



# Politics, Vaccine Distribution, and Public Reception during the Covid-19 Pandemic in Enugu State

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**Abstract**— *The COVID-19 pandemic has posed unprecedented challenges to governments worldwide, with significant implications for public health, social and economic development, and global security. This study aims to examine the politics surrounding the distribution of COVID-19 vaccines and its impact on public reception in Enugu State, Nigeria. Using political ecology theory and a mixed-method approach that includes data collection through interviews, surveys, and document analysis, the study explored the factors that shape the distribution of vaccines and how government officials, community leaders, and public health agencies are involved in the distribution process. Additionally, the study will investigate how the political climate in Enugu State contributes to the public's perception and reception of the vaccine distribution efforts. The study seeks to identify the challenges encountered during the distribution of the COVID-19 vaccines in Enugu, including political influence, corruption, and bureaucratic red tape, among other factors. The study shows that inadequate vaccine distribution has led to elitist vaccine reception. The findings of this study will provide valuable insights to policymakers, public health officials and community leaders on the challenges and opportunities for effective vaccine distribution strategies in Enugu State, contributing to the pandemic response in Nigeria and beyond.*



**Keywords**— *Covid-19 Pandemic, Elitist Vaccine Reception, Political Ecology Theory, Public Vaccine Reception and Vaccine Distribution.*

## I. INTRODUCTION

Governments around the world have faced unprecedented challenges as a result of the COVID-19 pandemic, which has serious consequences for public health, social and economic growth, and international security. A global health catastrophe has engulfed practically all of the world's nations. In order to stop the spread of the pandemic and lessen its effects on healthcare systems and economies, vaccines have become an essential tool (WHO, CDC, UN, 2021). But in many nations, notably Nigeria, the distribution of COVID-19 vaccines has grown complicated and politicized (Al Jazeera, 2021; BBC News, 2021; Africa News, 2021).

Nigeria had its first case of COVID-19 confirmed by the Infectious Disease Centre, Yaba, Lagos State, on February 27, 2020. This was confirmed when an Italian citizen arrived at the Murtala Muhammed International Airport, Lagos, at 10:00 p.m. on February 24, 2020, on board a Turkish airline from Milan, Italy. He was eventually confirmed positive when he visited his company's site in Ogun State and presented himself at his company's staff clinic, where he was confirmed and referred to the Infectious Disease Hospital (IDH) (Nigeria Centre for Disease Control, 2020). This led to contact tracing by the Nigeria Centre for Disease Control (NCDC). Places of first contact were traced using the manifesto of the flight of the index cases in Nigeria. Soon, the cluster of

cases was confirmed in Lagos and Abuja and further spread throughout the country.

The virus's emergence in Nigeria in February 2020 triggered a series of public health interventions, including lockdowns, travel restrictions, and other non-pharmaceutical measures. These actions were necessary to contain the disease's spread and prevent healthcare systems from becoming overwhelmed (Adeshokan, 2021). However, the pandemic has also exposed existing fault lines in the country's health system, revealing glaring gaps in infrastructure, emergency preparedness, and resource allocation. As such, Nigeria had to develop strategies to overcome these challenges and create systems to deliver critical medical resources such as vaccines (Mambondiyani, 2021). Despite the Nigerian government's efforts to distribute vaccines to every state, there is still a disparity in the distribution of the vaccines (Ukomadu & Sanni, 2021).

As of May 2023, the Nigeria Centre for Disease Control (NCDC) reported that Enugu State, which is in the southeast of Nigeria, has over 2,952 cases of COVID-19. The state government has implemented a number of measures to stop the virus from spreading, such as limiting gatherings, mandating the use of face masks in public areas, and putting contact tracing and testing procedures into place (Ojeme, 2021). However, there have been issues with the distribution of COVID-19 vaccinations in the state, such as worries about vaccine safety and the equal delivery of vaccines to all areas (Adebowale, Onyeji, Adebayo, & Ukpong, 2021).

The government's response in Enugu State has been characterized by a multifaceted approach, involving collaborations with various stakeholders such as religious groups, traditional leaders, and healthcare providers. The Nigerian Centre for Disease Control (NCDC) also played a significant role in coordinating the pandemic response to ensure that measures were consistent with globally agreed-upon best practices (Ifijeh, 2021). However, the public's perception of these measures has been mixed, with some citizens skeptical about the government's response to the pandemic. This skepticism about the government was a result of years of underfunded public healthcare infrastructure and other instances of government malfeasance. There were cases where people shunned vaccinations, citing mistrust and misinformation about the vaccine's safety and efficacy.

