



THE COVID-19 PANDEMIC IN NIGERIA

Brief 2, April 3 2020

POTENTIAL IMPACT ON THE NORTH-EAST

This brief was prepared by UNDP Nigeria on behalf of the UN System in Nigeria.

As Nigeria braces to be part of what is most likely a third wave of the COVID-19 outbreak - where the virus will interact with a low healthcare infrastructure and multiple preexisting fragilities - it is of outmost importance that all actors double efforts to safeguard the most vulnerable region of the country. Implications of an outbreak in the country's protracted conflict and security zones of the North-East could be particularly catastrophic.

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Situation Update

As of 3 April 2020, the number of COVID-19 confirmed cases have surpassed one million across over 200 countries and territories worldwide. Fatalities have reached 53,000 with a case fatality rate around 5 percent (Figure 1). In Nigeria, confirmed cases have increased to 190 with 2 fatalities at the time of writing. Cases have been registered in twelve states and the Federal Capital Territory (FCT), with Lagos and the FCT reporting the highest number of cases.




Efforts to contain the spread of the virus are underway. A National COVID-19 Multi-Sectoral Pandemic Response Plan has been adopted and will serve as a blueprint for a whole-of-Government response. Moreover, a network of current testing labs is being expanded for an additional six which will bring the total to 13 labs, including planned capacity in the North-East and the North-West. As this network expands, testing capacity is expected to increase to 5,000 tests/day against the current capacity of approximately 500

tests/day with a 24-48-hour turnaround from receipt of samples.¹ Increased testing will invariably lead to more cases being identified. Continued efforts to expedite procurement of additional kits, including 10,000 kits by the United Nations, are ongoing. Still, with the expected numbers to come in the weeks ahead, capacity will continue to be challenged.

Meanwhile, the Federal Government has directed cessation of movement in Lagos, the FCT and Ogun states, currently accounting for 72 percent of the current cases, for 14 days effective March 30th, 2020. These efforts have been supplemented by similar initiatives by several other States - those with confirmed cases and those without - imposing restrictions on entry in and out of the states as well as restrictions on movement within the state, enabling them to buy time for the recommended measures including for testing, isolation and contact tracing to be implemented.

¹ Presidential Task Force briefings

FIGURE 1 CURRENT NUMBER OF CONFIRMED CASES, FATALITIES (3 APRIL 2020)

	TOTAL CONFIRMED	TOTAL FATALITIES	CASE FATALITY RATE (%)	TOTAL CONFIRMED CASES/ 1 MILL POPULATION	TOTAL CASE FATALITY/ 1 MILL POPULATION
	877,744	43,569	5	132	7
	7,098	205	3	6	0.2
	190	2	1	0.9	0.01

The three states are however the country's economic and financial powerhouses, thus their lockdown is expected to have significant economic implications in other parts of the country.

Implications on socio-economic situations as highlighted in the first Brief remain. The economy is inevitably heading towards a recession and could contract by as much as 3.6 percent. The Federal Government has been proactive in introducing several measures to stem the adverse effects on the economy including the ₦15B to support to national COVID-19 response as well as economic stimulus and social protection packages for its most vulnerable.² Additional public expenditure in terms of a possible fiscal stimulus and expenses related to fighting the coronavirus could overshoot expenditure targets by at least 20 percent resulting in a sharp increase in the budget deficit from the original estimate of 1.5 percent of GDP to 8.3 percent in 2020.

While the lockdown will not stop the virus, it is a welcomed act of balancing non pharmaceutical interventions to reflect the local realities as highlighted in Brief 1. But such balanced lockdowns will become increasingly expensive in time – particularly in the face of a dwindling fiscal space – as the number of those requiring economic packages will increase. In Lagos for instance, with as many as 78 percent of the population living in rented dwelling combined with 65 percent of the population relying on NEPA as their only source of electricity, lockdowns will need to be supplemented with more than just food.

