

**THE SOCIO-ECONOMIC AND POLITICAL IMPLICATIONS OF THE COVID – 19
PANDEMIC ON LAGOSIANS AND RESIDENTS OF BENIN CITY**

BY

REJOICE OGHENETEGA UWHUBETINE

ART2100707

**DEPARTMENT OF HISTORY AND INTERNATIONAL STUDIES
FACULTY OF ARTS
UNIVERSITY OF BENIN
BENIN CITY**

OCTOBER, 2025

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**A PROJECT SUBMITTED TO THE DEPARTMENT OF HISTORY AND
INTERNATIONAL STUDIES, FACULTY OF ARTS, UNIVERSITY OF BENIN,
BENIN CITY IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE
AWARD OF THE BACHELOR OF ARTS (B.A) HONOURS DEGREE IN
INTERNATIONAL STUDIES AND DIPLOMACY.**

OCTOBER, 2025

CERTIFICATION

This is to certify that this research project was carried out **REJOICE OGHENETEGA UWHUBETINE** in the Department of History and International Studies, University of Benin, under my supervision.

Mr. M. Z. Akali
(Project Supervisor)

Date: _____

Prof. J.C. Nwaka
(Ag. Head of Department)

Date: _____

DEDICATION

This project work is dedicated to the Almighty God for his infinite mercies and grace.

ACKNOWLEDGEMENTS

First and foremost, I give thanks to Almighty God for His guidance, wisdom, strength, and protection throughout the course of this project.

I extend my profound appreciation to my supervisor, Mr. M. Z. Alkali, for his invaluable guidance, patience, and expertise. His constructive feedback and unwavering support have been instrumental in shaping this work.

I am also grateful to Prof. J.C Nwaka, Head of Department, International Studies and Diplomacy, for her administrative expertise.

I appreciate other Lecturers in the Department, among whom are Prof. E.A Ifidon, Prof. Eddy Efragbe, Prof. O. B. Osadolor, Dr. A. O Nwaokocha, Dr. J. Osagie, Dr. D.O Iweze, Dr. Frank Ikponmwosa, Dr. Charles Osarumwense, Dr. Williams E. Orukpe, Dr. (Mrs.) I. Osewengie and Mr. Daniel Orobator. Your collective wisdom, dedication to education, and willingness to impart knowledge have profoundly enriched my academic and intellectual growth.

To my wonderful parents Mr. and Mrs. Emmanuel Uwhubetine, thank you for the love, support and care. I love you both.

To my siblings Peace, Precious and especially Mrs. Gift Olukoju, thank you for the motivation, love and support.

To my uncle Mr. Onyebueke Anayo for his great efforts to my academic success and stay in school.

And to my wonderful friend Tom-Edeigba Livingstone for his ever-ready support.

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CHAPTER ONE

BACKGROUND TO THE STUDY

Introduction

A mysterious pneumonia known as COVID-19 broke out from Wuhan, China in late December, 2019. The early stages of what would become a global health crisis were first identified in December 2019 when reports surfaced regarding an initial outbreak at a bustling market, which impacted the market's workforce with approximately 66% of its staff reportedly falling ill. The severity of the situation prompted a swift response from local health authorities. On December 31, 2019, an epidemiological alert was formally announced, leading to the decisive measure of shutting the market on January 1, 2020.

However, throughout the subsequent month (January), the virulent pathogen embarked on a rampant spread across China including numerous provinces but not limited to Hubei, Zhejiang, Guangdong, Henan and Hunan and vital cities of Beijing and Shanghai also became significant epicenters of the epidemic.¹ Beyond China's borders, the disease rapidly spread, to nations such as Thailand, Japan, The Republic of Korea, Vietnam, Germany, The United States and Singapore. By February 6, 2020, the World Health Organisation (WHO) had documented a staggering 28,276 confirmed cases globally alongside a tragic count of 565 deaths, with the contagion impacting at least 25 countries.² The novel coronavirus which is popularly known as COVID-19 virus is linked to the same family of viruses such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).

Symptoms of COVID-19 typically included fever, cough and shortness of breath. A March 2020 UNICEF report, "UNICEF Key Messages and Prevention and Control In Schools" highlighted that severe COVID-19 infections can lead to pneumonia or breathing difficulties and in rare instances, can be fatal. Since these symptoms mirror those of the more common flu or common cold, testing is essential to confirm a COVID-19 diagnosis.³ The COVID-19 virus spreads primarily through respiratory droplets from an infected person's coughs and sneezes. You can also get infected by touching surfaces where the virus lives while the virus can survive on surfaces for several hours, simple disinfectants can kill it, says UNICEF.

The first case of the coronavirus disease in Nigeria broke out on February 27, 2020 with the entry of an Italian man who travelled from Lagos to Ogun state where he became ill and was promptly isolated. The entry of COVID-19 into Nigeria led to the gradual spread of the virus from Lagos and Ogun state to other parts of Nigeria such as Edo state, Delta state, Abuja etc. The response to the pandemic led to widespread lockdown mostly in places like Lagos, Ogun and Abuja which had more cases and limited movements and curfews in states which recorded lesser cases. The lockdown affected business, daily-lives and overall well being of residents of Lagos and Benin which brought social, economical and political implications.

Statement of the problem

The outbreak of the novel Coronavirus popularly known as COVID 19 had a significant impact on Nigerians particularly its socioeconomic and political implications on Lagosians and residents of Benin city. Different analysis and questions has been raised about its long-term impact on the lives of the residents during and after the pandemic. While the general impact of the pandemic is well documented, a significant gap remains in understanding the specific, localized socioeconomic and political implications on populated urban centers like Lagos and Benin city as major economic and administrative hubs in Nigeria. There is the need to examine the ways in which the pandemic's containment measures (lockdown, restrictions on movement), its health consequences and subsequent economic downturn affected the socioeconomic well-being and political dynamic and governance on these urban centers, Benin city and Lagos.

Aim And Objectives

This project aims primarily at understanding and identifying the socioeconomic and political implications of the COVID 19 pandemic on Lagosians and residents of Benin city. How the COVID 19 pandemic affected the changes in livelihoods, income generations, movements, essential services like education and healthcare, public perception of government responses to the pandemic, shifts in political stability and how crises were managed during this period and overall quality of life of residents in both cities.

The Objectives are:

- To understand the outbreak of the COVID 19 and its spread;

- How the pandemic filtered its way into Nigeria and its spread to the different states;
- The socioeconomic and political implications on the overall well-being of two important cities in Nigeria, Lagos and Benin city;
- Analysis and records of the impact on individuals of Lagos and Benin cities.

Scope of the Study

This study will explicitly analysis the socioeconomic and political implications of the COVID-19 pandemic on Lagosians and residents of Benin city. It will consider the historical context, the spread, the outbreak and spread into Nigeria and a systematic understanding of its impact on Nigeria specifically Lagos and Benin city. The research scope will encompass from the outbreak on the novel coronavirus from late December 2019 to 2021.

Methodology

This project will employ a historical approach drawing up records, journal and available scholarly literature. Through analysis of these sources, the project will present an understanding on the emergency of COVID-19 and the socioeconomic and its political implications on the two cities of Lagos and Benin.

In delving into the study and project, various research techniques will be employed. This study will adopt a cross-sectional mixed method research. This method combines both quantitative and qualitative research method, where data would be analyzed within a single time and focusing on a particular population (Lagos and Benin city residents).

Quantitative research method will focus on gathering data and to access and evaluate the extent of socioeconomic impact (e.g change in income, employment, security etc) and political response. Qualitative research method which involves non-numeric data will for the purpose of this study focus on in-depth interviews, observations, discussions to gather rich, descriptive data on the experiences, perceptions, attitudes of the COVID-19 pandemic and it also seeks to understand the meanings behind the data. Cross-sectional data will be collected at a particular point, focusing on a selected population, particular Lagos and Benin.

The primary sources will entail archival materials on the pandemic and interviews with the resident of Lagos and Benin city. Different field visits and engagement with the population will be employed to gather first-hand information which will aid the study, while the secondary sources will focus on textbooks, learned journals and internet materials.

Literature Review

In Adam Tooze’s book, “Shutdown; How Covid Shook The World’s Economy”⁴ published in 2021, offers a thorough compelling look at how the COVID-19 triggered a global economic shutdown unlike anything seen in modern history. He thoroughly documents the events from early 2020, illustrating the rapid transformation of a local health crisis into global economic collapse. Tooze’s emphasis centers on the massive and synchronized nature of this economic down turn. He point out that never before the entire world economic shrunk by 20% in mere weeks nor had 95% of global economies experienced a simultaneous decline in per capital GDP during the first half of 2020. This “shutdown” was more than a recession, it was a

sudden cessation of economic activity across various sectors, brought on by public health mandates such as lockdowns, travel restrictions and social distancing.