The adoption and uptake of vaccines are greatly influenced by how safe and effective they are perceived to be. According to a recent study by Olagoke et al. (2021), a sizable part of Nigerians are reluctant to receive the COVID-19 vaccination due to doubts about its safety,

efficacy, and belief in the capacity of the government to control the pandemic. The study underscores how crucial it is to increase public confidence and communication regarding vaccine distribution, safety, and effectiveness.

In addition, politics and corruption have been identified as significant challenges to the effective distribution of COVID-19 vaccines in Nigeria. Babalola et al. (2021) found that the political climate in Nigeria has influenced the allocation of resources and decision-making related to the pandemic response. Moreover, the study shows that corruption and political favoritism may affect the distribution of vaccines, resulting in certain communities and groups being prioritized over others. Despite these challenges, Enugu State's government has continued to dialogue with various stakeholders and roll out awareness campaigns to improve the public's perception of the pandemic response. These campaigns aimed to provide transparent communication to address rumors and misinformation. Another approach is the establishment of mobile vaccination centers that will bring the vaccines to every nook and cranny of the state.

The COVID-19 pandemic has sparked both challenges and opportunities for leadership and governance in Nigeria. The distribution of COVID-19 vaccines in Enugu State is a complex issue that involves political, social, and economic factors. Enugu state's response to the pandemic illustrates how the government has leveraged collaborations and partnerships with stakeholders to ensure an effective response to the pandemic (Nwachukwu, & Ezenwaji, 2021). Nevertheless, addressing public perception concerning the vaccines remains a significant challenge that the government must overcome to improve vaccination rates and curb the pandemic.

Studies have shown that corruption in the Nigerian health sector compromises the capacity of the healthcare provider to deliver public goods and control the outbreak of diseases (Fasan, 2020; Agwu, Orjiakor, Odii, & Onwujekwe, 2022). Again, a weak healthcare system and a large-scale immune-compromised population owing to the high prevalence of malnutrition, diabetes, hypertension, anemia, malaria, HIV/AIDS, and tuberculosis contribute to the rapid spread of COVID-19 in Nigeria (Lone & Ahmad, 2020). COVID-19-related misinformation also prompts people to act abruptly and increases the chances of the spread of the virus in Nigeria and elsewhere (Adepoju, 2020). The prevalence of highly congested and unsanitary slums also increases the spread of infectious diseases in Nigeria, including COVID-19 (Human Rights Watch, 2020; Ezeibe, 2020 et al). Other studies have also delved into the effects of the COVID-19

pandemic on national and state economies; many have glossed over the availability, distribution, and reception of vaccines in the post-lockdown era in Enugu State.

It is against this backdrop that the study is targeted towards unraveling the politics, vaccine distribution, and public reception during the COVID-19 pandemic in Enugu State. Specifically, to ascertain whether inadequate vaccine distribution is responsible for elitist vaccine reception in Enugu State.

## II. POLITICS, VACCINE DISTRIBUTION, AND PUBLIC RECEPTION OF COVID-19 VACCINE

The COVID-19 pandemic has been a global crisis that has affected almost every country in the world. Politicians have been playing a significant role in the response to the pandemic, and the distribution and reception of vaccines have also become crucial aspects of the crisis. This section analyzes how politics has influenced vaccine distribution and public reception in Nigeria, particularly in Enugu State. The review focuses on the following key variables: politics, vaccine distribution, and public reception.

An overarching relationship exists between politics, vaccine distribution, and its reception. First, equitable access to safe, potent, and effective vaccines is critical to ending the COVID-19 pandemic, and vaccination itself will stop the spread of this global pandemic. However, there are differences in the number of doses delivered and administered. Thus, vaccine distribution and reception are concerned with COVID-19 vaccine doses delivered and administered in addition to vaccine trends and demographic data (NCDC, 2021).

