International Journal of Social Science Research (IJSSR)
Volume- 3, Issue- 5 | September - October 2026 ISSN: 3048-9490

Public Insight on COVID-19 Response and Management in Nigeria

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Abstract

The paper focuses on public insights regarding the response to and management of COVID-19 in Nigeria. The paper dwells on the social distance theory to explain the role of individuals and communities in managing outbreaks. The paper is a desk review of secondary sources on COVID-19 management and response in Nigeria. Findings show that Nigerians were dissatisfied with the COVID-19 management as a result of an inadequate supply of medical equipment. There was a general perception that the rise in these statistics of infected individuals was based on political and economic reasons. Findings show that a large population of Nigerians do not observe COVID-19 protocols as a result of the poor perception about the pandemic. Findings indicate that many people do not believe in the existence of the COVID-19 pandemic. It was also found that persons who observed the COVID-19 rules were mostly at bank premises and other public places where COVID-19 rules were strictly enforced. The paper concluded that there is poor public perception of the response to the COVID-19 pandemic in Nigeria, largely influenced by inadequate equipment and facilities and population density to manage the pandemic. The paper recommended that the federal and state governments should do more to build health infrastructures and provide the necessary personal protective equipment for the frontline health workers, and there should be massive education of the general public on the dangers of COVID-19 in Nigeria.

Keywords: COVID-19, management, response, public perception, pandemic.

Introduction

The Nigerian public has shown varied reactions to the COVID-19 pandemic and its management by responsible agencies. Concerns have arisen around the handling of isolation centers, distribution of personal protective equipment (PPE), and daily updates on infection figures and fatalities. Notably, some individuals believe that COVID-19 is either nonexistent or a manufactured issue for political and economic purposes (Chukwuorji and Iorfa, 2020). In a recent study in Nigeria, it was found that COVID-19 was perceived as an exaggerated disease, associated with corruption and an unnecessary means to induce panic and disorder (Illesanmi and Afolabi, 2020).

On March 1, 2020, the World Health Organization declared COVID-19 a global pandemic after confirming over 118,000 cases and 4,291 deaths across 110 countries, prompting widespread

Published: 14 September 2026
DOI: https://doi.org/10.70558/IJSSR.2026.v3.i5.301305

fear regarding containment (World Health Organisation [WHO], 2020). The virus reached Nigeria shortly thereafter, with its first case reported on March 23, 2020, involving an Italian individual in Lagos. The Nigerian Center for Disease Control (NCDC) reported numerous additional instances every day after this. On March 17, 2020, the Federal Government of Nigeria quickly established a Presidential Taskforce led by Boss Mustapha to address the pandemic. (2020, Ajimotakun). This later led to the declaration of a total lockdown of the whole nation by the President-Muhamadu Buhari as a way to control the spread of the pandemic.

There have been multiplicities of theories and different feelers about the response and management of the COVID-19 in Nigeria probably based on personal experience of people, belief systems and even ignorance. These perceptions have left so many unanswered questions to the general public and have gone a long way to affect peoples' attitude towards the fight against the pandemic. With no officially approved vaccine WHO, it is worrisome that if these perceptions are not addressed, it might hinder the efforts towards curtailing the damaging effect of the pandemic in Nigeria since the disease have a lot to do with social interaction. The major concern is the perception, response and management of COVID-19 in a densely populated Nigeria society. It is against this backdrop that the paper is anchored on the public perception toward the response of COVID -19 pandemic in Nigeria.

The paper is anchored on the following objectives (1) Analyse population density and the public perception and attitude towards COVID-19 in Nigeria (2). Examine COVID-19 response and management strategies in Nigeria.

Conceptual Clarification

COVID-19: COVID-19 is also known as Corona Virus. It was first discovered in the Chinese city of Wuhan in the last quarter of 2019. Since then, there have been many theories about its origin as many believed it's a disease that is rooted in animals such as Pangolins etc. While others believed that it was created in the laboratory by the Chinese. For example, the American President-Donald Trump in many occasions referred to Corona virus as 'Chinese Virus' or 'Wuhan Virus' (Chiu, 2020).

Public Insight: The general consensus on a certain issue or voting intention that is pertinent to society is known as public opinion, or popular opinion. It is the opinions of the people on issues that impact them. This refers to the view point of a large number of people in the society. It also implies the feelers of a significant number of people in a given environment on issues of public interest. It is pertinent to note that perception may depends on so many factors such as culture, religion or personal experiences of individuals among others.

