

Public Administration and Crisis Management in Africa: Evaluating Government Resources to COVID-19 Pandemic in Nigeria

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DOI: <https://doi.org/10.47772/IJRISS.2026.10100094>

Received: 04 January 2026; Accepted: 11 January 2026; Published: 23 January 2026

ABSTRACT

The COVID-19 pandemic posed one of the most formidable governance and crisis management challenges in Africa's modern history. In Nigeria, the pandemic exposed structural weaknesses in public administration, including fragile health systems, bureaucratic bottlenecks, corruption, and inadequate preparedness. This study evaluates how Nigerian government institutions managed resources in response to the pandemic, with particular focus on transparency, efficiency, and accountability in crisis governance. The paper investigates the mobilization and distribution of health, financial, and human resources, and examines the role of intergovernmental relations, public-private partnerships, and international aid in shaping Nigeria's pandemic response. Using a qualitative desk-based research method supported by secondary data, policy documents, and reports from international organizations, the study provides insights into the successes, limitations, and lessons learned from Nigeria's COVID-19 experience. Findings reveal that while Nigeria demonstrated resilience through rapid establishment of task forces, emergency funding, and adoption of digital monitoring platforms, the response was hindered by weak institutional frameworks, uneven state-level implementation, and lack of public trust in government agencies. The study concludes that sustainable crisis management in Africa requires strengthening of governance structures, investment in public health infrastructure, and institutionalization of accountability mechanisms. It recommends that Nigeria and other African states should adopt anticipatory governance frameworks, mainstream crisis response into public administration reforms, and build citizen centered approaches to disaster management. This paper contributes to scholarship on crisis governance and offers policy-relevant insights for building resilience in African public administration systems.

Keywords: Public Administration, Crisis Management, COVID-19, Nigeria, Governance, Resources

INTRODUCTION

The outbreak of the Coronavirus Disease (COVID-19) in late 2019 and its rapid global spread in 2020 significantly reshaped governance practices, public administration, and crisis management systems worldwide. Governments across different political and administrative systems were required to formulate emergency policies and implement containment measures in response to an evolving public health crisis. In both developed and developing contexts, the pandemic underscored the importance of administrative capacity, institutional coordination, and effective public sector leadership in managing large-scale emergencies (World Health Organization [WHO], 2022; United Nations Development Programme [UNDP], 2021).

Public administration in Africa operates within diverse institutional and political environments shaped by historical, socioeconomic, and structural factors. Over the years, African governments have undertaken various public sector reforms aimed at improving efficiency, accountability, and service delivery (Olaopa, 2020). Crisis management in this context involves the ability of public institutions to anticipate risks, mobilize available resources, coordinate stakeholders, and implement timely policy responses. The COVID-19 pandemic therefore provided an opportunity to observe how public administration systems in Africa function during large-scale emergencies and how existing administrative frameworks are utilized in times of crisis (Christensen et al, 2016).

In Nigeria, the COVID-19 pandemic prompted the activation of multiple administrative and policy mechanisms at the federal, state, and local government levels. These included the establishment of emergency

task forces, public health guidelines, economic stimulus measures, and social intervention programmes aimed at mitigating the health and socioeconomic impacts of the pandemic (Federal Government of Nigeria, 2020). As Africa's most populous country and largest economy, Nigeria's administrative response to COVID-19 represents a critical case for understanding the role of public administration in crisis management and for drawing lessons relevant to other African states (Adepoju & Alabi, 2021).

Despite the growing scholarship on COVID-19, governance, and public health, there remains limited empirical analysis of how public administration structures and government resources influenced Nigeria's crisis management outcomes during the pandemic. Existing studies have largely emphasized health indicators, economic effects, or citizens' compliance with containment measures, with insufficient focus on administrative processes, intergovernmental coordination, and resource utilization from a public administration perspective (Ejiogu et al, 2020). This gap in the literature raises critical concerns about the effectiveness of Nigeria's public administrative response to COVID-19 and the extent to which government resources were adequately mobilized and managed during the crisis. Consequently, this study seeks to evaluate public administration and crisis management in Nigeria by examining government resource responses to the COVID-19 pandemic. The study will contributes to knowledge by providing an administrative and institutional analysis of crisis management in an African context, thereby offering policy-relevant insights for strengthening public sector capacity and preparedness for future public health emergencies.