Potential trajectory of COVID-19 in Nigeria

We may never know the true impact of COVID-19 in the country as many of its victims may die before they are diagnosed and recorded accordingly. With the limited capacity and pace of testing, confirmed cases re-

² The Government has in addition identified 10.7 million of its most vulnerable to whom conditional cash transfers for the next two months will be directed towards. For the Internally displaced persons (IDPs), two months of food ration will be distributed. Further, a three-month repayment moratorium on several Federal loans have been granted.

ported in Nigeria could be seriously underestimating the real state of play.

At the time of writing, not more than 4,500 people would have been tested.³ Comparatively, South Africa has conducted close to 40,000 tests despite recording its index case a week after Nigeria while South Korea has conducted over 300,000 tests. Nonetheless, the numbers will begin to increase particularly as incubation periods come to an end.

We could begin to see cases doubling within 2 days – as it did in South Korea, or we could see them continue to lag as in the case of India – where testing has not been widespread. While many measures, including social distancing, confinement as well as testing will influence the number of confirmed cases, to grasp what the range of numbers could look like, we use growth rates of confirmed cases in South Korea and India⁴ from when confirmed cases reached 100 and apply it to Nigeria's case. As the number of confirmed cases in the next twelve days is expected to be highly influenced by testing capacity and effort in the country, we also use a simple lag-dependent autoregressive model to simulate potential unconstrained (i.e. not accounting for impact of future policies) path for confirmed cases.⁵

Assuming that the current pace of testing continues, we estimate that within the next 2 weeks, confirmed cases in the country could reach between 1,300 and 2,600 (Figure 2).

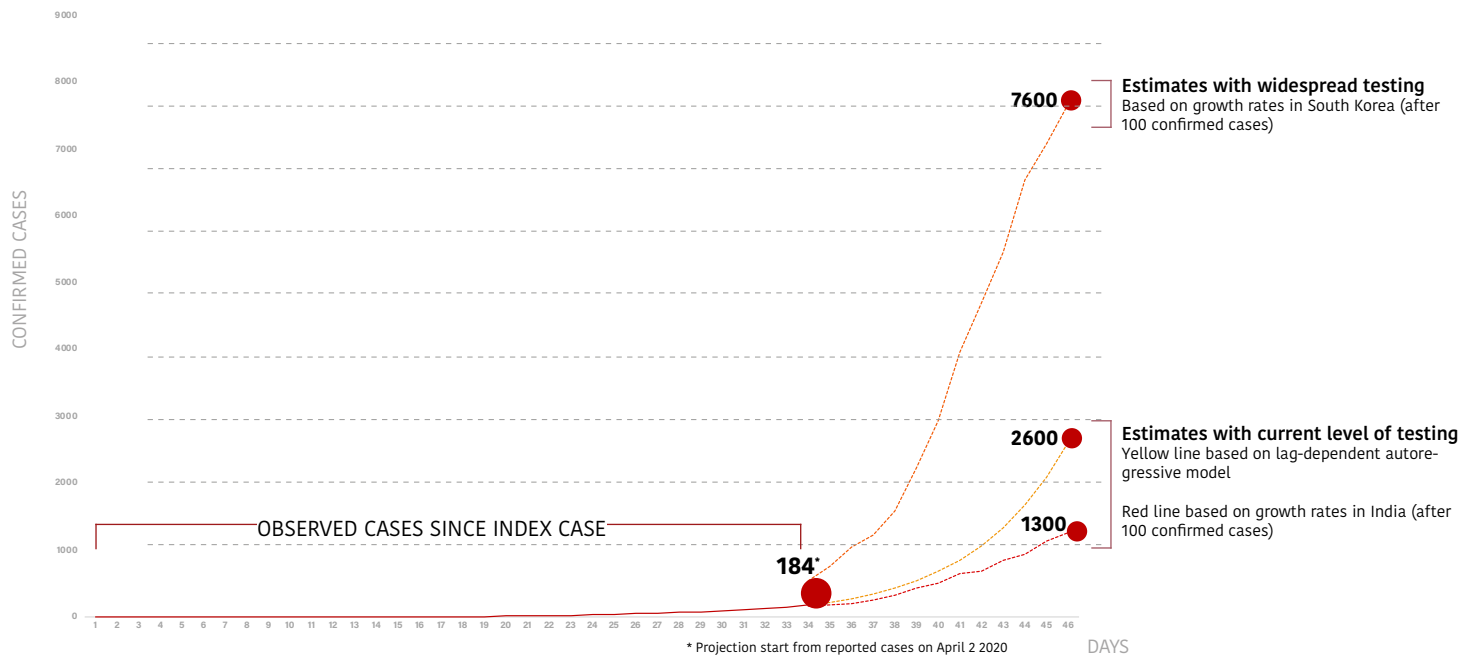
Meanwhile, if we use parameter estimates of true numbers from models of the virus' natural spread in China before the travel ban was applied, there could be well