Theoretical Framework: Social Distance Theory

The paper adopts the social distance theory, which views affective distance between members of two groups and the focus on people's feelings and reactions toward other people and toward groups of people as crucial. This suggests that the simplest way for people to lower their risk of infection during an epidemic like Ebola is to decrease their rate of contact with infectious individuals. Georg Simmel developed the idea of "social distance" as a sophisticated understanding of sociality as forms of "distance" in both geometric and metaphorical senses.

However, when Simmel's American pupil Robert Park and his "Chicago School" of sociology, most notably Emory Bogardus's work took away Simmel's geometric notion of distance, the idea was diminished. The "Stranger" is well placed in relation to the Sociology of Space chapter of Simmel's Soziologie (1908), where Simmel clearly described the "geometry of social life."

Simmel follows the Stranger's historical geometric location in The Stranger: The stranger appears everywhere as a trader throughout the entire history of economic activity, and the trader appears everywhere as a stranger. A trader is only necessary for items made outside the group. The trader must be a stranger because there is no chance for anyone else to earn a living from it unless there are people who travel to other countries to purchase these essentials, in which case they also are "strange" merchants in this other region. The Stranger is a synthesis, both mobile and stationary.

Affective distance between members of two groups determines social distance. The study of social distance focuses on people's emotional responses to one another and to groups of people (Bogardus, 1933). According to him, social distance is basically a gauge of how much or how little empathy members of one group have for members of another. It may be crucial to remember that there are other conceptualisations in the sociological literature besides Bogardus's. Numerous sociologists have noted that social distance can also be conceptualised based on other factors, such as the frequency of interactions between various groups or the normative differences in a community on what constitutes an "insider" or "outsider."

One of the key issues in public health epidemiology is how individual and community activities can help reduce and manage the costs of an epidemic. The fundamental problem is how people's reasonable social-distancing strategies during an epidemic will differ based on how effective the responses are, and how these strategies alter the epidemic overall (Reluga, 2010) By lowering the frequency of interaction between susceptible people and diseased people who could spread the illness, social distancing methods can stop the spread of disease. Although social distancing techniques can lessen the intensity of an epidemic, their advantages rely on how often people utilise them.

It outlines how people might best use social separation and related self-protective behaviours during an epidemic. However, people are sometimes unwilling to pay the expenses associated with social distancing, which can restrict its effectiveness as a control mechanism. According to the theory's presumptions, the only way to effectively combat COVID-19 is for people to learn how to manage their social interactions in public and private settings, such as markets, places of worship, and schools. It also implies that the role of the individual is crucial in reducing the catastrophic impact of any epidemic on society, particularly in Nigeria, regardless of the government's best efforts.

Methodology

The is a review based on secondary sources from reputable organisations including the World Health Organisations (WHO), the Nigerian Center for Disease Control (NCDC), the Federal ministry of Health and other publications on covid-19 perception, response and management in the phase of a densely populated Nigeria.

An Overview of the Response to COVID-19 in Nigeria

The government and people in Nigeria were shocked and alarmed by the Covid-19 epidemic. On March 17, 2020, the federal government acted swiftly and established a Presidential Taskforce on COVID-19, led by Mr. Boss Mustapha, Secretary to the Government of the Federation. The index case was discovered in Lagos State a few days after it was inaugurated. The population was greatly alarmed by the news, believing that the worst was about to happen. This fear was actually something to go by because the health system was so inadequate. Unfortunately, continent as a whole lack the capacity to manage the pandemic due to their weak health systems. For instance, Melinda Gates noted that there will be corpses on the streets of Africa in an interview with Cable Network News (CNN) (Nathaniel, 2020). This increased Nigerians' anxiety about the anticipated harm the virus would do to individuals in a nation with woefully limited medical facilities and staff.

To combat the outbreak, states and the federal government of Nigeria have received substantial financial contributions, PPES, isolation centers, vehicles, and other items from private organisations, foreign donor organisations, international governments, and other well-meaning Nigerians. The Nigerian government received two billion naira (N2,000,000,000) from a number of Nigerians, including business tycoon Aliko Dangote. This is only one of many contributions made by private citizens and collaborative organisations. The Lagos State Government, which served as the pandemic's epicentre, also received a variety of gifts from private citizens and affiliated organisations. According to reports, as of May 31, 2020, these gifts totalled more than $25 billion (Moshood, 2020). It is quite disheartening, that despite all these funds, there has been many complaints of bed spaces and other necessary equipment to fight the pandemic in Nigeria.