Israel N. Obasi in his book, “Nigeria’s Policy Response to COVID-19 Pandemic”⁵, provides an insightful discussion of how Nigerian government with the help of its citizens battled against the coronavirus pandemic which resulted in over 6 million deaths and over 468 million confirmed cases globally as at March 20th 2022, Obasi’s core argument acknowledges that Nigeria, like many nations, struggled to create and execute its pandemic policies and how Nigeria’s specific socioeconomic and institutional realities often amplified these challenges. His book reveals that imposing lockdown policies, though essential for public health, proved “economically devastating and socially dislocating” for a nation where a large part of the population relies on daily informal economic activities for survival. The conflict between public health needs and economic realities is a main theme in Obasi’s analysis.

In an article by Prof. Olasanya. O. and Ahamuefala. E. Ogbonna “COVID-19 and Growth Projections”⁶ explains how Nigeria’s economy faced significant turmoil following the emergence of COVID-19. The virus, first detected in Nigeria on February 27, 2020 and declared a global pandemic by the World Health Organisation just 13 days later. While much discourse in both public media and academic literature predominantly concentrated on the global macroeconomic repercussions of COVID-19, Ataguba (2020) offered a crucial counter argument. He contended that this focus represented “Only one part of the bigger picture of economic impact” Ataguba specifically highlighted the vulnerabilities of Africa and cited its

high disease burden, poorly developed infrastructure, inadequate safety nets and a fragile health systems.

Still in the article by Olusanya and Ogbonna, they explained the vulnerabilities and weaknesses of the Nigerian economy. The country was said to still be recovering from a recession experienced in 2016, furthermore Nigeria's heavy reliance on crude oil made it vulnerable to the dramatic drop in international oil prices. These factors and more collectively fueled concerns and uncertainties about economy. As Ozoli (2020) noted, the economic downturn in Nigeria was a direct result of the combination of declining oil prices and the ripple effects of the COVID-19 outbreak.

In the book "Economic and financial impacts of the COVID-19 Crisis around the World: Expect the unexpected" by Allen N, Mustafa U and Raluca A.⁷, Provides an in-depth analysis of the COVID-19 crisis's effect on the global economy. The book offers a deep dive into the COVID-19 economic crises, observing its effect on households, businesses, banks and financial markets. The book conceptualizes the COVID crisis by comparing and contrasting it with major past events like the crash of 1929 and the 2007-2009 Global financial crisis. The comparison is key, as it highlights the unique origin of the COVID-19 Crisis in the real economy, not the financial sector. The authors analyzes how governments and central banks around the world responded, weighing the social and benefits of different policies. A major focus is on learning from the crisis. The book concludes by offering a "toolkit" of preventive measures and policy advice to help us better prepare for and manage unexpected crisis in the future.

In COVID-19 and the informal Economy: Impact, Recovery and the future, by Martha. C, Michael. R and Kunal.S.⁸. This book provides a comprehensive and global analysis of how the pandemic affected the world's most vulnerable workers. The main argument of this book is how that the COVID-19 pandemic hit informal workers- the majority of the global workforce- the hardest. The book challenges harmful stereotypes by showing the workers are very important but vulnerable. The book also shows that the crisis didn't affect all informal workers equally. The impact varied significantly based on the workers sector, location and gender. Detailed case studies on groups were carried out, groups like street vendors, home-based workers and it illustrates how their livelihoods were uniquely affected by lockdown, supply chain issues and shifts in consumer habits.

The book also highlights that women in the informal sector often experienced greater job losses and slower recoveries than men. Here the government was also critically examined alongside their economic recovering plans, arguing that many policies failed to support the vital part of the workforce. The final section of the book "The future", proposes a set of policy recommendations for a more inclusive recovery and it included creating better social protection program and providing financial aid, most importantly, the authors call for a "New Social contract" that acknowledges, values and give informal workers a voice in policy decisions.

Evans. O, Gbadebo.O, Daniel .U and Romanus .O (2022)⁹ In their book “Covid-19 In The African Continent;Sustainable Development And Socioeconomic Shocks”, offers to examine the mix impact of the COVID-19 pandemic on African countries. The book gives a comprehensive and detailed analysis of the far-reaching consequences of the pandemic across Africa. Its doesn't just focus on the public health crisis but delves into the continent's socioeconomic fabric. The book carefully examines how the pandemic has derailed process toward the Sustainable Development Goals (SDGs), highlighting the setbacks to poverty reduction, education and economic growth. It analyses the effectiveness of the policies implemented from the African government and non-governmental organizations in response to the crisis, their effort in stimulating economic recovery and building a more resilient post pandemic future.

The ultimate objective of this scholarly work is to provide a wide range evidence based framework for policy makers.

In the article, “Impact Of COVID-19 On Transportation In Lagos, Nigeria” by Emmanuel Mogaji (2021)¹⁰, highlights and focuses on the impact of COVID-19 on transportation in Lagos state, Nigeria. The effect it had on the economy, the increased cost of transportation, shortage of transportation, mode and congestion.

Chapterization

Chapter One: Background to the Study

This chapter provides an introduction to the background to the study, stating its aim and objectives of this research, the methodology used in carrying out this research, the scope of the research and various literature reviewed in relation to this study.

Chapter Two: The Outbreak of Covid 19 and its Spread

This chapter examines the outbreak and spread of the Covid 19, its entry into Nigeria particularly Lagos and Benin City.

Chapter Three: Socio-Economic and Political Implications of Covid 19 in Lagos and Benin City

This chapter examine the implications of Covid 19 on Lagosians and residents of Benin City especially the socio-economic and political aspects.

CHAPTER FOUR: Comparative Analysis of Covid 19 in Lagos and Benin City

This chapter compares the impact of the Covid 19 on the two different cities. It also critically analyzing its impacts.

CHAPTER FIVE: Conclusion

This chapter concludes the project work.

Endnotes

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CHAPTER TWO

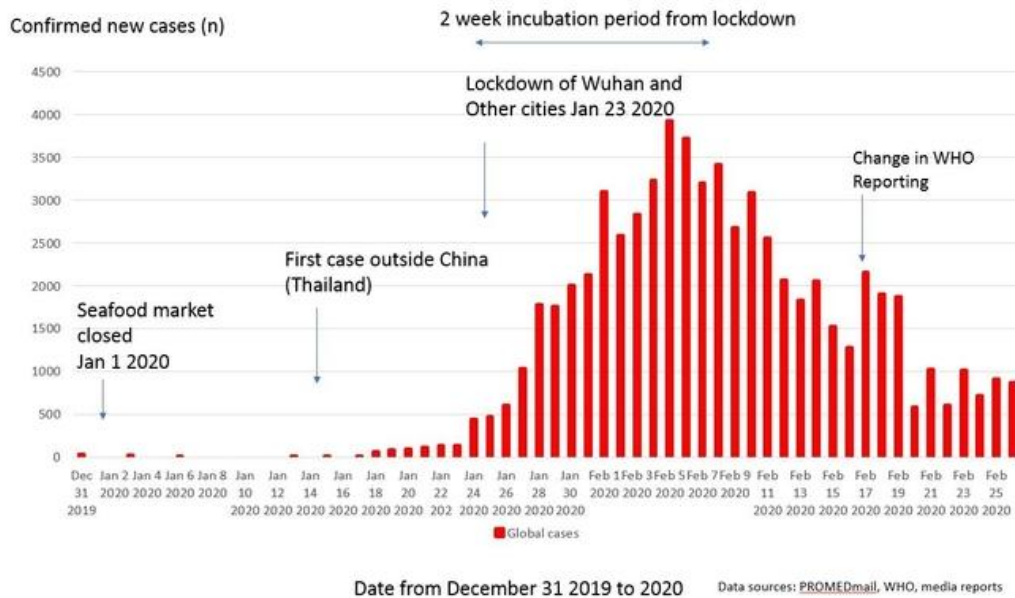
THE OUTBREAK OF COVID-19 AND ITS SPREAD

Background and outbreak of covid-19

The earliest documented cases of COVID-19 were traced back to Wuhan, Hubei Province, in early December 2019. On December 30, an unofficial report from Dr. Li Wenliang warned of a SARS-like virus, which led to brief state-sanctioned censorship and delay in national disclosure. The rapid identification of this pathogen, largely due to advancements in genomics sequencing, was critical in the early understanding of its potential threat.¹

Initial epidemiological characteristics and early containment efforts

China's initial reluctance to release full data and its attempt to control the narrative led to criticism by international actors. However, early epidemiological investigations in Wuhan revealed crucial insights into the virus's characteristics. Clinical presentations varied widely, from mild flu-like symptoms to severe pneumonia, acute respiratory distress syndrome (ARDS), and multi-organ failure, particularly in older adults and those with underlying health conditions.²