³ As of 26 March 2020, 862 people have been tested and estimated current tested with testing capacity of 500/day as per PTF

⁴ In the case of India, it had conducted only 17,000 tests two months after its index case.

⁵ While acknowledging that an autoregressive model for infection spread is explosive and other preventative measures will surely impact the number of confirmed cases, as the objective is to predict Y_t for a relatively short interval and given the 'undertesting', we feel that it is an appropriate model for this particular interval. We bootstrap the current underlying series 5000 times for the simulations.

FIGURE 2 PROJECTED NUMBER OF CONFIRMED CASES IN NIGERIA (14 days)



over 20,000 people infected in the country within the next two weeks.⁶

Further simulations indicate that Nigeria is expected to register confirmed cases of 10,000 between 17-23 April.⁷ And over the course of the pandemic, projections under various mitigation strategies and transmission, or R_0 , scenarios, estimate that between 113 million and 193 million people could become infected.⁸ It must be noted that a majority of the projected cases are expected to be mild without requiring hospitalisation.

With two case-fatalities thus far, it is difficult to project what mortality rates will look like in Nigeria. Worst case scenario estimates are sobering – ranging from 200,000 to 500,000⁹ – however, as new data comes in and mitigation policies are put in place, many of the

underlying assumptions and parameters of the estimation models will need to be refined to allow for a clearer picture of the spread of the virus in Nigeria.

Nigeria braces itself to be part of what is most likely a third wave of the outbreak – along with many of the world's developing countries – where the virus will interact with significantly lower healthcare capacities and multiple preexisting fragilities. Implications of an outbreak in the country's protracted conflict and security zones of the North-East could be particularly catastrophic – significantly altering the country and its psyche.

This policy brief focuses on the potential impact of COVID-19 on Nigeria's North-East region, including on the most vulnerable populations and security implications in Borno, Adamawa, and Yobe (BAY) states.

6 Ruiyun Li, Sen Pei, Bin Chen, Yimeng Song, Tao Zhang, Wan Yang, Jeffrey Shaman. Substantial undocumented infection facilitates the rapid dissemination of novel coronavirus (SARS-CoV2). <https://science.sciencemag.org/content/early/2020/03/24/science.abb3221>.

7 Pearson, C., Van Schalkwyk, C., Foss, A., O'Reilly, K., SACEMA's Modelling and Analysis Response Team, CMMID COVID19 working group, Pulliam, J. Projection of early spread of COVID19 in Africa as of 25 March 2020.

8 Imperial College COVID-19 Response Team. Global unmitigated, mitigated and suppression scenarios.

9 Ibid

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Context of the North-East

Nigeria's North-East region is "one of the most pronounced, multi-faceted and complex humanitarian and development crises known to the international community today"¹⁰. It is within this humanitarian and development context that the threat of the COVID-19 pandemic looms largest, particularly for its 1.8 million Internally displaced persons (IDPs) in the three states.

While there are no reports of confirmed cases in the region yet, efforts to contain the virus have commenced with all three states issuing directives restricting movement in and out of their respective states.¹¹ This however remains a temporary solution. At some point, economic and social costs of a lockdown will inevitably outweigh efforts to contain the spread of the virus and curfews and restrictions will be lifted or eased. Unless the virus is completely eradicated within this time period – which is highly unlikely – the threat of a spread persists and can be higher for populations in the BAY states. In the event of an outbreak, the virus will be met with a fractured healthcare system that struggles to deal with a variety of known diseases.