The reaction to COVID-19 has been significantly influenced by politics. Politicians in Nigeria have been in charge of implementing regulations, including lockdowns and preventing the dissemination of false information. The politics of the crisis have occasionally, nonetheless, had unfavorable effects. Umeora and Umeora (2021) claim that the politicization of the pandemic in Enugu State led to a shortage of resources, delayed testing, and a deficient healthcare system. This demonstrates how crucial politics is to the control of pandemics.

Vaccine distribution has become a global challenge due to limited supplies and unequal access. In Nigeria, the government has been responsible for the distribution of vaccines to different states. According to Adhikari et al. (2021), Enugu State received a relatively small allocation of vaccines, which led to vaccine shortages and delays in the vaccination process. The study also reveals that vaccine hesitancy, misinformation, and

fear of side effects have contributed to low vaccine uptake in Enugu State.

A critical component of vaccine delivery is public acceptance. In Nigeria, vaccine hesitancy is common, which has resulted in low vaccine uptake, claim Okonkwo et al. (2021). According to the report, hesitation about vaccines has been influenced by concerns about side effects, a lack of faith in the government and medical professionals, and religious convictions. The report also emphasizes the importance of politics in overcoming vaccination reluctance.

In conclusion, the COVID-19 pandemic continues to pose significant challenges to Enugu State, Nigeria, and the world. Politics has played a crucial role in the management of the crisis, with both positive and negative results. Vaccine distribution has also been a global challenge, with limited supplies and unequal access. Public reception has been a crucial aspect of vaccine distribution, with vaccine hesitancy being prevalent in Nigeria. These key variables are interlinked and require a coordinated response from various stakeholders, including politicians, healthcare providers, and the public. Future research should focus on developing strategies to address vaccine hesitancy, improve vaccine distribution, and enhance political commitment to the COVID-19 response.

## III. METHODOLOGY

The study employed a time-series design. The political ecology theory was used as a framework for analysis. The study adopted mixed research methods. The target population for the study was made up of 3,693,463. From the target population, sample sizes of 394 respondents were selected with justifications using purposive sampling and systematic sampling, respectively. The qualitative aspect of research used the documentary method, and 394 questionnaires were sent out using Yamane's formula (1967) for data collection. The data generated were analyzed using content and thematic analysis methods.

### 1. Theoretical Perspective

This study aims to examine the politics surrounding the distribution of COVID-19 vaccines and their impact on public reception in Enugu State, Nigeria. The COVID-19 pandemic has brought to light the political dynamics and complexities surrounding the distribution and reception of vaccines across different countries and regions. In Enugu State, Nigeria, the politics of vaccine distribution and reception have become a controversial issue, with different actors playing varying roles. Political ecology theory provides a lens through which to analyze the underlying

power relations and socio-economic factors that influence vaccine distribution and reception.

The prominent scholars within political ecology theory are Michael Watts (1983), Erik Swyngedouw (1999), Arturo Escobar (1995), and Nancy Peluso (1992). These scholars have significantly contributed to the development of political ecology theory and have provided valuable insights into the complex dynamics that shape human-environmental relationships.

According to Blaikie (2006), political ecology theory recognizes that environmental problems are socially and politically constructed and that the distribution of power and resources plays a key role in shaping these problems. In Enugu State, the distribution of vaccines is influenced by political power dynamics and resource allocation, which favour certain groups over others. There are concerns that political elites and well-connected individuals are receiving vaccines ahead of other groups, such as health workers and the elderly.

This is in line with the work of Robbins (2012), who argues that political ecology recognizes that access to resources is based on the power relations and social hierarchies that exist within a society. In Enugu State, the politics of vaccine distribution reflect social hierarchies where those with greater power and resources receive preferential treatment. This has created mistrust among some sections of the population who feel marginalized and excluded from the vaccine distribution process.

Furthermore, Leach and Scoones (2015) argue that political ecology theory also takes into account the dynamic interactions between different actors and their interests. In Enugu State, there are multiple actors involved in the vaccine distribution and reception process, including the government, private sector, and civil society organizations. These actors have different interests and priorities, which can impact the distribution and reception of vaccines. For example, private health providers may be more interested in serving their clients than reaching marginalized populations.

Additionally, Bryant and Bailey (1997) assert that political ecology theory helps to explain the causes and consequences of environmental inequalities, conflicts, and social injustices associated with resource distribution. In Enugu State, there is a possibility of environmental inequality and social injustice as some sections of the population may not have equal access to vaccines.