In response to the escalating crisis, Chinese authorities implemented an unprecedented series of stringent public health measures. On January 23, 2020, Wuhan and several other cities in Hubei Province were placed under a severe lockdown, restricting the movement of millions of people.³ This strategy, while controversial due to its scale and impact on civil liberties, was an attempt to dramatically reduce transmission chains. Beyond the lockdown, measures included aggressive contact tracing, isolation of confirmed cases, quarantine of close contacts, mass testing, and the rapid construction of temporary hospitals (fangcang hospitals) to manage patient surge. These early, draconian containment efforts provided a glimpse into the potential effectiveness, as well as the societal cost, of large-scale non-pharmaceutical interventions (NPIs).⁴

Diplomatic Fallout and Blame Narratives

Throughout January, the U.S. and other Western nations began issuing travel advisories. The United States evacuated its citizens from Wuhan on January 29 and imposed travel restrictions shortly after. Accusations of Chinese non-transparency began to dominate media and diplomatic circles, exacerbating Sino-Western tensions. Simultaneously, China's efforts to portray competence—through hospital construction and media control—formed part of its global "soft power" push.⁵

Progression From Local To Global Spread

Despite rigorous containment efforts in China, the inherent connectivity of the modern world ensured the virus's global propagation. The initial spread was predominantly facilitated by international travel. Early cases outside China were often linked to individuals who had visited Wuhan or had close contact with travelers from the region. Thailand, Japan, South Korea, and the United States reported some of the earliest confirmed cases outside mainland China in January 2020.⁶



Picture showing the global spread of the virus

Key events accelerated the global dissemination. The Diamond Princess cruise ship, which quarantined off the coast of Japan in February 2020, became an early, high-profile example of rapid transmission in a confined environment, providing valuable, albeit grim, data on transmissibility.⁷ Similarly, large-scale gatherings and events, such as religious conventions in South Korea and sports events in Europe, served as "superspreading events," leading to explosive outbreaks in new regions.⁸

By late February and early March 2020, significant community transmission was evident in countries like Italy, Iran, and South Korea, marking the transition from imported cases to widespread local epidemics.⁹ Italy, in particular, became an early European epicenter, overwhelming its healthcare system and providing a stark warning to other nations. The rapid spread across continents underscored the challenges of containing a highly transmissible

respiratory virus in an interconnected world, demonstrating how quickly a localized outbreak could become a global pandemic.¹⁰

Covid-19's Entry into Nigeria: A Historical Account

Nigeria recorded its index case of COVID-19 on February 27, 2020, involving an Italian national who arrived in Lagos from Milan two days prior via Murtala Muhammed International Airport. This event immediately triggered the activation of a multi-sectoral emergency operations center by the Nigeria Centre for Disease Control (NCDC) to coordinate a nationwide response. The second case, confirmed on March 9, 2020, was a Nigerian citizen who had contact with the index case in Ogun State.

Despite early assurances from the Federal Government regarding strengthened surveillance at international airports, the three-week interval between the first case and the imposition of comprehensive travel restrictions on March 18, 2020, likely allowed for undetected importation of the virus. Returnees from abroad constituted a significant proportion of early confirmed cases, highlighting the critical role of international travel in the initial spread. By March 29, 2020, a total lockdown was declared for high-incidence states like Lagos, Ogun, and the Federal Capital Territory (FCT), later extended nationwide by April 23, 2020.¹¹

Policy Responses and Challenges

The Nigerian government's initial response to the pandemic was structured around an Incident Management System, focusing on key thematic areas such as surveillance, laboratory services, points of entry (PoE) management, infection prevention and control, case management, risk communication, and logistics.¹² The Nigerian government reacted by activating the National Coronavirus Emergency Operations Centre (EOC), led by the NCDC, in collaboration with the Federal Ministry of Health (FMoH), the Lagos State government, and WHO. Non-pharmaceutical interventions (NPIs) included travel restrictions, curfews, social distancing directives, and the closure of schools, markets, and places of worship.¹³

However, the implementation of these measures faced significant challenges. Compliance with social distancing and lockdown directives was notably low, particularly among a populace where over 85% depend on daily economic activities for survival. The provision of palliatives, intended to cushion the economic hardship, was reportedly ill-managed and poorly distributed, reaching only a small fraction of the vulnerable population.¹⁴ This economic pressure often forced individuals to choose between adhering to public health guidelines and securing their livelihoods, inadvertently sustaining transmission chains, especially in densely populated urban centers like Lagos.

Diplomatic And International Dimensions

Nigeria maintained close communication with the WHO, which supported surveillance, testing kits, and response coordination. The country also worked with the Africa CDC and

bilateral partners including China, the EU, and the United States. These interactions were not merely health-focused but also diplomatic - influencing aid, cooperation, and reputational politics. The global imposition of travel restrictions and border closures in response to COVID-19 had profound and intricate diplomatic implications for Nigeria, significantly affecting its foreign relations and economy. While intended as a public health measure, these restrictions inadvertently became tools of economic and diplomatic recalibration, reshaping global interdependence. Nigeria, heavily reliant on international trade, foreign direct investment, and diaspora remittances, experienced severe economic disruption.¹⁵

The pandemic underscored the need for enhanced regional coordination and robust public health infrastructure at points of entry to manage future cross-border health crises more effectively.

Furthermore, the global scramble for medical supplies and later, vaccines, highlighted existing power imbalances in international relations. Nigeria, like many developing nations, found itself navigating a complex landscape of "vaccine diplomacy," primarily reliant on multilateral initiatives like COVAX and bilateral aid. While relationships with organizations like Gavi, WHO, and the World Bank facilitated access, the initial "vaccine nationalism" of wealthier nations exposed vulnerabilities and underscored the importance of diversified diplomatic engagement and the long-term goal of domestic manufacturing capacity. Nigeria's cautious approach to certain bilateral vaccine offers, such as Russia's Sputnik V, demonstrated an adherence to regulatory processes but also revealed the complexities of vaccine procurement driven by cost, logistics, and public acceptance.¹⁶

The Entry Of Covid-19 Into Lagos

Lagos recorded Nigeria's index case of COVID-19 on February 27, 2020, an Italian national who arrived at the Murtala Muhammed International Airport (MMIA) from Milan.¹⁷ This event instantly positioned Lagos as the national epicenter and triggered the activation of a multi-sectoral emergency operations center by the Lagos State Ministry of Health. The city's status as a hub for international travel and its extensive transportation network facilitated the virus's initial spread. Early cases were predominantly linked to international travelers and their contacts, underscoring the critical role of border control and quarantine measures.¹⁸

A comprehensive lockdown of the city was not imposed until late March, a measure that followed a period of escalating community transmission. The initial weeks saw a rapid increase in cases, overwhelming the nascent contact tracing capacity and revealing significant gaps in the public health infrastructure. The government's decision to establish dedicated isolation and treatment centers, such as the one at the Infectious Disease Hospital in Yaba, was a crucial step, but their capacity was quickly tested by the growing number of symptomatic patients.¹⁸ By the end of 2020, Lagos accounted for a disproportionately high number of Nigeria's total confirmed cases, cementing its status as the nation's primary battleground against the pandemic.

Policy Responses and Public Health Management by the Lagos State Government

Lagos' status as an international hub — home to Nigeria's largest airport, seaports, and over 21 million people — made it especially vulnerable. Within weeks, the virus had

spread within the state. As cases grew, Lagos authorities established an Incident Command System under the leadership of the state governor, collaborating with the WHO, private donors, and foreign embassies to mobilise resources. Under the leadership of the LSMoH and a dedicated COVID-19 Task Force, the government adopted a strategy centered on non-pharmaceutical interventions (NPIs). These included a lockdown of the state, a ban on inter-state travel, the closure of schools and markets, and a series of public awareness campaigns.¹⁹ The Lagos State Government also entered into direct cooperation with the United Nations Development Programme (UNDP), and the WHO deployed technical advisors to Lagos State's Emergency Operations Centre. These actions illustrated a broader trend of “pandemic diplomacy”, where medical aid became a tool of foreign policy.²⁰

COVID-19 IN BENIN CITY: The Local Onset and Public Health Response in Benin City

Nigeria recorded its index case of COVID-19 on February 27, 2020, in Lagos, marking the virus's arrival in Sub-Saharan Africa. Shortly thereafter, Edo State, with Benin City as its capital, began to register its own cases, signaling the start of a local battle against the nascent pandemic. The University of Benin Teaching Hospital (UBTH), a major referral center in Southern Nigeria, quickly became a focal point for case management and response. However, the lack of early testing centers and shortage of personal protective equipment (PPE) hampered response efforts. In April 2020, Edo State set up isolation centers at Stella Obasanjo Hospital and UBTH. The state government also launched public awareness campaigns in

Pidgin English and local dialects, distributed palliatives to households, and imposed curfews. Efforts were initiated to screen passengers at entry points and establish testing centers. However, as noted by sources, the capacity for extensive testing was a significant challenge. This indicated that the actual community spread might have been much higher than initially captured.²¹