Before the emergence of COVID-19, 35 percent of health facilities in the affected states of Borno, Adamawa and Yobe were damaged as a result of conflict. There have also been significant disruption of vaccination campaigns and other essential health services for children and other vulnerable groups in inaccessible areas. In addition, funding has been a major challenge. In 2019, the health sector received only 25 percent of its funding requirements.¹²

This would mean a greater need to step up funding for addressing the twin effects of conflict and COVID-19 on the people in the BAY states. Meanwhile, the Borno State COVID-19 readiness checklist reveals vast gaps

in institutional and human resources as well as equipment - currently equipped with just 52 and 83 beds in ICU and isolation centers, respectively.¹³ Thus, efforts to put in place localized contingency plans in the BAY states remains urgent.

Implications of an outbreak in IDP camps

Many of the prescribed global preventative measures will be difficult to implement given the conditions of where Nigeria's most vulnerable populations reside.

Assessments of the IDP camps by DMS/CCM, Shelter and NFIS indicate that one in four of the camps – where 430,000 IDPs reside - in the BAY states are highly congested with per capita space of less than 15m². Consequently, almost all of the LGAs hosting the over congested IDP camps in Borno have been identified as 'high risk' areas by the Borno COVID-19 Preparedness and Response Plan.

In 3 of the camps/settlement centers assessed which were located in Jere, Gwoza and Kala Balge LGAs -where close to 64,000 people reside- the static crowd per capita space is less than or equal to 1m² compared to 2m² in Mumbai's slums (See Figure 3). Social distancing measures would be physically impossible to enforce in these camps. Overall, current social distancing prescriptions would be close to impossible to apply in the 'highly congested' IDP camps. An additional 12.5 million m² (1259 hectares) of land is required to transform highly congested camps to allow for per capita space of 35m² – the acceptable space prescribed by UNHCR.¹⁴

In addition to space, lack of access to water and sanitation further compound deprivations and vulnerabilities as well as for the implementation of preventative measures.

10 UNDP. (2018). National Human Development Report 2018: Achieving Human Development in North-East Nigeria

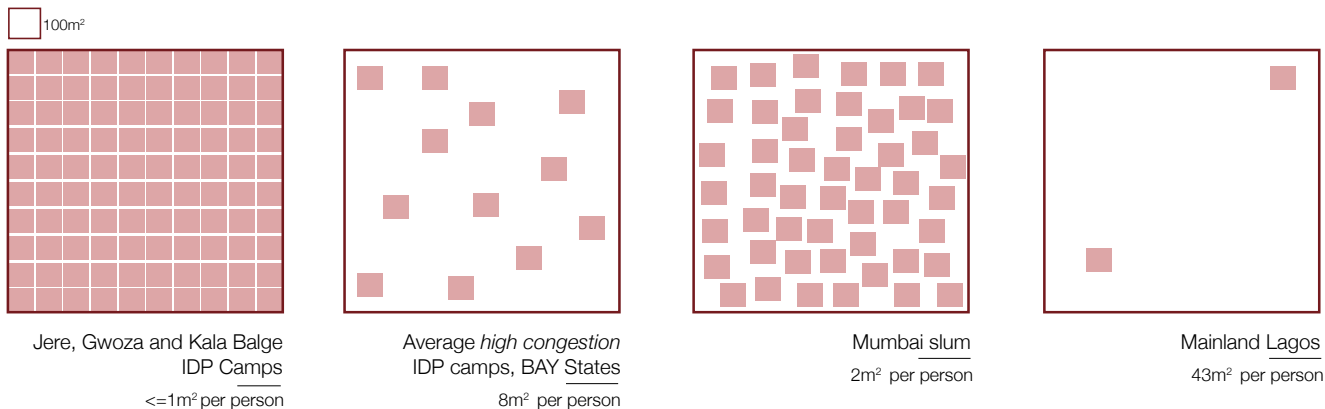
11 All effective 31 March 31, 2020; Borno will ban passenger vehicle and passenger movement, except humanitarian and those bringing food/medicine/fuel/humanitarian goods; Adamawa will go on lockdown; and Yobe will close its borders.