This framework's practical application well explains the pitiful situation of Nigeria's political system, which has been dominated by the political elite since the return of civilian and democratic administrations in Enugu State in 1999. This stratification has classified the political

environment into the rulers (elites) and the ruled (masses). Therefore, political ecology theory provides a useful frame for explaining the politics of vaccine distribution and reception in Enugu State during the COVID-19 pandemic. It highlights power relations, social hierarchies, the interests of different actors, and its consequences for equitable access to vaccines. By using political ecology theory, policymakers and stakeholders in Enugu State can better understand the underlying causes of these dynamics and develop policies and interventions that enhance equitable access to vaccines while reducing social and economic inequality.

The availability and accessibility of the COVID-19 vaccine are essential for cushioning the spread and effects of the COVID-19 pandemic. In other words, vaccination is a critical instrument in the battle against the COVID-19 pandemic. This theory re-emphasized the need to eliminate, at all costs, any element of politics in the distribution and reception of the COVID-19 vaccine. Vanguard News Nigeria (2021) shows the manifestation of the elitist reception of the COVID-19 vaccine in Enugu. This is because most of the people already vaccinated are health workers, security men, critical or strategic leaders at both state and local government levels, and some elderly people. Equally, vaccine nationalism in developed countries has led to a low rate of vaccine distribution in Nigeria and Enugu State in particular.

## 2. The Inadequate Vaccine Distribution and Elitist Vaccine Reception in Enugu State, Nigeria.

Tables 1, 2, and 3 show the demographic background of the respondents (gender, age, and educational qualifications).

Table 5.1 Gender

Gender	Respondents	Percentage
Female	219	55.6%
Male	175	44.4%
<b>Total</b>	<b>394</b>	<b>100%</b>

Source: Field Survey, 2023

From the above table, the female group has the highest number as it relates to the questionnaire. This is based on the fact that, out of the 394 copies of questionnaires collected, 219 were female, representing 55.6%, as compared with 175 male respondents, representing 44.4%.

Table 5.2 Age

Gender	Respondents	Percentage
18-38	114	36.5%
39-59	200	50.7%

60 and above	80	20.3%
<b>Total</b>	<b>394</b>	<b>100%</b>

Source: Field Survey, 2023

The above table reveals that the respondents between 39 and 59 years old, with 50.7%, have the highest number out of the 394 copies of questionnaires collected.

Table 5.3 Educational Qualifications

Educational Qualifications	Respondents	Percentage
1 <sup>st</sup> School Leaving Certificate	30	7.6%
SSCE	69	17.5%
Diploma/NCE	110	27.9%
Degree/HND	150	38.1%
Masters Degree/PhD	35	8.9%
<b>Total</b>	<b>394</b>	<b>100%</b>

Source: Field Survey, 2023

The questionnaire reviews that degree/HND educational qualification has the highest number, which is 150, which represents 38.1%, while diploma/NCE has 110, which represents 27.9%, SSCE has 69, which represents 17.5%, master's degree/Ph.D. has 35, which represents 8.9%, and 1st school leaving have 30, which represents 7.6%.

Table 5.4 shows the availability and accessibility of Covid-19 Vaccine.

Option	No. of Respondents	Percentage
Agree	108	27.4%
Disagree	125	31.7%
Not Sure	161	40.8%
Total of Respondents	<b>394</b>	<b>100%</b>

Source: Field Survey, 2023

From the above table, 108 respondents, representing 27.4%, agreed that there is availability and accessibility of the COVID-19 vaccine, while 125 respondents, representing 31.7%, disagreed, and 161 respondents, representing 40.8%, are not sure about the issue. From the above table, the response shows that the majority of people are not concerned about the availability and accessibility of the COVID-19 vaccine. In other words, vaccine nationalism in developed countries has led to a low rate of vaccine distribution.

#### IV. FINDINGS AND DISCUSSION

The emergence of the COVID-19 pandemic in Nigeria has posed significant challenges to the government, including how to distribute vaccines equitably to all states. Enugu State, like other states in Nigeria, has experienced inadequate distribution of COVID-19 vaccines, leading to an elitist vaccine reception. This issue has been exacerbated by the state's political landscape, vaccine distribution strategies, and public perception, making vaccine rollout a significant challenge (Ibrahim et al., 2020).