The government, with support from various organizations, moved to establish dedicated isolation and treatment centers. This involved repurposing existing facilities and, in some cases, constructing new ones. Measures such as hand hygiene promotion, social distancing protocols, and the mandatory use of face masks were introduced. The government also imposed restrictions on public gatherings and, for a period, school closures.²²

Policy Responses and Public Health Management by the Edo State Government

The Federal Government of Nigeria, through agencies like the Nigeria Centre for Disease Control (NCDC), issued national guidelines and supported states in their responses. At the state level, the Edo State Government was responsible for implementing these directives, establishing task forces, and allocating resources for local containment and treatment efforts. However, challenges in inter-agency coordination, resource allocation, and accountability often complicated effective implementation.²³

Nigeria, including states like Edo, benefited from international support in its fight against COVID-19. Organizations such as the World Health Organization (WHO), the World Bank, and various bilateral partners provided technical assistance, funding, and essential

medical supplies. These diplomatic engagements were vital, especially in addressing the acute shortages of medical equipment, testing kits, and personal protective equipment (PPE). The effectiveness of this aid, however, often depended on local absorptive capacity, corruption levels, and logistical challenges.²⁴

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CHAPTER THREE

SOCIO-ECONOMIC AND POLITICAL IMPLICATIONS OF COVID-19 IN LAGOS AND BENIN

In Nigeria, a nation characterized by its significant population density, complex informal economy, and a federal governance structure, these measures had particularly profound and multifaceted consequences. Lagos, as Africa's most populous city and Nigeria's commercial nerve center, was the initial epicentre of the outbreak and consequently experienced some of the earliest and most stringent lockdown directives. Its experience, particularly the "Lockdown in Lagos," often set the precedent and tone for responses across other major urban areas, including Benin City, the capital of Edo State.

Lockdown in Lagos

Nigeria confirmed its first COVID-19 case in Lagos on February 27, 2020. The initial response was characterized by a period of cautious observation, followed by increasingly stringent measures as cases mounted. On March 30, 2020, then-President Muhammadu Buhari announced a total lockdown of Lagos, Ogun States, and the Federal Capital Territory (FCT) Abuja for an initial period of 14 days, later extended. This directive significantly restricted movement, closed non-essential businesses, and mandated social distancing. Edo State, including Benin City, followed suit with its own set of restrictions, albeit with variations in timing and enforcement intensity.

The policy rationale for this lockdown was clear: to "flatten the curve," prevent overwhelming the nascent healthcare system, and allow for contact tracing and isolation. The vast majority of the population relies on daily earnings, and a sudden halt to economic activity threatened immediate destitution. This inherent conflict between public health imperatives and socio-economic realities became a defining feature of the lockdown experience.¹



Picture showing the lockdown in Lagos

Socioeconomic And Political Impact of Covid-19 In Lagos

Socioeconomic Impact of Covid-19 In Lagos

The socio-economic fallout from the COVID-19 lockdown in Lagos was immediate and far-reaching, exposing and exacerbating pre-existing structural inequalities.

Employment And Livelihoods

Lagos, home to more than 20 million people, experienced massive job disruptions, particularly in the informal sector. According to the National Bureau of Statistics (NBS), about 42% of employed Nigerians reported income loss during the lockdown, with Lagos being the hardest hit. Lagos' economy is deeply informal, with over 60% of its workforce relying on daily income sources ranging from street trading to artisan services. The government-imposed lockdown in March 2020, initially for two weeks but extended intermittently until mid-2021, effectively paralyzed this sector. Street vendors, daily wage earners, small business owners, and transport workers, who constitute a significant portion of the workforce in both cities, were abruptly cut off from their income streams.²

“I am a tailor. My customers stopped coming. No work, no food. The government said stay home, but did not bring help.”³

"When they announced the lockdown, it was like a sudden stop to life. My small food stand, where I earn enough to feed my children every day, had to close. We ate through our savings in the first week. It was pure hunger. We had to rely on neighbours and family, and even then, it wasn't enough."⁴

The lockdown thus disproportionately affected lower-income households, where compliance meant choosing between public health and starvation. Food insecurity rose sharply, as documented by the Nigerian Bureau of Statistics, which noted a 36% increase in household hunger during April–May 2020. Small and Medium Enterprises (SMEs), the backbone of Nigeria's economy, faced immense pressure. Supply chains were disrupted, customer traffic plummeted, and many businesses lacked the digital infrastructure or financial reserves to pivot. A report by the National Bureau of Statistics (NBS) in collaboration with the United Nations Development Programme (UNDP) indicated that up to 79% of Nigerian businesses were negatively impacted by the pandemic, with a significant proportion facing revenue losses.⁵

Food Security and Cost of Living

The restrictions on movement affected the distribution of goods, leading to spikes in food prices, particularly for perishable items. This compounded the economic hardship for households with diminished incomes. While state governments attempted to provide palliatives (food items and cash transfers), their distribution was often criticized for being insufficient, poorly targeted, and susceptible to political interference, further eroding public trust.

"The palliatives were a joke in many areas. Some families got a tiny bag of rice and noodles, while others got nothing. It created more

tension than relief. People saw that resources meant for the poor were being diverted or not reaching the truly needy.⁶

Education and Digital Divide

Public schools were shut, and online learning was encouraged. However, many students in Lagos lacked access to smartphones or stable internet. A study revealed that only 29% of secondary school students could participate in remote learning during the lockdown.⁷ Nationally, between March and September 2020, approximately 22.4 million elementary, 6.8 million lower secondary, and 1.7 million university students were affected. Remote learning was limited, particularly in public schools, and education loss was estimated to equal 5–6 months' worth in learning gains.⁸ Lagos's pre-existing educational disparities were exacerbated, as private schools varied widely in access to e-learning, and public schools were largely unprepared for remote education. Lagos relied on television and radio learning during closures, but poorer areas struggled due to resource constraints.⁹

“My daughter's school sent assignments via WhatsApp when school closed. But our network is weak and I have four children. I could not afford data for them all, so only one did any schoolwork.¹⁰”



Picture showing the Online Education in Lagos

Public Health and Healthcare Access

Though Lagos recorded over 25,000 confirmed cases by December 2020, its healthcare infrastructure—already under strain—struggled to cope. Lockdown-induced travel restrictions and fear of infection led to a 40 percent decline in outpatient visits for non-COVID conditions, exacerbating maternal and child health risks.¹¹ Community health workers reported interruptions in vaccine drives and antenatal care. “Patients feared coming to clinics; some delivered at home,” noted Dr. Michael Uba, a Lagos primary-care physician.

By April 2020, the State had isolation beds at Mainland Hospital, and was preparing to open new centres at Onikan Stadium and Gbagada General Hospital with a total capacity approaching 300 beds. Adequate PPE stocks were in place, assisting in contact tracing and case management.¹²

Transportation And Urban Mobility

Under the lockdown, the city's Bus Rapid Transit (BRT) and ferry services operated at 50 percent capacity. Private minibuses (danfos) were banned altogether, disrupting commutes for over 1 million daily riders. The resulting transport vacuum forced reliance on motorcycles (okadas), which remained illegal but proliferated, raising safety and enforcement concerns.

Political Impact of Covid-19 In Lagos

The COVID-19 pandemic and the accompanying lockdowns placed unprecedented pressure on Nigeria's governance structures, leading to significant political implications related to the exercise of emergency powers, shifts in public trust, and the legitimacy of the state.

Government Response and Trust

In response to the crisis, both the federal and state governments invoked various legal frameworks to implement emergency measures. The Quarantine Act of 1926 was dusted off and became the primary legal basis for imposing lockdowns and restricting movement. This led to an expansion of executive powers, with governors in Lagos State issuing directives that significantly curtailed fundamental freedoms. While initially framed as temporary, concerns were raised about the potential for these powers to be abused or to linger beyond the immediate crisis.¹³ While the Lagos State Government set up isolation centers and food distribution schemes, many residents distrusted government intentions. A civil society report

by BudgIT showed that 79% of surveyed Lagosians did not receive any form of palliative, despite widespread announcements.

Law Enforcement and Human Rights

The militarized enforcement of lockdown orders introduced significant human rights concerns. The Nigeria Police Force and military personnel were deployed to monitor movement, enforce curfews, and disperse gatherings. The National Human Rights Commission reported at least 18 extrajudicial killings linked to lockdown enforcement within the first month. The securitization of public health—while effective in deterring mass movement—led to an erosion of civil liberties and sparked protests in some neighborhoods.