12 WHO Nigeria, Health Sector Bulletin, September 2019.

13 Borno State COVID-19 Preparedness Plan

14 <https://emergency.unhcr.org/entry/45581/camp-planning-standards-planned-settlements>

FIGURE 3 PER CAPITA SPACE IN BAY STATES IDP CAMPS AND COMPARATORS



Outbreak of COVID-19 in such living conditions could likely follow simulation estimates under unmitigated and high (and possibly even higher) transmission rates, R0 of 3.3. In such a case, in the event of a simultaneous outbreak in camps classified as ‘highly congested,’ as many as 400,000 IDPs could become infected.¹⁵

The stealth of the virus in the extremely congested living conditions and interacting with a population characterised by high prevalence of comorbidities, including high incidences of chronic malnutrition and endemic malaria coupled with the current measles, cholera and Lassa fever outbreak¹⁶ can result in serious implications on containment efforts in the region as well as throughout the country. Adding to the already bleak outlook, a COVID-19 outbreak could severely hamper the capacity of humanitarian actors to serve affected communities by impeding supply chains and resulting in fatal delays of delivery to the 7 million in need of humanitarian relief. Significant numbers in collateral damage could be expected.

Implications of an outbreak on livelihood and food security

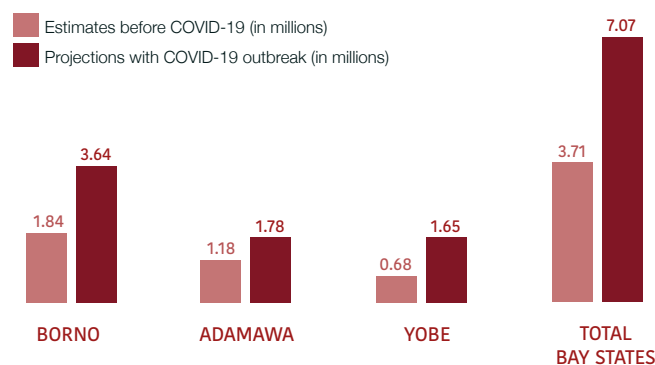
The impact of an outbreak of COVID-19 on the food security and nutrition situation in the North-East would likely be very tangible, affecting population layers that previously were not part of humanitarian caseloads.

In case of an enforced lockdown in cities and towns, it can be expected that due to the precarious nature of many livelihoods, up to two thirds of the popula-

tion would only have a few days until their food stocks would be exhausted and severe coping mechanisms would become widespread, further undermining lockdown measures and public order.

Initial estimates by the World Food Programme Nigeria indicate that a COVID-19 outbreak in the BAY states would impact the economic livelihoods of 7 million people resulting in an increase in the number of food insecure individuals by 3.4 million (See Figure 4). Given the largely urban and peri-urban sources of livelihood in Borno, it is expected to be hit the hardest with 62 percent of its population, or 3.6 million people, adversely impacted by a potential outbreak. Meanwhile the more agriculture-based sources of livelihood that define Adamawa and Yobe will act to shield some of the impact, nonetheless, 3.4 million individuals are projected to be adversely impacted and could become food insecure in the two states.

FIGURE 4 PROJECTED IMPACT ON FOOD INSECURITY



¹⁵ Using estimated proportions from Imperial College COVID-19 Response team simulations for Nigeria
¹⁶ Borno State COVID-19 Preparedness Plan

Depending on the trajectory of the disease and the ability of humanitarian actors to continue delivery, these numbers may rise even more, particularly if the epidemic leads to a breakdown of public order and lawlessness, which could hinder agricultural activities in the coming planting season.