The state's political landscape has complicated vaccine distribution in Enugu State due to political rivalry and power struggles with the national government. The People's Democratic Party (PDP), the government of Enugu State, has not enjoyed a cordial relationship with the ruling All Progressives Congress (APC) at the national level. This rivalry has contributed to delays in vaccine distribution and caused unequal access to vaccines in certain areas of Enugu State (Nwabueze & Nwajiuba, 2021).

The politics of vaccine distribution play a significant role in shaping the reception of vaccines, particularly in countries with limited resources. In Enugu State, Nigeria, there have been concerns that the limited distribution of vaccines has led to an elitist vaccine reception, with political elites and well-connected individuals receiving vaccines ahead of other groups. Ojo (2021) notes that in Nigeria, vaccine distribution has been influenced by politics, with priority groups such as government officials, diplomats, and political elites receiving vaccines before other groups.

Osinusi and Sunmonu (2021) reported that in Nigeria, vaccine distribution is determined by power relations and social hierarchy, with wealth and political connections playing a significant role in determining vaccine prioritization. The Coalition of United Political Parties in Enugu State (CUPP) has accused the state government of prioritizing vaccine distribution to political elites and well-connected individuals at the expense of other groups, according to Abah (2021).

Furthermore, Enugu State's vaccine distribution tactics have been heavily centralized, which has a negative impact on the equal delivery of vaccines to both urban and rural areas. Instead of public health institutions, the majority of vaccinations have been provided to private hospitals in metropolitan areas, leaving rural communities underserved and disadvantaged (Ibrahim et al., 2020). People from low-income backgrounds who do not have access to private healthcare are disadvantaged by this distribution mechanism. As a result, an aristocratic vaccine

system has developed in which only the wealthy and privileged may obtain vaccines, while the underprivileged and defenseless populace are denied access. These circumstances combined to create an aristocratic vaccine reception in the state of Enugu.

Adeniji and Fagbamigbe (2021) found significant differences in the rate of COVID-19 vaccination by social class in Nigeria. In particular, they found that individuals from higher social classes were more likely to receive the vaccine, while those from lower social classes were less likely to receive it. A news report by The Guardian Nigeria (2021) highlights concerns about widespread vaccine inequity in Nigeria, with wealthier and better-connected individuals gaining access to vaccines first. According to the report, political leaders, lawmakers, and other well-connected individuals have been accused of receiving vaccines ahead of frontline health workers and other vulnerable groups.

A study by Olusanya et al. (2021) found that government incentives and interventions aimed at increasing vaccine distribution in Nigeria tended to benefit certain groups more than others. Specifically, they found that urban areas and higher socioeconomic groups tended to benefit more, while rural areas and lower socioeconomic groups were less likely to receive vaccines.

The availability and adequate distribution of the COVID-19 vaccine are the means of achieving far above-ground levels of vaccination in Nigeria and Enugu State in particular, and the motivation and readiness of the people to receive the vaccine are another issue. The most reliable means of combating the COVID-19 pandemic, since non-pharmacological measures could not prevent its spread, as epitomized in the emergence of a second wave, is vaccination (Isah & Ubaka, 2021). The COVID-19 pandemic must be fought, and the coronavirus vaccine is a crucial tool. To put it another way, if the vaccines are effectively administered and accepted by the public, the spread of the virus within the state will be slowed or prevented. The public should be encouraged to get immunized, and non-pharmaceutical methods of preventing the spread of the virus should also be maintained. Examples include wearing a face mask, regularly washing your hands with soap and water, and adhering to social protocol.

Furthermore, the public's mistrust of the government's handling of the pandemic has led to a decline in vaccination rates. Many people are skeptical about the safety and efficacy of the vaccines and are unwilling to take them. This mistrust is partly due to past experiences of corruption in government healthcare provision (Abimbola & Malik, 2020). Studies have shown that the

public's lack of trust in government healthcare systems is a significant barrier to vaccine uptake in Nigeria (Azodo et al., 2021).

In addition, these findings align with the core principles of political ecology theory, which considers how environmental and resource-related issues are influenced by political power and social hierarchies. The politics of vaccine distribution in Enugu State are shaped by power relations and social hierarchies among different groups. Wealthy and well-connected individuals are more likely to have access to the vaccines, while poorer and marginalized people may be excluded from the vaccine distribution process.

