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The Politics of COVID-19 and Weber's Bureaucratic Public Administration Theory

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Abstract

The Covid-19 pandemic currently ravaging the world, sacking communities, distorting national plans, challenging institutional management, impoverishing hitherto stable families, fuelling conspiracy theories, and instigating global hegemonic politics, is a social crisis with inestimable contradictions. This paper examined the impact of Covid-19 pandemic on the management of public institutions based on Max Weber's bureaucratic theory. The central objective of the paper was to critically analyse the relationship between the State, the elite and the bureaucratic institutions in efforts to stabilise the system and maintain privileges during a national emergency like the Covid-19 pandemic. Elite theory espoused by Vilfredo Pareto, Gaetano Mosca, Roberto Michels, C. Wright Mills and Max Weber was adopted as the theoretical framework. As a study in political and administrative theory secondary sources of data were utilized and analysed based on textual and content interrogation of extant literature and reports on the Covid-19 pandemic. One of the major findings is that while the pandemic itself was colour-blind and operated as a leveller the existing social structure had ensured that fatalities were tilted against coloured and lower class citizens across the world. Consequently, the paper concluded that the management of the pandemic had rather than follow established rational bureaucratic principles been highly politicized and accordingly exposed the inadequacies of elite rule in emergency management in many countries, particularly Africa. The paper therefore recommended that existing class and racial cleavages need to be bridged in order for advances in medical science to serve humanity effectively and dispassionately.

Key words: Covid-19, Bureaucracy, Domination, Elite, Administration

Introduction

The Covid-19 pandemic took the world by surprise. Many countries were stretched to breaking point in terms of the capacity of their health facilities to cater for their citizens in an emergency. It turned out that the heat was felt most in the developed countries with better facilities, while Third World countries across the tropical regions would appear to have been spared by providence. In Africa where the elite take pleasure in medical tourism the impact would have been far more disastrous than was experienced. Nonetheless, it was a clear warning that health facilities need far greater attention than they currently receive. Budgetary allocations to the health sector have been paltry in several African countries. More importantly, impact of the pestilence was felt more by the elite since it originated from the developed countries and had to be spread through air travel, a practice more associated with them.

Furthermore, the effective functioning of bureaucratic administrative institutions based on established rational principles also came under severe pressure. In several African countries decision making circumvented the bureaucratic principles that would have more adequately managed the impact of the pandemic. Strong men and women, i.e. the elite, in most cases, simply took advantage of the situation to enrich themselves at the expense of the masses. Emergency fund allocations and disbursements were announced without being implemented. Palliatives were

received without being distributed, resulting in a national crisis in Nigeria, where billions of Naira were reportedly spent on feeding school children during the lockdown.

Several companies, businesses and governmental agencies have been adversely affected resulting in job losses and worsening poverty levels. Working from home with pay cuts that has been adopted by some institutions has somehow helped sustain livelihoods but nonetheless reduced capacity utilization. Across the world class and racial discrimination in access to health facilities became pronounced during the pandemic. A suitable drug to combat the disease has been long in coming, thus creating availability, accessibility and affordability crisis when medical science eventually succeeds. Claims and counter-claims of the efficacy of some medical discoveries, such as the Madagascar drug and Dr. Stella Emmanuel's pharmaceutical tests, have also taken a toll of human lives. The most crucial issue surrounding the Covid-19 pandemic is the imperative of upgrading medical science to better serve humanity on the basis of equality of access to health facilities and services.

The Problem

Bureaucracy is an administrative model for managing complex governmental and private organisations. It is imbued with several distinct attributes, such as hierarchy, specialization, span of control, Weber characterized the state as "a human community that (successfully) claims the monopoly of the legitimate use of physical force within a given territory" and that the right to use physical force is ascribed to other institutions or to individuals only to the extent to which the state permits it" (quoted by Morris, 2015, pp. 195-209). This exclusive right of the state to use force become more pronounced during the Covid-19 pandemic when all other institutions went under, particularly during lock down. When the state itself became threatened the bureaucratic institutions played their historical and functional role of stabilizing the state. However, in the process of performing that role elite privileges became manifest.