Implications on peace and security

The effects of COVID-19 on the Peace and Security conditions in the North-East could be catastrophic as it risks further eroding an already fragile social fabric and in turn undo the gains made in deepening foundations for peace and stability in the region. Three possible scenarios are:

First, evidence has demonstrated that violent extremist groups have used moments of disasters – natural or otherwise – to either enhance their recruitment through propaganda aimed at exploiting marginalized portions of the population. It could also exploit security vacuums that are created as the government diverts attention towards containing the outbreak or as outbreaks occur within the various entities of the security infrastructure. Outbreaks within the police forces, for instance, could place added pressure on the military to distribute capacity towards enforcement of law and order. Outbreaks in strategic military camps themselves pose significant security risks as it could weaken military capabilities and present opportunities for non-state armed groups to expand their areas of influence. If domestic priorities resulting from COVID-19 outbreaks in neighbouring states force governments to pull back their troops, it could further dilute the security presence in the Lake Chad Basin (LCB) region – and given the nature of porous borders among the LCB countries – security vacuums that could potentially be exploited are vast.

Currently the number of incidences between non state armed groups, such as Boko Haram, and the Government are not much higher than monthly averages seen

over the past two years. While past trends indicate that confrontations with Boko Haram intensify during the first quarter of the year, incidences of defensive attacks in March 2020 are over 2 times what the monthly averages have been over the past two years.¹⁷ As such, threats of retaliation may further compound security challenges amidst a COVID-19 outbreak.

Second, a complete lockdown without protection measures for vulnerable populations in a conflict-setting where social bonds are weak might trigger civil unrest and exacerbate communal conflicts thus contributing to an undetected spread of the COVID-19 disease and impeded containment. This could manifest in two different ways; in the form of rise in criminal activity and unrest among communities who cannot access livelihoods support and/or clashes with the police or military should they be used to enforce the lockdown and adopt a heavy-handed approach. Furthermore, in the event of cases being imported by humanitarian actors, there is a threat of a new dimension of conflict where community unrest and possible attacks become directed towards humanitarian and aid workers.

Third, the lockdown might disrupt peacebuilding efforts by humanitarian and security actors in this fragile context. Community level peacebuilding, social protection and early recovery measures in the North-East do play a central role in rebuilding social bonds; reintegrating former combatants and restoring community livelihoods. The spread of COVID-19 into the communities and the restrictive measures to contain it will most likely disrupt these interventions with the likelihood of relapse into violence.

¹⁷ UNDP calculations using ACLED database, accessed April 1 2020

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Key Policy Options

In a region characterised by insecurity and fragile populations with competing health and developmental challenges, policy options in the face of a pandemic such as COVID-19 become restricted. Every response mechanism must be enacted and anchored within a humanitarian peace and development nexus. All existing and ongoing humanitarian and peacebuilding programmes will need to be enhanced, sustained and scaled up and as soon as the epidemic would stabilize or wind down, recovery programmes need to be launched.

But, the prospect of an outbreak in a context like the North-East will expose new frontier risks and most probably change the face of conflict altogether. It will call on all stakeholders, including State and humanitarian actors, to reevaluate and reconsider approaches in the face of new unknown variables.

In the meantime, key policy options include:

SAFEGUARD SECURITY INFRASTRUCTURE

The potential risks associated with an outbreak within the security infrastructure are grave. Thus, efforts to minimize any risk are crucial towards ensuring that military strongholds are not compromised. Four key options to consider are:

- Suspension of security personnel rotations, including home leaves and change in duty stations, to avoid inadvertent importation of COVID-19 into police and military facilities as well as prisons and detention centers;
- Set up testing, quarantine and isolation centers within military barracks and camps to ensure full capacity for clinical management of confirmed and suspected cases;
- Initial 14-day quarantine in the event of any reinforcement or new personnel entering the security camps/barracks and;
- Tailored sensitisation programmes for security personnel emphasizing key hygiene messag-

ing as well as on how to flag signs/symptoms. This will also create confidence within the security forces that their well-being is prioritised. This messaging can have additional benefits as security personnel will be better equipped to relay information on preventative measures to citizens.