Objectives of the Study

This study is guided by the following objectives:

1. To examine how Nigerian public administration institutions mobilized and allocated resources in response to the COVID-19 pandemic.
2. To evaluate the effectiveness, transparency, and accountability of government interventions during the crisis.
3. To analyze the challenges faced in implementing crisis management policies at national and subnational levels.
4. To identify lessons from Nigeria's response that can strengthen crisis management and governance in Africa.
5. To provide policy recommendations for improving resilience, preparedness, and citizen-centered crisis governance in Nigeria and across Africa.

LITERATURE REVIEW

Empirical Review

Early empirical studies on public administration and crisis management, conducted prior to the COVID-19 pandemic, emphasized the institutional foundations required for effective crisis response. Suberu (2010) highlighted persistent challenges in Nigeria's governance structure, particularly uneven institutional capacity across federal and subnational governments. Similarly, Kapucu and Garayev (2016) argued that effective crisis management depends on robust institutional frameworks, intergovernmental coordination, and trust between the state and citizens. Olowu and Erero (2017) further noted that disparities in administrative capacity among Nigerian states significantly influence policy implementation outcomes during emergencies.

With the emergence of COVID-19 in 2020, scholarly attention shifted sharply toward pandemic response and governance capacity. Nkengasong (2020) observed that African countries faced significant difficulties in testing, contact tracing, and health system preparedness due to weak infrastructure and limited resources. In Nigeria, Amzat et al. (2020) documented the role of international organizations and public-private partnerships in supporting government efforts, particularly in the provision of personal protective equipment and strengthening health supply chains. These studies underscored the importance of external support while also revealing structural dependence on foreign assistance.

As the pandemic progressed, empirical studies began to assess national and subnational responses more critically. Akinola (2021) described COVID-19 as a major stress test for fragile governance structures in Africa, while Onyishi (2021) provided evidence of irregularities in Nigeria's palliative distribution process, including exclusion of vulnerable households and weak accountability mechanisms. The World Bank (2021) reported that Nigeria mobilized substantial emergency funds for healthcare and economic stimulus, yet implementation gaps limited the effectiveness of these interventions. Fashola (2021) highlighted Lagos State's relatively proactive response, marked by aggressive testing, isolation, and treatment strategies, contrasting it with weaker responses in several other states.

More recent studies have deepened the empirical evaluation of governance and crisis management outcomes. Mbaye and Siegmann (2022) compared African countries' pandemic responses, noting that states with stronger institutions, such as South Africa, implemented more coordinated containment measures than countries like Nigeria, Kenya, and Ghana, where responses were fragmented. Adegbeye et al. (2022) further documented allegations of corruption, inadequate transparency, and poor coordination in Nigeria's COVID-19 response. The United Nations Development Programme (UNDP, 2021) also emphasized that while collaborations with donors and multilateral agencies improved access to vaccines and digital monitoring tools, they simultaneously exposed Nigeria's limited domestic crisis-management capacity.

Gaps in Literature

Despite the growing body of scholarship on COVID-19 and governance, important gaps remain in understanding Nigeria's pandemic response from a public administration and crisis management perspective. First, much of the existing literature emphasizes epidemiological outcomes, public health interventions, and macroeconomic effects, with relatively limited empirical focus on how public administration structures influenced government resource mobilization, coordination, and accountability during the crisis. Second, although several studies have reported corruption and irregularities in palliative distribution, few provide systematic analyses of the bureaucratic and institutional bottlenecks that constrained effective crisis management across federal and subnational levels. Third, existing studies often examine Nigeria's response in isolation, with limited comparative engagement that situates the country's experience within broader African governance and crisis management challenges. Consequently, there remains insufficient understanding of how administrative capacity and institutional arrangements shaped crisis response outcomes in Nigeria. This study seeks to fill these gaps by evaluating Nigeria's COVID-19 response through the lens of public administration, thereby contributing to knowledge on crisis management and governance in Africa.