Public Perception and Attitude towards COVID-19 in Nigeria

The public's attitude toward the fight against COVID-19 in Nigeria has been significantly influenced by their impression of the virus. Numerous factors, such as cultural belief systems, religion, and a lack of public confidence in the way the pandemic is being handled, have an impact on these perceptions. It is regrettable that a lot of people in Nigeria still think the coronavirus doesn't exist. These groups have blatantly disregarded any rules or procedures established by the NCDC and the WHO, putting their own and others' lives in jeopardy. Some people's religious views led them to assume that the COVID-19 epidemic is just for unbelievers and that people who trust and believe in God will not be infected. These different perceptions and believes are inimical to the fight against the pandemic. Also, the use of facemask even among the highly educated has been seen as a burden and unnecessary distraction. This is evident in the fact that most of these facemasks in public occasions are not properly worn, some are worn below the jaw without covering the mouth or nostrils thereby defeating the aim it is meant for. It is unfortunate that most people who wore facemasks does so only when they are involved in public activities where facemasks are enforced.

Social and physical distancing becomes a matter of concern as most of Nigerians perceived it as an abstract phenomenon. It has been observed that public places like markets where social interaction is not controlled, there are visibly no rules guiding the manner in which transactions

are carried out in reference to social and physical distancing. It is obvious that people can only adhere to these rules only when they are aware that they are been monitored which in most cases occurred only in government establishments and organized private settings. It may not be out of place to say that most of members of the general public are only pretending to follow COVID-19 guidelines. This behaviour is not the best practice in tackling a pandemic in any society.

There have been different perceptions from the general public on how the COVID-19 pandemic has been handled in Nigeria. These perceptions are discussed based on the following:

i. Economic Gains

It is regrettable that many Nigerians still do not accept the reality of COVID-19 despite numerous attempts by the country's leadership at all levels. There is a widespread perception that the publicity and management of the pandemic in Nigeria are intended to benefit those in charge of its daily operations, both at the state and federal levels. For instance, in response to public uproar that the cash received through donations could not be accounted for, the House of Representatives ordered that the NCDC provide information about the funds transferred to states as well as a detailed account of what had been spent (Ezieke, 2020). It is important to highlight that numerous nations and organisations have given the federal government substantial sums of money and goods, yet many Nigerians still doubt how these funds should be used. For instance, a survey carried out in Ibadan, Nigeria, revealed that many residents do not think COVID-19 exists. Instead, many saw it as a chance for politicians to benefit themselves. Since the COVID-19 epidemic in Nigeria, there have been reports of denial, ignorance of the virus, and a general loss of confidence in the Nigerian government (Chukwuorji and Iorfa, 2020). In a similar event, the House of Representatives was investigating the Niger Delta event Commission's (NDDC) interim management for diverting 6.3 billion naira intended for COVID-19 palliative care for the commission's member states (Babatunde, 2020).

ii. Political Strategy

Different perspectives on the pandemic have been introduced by politics, which has played a significant impact. In order to do this, some state governors publicly said that there hasn't been a single incidence of COVID-19 in their states. This led to a protracted dispute with the NCDC, which at one point stated that no state in Nigeria can be considered COVID-19 free. For instance, Yahaya Bello, the governor of Kogi State, publicly stated on multiple occasions that there was not a single COVID-19 case in his state, despite the fact that all of the states that border Kogi State had confirmed numerous cases. When he insisted on quarantining the NCDC officers who were dispatched to Kogi State to complete their official job on COVID-19, his claims took on a tragic tone. He also emphasised that the state will deal with COVID-19 because it has expertise dealing with pandemics (Nnakaike, 2020).

Additionally, Prof. Ben Ayade, the governor of Cross River State, has repeatedly maintained that there are no COVID-19 instances in his state. Because of this stance, he was at odds with the NCDC and the local chapter of the Nigerian Medical Association (NMA), which ultimately went on strike, claiming that the Governor's actions were putting its members' lives in jeopardy

(Adebulu, 2020). For instance, Susan Okpe (nee-Lawani), a UK returnee, and the Benue State Government/NCDC were at odds over the latter's rejection of her COVID-19 status when she tested positive (Ramon, 2020).