The predominance of the members of such a structure of domination rests upon the so-called "law of the small number." The ruling minority can quickly reach understanding among its members; it is thus able at any time quickly to initiate that rationally organized action which is necessary to preserve its position of power. Consequently it can easily squelch any action of the masses threatening its power as long as the opponents have not created the same kind of organization for the planned direction of their own struggle for domination (Weber, 1978, p. 952).

During Covid-19 the state was threatened when everybody, including the President or Prime Minister needed to self-isolate, reduce physical contacts and even meetings, but simultaneously needed to keep the state functioning. Emergency institutions had to be created or strengthened under the bureaucracy for the purpose of system maintenance and stability such as Centres for Disease Control (CDC) the Health Ministry. Patients had to be received, quarantined, treated, fed, and either discharged on recovery or prepared for burial in such a manner as to ensure that the rest of the society was protected against spread. Daily reports on casualties had to be released as a matter of exigency. Drugs had to be obtained, effective or not, and administered. Cautionary measures had to be issued and enforced to curb the spread. Palliatives had to be obtained and distributed to ameliorate the distress of the people.

The real issue is that bureaucracy had to take the risk to preserve the society and stabilise the system, but in so doing elite privileges had to be maintained. Unleashing the instruments of domination in order to compel the society for general safety was the function of the bureaucracy, but while some died in droves others, the elite appeared to feel more secure, received better treatment, died less and even, in some cases had to publicly pronounce their contact with the virus and self-isolation. The state has therefore been constructed to maintain an iron law of privileges irrespective of what political system, liberal, socialist, autocratic, democratic, or theocratic, that is in operation. Under Covid-19 the law of the small number came into operation when the elite came under real threat as the virus proved to be no respecter of persons or privileges. However, the elite was able "*quickly to initiate that rationally organized action which*

is necessary to preserve its position of power". In the rest of the paper those specific actions that were necessary to preserve the position of the elite as the dominant group will be analysed.

Aim and Objectives of Study

The aim of this study is to critically analyse the relationship between the State, the Elite and the bureaucratic institutions in efforts to stabilise the system and maintain privileges during a national emergency like the Covid-19 pandemic.

1. To examine the rational actions of bureaucrats in the administration of public institutions during a national crisis like Covid-19.
2. To study the efficiency of bureaucratic theory and practice in system maintenance or stability during a national crisis like Covid-19.
3. To analyse the attitude of the state in its responsibility to defend and protect its citizens during a national health emergency like Covid-19.

Research Questions

1. What were the rational actions of the elite using bureaucratic administrative institutions to preserve itself in course of a national crisis like Covid-19?
2. How efficacious was bureaucratic theory in system maintenance or national stability during a national crisis like Covid-19?
3. What was the attitude of the state in its responsibility to defend and protect its citizens during a national health emergency like Covid-19?

Research Assumptions

1. In course of a national crisis like Covid-19 the elite, using bureaucratic administrative institutions, take rational actions to preserve themselves.
2. Bureaucratic theory is highly efficacious in system maintenance or national stability during a national crisis like Covid-19.
3. The state demonstrates disparate attitudes in its responsibility to defend and protect its citizens during a national health emergency like Covid-19.

Theoretical Framework

Elite Theory is associated with thinkers such as Vilfredo Pareto, Gaetano Mosca, Roberto Michels, C. Wright-Mills and Max Weber. It essentially segregates society into two broad categories – the few at the top that constitute the Elite and the Masses below that are usually in majority. Decisions taken on behalf of the masses by the elite are, more often than not, in the interest of the elite. Michels argued that large, organizationally complex institutions “are likely to be governed by cliques whose powers (disposable resources, freedom of action, security of tenure) are abundant and whose policies (use of official status and resources) deviate from the policy-preferences of their constituents” (May, 1965, pp. 417-429). What this assertion suggests is that in complex organisations and society at large the elite often evolve and protect an interest distinct from the wider society while appearing to speak generally. All the attributes of a bureaucratic organisation, such as large-scale membership, complexity, procedural formality, functional differentiation, stratification, specialization, hierarchy, and control increase the power of the elite and accordingly separates them more from the followers.