Lockdown in Benin City

Nigeria's first confirmed COVID-19 case surfaced in Lagos on February 27, 2020. The initial federal response was cautious, but as case numbers surged, particularly in Lagos, President Muhammadu Buhari announced a phased lockdown for Lagos, Ogun, and the Federal Capital Territory (FCT) Abuja, commencing March 30, 2020 (Nigeria Centre for Disease Control, 2020). This "Lockdown in Lagos" served as a template, influencing subsequent actions by other state governments.

Edo State, under Governor Godwin Obaseki, quickly followed suit, albeit with a slightly different timeline and enforcement emphasis. The "Lockdown in Benin" effectively began with the announcement of a statewide dusk-to-dawn curfew on April 19, 2020, along with a ban on public gatherings, closure of markets (except for food and essential items), and

strict enforcement of social distancing and mask-wearing. Inter-state travel was also prohibited, significantly isolating Benin City from its economic hinterlands and other major urban centers.¹⁴ The rationale was consistent: to contain the spread of the virus, protect the nascent healthcare system, and facilitate contact tracing.

Socio-Economic And Political Impact in Benin City

Socioeconomic Impact of Covid-19 In Benin City

The lockdown in Benin City created a ripple effect that cascaded through the city's economy, affecting various sectors and demographics. The measures, which included the closure of markets, restrictions on movement, and a ban on public gatherings, had a devastating impact on the livelihoods of many.

Employment and Livelihoods

Benin City's economy is heavily reliant on the informal sector, with a significant portion of its population engaged in daily trading, artisan work, and small-scale entrepreneurship. The lockdown effectively halted these activities. Market traders, artisans, bike riders, and daily wage laborers make up a significant portion of the workforce. According to the National Bureau of Statistics (NBS), over 61 percent of working adults in Edo State were employed informally in 2019.²

During the lockdown, many informal workers faced sudden unemployment. Civil servant operations were reduced to skeletal staff, while markets and intercity transport were halted. A foodstuff trader at Oba Market, who wished to remain anonymous, recounted the

sudden loss of income: "Before the lockdown, I made enough money every day to feed my family. The day they announced the lock-down, it was like a sudden stop. My goods were in the market, and I couldn't sell them. We had to eat from our savings until there was nothing left."

"The lockdown hit us hard. As a bricklayer, my income depends on daily work. When construction sites closed, there was nothing. We relied on the little savings we had, which quickly ran out. Feeding my family became a daily miracle. I kept hoping the governor would announce some help, but it felt like we were forgotten."¹⁵

"My salon was my life, my only source of income. When they locked down Uselu, I couldn't open. My apprentices couldn't come. My customers couldn't come. It was like someone just switched off the light on my business. I started selling fruits just to survive, but even that was difficult with all the restrictions."¹⁶

Food Security and Cost of Living

Restrictions on inter-state movement and local market operations caused significant disruptions in food supply chains, leading to price surges for essential commodities. This

compounded the economic hardship for households already grappling with lost incomes. Government efforts to provide palliatives (food packages and cash transfers) were met with mixed results. While some aid reached vulnerable populations, distribution was often criticized for being insufficient, poorly coordinated, and marred by allegations of diversion and political patronage.

"I volunteered with a local NGO distributing food in some



Picture showing food scarcity (between hunger and the people)

Education And School Closures

All educational institutions were shut from March to September 2020, disrupting learning for approximately 200,000 students in Edo State.¹⁸ Benin City schools were particularly affected due to poor digital infrastructure. While some private schools attempted online learning via WhatsApp and Zoom, access was limited.

"We shared one small Android phone between four siblings," said Eseosa, a 16-year-old student in New Benin. The Ministry of Education estimated that only 15–20% of students in public schools accessed remote lessons during the lockdown.¹⁸

A final-year student lamented, "My university tried to move classes online, but not everyone had a good phone, let alone a laptop or internet data. We lost a full semester of learning, and there was no proper plan to help us catch up."



Public Health and Health Care Access

Benin's healthcare facilities faced immense pressure during the pandemic. With limited isolation centers, the city's flagship Central Hospital had to redirect resources from routine care to COVID-19 treatment. Immunization drives and maternal health services dropped drastically. A 2021 UNDP report revealed that non-COVID outpatient attendance in Benin fell by over 35% during peak lockdown months, due to fear of infection and transport barriers.¹⁹

Health workers also faced stigmatization. One nurse, Blessing I., recalled: "People stopped talking to me in my compound because I worked in the hospital. Some landlords even asked nurses to leave their apartments."

Transportation and Urban Mobility

Government-regulated minibuses and taxis (ESCOB) operated on skeletal schedules, causing overcrowding and increased transport fares. The ban on interstate travel also cut off Benin's link to Lagos and Abuja, slowing trade and informal commerce.

Political Impact in Benin City Lockdown

The COVID-19 lockdown in Benin City revealed not only the fragility of state capacity but also the erosion of public trust in government institutions. However, many residents viewed the state's pandemic response as detached from their lived realities.

Government Response and Trust

Both the federal and state governments invoked existing laws, primarily the Quarantine Act of 1926, to legitimize sweeping emergency powers. Governor Obaseki issued

executive orders that significantly curtailed fundamental rights, including freedom of movement and assembly. While these measures were deemed necessary for public health, they represented a substantial expansion of executive authority. Concerns were raised by civil society organizations and legal experts about the potential for abuse and the lack of robust oversight mechanisms.²⁰ While the Edo State government held press briefings and passed emergency regulations, much of the population experienced these as top-down impositions rather than participatory governance. The absence of community consultations or transparent distribution of relief fueled perceptions of exclusion. There were reports of elected officials using the pandemic as a platform for political self-promotion, distributing branded hand sanitizers and foodstuffs during the lockdown, particularly ahead of the September 2020 Edo gubernatorial election. This further entrenched cynicism among citizens regarding the motivations behind government actions.

According to a 2021 policy brief by the Centre for Democracy and Development (CDD), Nigeria's pandemic response lacked trust-building mechanisms and worsened public alienation from political institutions.

Law Enforcement and Human Rights

Enforcement was strict in early weeks. The Nigeria Police and Edo State Vigilante groups manned checkpoints. Several cases of brutality, extortion, and abuse were reported by civil society groups. The lockdown period also impacted civil society organizations (CSOs). While many CSOs played a crucial role in filling governance gaps by providing humanitarian

aid and disseminating information, they also faced operational challenges and increased scrutiny from state authorities.

Reports of human rights abuses by security forces were rampant in both cities, with Amnesty International documenting numerous instances of excessive force, illegal detention, and extortions committed by police and military enforcing lockdown measures.²¹ These incidents further deteriorated the human rights landscape and highlighted pre-existing issues of police brutality.

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CHAPTER FOUR

COMPARATIVE ANALYSIS OF THE COVID-19 IN LAGOS AND BENIN

Analysis of Covid – 19 Socio-Economic and Political Impacts in Lagos

The Informal Sector

Lagos's economy is dominated by the informal sector, employing over 70% of the workforce and contributing an estimated 60% to the state's GDP.¹ This vulnerability—a lack of social safety nets, savings, and the need for daily physical mobility—became the crisis's primary channel. The federally mandated 5-week lockdown in April/May 2020 brought this sector to an abrupt halt. A survey by Innovations for Poverty Action (IPA) found that 79% of Lagosians working in the informal sector reported losing their primary source of income during the lockdown.²

During the COVID-19 pandemic, the Lagos State Government (LASG) faced significant challenges in providing adequate support to its citizens, particularly the large informal workforce. The government's initial response, which included the distribution of a small amount of food palliatives, was widely criticized for being insufficient. This inadequacy was not simply an oversight but a direct consequence of deep-seated issues within the city's political and economic structures.

One of the primary factors contributing to the government's limited response was a severe lack of fiscal capacity. The LASG, like many sub-national governments, operates with a constrained budget, and the sudden economic shock caused by the pandemic overwhelmed

its financial resources. This made it impossible to fund a comprehensive relief program that could reach everyone in need. The limited funds available had to be stretched across a vast population, resulting in the distribution of what many considered a meager amount of aid.

The issue was further compounded by a critical absence of reliable data on the informal workforce. Unlike those in the formal sector who are registered with various government agencies and employers, informal workers—such as street vendors, artisans, and small-scale traders—do not exist within formal registries. This lack of data meant the government had no clear picture of the number of people in this sector, their locations, or their specific needs. Without this foundational information, designing and implementing a targeted and effective relief strategy was a near-impossible task. The informal workforce was effectively invisible to policymakers, leading to their exclusion from initial relief plans. This invisibility is a central tenet of the "political economy of informality." Because informal workers are not formally organized, they lack the collective political leverage of their counterparts in the formal sector. They are not represented by powerful unions or associations that can lobby the government on their behalf. This limited political power means their voices are often unheard and their concerns are not prioritized in policy design. As a result, when the crisis hit, this vulnerable group was largely an afterthought in the government's initial response. This systemic neglect during the crisis directly exacerbated the problems of hunger and poverty, pushing an already precarious population further into destitution. The government's limited and untargeted efforts failed to address the fundamental needs of a significant portion of its population, highlighting

a critical gap in its social safety net and a lack of understanding of the informal economy's critical role in the lives of Lagosians.³

Public Health System

Before the COVID-19 pandemic, Lagos already faced a severe healthcare crisis. The city's healthcare system was already struggling due to a critically low doctor-to-patient ratio and inadequate infrastructure. This long-standing vulnerability meant that when the pandemic hit, the system was not prepared for the immense strain it would face. Despite its pre-existing weaknesses, the Lagos State Government (LASG) demonstrated a degree of resilience and competence in its initial response. The government quickly worked to establish new testing capacity and create dedicated isolation centers to manage the influx of COVID-19 patients. However, the sheer scale of the pandemic quickly overwhelmed these efforts.

