

Religious actors and politics in Nigeria, towards which post-covid-19 trend?

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Executive Summary

The subject of religion and the behavior of religious actors in the COVID-19 crisis appear at first glance to establish either just marginal issues or factors which have a tendency to be negative. On the other hand, there is far less public discussion on the strategic role played by religious communities as civil society partners of governments or the World Health Organization, as agencies providing charitable and pastoral assistance, and as a resource for hope and emergency management so as to successfully cope with the pandemic. This study analyzed the ambivalent role of actors in the COVID-19 pandemic in Nigeria within the framework of a theory-based empirical analysis, presents the most important developments, learning effects and problem areas yet to be addressed and finally, based on this, draws up policy recommendations for action.

This policy brief offers comprehensive and integrated recommendations on the key areas of policy action that should form part of the response on how to integrate religious actors in managing the Covid-19 pandemic in Nigeria.

The brief is addressed at policy-makers and the general public.

In brief Faith actors should be in a position to do the following in their capacities as leaders:

- Ensure they share and promote accurate, science-based information about COVID-19 and the precautions
- Follow local and national guidelines on gatherings, ensuring all meetings and rituals are conducted safely and taking all preventative measures to stop the spread of COVID-19.
- Provide appropriate spiritual and psychosocial first aid to contribute to healing and resilience for children and their parents/caregivers.

- Assess the underlying spiritual beliefs alongside general levels of understanding related to COVID-19 in the communities where they work, partnering with faith actors and supporting the government with development of risk communication and community engagement plans based on these assessments, sensitization of community leaders, and amplification of agreed risk communication and messaging.

FBOs and faith actors can play an important role in challenging and addressing beliefs and attitudes that may cause harm or limit an effective response, as well as in promoting cultural or religious values that enhance the response. In this way they can;

- Promote interfaith and intra-faith collaboration, peace and social cohesion between communities.
- Address fear, stigma and false information, and combat xenophobia in the midst of the pandemic.
- Advocate for a comprehensive response to the direct and indirect child protection, livelihoods and health impacts of the pandemic on the most vulnerable children and families.

An Introduction

The COVID-19 pandemic is considered as the most crucial global health calamity of the century and the greatest challenge that the humankind faced since the 2nd World War. Misinformation and conspiracy theories have spread

as fast as the pandemic and both traditional and religious actors were at the forefront in de-mystifying the misconceptions and promoting awareness considering their critical and important role in the society. Research shows that the pandemic exacerbated already existing inequalities in the population with the most vulnerable being directly affected. Faith actors can exercise considerable influence in their communities and are trusted with social and spiritual capital which they use to engage with the society, thus they become essential partners in understanding local contexts and addressing and proffering solutions to problems. Unfortunately development partners and government have not exploited this potential and thus they remain in the periphery of any meaningful partnership.

An overview of the research and an analysis of the Nigeria situation

Religion is often seen as an important coping mechanism, especially during times of stress and anxiety. It can offer perspective, hope and meaning in uncertain times, which can act as an anchor for those predisposed to mental health issues. During the COVID-19 pandemic, because many places of worship were required to close, many religious bodies adapted their patterns of worship and moved from face-to-face to online services.

Interviews with the Imams of neighborhood mosques in Kaduna, Kano and Borno point to the fact that during the lockdown worshippers were reaching out to the Imam via WhatsApp and phone conversations as a way of extending hope and were well placed to offer services which address the indirect effects of COVID-19, such as deteriorating mental health, isolation and a rise in the frequency of domestic violence, given the pastoral nature of religious duties.

In the case of Nigeria the impact of the intervention of religious leaders has been significant in steering the organizational life of followers.

While changing the organization of religious life became necessary at the peak of the pandemic, the churches and mosques maintained contact with the believers in various ways, using modern technologies and access to public media in this regard. Although the religious institutions are not changing their doctrinal positions, they declare different forms of cooperation. The ongoing crisis in Northeastern Nigeria continues to have a profound impact on the population in need of humanitarian assistance. In particular Borno Adamawa and Yobe states have been through many years of the Boko Haram conflict which has greatly halted economic activities thereby making the population more impoverished.

For example 30 percent of the population live under one dollar a day. Therefore the lockdown was greatly frowned upon because their source of livelihood was completely shut down. Those interviewed highlighted the frustrated position of the population which also resulted in the rise of crime. In a nutshell the lockdown did not work because of the vulnerability of the society. The state government then resorted to relax the lockdown but encouraged the population to follow the COVID-19 protocol. In the light of this, the government and philanthropists with the aid of the religious actors were involved in distributing palliatives which was still not sufficient but helped ease the suffering. In addition to collaborating with aid organizations the state and federal government distributed hand sanitizers to those in the community most affected by the pandemic.

Key Findings

Communication about the pandemic was received by a majority of the citizens and it was evident that cultural and religious perceptions contributed to the response of the citizens on the information about the pandemic and its effects and how they applied it to themselves.

Secondly a majority of the citizens followed the preventive measures of handwashing, social distancing and wearing of the face mask after being convinced by their religious actors.

Initially there was skepticism surrounding the pandemic and some resistance to government directives of lockdown but due to the intervention of religious actors most people adhered to the directives. The social distancing measure in particular stirred up resistance from the communities in the Northern part of the country because it directly affected the way of worship which is congregational in nature because they are majority Muslim. However with the intervention of the religious actors through the use of religious text to justify that religion was compatible with social distancing made it possible to have a degree of social distancing. In the Southern part of the country where the majority are Christians the response to social distancing was more accepted at the early stages of the pandemic when it was declared to be contagious. This reflects the challenges faced by Nigerians on social distancing based on the different social, economic and cultural contexts of its population.

Thirdly the lockdown unfortunately increased food insecurity and inevitably raised cases of domestic violence for women. In Nigeria women generally engage in petty trading and selling thus their livelihoods were affected by the lockdown since they could not go out and sell. This resulted in raising the already existing hardship caused by the insecurity caused by Boko Haram in the northern part of the country. Additionally at home they faced potential physical abuse from their partners.

Religious actors were instrumental in their interventions in such cases by providing counseling and helping in the distribution of palliatives.

Insights and policy recommendations.

1. Insights from our study can help augment and supplement existing efforts by the government to increase compliance with public health guidelines on containment and prevention of COVID-19 by religious actors. Evidence from our study suggests that engaging these actors can produce positive collaboration
2. The results can provide valuable insights for strategies used by other public health campaigns to engage the public and build trust, such as the current COVID-19 vaccination drive. This will be fundamental in achieving the objectives of mass vaccination so as to ensure maximum immunity for the population
3. Dialogue and involvement between politicians and religious actors can be beneficial to long term implementation of public health. Faith actors (coalitions, individuals, institutions) need to sit at the table where decisions are taken to address issues of public health if focus based action is to become effective for addressing future incidents of health pandemics.
4. Faith actors can complement efforts by the government aimed at addressing the increasing insecurity experienced within the unique construct of the Nigerian society.