THEORETICAL FRAMEWORK

Crisis Management Theory

Charles F. Hermann is widely recognized as the earliest and principal foundational scholar of Crisis Management Theory. In his seminal work, Crisis Management Theory examines how governments and public institutions identify, respond to, manage, and learn from unexpected or disruptive events that threaten public safety, welfare, or institutional stability. A crisis, in this context, refers to a situation perceived as an urgent threat to core societal functions that requires immediate and coordinated action under conditions of uncertainty and ambiguity (Britannica, 2025). Crises typically overwhelm routine administrative mechanisms, compelling public leaders to adopt extraordinary policies and make critical decisions in compressed timeframes.

In public administration literature, crisis management extends beyond reactive measures to include sensemaking, decision-making, meaning-making, coordination, and learning. These elements are essential in understanding how institutional actors interpret threats, mobilize resources, communicate with stakeholders, and modify existing procedures in real time (Boin et al., 2016). Crisis Management Theory therefore provides a comprehensive lens for evaluating government responses during large-scale emergencies such as the COVID-19 pandemic.

Applying this theory to the Nigerian context, the COVID-19 pandemic can be understood as a multidimensional crisis that elicited diverse administrative responses across federal and subnational levels. Crises disrupt normal governance processes and require collaboration between institutions, rapid mobilization

of human and material resources, and adaptive leadership (Banga et al., 2025). In Nigeria, these requirements manifested in the activation of emergency task forces, public health directives, economic stimulus programmes, and intergovernmental coordination mechanisms. By viewing these interventions through the Crisis Management Theory, the study assesses whether Nigerian public administration systems were capable of anticipating risks, coordinating actions across sectors, and translating resource allocations into effective outcomes.

Thus, Crisis Management Theory provides both a conceptual foundation and an analytical framework for this study. It guides the investigation of how Nigerian public administration mobilized and utilized resources during COVID-19, how crisis responses were coordinated across levels of government, and how governance structures performed under pressure. In doing so, the theory helps bridge the gap between descriptive accounts of interventions and a systematic evaluation of crisis management effectiveness in Africa's largest economy.

METHODOLOGY

This study adopted a qualitative desk-based research design, drawing primarily from secondary sources such as government reports, policy documents, international agency publications, and peer-reviewed journal articles. A desk-based design was appropriate because of the nature of the research problem, which sought to evaluate government resource mobilization and crisis management responses during the COVID-19 pandemic in Nigeria. Given restrictions on primary data collection during the pandemic and the availability of rich documentary evidence, the design enabled a systematic and critical analysis of Nigeria's public administration performance.

The study was exploratory and evaluative, aiming to generate insights into institutional strengths, weaknesses, and lessons from Nigeria's crisis governance. The emphasis was on identifying patterns of response, analyzing challenges, and assessing outcomes, rather than on statistical generalization.

Sources of Data

Data were obtained from multiple secondary sources to ensure validity and reliability. These included:

1. **Government Reports:** Official releases from the Presidential Task Force on COVID-19, Federal Ministry of Health, Nigeria Centre for Disease Control (NCDC), and state-level response committees.
2. **International Organizations:** Publications from the World Bank, World Health Organization (WHO), African Union (AU), and United Nations Development Programme (UNDP).
3. **Academic Literature:** Peer-reviewed journal articles, books, and conference papers focusing on public administration, crisis management, and governance in Nigeria.
4. **Media and Civil Society Reports:** Credible reports from investigative media houses and nongovernmental organizations (NGOs) that monitored government interventions and palliative distribution.
5. **Statistical Data:** Quantitative figures such as COVID-19 case numbers, mortality rates, testing capacity, vaccination statistics, and budget allocations, sourced from WHO databases, NCDC situation reports, and National Bureau of Statistics (NBS).

This triangulation of sources enhanced the credibility of findings and reduced the risks of bias inherent in single-source reliance.