COVID-19 Management in Nigeria

i. **Facilities and Equipment**

In order to control and treat COVID-19, both federal and local governments in Nigeria have established isolation centers. After dealing with the deadly Ebola virus, it was evident that the nation was ill-prepared. It also made the shortcomings of Nigeria's healthcare system abundantly evident. Facilities were also supplied by private businesses, including banks. For instance, a 360-bed isolation facility called Thisday Dome in Abuja was donated (Ifijeh, 2020). In addition to cars and other gifts, notable people like Aliko Dangote constructed and gave an isolation facility to the Kano State Government (Adewale, 2020). It's crucial to remember that the public is dissatisfied with how these facilities are used and run. Additionally, it has been observed that health workers, who most need personal protective equipment (PPE) to perform their vital tasks, are not receiving enough of it. In the middle of the battle against the pandemic, the NMA and other sister unions in the health sector filed numerous grievances, which ultimately resulted in strikes and threats of strikes.

iii. **Testing Capacity, Vaccines, and Treatment of COVID-19**

Nigeria, with a population exceeding 200 million, had a testing capacity of only 3,500 persons as of October 9, 2020, highlighting an unacceptable response to the pandemic for a major African nation (Ukpe, 2020). In terms of population and resources, its capability is significantly less than that of South Africa, which has a testing capacity of more than 25,000 per day, and other smaller countries. Although the World Health Organization has not yet approved a vaccine to treat COVID-19, several nations, including the United States and Russia, have asserted that certain vaccines are capable of curing the virus. For instance, US President Donald Trump has often asserted that hydroxychloroquine can treat the corona virus. However, WHO vigorously contested these assertions (Carvalho, 2020). The use of hydroxychloroquine and other medications for clinical studies has also been approved by Nigeria's National Agency for Food Drug Administration and Control (NAFDAC) (Folorunsho-Francis, 2020). To level the playing field, some of these vaccinations were supplied to Nigeria for use after Madagascar claimed to have discovered a treatment for Covid-19. Despite President Buhari's explicit declaration that these medications will undergo scientific testing, nothing has been heard about them since.

Many Nigerians wonder which medication was actually used to treat these individuals, even though the NCDC's most recent records show that many of those who got the illness were successfully treated and released. This perception has further fuelled the myth that the NCDC only adds the number of infected individuals for reasons that are only known to the organization. Another perspective argues that, considering the vast number of individuals discharged, the treatments for COVID-19 are questionable in the absence of recognized vaccines. As at 9th November, 2020, it was reported that Nigeria have a total of 64,184 confirmed cases out of which 60,069 have been discharged and 1,158 deaths (NCDC, 2020).

Conclusion and Recommendations

Based on the information gathered, the study concluded that there is a poor perception on the response and management of COVID-19 pandemic in Nigeria. The paper also concluded that the perception is generally based on issues relating to disbelieve in the existence of the pandemic and public mistrust on the use of resources to handle the pandemic. The study also concluded that the low level of testing capacity in a country of more than 200 million people is an indication of poor performance from the authorities. The paper however commends the efforts private organizations, international organizations, and well-meaning Nigerians for the generous donations to fight the pandemic. Based on the forgoing, the paper made the following recommendations:

1. The federal and state governments should do more to build health infrastructures and provide the necessary PPEs for the frontline health workers to be able to fight the pandemic effectively.
2. More campaigns should be carried out to change the public attitude towards COVID-19 pandemic in Nigeria. This is because many Nigerians still leave with the believe that COVID-19 is not real.
3. A trust fund should be established by government to handle disease outbreaks the same way is done in other sectors.
4. As Nigerians await the approval of the vaccine for the treatment of COVID-19, the authorities should come out clear to inform the general public how the large number of patients are treated and discharged to avoid the necessary suspicion that the tallies by NCDC are not intentionally added.
5. Considering the fact that there have been many donations from both local and international sources, the PTF should clearly give account of all their activities in order to restore public trust and change peoples' attitude towards fight against COVIID-19 pandemic.
6. The public should to adhere to of COVID-19 rules and protocols as set by the NCDC and WHO to avoid an unwarranted spread and loss of lives in Nigeria.

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