The intense focus on battling COVID-19 came at a heavy cost to other essential healthcare services. Resources, staff, and attention were all diverted to the pandemic response, causing a massive disruption to routine medical care. This shift had tragic consequences: a significant increase in deaths from preventable diseases like malaria, complications during childbirth, and other non-COVID-19 illnesses. The health system's singular focus on one crisis inadvertently created a secondary public health emergency.

The pandemic also exposed deep-seated issues in Nigeria's governance structure, leading to significant conflicts between different levels of government. The LASG, led by a capable but financially restricted team of experts, often found itself in conflict with the

Federal Government of Nigeria (FGN). These clashes centered on disagreements over resource allocation and the overall direction of the health response.

A prime example of this fragmentation was the controversial purchase of ambulances by a federal agency, the Niger Delta Development Commission (NDDC), at a time when hospitals in Lagos were desperately in need of resources. This disjointed approach meant that while the LASG was on the front lines of the crisis, struggling to get essential supplies, federal agencies were making decisions that didn't align with the immediate needs on the ground. This lack of coordination and cooperation diluted the overall effectiveness of the health response, hindering a unified and efficient strategy to combat the pandemic.⁴

Formal Commerce & Industry

When the pandemic struck, Lagos's economy, like the rest of the world, was hit hard, but the impact was not felt equally across all sectors. The formal economy, which includes established businesses in banking, technology, manufacturing, and aviation, showed a different level of resilience compared to the city's vast informal sector.

Businesses in the formal sector were able to adapt more effectively to the new reality of the pandemic. For example, sectors like banking and technology quickly transitioned their operations to a remote work model, allowing them to continue functioning with minimal disruption. However, not all formal sectors were so lucky. Industries such as manufacturing, aviation, and hospitality faced severe downturns, as travel restrictions and lockdown halted their activities. This widespread economic shock was reflected in Nigeria's national figures,

with the country's GDP contracting sharply by -6.1% in the second quarter of 2020. As Nigeria's economic powerhouse, Lagos bore the brunt of this contraction, experiencing a significant decline in business activity and a rise in unemployment.

A key difference in how the formal and informal sectors weathered the crisis was the political influence of the formal sector. Comprised of large, organized businesses, this sector was able to successfully lobby the government for a faster reopening of the economy. This political leverage was a major advantage, as it allowed these businesses to push for policies that benefited them.⁵ Additionally, the formal private sector had privileged access to government relief packages. A prime example of this was the Central Bank of Nigeria's (CBN) COVID-19 intervention funds, such as the ₦50 billion Targeted Credit Facility. These funds were designed to help businesses manage the economic fallout of the pandemic. However, while formal businesses had the necessary paperwork and connections to apply for and receive these funds, the informal sector was largely unable to access them. This stark contrast underscores how pre-existing economic power and influence played a crucial role in shaping who received help and who was left to fend for themselves during the recovery period. The unequal distribution of these resources further widened the gap between the two sectors and highlighted the systemic disparities in Lagos's economy.

Education

The COVID-19 pandemic brought with it a major disruption to the education sector in Lagos, forcing the closure of schools and affecting a staggering 1.5 million students. This

sudden shift to remote learning revealed and exacerbated a long-standing vulnerability within the state's education system: a deep digital and infrastructural divide. In an attempt to ensure learning continuity, the Lagos State Government initiated remote learning programs through television and radio broadcasts. However, these efforts proved to be largely ineffective for the majority of students. The reasons for this failure were multifaceted and rooted in the socio-economic realities of many households. A significant number of children, particularly those from low-income families, faced a lack of basic necessities for remote learning, including consistent access to electricity, a reliable internet connection, and the necessary electronic devices. Without these foundational resources, continuous and effective learning was simply impossible. This situation did more than just halt their education; it widened the gap of educational inequality, putting children from disadvantaged backgrounds even further behind their more privileged peers.

The crisis also exposed a critical gap in multi-level governance planning for social services. The response to the educational challenge was primarily a state-led initiative, with little to no substantive coordination with the federal government on key issues. There was a notable absence of a shared strategy for standardizing or subsidizing digital access across the country. This lack of collaboration and unified policy between the Lagos State Government and the Federal Government of Nigeria meant that efforts were fragmented and less effective than they could have been.⁶ The failure to work together on this critical issue highlighted a systemic flaw in how social services are planned and delivered, leaving a large portion of the

student population vulnerable and without the necessary support to continue their education during an unprecedented crisis.

For more on how Nigerian education is facing an emergency, you can watch Nigeria's Education Emergency. This video is relevant as it provides a broader context on the systemic issues facing education in Nigeria, including the problem of a high number of out-of-school children.

Housing and Urban Mobility

Before the pandemic, Lagos was known for its dense population and bustling public transport system. However, these very characteristics became significant challenges to public health and social order when COVID-19 arrived. The city's reliance on packed public buses, known as "danfos," and its high population density made the implementation of key safety measures nearly impossible. For millions of Lagosians, social distancing was not just difficult; it was a physical impossibility. This was particularly true for those living in crowded, informal settlements like Ajegunle and for the countless individuals who relied on public transport for their daily commute. These living and commuting conditions meant that the virus could spread easily, posing a major risk to public health.

The government's response was to impose a lockdown and restrict movement, but this came at a heavy cost. The severe disruption to the city's transport system stranded workers and brought much of the economy to a standstill. For a city that thrives on the movement of people and goods, this was a crippling blow to economic activity.⁷The enforcement of these

mobility restrictions often led to tense and tragic confrontations. Security agencies, tasked with ensuring compliance, frequently clashed with citizens whose very survival depended on their ability to move around. The situation created a painful dilemma: a direct conflict between the public health mandates necessary to control the pandemic and the economic necessity of the people. For many, staying home meant losing their livelihood, while going out meant risking their health. This tragic trade-off highlighted the difficult choices faced by both the government and its citizens, exposing the deep social and economic vulnerabilities of a city built on constant motion.

Analysis of the Covid-19 Socio-Economic and Political Impact in Benin City

The Political Economy of the Lockdown

Prior to the COVID-19 pandemic, the economic structure of Benin City was distinctively informal. The city's economy was overwhelmingly dependent on daily face-to-face transactions. This was the lifeblood of its markets, the numerous artisan workshops, and the bustling transportation sector. A weak formal private sector meant that the vast majority of the population earned their living through these informal, daily activities. The city's political landscape was equally unique, characterized by a political class whose power was often sustained through patronage networks, rather than through the consistent delivery of public services to its citizens. This reliance on patronage created a system where the government was not fundamentally structured to provide for its people in a time of crisis.

When the federal government mandated a lockdown, the Edo State Government was tasked with its enforcement. For Benin City's economy, this was a disaster. The lockdown instantly froze its economic engine, bringing all daily, face-to-face commerce to an abrupt halt. A survey conducted by BudgIT revealed the severity of the situation: over 82% of people in the South-South geopolitical zone, which includes Edo State, relied on a daily income to survive. The lockdown was not just a stay-at-home order; it was, in effect, a "stop-earning" order for the vast majority of the population. This policy had an immediate and catastrophic impact on the economic security of households. Because they lived on a day-to-day basis, they had no savings to fall back on. Furthermore, the city and state lacked a robust social safety net that could provide relief. As a result, families faced an immediate and catastrophic income shock.⁸

The government's lockdown policy, while designed with the noble intention of protecting public health, demonstrated a fundamental blindness to the economic reality of the city it was governing. It failed to consider the devastating consequences of shutting down an economy where the majority of people live hand-to-mouth. The policy was implemented without a viable alternative for how people would eat or pay their bills. This disconnect between policy design and the lived experience of the populace meant that while the government was trying to solve one crisis, it was inadvertently creating another—one of widespread hunger and poverty. The tragic trade-off between public health and economic survival was laid bare, exposing the deep vulnerabilities of a city dependent on an informal economy with a government unprepared to support it.