The state government of Enugu State has established mobile vaccination stations to reach remote locations where COVID-19 vaccinations are most needed in order to solve the concerns of inadequate vaccine distribution and elitist vaccine reception in the state. To boost public opinion and confidence in the COVID-19 vaccine, the government has also launched awareness campaigns about COVID-19, emphasizing the value of vaccination. In order to address the issue of vaccine distribution and vaccination hesitancy, the government has additionally requested cooperation from stakeholders, including traditional and religious leaders (Azodo et al., 2021). Our argument is that political rivalry, negative public perception, and an elite vaccination reception have all been present during the delivery of vaccines in Enugu State. To solve these issues and guarantee equal vaccination distribution throughout the state, the Enugu State government must take aggressive actions. A lot can be done to improve vaccine distribution in the state, including working with stakeholders to educate the public about vaccine safety and effectiveness and setting up additional mobile vaccination stations.

In the middle of August 2020, Enugu State had a rudimentary case casualty rate of 1.95% COVID-19. As a result of the fairly weak health systems in the state characterized by insufficient apparatus, low government financing, and a high burden of infectious diseases (such as TB, HIV, and Malaria), the COVID-19-associated fatality rate increased drastically between February and August 2020 (Uzochukwu, Onyejekwe & Aloh, 2021).

Table 6 shows that as of May 24, 2023, Nigeria had confirmed COVID-19 cases (266,675), active cases (3,577), discharged 259,953 cases, and recorded 3,155 deaths. From the table above, Enugu State recorded 2,952 cases (lab confirmed), 13 active cases (on admission), 2,910 discharged cases, and 29 deaths. However, from April 22nd to April 28th, 2023, no new confirmed cases of COVID-19 were recorded in Nigeria (NCDC, 2023).

Table 6.1 The Status of COVID-19 Pandemic in Enugu State

No. of Confirmed Cases	No. of Active Cases	No. of Discharged Cases	No. of Deaths
2, 952	13	2, 910	29

Source: Authors used from NCDC Coronavirus COVID-19 Microsite (2023).

To this end, the assertion that inadequate vaccine distribution has led to elitist vaccine reception in Enugu State is supported by recent research and news reports. To address this issue, policymakers need to focus on equitable vaccine distribution strategies that prioritize vulnerable and marginalized populations and minimize vaccine inequities. As a society, it is vital that we work towards ensuring adequate and equitable distribution of vaccines, especially in low and middle-income countries, to ensure maximum vaccine coverage in the fight against COVID-19.

## V. CONCLUSION

The distribution of COVID-19 vaccines in Enugu State has posed significant challenges. The politicization of vaccine distribution, corruption, vaccine safety and effectiveness concerns, and equitable distribution have all contributed to the complexity of vaccine distribution. The inadequate distribution of COVID-19 vaccines in Enugu State has led to an elitist vaccine reception, where vaccines are mainly distributed to urban areas and private hospitals, leaving rural areas and public health facilities underserved. This situation has been worsened by the state's political landscape and public perception, which has resulted in a decline in vaccination rates. To address this challenge, the Enugu State government has partnered with various stakeholders to improve vaccine distribution by establishing mobile vaccination centers and collaborating with religious leaders and traditional rulers to raise awareness about vaccine safety and efficacy.

However, it is essential to address the underlying causes of this problem, such as mistrust in the government's handling of the pandemic and political rivalry. This will require concerted efforts from all stakeholders, including government authorities, healthcare providers, community leaders, and the public. The equitable distribution of COVID-19 vaccines is necessary to contain the pandemic and prevent its resurgence in the future. Therefore, it is crucial to continue improving vaccine distribution to ensure that all citizens, regardless of

their socioeconomic status or geographic location, have access to vaccines.

Finally, the inadequate distribution of COVID-19 vaccines in Enugu State has led to an elitist vaccine reception. This situation has been caused by political rivalry, centralized vaccine distribution strategies, and public perception; hence, it has contributed to a decline in vaccination rates. To address these challenges, there is a need for transparency in vaccine distribution, making the COVID-19 vaccines accessible to all citizens, including those in rural areas. Ensuring equitable vaccine distribution is essential in curbing the spread of COVID-19 in Enugu State.

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