Data Collection Procedure

Secondary data were systematically collected through content review of documents, reports, and publications published between 2020 and 2023. The search strategy involved academic databases such as JSTOR, Scopus, Google Scholar, and ResearchGate, as well as institutional repositories of WHO, World Bank, and AU. Keywords such as "COVID-19 Nigeria," "public administration and crisis management," "government resources pandemic," and "African governance COVID-19" were used to identify relevant materials.

Documents were selected based on their relevance, credibility, and contribution to understanding Nigeria's response. Priority was given to official and peer-reviewed sources, while gray literature such as NGO reports was used for triangulation and supplementary evidence.

Data Analysis Technique

The study employed qualitative content analysis to interpret and evaluate the collected data. This involved:

- Thematic Coding:** Documents were reviewed, and key themes such as resource mobilization, intergovernmental coordination, accountability, corruption, and citizen compliance were identified.
- Comparative Analysis:** Nigeria's response was compared with selected African countries (South Africa, Ghana, Kenya) to contextualize findings.
- Trend Analysis:** Numerical data such as case numbers, testing capacity, and vaccine coverage were analyzed to highlight the scale and effectiveness of Nigeria's interventions.

RESULTS AND DISCUSSION OF FINDINGS

RESULTS

Nigeria's response to the COVID-19 pandemic involved mobilizing health, financial, and human resources to mitigate the spread of the virus and cushion socio-economic impacts. Key indicators such as confirmed cases, testing capacity, mortality rates, budgetary allocations, and vaccination coverage provide insights into the effectiveness of government interventions.

Table 1: COVID-19 Confirmed Cases and Deaths in Nigeria (2020–2022)

Year	Confirmed Cases	Deaths	Case Fatality Rate (%)	Source
2020	89,163	1,302	1.46	NCDC (2021)
2021	237,561	3,024	1.27	NCDC (2022)
2022	266,463	3,155	1.18	WHO (2022)

Source: Nigeria Centre for Disease Control (NCDC, 2021–2022); World Health Organization (WHO, 2022).

Table 2: Federal Budgetary Allocations to COVID-19 Response in Nigeria (2020–2021)

Sector/Intervention	2020 Allocation (₦ Billion)	2021 Allocation (₦ Billion)	Source
Health Sector Emergency Fund	120	150	Federal Ministry of Finance (2021)
Palliatives & Social Protection	500	420	Budget Office of Nigeria (2021)
Vaccine Procurement & Distribution	—	250	WHO & UNICEF (2021)
Economic Stimulus & Job Creation	300	200	World Bank (2021)

Source: Federal Ministry of Finance (2021); Budget Office of Nigeria (2021); World Bank (2021).

Table 3: Vaccination Coverage in Nigeria Compared to Selected African Countries (as of December 2022)

Country	Population (Millions)	Fully Vaccinated (%)	Source
Nigeria	213	22.4	WHO (2022)
South Africa	59	49.7	Africa CDC (2022)
Kenya	54	28.9	WHO (2022)
Ghana	31	31.2	Africa CDC (2022)

Source: World Health Organization (WHO, 2022); Africa CDC (2022).

DISCUSSION OF FINDINGS

The results demonstrate that Nigeria's COVID-19 response was characterized by mixed outcomes, reflecting both achievements and persistent governance challenges.

- Health Sector Response:** Nigeria recorded relatively low case fatality rates compared to global averages (1.2% vs. 2.0% globally, WHO, 2022). This suggests some effectiveness in containment measures and treatment strategies. However, low testing capacity and underreporting likely masked the true scale of infections.
- Financial and Resource Mobilization:** The government allocated significant funds to health interventions, social protection, and economic recovery. Yet, corruption allegations, poor targeting of beneficiaries, and lack of transparency in palliative distribution weakened public trust. The 2020 controversy surrounding warehouses filled with undistributed palliatives underscored administrative inefficiencies.
- Vaccination Coverage:** By December 2022, only 22.4% of Nigerians were fully vaccinated, far below continental peers like South Africa (49.7%). This reflects challenges in vaccine procurement, logistics, and public hesitancy due to misinformation. Weak health infrastructure and rural inaccessibility further hindered nationwide rollout.
- Intergovernmental Coordination:** Federal and state governments exhibited uneven responses. Lagos State led in proactive containment strategies, while northern states lagged due to weak health systems and sociocultural resistance. This unevenness reflects broader structural weaknesses in Nigeria's federal system.
- International Partnerships:** Nigeria benefited from donor assistance, international financing, and public-private partnerships, which supplemented weak domestic capacity. While this support helped in the short term, it reinforced Nigeria's dependency on external actors during crises.
- Institutional Weaknesses and Public Trust:** Bureaucratic bottlenecks, corruption, and weak accountability mechanisms undermined the effectiveness of interventions. Citizens' mistrust of government institutions translated into non-compliance with preventive measures such as mask wearing and lockdowns, thereby limiting the impact of policies.