The Crisis of Food Security

The lockdown policies put in place to combat the COVID-19 pandemic had a devastating and direct impact on food security in Benin City. This was not a simple issue of a single factor; the policies attacked food security through two main channels: availability and access. The government's decision to close major markets like Oba Market and New Benin Market was intended to limit large public gatherings and curb the spread of the virus. However, this action had severe and unintended consequences. By shutting down these central hubs of commerce, the government effectively choked the city's food supply chain. Farmers from the surrounding local government areas, who are the lifeblood of the city's food system, faced immense difficulty transporting their goods into the city.⁹ The lack of access to these crucial markets meant that a significant amount of produce either spoiled or was sold at a loss, leading to a shortage of fresh food in the city.

Even in instances where some food was available, the collapse of economic security for the majority of the population meant that most people could not afford to buy it. A survey by the National Bureau of Statistics (NBS) found that the average price of food items nationally increased by 18.3% during the second quarter of 2020. This inflation was felt particularly acutely in Benin City, where most people were already living on a daily income that had now disappeared. The price surge was driven by several factors, including the closure of borders, significant logistical challenges, and, in some cases, opportunistic hoarding by merchants.

This perfect storm of low availability and high prices resulted in a situation of acute food insecurity. There were widespread reports of families surviving on just one meal a day or even less. The sheer desperation and hunger were so profound that the term "COVID hunger" entered the local lexicon.¹⁰ This new phrase served as a stark and tragic testament to a fundamental reality: for many people in Benin City, the threat of starvation was far more immediate and terrifying than the threat of the virus itself. The government's policies, while aimed at public health, inadvertently created a humanitarian crisis of food shortages and hunger.

The Political Economy of Palliatives

As the crisis deepened, the government's primary response was the distribution of food palliatives. This process became a critical point for understanding the political and economic dynamics at play. The distribution was far from an effective solution; it was often haphazard, insufficient, and deeply politicized. Instead of being a fair and equitable process, reports indicated that palliative materials were frequently funneled through political loyalists and community leaders. This method of distribution was not a matter of a simple oversight; it was a deliberate choice that led to widespread accusations of favoritism and the exclusion of opposition supporters. Families and individuals who were not connected to these political networks often received little to no aid, even if they were in desperate need. This approach transformed a humanitarian effort into a tool of political patronage, ensuring that relief went

to those who were politically aligned with the ruling class, rather than to those who were most vulnerable.¹¹

The failure of the palliative system to be transparent, equitable, or timely meant that it did very little to alleviate the food security crisis. For the vast majority of the population, the aid was either too little, too late, or didn't arrive at all. This lack of a functioning social safety net during a time of extreme hardship did more than just fail to solve the immediate problem of hunger; it reinforced a damaging narrative about the political class. Many people came to see their leaders as either absent or predatory during a time of crisis. This perception had a lasting and corrosive effect, further eroding community security and trust in institutions. The government's response, meant to provide a sense of security and care, instead left many feeling betrayed and abandoned, highlighting the deep chasm between the political elite and the citizens they were meant to serve.

Comparative Analysis of Covid-19's Socio-Economic and Political Impact in Lagos and Benin City

The political and governance responses to COVID-19 in Lagos and Benin City, while both proactive, were products of different administrative contexts. In Lagos, the response was a high-resource, centralized, and top-down model reflective of its status as a state with a vast IGR (Internally Generated Revenue) and a sophisticated bureaucratic machinery. The Lagos State Government (LASG), leveraging its strong media presence and public health infrastructure, rapidly established a robust testing and isolation regime. Initial policies,

including a strict lockdown and a curfew, were enforced with a high degree of state capacity. However, the effectiveness of these policies was often undermined by the city's sheer scale and the deep-seated disconnect between formal policy and the realities of its densely populated, informal settlements. Palliative distribution, for instance, was widely reported as insufficient and poorly targeted, leading to public discontent and exposing a long-standing weakness in social welfare systems.¹² The political narrative in Lagos was one of managerial competence and decisive action, yet the crisis also laid bare the state's limited reach in truly vulnerable communities, questioning the effectiveness of a purely centralized model in a fragmented urban context.

In Benin City, the response of the Edo State Government presented a different paradigm. With a smaller resource base and a different political dynamic, the approach was arguably more community-centric and collaborative. The state government, under Governor Godwin Obaseki, focused on a more decentralized strategy, engaging traditional institutions and community leaders to enforce health guidelines and disseminate information. While a lockdown was also implemented, its enforcement and the distribution of relief were more localized, and in some cases, seen as more equitable due to a greater reliance on grassroots structures.¹³ The political leadership in Edo State used the pandemic to build public trust, with a strong focus on data-driven decision-making and transparency. While this model may have lacked the scale and speed of Lagos's response, its reliance on community buy-in arguably fostered a different kind of resilience—one based on social cohesion and local accountability.

Scale And Economic Structure

The COVID-19 pandemic caused significant economic shocks that rippled through Lagos and Benin City, but the impacts were felt very differently due to their contrasting economic structures. Lagos, with its diverse and modern economy, experienced a rapid slowdown. Its reliance on formal sectors like finance, telecommunications, and a dynamic service economy meant that the initial lockdown quickly crippled supply chains and business operations. However, a key part of the city's economy—its burgeoning digital sector—showcased remarkable resilience. Many formal businesses were able to pivot to remote work and e-commerce, a transition that accelerated a pre-existing trend and solidified Lagos's reputation as a hub for digital innovation. This adaptability allowed a portion of the economy to continue functioning despite the restrictions.

The city's vast informal economy, which provides a livelihood for millions, was hit hard by the lockdown. Yet, even here, a profound adaptive capacity emerged. Micro-entrepreneurs, street vendors, and small-scale traders who were suddenly unable to operate in person began to move their businesses to online platforms. The rise of new local logistics and delivery services provided a critical lifeline, allowing these informal businesses to reach customers.¹⁴ This showed a kind of organic, grassroots-level resilience that compensated for the lack of formal government support or social safety nets. The ability of both the formal and informal sectors to leverage technology provided a unique path to recovery.

In contrast, the economic impact in Benin City was more pronounced and challenging. With a less diversified formal economy and a greater dependence on local commerce and public gatherings, the initial lockdown led to widespread disruption. Sectors heavily reliant on transportation and agricultural trade were brought to a near standstill by movement restrictions. The city's dominant informal economy was particularly vulnerable. Unlike Lagos, a rapid digital pivot was less widespread in Benin City. This was primarily due to lower levels of technological penetration and digital literacy. Without the ability to transition to online platforms, the informal economy was crippled, and many people were left without any means of income. As a result, Benin City's recovery was a slower, more traditional process.¹⁵ It was dependent on the gradual easing of restrictions and the slow re-establishment of face-to-face transactions and traditional market systems.

This comparison highlights that while Lagos's recovery was fueled by the acceleration of digital trends, Benin City's was a more protracted return to normalcy. The pandemic underscored the unique vulnerabilities of each city, demonstrating how a resilient digital infrastructure and a diversified formal economy provided Lagos with a crucial advantage that Benin City did not possess.

Governance and Institutional Capacity

The response to the pandemic in Lagos and Edo State highlighted the vast differences in their governance capabilities and resources. Lagos's approach was defined by its significant policy autonomy and institutional strength. This allowed the state to act swiftly and decisively,

independent of the federal government's pace. Lagos quickly established its own incident command structure, a key step that provided a clear, centralized authority to manage the crisis. The state also pioneered its own mass testing initiatives and built dedicated isolation centers. These actions were not dependent on a federal timeline or federal resources. A major reason for this independence was Lagos's large internal revenue generation (IGR). This robust financial capacity provided the state with the flexibility to fund its own a wide range of response measures, from healthcare to social services. Lagos's ability to finance its own pandemic response showcased a level of self-sufficiency that few other states in Nigeria could match.

In contrast, Edo State, which includes Benin City, faced much greater financial and logistical constraints. While the state's response was proactive under Governor Godwin Obaseki, it remained far more dependent on federal allocations and directives from the Presidential Task Force (PTF). This dependency meant that Edo State could not act with the same speed or scale as Lagos. The state often had to wait for federal approval or funding, which led to a slower rollout of critical measures like testing and relief.¹⁶ The difference in response times and capacity between the two states underscored the unequal distribution of power and resources in Nigeria's federal system, with Lagos's financial strength providing it with a crucial advantage in a time of national crisis.

Pre-Existing Socio-Economic Conditions

The COVID-19 pandemic exposed and magnified pre-existing inequalities in both Lagos and Benin City, though the ways in which these vulnerabilities played out were distinct and reflected the unique social and environmental conditions of each urban center.

