). The fact is that the extent of the health crises depends on public health alongside responses from economic policy. However, economic interventions to correct the situation in the small business sector is not to only offer an immediate relief to sustainably recover through building a longer term resilience. It is most likely that the economy would continue to operate minimally. The small businesses are also most likely to experience restrictions in their operations, until sufficient vaccines are available to fight the pandemic to the end. This will force the small businesses to need support during the long term crisis (Aderemi, Ojo, Ifeanyi, & Efunbajo, 2020).

The extent of the Covid-19 pandemic spread in the Northeast Nigeria

About 1.4 million to 2.1 million (25% to 36%) small businesses were expected to permanently close if there was no intervention, because of the disruption within the four months of the Covid-19 virus (Olusanya, 2022). The immediate effect of the Covid-19 pandemic was and still the rampant unemployment as a result of the failure of the small scale businesses. The situation caused a pervasive poverty among Nigerians which pushed Nigerian

entrepreneurs and their dependents to experience grievous fracture in their social mobility. Not less than 75% Nigerians are engaged by small scale business operators. During the moments of the pandemic, there was a high rise of unemployment to above the statistical indices of 23.90 percent of 2011, as indicated in the report of the National Bureau of Statistics.

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This results to an immense contribution to the national economy (Chukwueka & Ekeruche, 2020). That is to say that, they create employment opportunities to the citizenry close to the project sites. That is why the small scale businesses are deemed as the bedrock for rapid competitive economic growth in each country they are situated. Prior to the Covid-19 plague, small businesses were almost half of the entire private sector jobs. The large number of businesses closing brought about continued unemployment and drastic economic damage, because it was apparent that the closure was not temporary shutdowns. From 2000 to 2017, the small business workers formed 2/3 of net newly employed youths in Nigeria. Such long lasting unemployment makes a country to experience more crimes, because many people have been released from their posts of duties and unable to fend for their families. Their children may not go to school, while those in school become dropouts.

3. Conclusions

In the entire historical domains, pandemics have been adjudged as integral aspects of human civilisation irrespective of how much mankind scientifically tries to fight them. The more human beings adapt to fight them, then more they resist. Human societies are dynamic in nature, mindsets also change, science also progresses and politics change too. Unfortunately, the will

of mankind to survive does not change. As long as the government is not ready to prepare for eventualities, Nigerians would be caught unawares by more pandemics due to corruption in the process of solving health challenges. The large number of small businesses closing is escalating the economic damages. Therefore, a large portion of the population would be left without employment, hence from 2000 to 2017, about 2/3 of newly employed Nigerian youths were accommodated by the small businesses. The major lesson learnt from human experience include the pandemics that affected humanity centuries ago such as tuberculosis, HIVAIDS, Ebola, smallpox all have been successfully defeated through modern medicine by vaccines therapies. providing and Knowledge sharing and accelerated research among scientists at global level provides the ultimate solution to the Covidpandemic among other diseases (Ranabir, 2020). It has become evident that it is a global health crisis which needs an urgent action. The entire global village is faced with the challenge and an all-round action is needed so that manufacture and distribution of treatment is directed towards producing a reliable antidote to the virus and correctional approach to the lack of political will to fight a pandemic before its escalation at international level. The pandemic is so strong that it adduced to spare no country on earth no matter the level of their economy and technological capability in the comity of nations. Prior to the covid-19 pandemic, all nations were working together in tackling health issues around the globe. Unfortunately, there is an ongoing functional neo-liberal economy around the globe, because of the existence of racist fault lines along the paths of science and racism.

4. Recommendations

This study recommends that Nigerians and Nigerian governments at all levels should strategically create synergy in knowledge sharing and scientific research at global view to hasten reaching to an ultimate solution to any pandemic, especially the current Covid-19 virus, because it is a health challenge that needs an urgent attention. The Covid-19 pandemic has shrank the economic sector of Nigeria exposing how much the country is unprepared challenges. for health Therefore, the government should assist the small scale business owners with certain facilities to revive their firms. Northeastern region of Nigeria had been dislodged by the armed conflict unleashed by the Boko Haram terrorists making it agriculturally affected. Therefore, ore efforts should be made to free the axis from the clench of the insurgents. The youths should be encouraged to go into farming under certain agricultural programmes without delay to be funded and equipped by the government, individual philanthropists and private organisations.

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