Overall, the findings underscore that Nigeria's public administration demonstrated resilience but also fragility in crisis management. While rapid institutional responses prevented catastrophic outcomes, systemic weaknesses in governance, accountability, and coordination constrained effectiveness.

CONCLUSION AND RECOMMENDATIONS

Conclusion

This study examined Nigeria's public administration and crisis management response to the COVID-19 pandemic, focusing on how government resources were mobilized, allocated, and managed during the crisis. The findings reveal that Nigeria's response combined elements of institutional resilience and systemic fragility.

On the positive side, the establishment of the Presidential Task Force on COVID-19, mobilization of emergency funds, and engagement with international donors demonstrated Nigeria's capacity to respond to sudden crises. The relatively low case fatality rate compared to global averages further suggests that, despite systemic weaknesses, some level of effectiveness was achieved.

However, the pandemic also exposed deep-rooted governance challenges. Bureaucratic bottlenecks, corruption in palliative distribution, uneven state-level responses, and weak intergovernmental coordination undermined the overall effectiveness of the response. Limited health infrastructure, low vaccination coverage, and citizen mistrust in government institutions further constrained outcomes. Importantly, the pandemic highlighted Nigeria's persistent dependency on external actors for critical support, underscoring the fragility of domestic capacity.

The study concludes that crisis management in Nigeria, and Africa more broadly, requires more than emergency responses. It calls for institutionalized resilience, rooted in strong public administration systems, anticipatory governance, and accountability mechanisms. COVID-19 should thus be seen as both a crisis and an opportunity for reform, offering valuable lessons for strengthening governance frameworks to manage future pandemics and other national emergencies.

Recommendations

Based on the findings, this paper offers the following recommendations:

- 1. Strengthen Public Health Infrastructure:** Nigeria should invest heavily in health systems, focusing on expanding testing facilities, upgrading hospitals, and improving vaccine logistics to enhance preparedness for future pandemics.
- 2. Institutionalize Crisis Management Frameworks:** Rather than relying on ad hoc task forces, government should establish permanent crisis management units within public administration to ensure rapid, coordinated responses to emergencies.
- 3. Enhance Transparency and Accountability:** Public resource allocation during crises must be subjected to transparent monitoring and auditing mechanisms. Strengthening anti-corruption agencies and introducing digital tracking platforms for palliatives and funds will improve accountability.
- 4. Improve Intergovernmental Coordination:** Clearer frameworks for federal, state, and local government collaboration in health emergencies should be institutionalized. This will reduce uneven responses and ensure equitable allocation of resources nationwide.
- 5. Promote Citizen Engagement and Trust:** Building public trust requires open communication, consistent enforcement of policies, and engagement with civil society organizations. Citizen-centered approaches increase compliance and legitimacy of interventions.
- 6. Leverage Technology and Innovation:** Adoption of digital tools for contact tracing, data management, and public awareness campaigns should be mainstreamed into public administration practice.

7. **Reduce Dependency on External Actors:** Nigeria must build self-reliant capacity by investing in local vaccine research, pharmaceutical production, and emergency resource mobilization, reducing reliance on donors during crises.
8. **Mainstream Crisis Preparedness into Public Administration Reform:** Governance reforms should integrate anticipatory planning, resilience-building, and adaptive governance principles to ensure that institutions are better equipped for future shocks.

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