In Lagos, the defining feature of its vulnerability was extreme population density. This was particularly evident in low-income, high-population areas like Ajegunle and Makoko. Here, the close proximity of homes and the sheer number of people living in a small area made the primary public health directive of social distancing a physical impossibility. The crowded living conditions meant that if one person became infected, the virus could spread rapidly through the community, accelerating local transmission. In stark contrast, affluent areas such as Lekki and Victoria Island were able to comply more easily with public health measures. Their residents typically had more living space and could readily transition to working from home, effectively isolating themselves from the virus and its spread. This clear divide highlighted how socio-economic status directly impacted the ability of residents to protect themselves.

In Benin City, the vulnerabilities were less about sheer density and more about a combination of social structure and inadequate infrastructure. While the city is, on average, less densely populated than Lagos, a high prevalence of multi-generational compound living arrangements created its own set of challenges. In these compounds, multiple families often live together, sharing common spaces, which made effective isolation protocols for infected

individuals nearly impossible. An infected person could easily transmit the virus to older relatives or young children within the same household, putting the most vulnerable at risk.¹⁷

Compounding this issue was the limited access to running water in many neighborhoods. This infrastructural failing hindered the adoption of basic hygiene measures, such as frequent handwashing, which health authorities worldwide recommended as a primary defense against the virus. The lack of reliable access to a fundamental resource like water made it difficult for residents to follow basic public health guidelines, further increasing their risk of infection.

In both cities, the pandemic did not create new inequalities but rather illuminated how long-standing social and infrastructural issues played a critical role in determining who was most vulnerable to the virus and its devastating effects.

Policy Implementation & Public Compliance

The way the government enforced pandemic protocols in Lagos and Benin City had vastly different outcomes and revealed a lot about public trust and authority in each place. In Lagos, the initial enforcement of the lockdown and other pandemic rules was heavy-handed and often brutal. There were numerous well-documented incidents of police brutality, which were a major factor in the public's response. In fact, many of the frustrations that fueled the later #EndSARS protests were born out of the aggressive and violent enforcement of pandemic regulations. This use of force didn't just enforce the rules; it actively eroded public trust. Over time, the government's approach led to widespread public skepticism and "pandemic fatigue." People became less willing to comply with the rules not just because they

were tired, but because they no longer trusted the institutions that were enforcing them. The government's actions created a hostile environment that ultimately made it harder to manage the crisis.

In Benin City, the government's approach was a stark contrast. Instead of relying solely on force, the state government effectively leveraged traditional institutions to encourage compliance. The Oba of Benin's public endorsements of safety protocols, such as social distancing and hygiene measures, played a significant role in fostering public cooperation. This model of authority was particularly effective among the elderly and in rural-urban fringe communities, where traditional leadership holds immense respect and influence. The Oba's involvement showed that a different, more culturally resonant model of authority could be more effective than a top-down, punitive approach.¹⁸ By working with respected community leaders, the government was able to build a foundation of trust and encourage compliance without resorting to force. This highlighted a key difference in how authority and public cooperation were navigated in each city during the crisis.

A Multi-Level Analysis of Political Impact

Federal Level

The PTF's one-size-fits-all directives often failed to account for the vast differences between Nigerian states. The tension between federal authority and state autonomy was a constant undercurrent, with states like Lagos pushing the boundaries of their constitutional powers during the health crisis.

State Level

The pandemic became a stage for political performance. In Lagos, the government's response was framed as a demonstration of its sophistication and capacity to govern itself as a quasi-nation-state. In Edo, the public health crisis became entangled in the intense political rivalry between Governor Obaseki and his predecessor, complicating a unified response.

Local/Community Level

Where the state was absent or repressive, community-based organizations, religious bodies, and traditional rulers stepped in to provide information, distribute palliatives, and enforce their own nuanced versions of safety rules. This highlights the limited reach of the formal state and the critical role of informal governance structures in times of crisis.¹⁹

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CHAPTER FIVE

CONCLUSION

The initial entry of the novel coronavirus (COVID-19) into the Nigeria was first identified and officially confirmed within the bustling metropolitan hub of Lagos State. This primary case, which marked a pivotal and alarming turning point for the nation's public health landscape, was traced to an Italian national who had arrived via the Murtala Muhammed International Airport, thereby highlighting the virus's capacity for international transmission across borders. From this singular epidemiological epicenter in Lagos, the virus began a relentless and insidious proliferation, gradually disseminating through inter-state travel and community contact to various other states within the country. A significant and concerning secondary locus of infection emerged in Edo State, with its capital, Benin City, registering its own inaugural cases, thereby signaling the commencement of a localized battle against the nascent pandemic. In a proactive and preparatory measure, the Edo State government initiated the establishment of dedicated isolation and treatment centers to manage the anticipated influx of patients.

The escalating wave of infections, directly linked to that first imported case, initiated a series of increasingly active governmental interventions. This culminated in the imposition of comprehensive travel restrictions and, ultimately, a decisive declaration of a total lockdown on March 29, 2020. This initial mandate targeted major economic and political nerve centers, namely Lagos, Ogun, and the Federal Capital Territory of Abuja. Recognizing the pervasive

nature of the threat, this lockdown policy was subsequently expanded to encompass the entire nation by April 23, 2020, in an unprecedented effort to mitigate viral transmission. The socioeconomic ramifications emanating from the COVID-19 pandemic and the associated lockdown measures were both immediate and profoundly far-reaching, creating a multifaceted crisis. In Lagos, a megalopolis renowned for its vibrant informal economy, the implications were particularly severe. The restrictions on human mobility and economic activity exerted tremendous strain on preexisting socioeconomic structures, resulting in a scenario where over twenty million residents experienced massive and sudden job losses. The informal sector, the lifeblood of the city's economy, absorbed the hardest hit. Data from the National Bureau of Statistics (NBS) painted a stark picture, indicating that approximately 42% of employed Nigerians nationwide suffered significant income depletion, with a staggering 60% of the workforce—comprised largely of artisans and daily-income traders—seeing their livelihoods evaporate overnight. Furthermore, the constraints on the distribution and logistics networks triggered severe disruptions in the supply chains for essential goods, which in turn provoked a sharp and distressing spike in commodity prices, exacerbating the economic hardship for the average citizen.

Concurrently, the educational sector faced an unprecedented standstill. Primary, secondary, and tertiary institutions across the board were compelled to suspend physical academic activities indefinitely, sending students home in the middle of an academic session. This disruption extended to nationally coordinated examination bodies, with critical joint exams such as the West African Examinations Council (WAEC), the National Examinations

Council (NECO), and the Joint Admissions and Matriculation Board (JAMB) being either postponed or fundamentally altered in their administration. The void created by school closures prompted a sudden, forced transition to online learning platforms. However, a revealing study underscored the profound digital divide, demonstrating that despite these efforts, a mere 29% of secondary school students possessed the necessary resources and connectivity to participate effectively in remote learning during the lockdown. On the political front, the crisis necessitated the invocation of various legal and constitutional frameworks by both the federal and state governments, granting them extraordinary powers to implement and enforce public health measures, thereby illustrating the deep intersection of pandemic management and governance.

In Benin City, while the specific implementation of lockdown procedures exhibited slight regional variations, the overarching economic impact was similarly diverse and severe. The city's vast contingent of informal workers confronted the grim reality of sudden unemployment and financial trouble. Paradoxically, the pandemic also served as a catalyst for certain niche economic adaptations. It opened up new, unforeseen avenues for artisan workers and small-scale entrepreneurs who swiftly pivoted to meet new public health demands, generating livelihoods from the manufacture and sale of protective nose masks, hand sanitizers, and the operation of Point-of-Sale (POS) businesses, which became critical in a cash-scarce environment. The educational landscape in Benin mirrored the national predicament, suffering from protracted school closures that not only disrupted learning but

also led to the temporary unemployment of countless teachers and lecturers, further straining the local economy.

In conclusive analysis, it is irrefutable that the COVID-19 pandemic exerted profound and enduring socioeconomic and political implications upon the residents of both Benin City and Lagos. It acted as a severe stress test, adversely affecting virtually every sphere of influence within their respective economies, from commerce and education to governance. Yet, amidst the considerable adversity, the crisis also served to unveil a remarkable capacity for resilience and adaptation. It forcibly opened the minds of the citizenry to innovative business models and survival strategies, revealing pockets of economic activity that not only endured but, in some cases, thrived in the altered reality of a post-pandemic world, thereby leaving a complex and dual-natured legacy of destruction and opportunity.

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NAME	AGE	OCCUPATION	PLACE OF INTERVIEW	DATE OF INTERVIEW
Folarin Kehinde	32	Tailor	Lagos	9/9/25
Nduka, Adaobi	48	Food vendor	Igando	9/9/25
Obasuyi, Felix	42	Bricklayer	Benin	15/9/25
Olaniyan, Tunde	62	Community Leader	Igando	10/9/25
Okoro, Ngozi	35	Hairdresser	Ekosodin	15/9/25
Olukoju, Gift	36	Mother	Ikorodu	9/9/25

Osagie Faith	24	Student	Ekosodin	12/9/25
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