CONTINUED MONITORING OF ALL ENTRY AND EXIT TO THE STATES

States have already imposed border control and restrictions to entry to States. These, however, need to be implemented properly and with strict fidelity. Proper surveillance of the entry of people performing essential services including active case finding, case investigation, contact tracing and surveillance at Points of Entry (PoE) will be essential to achieve the desired objectives of border control/entry restrictions at PoEs.

KEEP SUPPLY CHAINS INTACT

One of the key potential adverse impacts of the spread of the virus is the disruption of supply chains including essential food and medicines. Continued supply of medicine and other essential goods would be critical to save the lives of IDPs and other vulnerable populations in the regions from the pandemic. Among the key issues to consider are:

- Early preparedness in planning and coordination of supply of these essential commodities;
- Assessing scenarios and planning accordingly to ensure continued humanitarian support presence including alternate options in the event of a scaling down/suspension of UN humanitarian presence due to unavoidable circumstances and;
- Address logistical constraints ensuring continuous flight availability to and from the region for both humanitarian personnel and goods supply supplemented by enhanced social protection.

STEP UP RESOURCE MOBILISATION

With a potential increase in food insecurity by 90 percent together with 60 percent of the BAY states' population already requiring humanitarian need, the potential spread to the North-East requires a coordinated and heightened response.¹⁸ The pandemic has impacted the donor countries the most at the moment with constrained and stretched fiscal spaces, although it is yet to be known how this will impact humanitarian and development funding. The Government and the UN (including at the global level) need to garner support of the private sector, philanthropic organizations and foundations who have already shown readiness to support the fight against COVID-19. Given the fiscal constraints, International Financial Institutions could consider debt payment moratoriums and soft loans to meet urgent financing needs.

INCREASE LAND AREA OF IDP CAMPS

This analysis indicates the serious space limitations of IDP camps in the event social distancing is to be practiced in the camps. Camp space in highly congested camps would need to be expanded by 1,250 hectares. More would be needed to expand camps that are moderately congested but under the UNHCR per capita space standards. Early planning and coordination as well as enhanced security arrangements need be agreed upon and coordinated among key stakeholders as a matter of urgency. Current ongoing initiatives, such as UNDP's Stabilisation Facility where widening of security trenches as well as perimeters of IDP camps may help ameliorate the social distancing challenges. Further enhancement of such expansions may be required to cater to additional needs.

STEP UP HUMANITARIAN SUPPORT DURING EMERGENCY

In case the virus spreads widely and food insecurity sit-

uations worsens, humanitarian agencies need to prepare for emergency food distribution for the affected populations. Given the security conditions, airdrop of food could be an option. Securing adequate amount of food supplies and strengthening logistical arrangements may become priority concerns.

In urban areas, where a large number of people may lose their income sources and may need assistance, distribution sites need to be set up as quickly as possible for quick registration and on-the-spot handover of a 2-month emergency food and nutrition assistance package. Targeting criteria will need to be more inclusive than in current humanitarian assistance programmes, in order to prevent possible unrest and preserve order in the distribution sites.

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WITH THE RECENTLY RELEASE HUMANITARIAN RESPONSE PLAN, IT IS CRUCIAL TO ENSURE RESOURCES ARE SECURED AND A SHARP FOCUS IS MAINTAINED ON THE COUNTRY'S MOST VULNERABLE REGION. THE PANDEMIC HAS IMPACTED HUMANITY IN AN UNIMAGINABLE WAY, LEAVING BEHIND A TRAIL OF SOCIAL AND ECONOMIC DESTRUCTION. AS NIGERIA BECOMES PART OF THE THIRD WAVE OF THE PANDEMIC, IT IS OF UPMOST IMPORTANCE FOR ALL ACTORS TO DOUBLE EFFORTS TO SAFEGUARD THE MOST VULNERABLE REGION OF THE COUNTRY.

¹⁸ OCHA, Humanitarian Needs Overview Nigeria 2020