Roberto Michels introduced the popular “Iron Law of Oligarchy”, which Weber termed the “law of the small number, by which the ruling minority can quickly reach understanding among its members” (Weber, 1978, p. 952) and accordingly maintain the predominance of the elite over the rest of society. C. Wright-Mills identified a power elite composed of political decision makers, corporate economic managers, and military top hierarchy, all male, white, and Christian – are highly interconnected, and quickly unite in moments of national crises that threaten their strategic interests (Ritzer, 2007). There is a tendency for power to shift from one of these centres to another at different periods successively. For instance:

The supremacy of corporate economic power began, in a formal way, with the Congressional elections of 1866, and was consolidated by the Supreme Court decision of 1886 which declared that the Fourteenth Amendment protected the corporation. That period witnessed the transfer of the centre of initiative from government to corporation (Wright-Mills, 1956)

The power elite, according to him, is constituted by the coincidence of economic, military, and political power, which converge for the domination of the masses even as it desperately seeks the effective protection of its strategic interests. Italian theorist, Vilfredo Pareto, introduced the word elite in the social sciences, and formulated his idea of the decline and fall of elites, especially the political elite, resulting in reproduction or circulation of elites, consolidating power through highly restricted vertical and horizontal recruitment and integration. By emphasizing the circulation of elites, Pareto and Mosca tried to explain the potential difficulty of elites to adapt to changing circumstances (Ritzer, 2007).

The official is entrusted with specialized tasks, and normally the mechanism cannot be put into motion or arrested by him, but only from the very top. The individual bureaucrat is, above all, forged to the common interest of all the functionaries in the perpetuation of the apparatus and the persistence of its rationally organized domination (Weber, 1978 p. 988). Bureaucracy is a rationally organized instrument of domination and legitimation that in reality functions for the elite though dispassionately for the masses, which precisely is the point of convergence between the two political and administrative concepts and also indicates their relevance for the purposes of this paper.

Methodology

This paper is essentially designed as a study in public administration with emphasis on political theory and therefore the sources of data collection are mainly secondary, i.e. from existing literature such as published books, journal papers, newspapers, magazines, reports, internet sources, etc. Data analysis in this paper is accordingly qualitative, focussing essentially on the extraction of textual contents from major works on bureaucratic theory and logical reappraisal and analysis of historical and contemporary facts and records about the Covid-19 pandemic.

The Politics of Covid-19

News about Covid-19 filtered slowly into the global space through mainstream and social media early 2020. It had however already been detected from December 2019, by the World Health Organisation (WHO) as the severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2), hence the name, coronavirus disease-2019 (COVID-19). It is indicated by fever, dry cough, and chest pain with pneumonia in severe cases, including respiratory signs such as sneezing or sore throat, reported to have originated from Wuhan, Hubei province, China, and associated with the Huanan Seafood Wholesale Market. It fell on the World Health Organization (WHO), to provide global leadership with other global partners, through world public health authorities such as the Centres for Disease Control and Prevention (CDC), by making frantic efforts to control and prevent the spread of the disease. WHO consistently issued guidelines on managing the pandemic including instructions on how to detect the disease, emergency treatment, application of preventive and control strategies, supportive therapy, and the avoidance of disease complications. Initially identified as a highly contagious disease that could spread globally in a short period of time, it was declared a global pandemic by the World Health Organization on March 11, 2020 (Ahmad & Lone, 2020).

No sooner had these facts been revealed than politics stepped in amid a complex web of controversies and conspiracy theories. Though generally known to have originated from China there were speculations and rumours that it was actually manufactured from a laboratory to deliberately infect and destabilise the west, particularly the United States, and give China the strategic advantage as the new global hegemon both politically and economically. From that

moment China became a suspect and every piece of information from China was taken with a pinch of salt. Exceptionally high casualty figures from China failed to attract global sympathy. Worsening this situation was when medical aid sent to Italy and Spain, two of the worst European cases, when tested turned out to be already infected and had to be abandoned. Soon after, China shifted focus to Africa, sending test-kits, equipment, personnel and even funds, under very suspicious circumstances, as everything was packaged as foreign aid with repayment requirements. Possible African vulnerabilities were so hyped in the media that there were speculations of the streets of African cities to be littered with corpses. This campaign was amplified by the Bill and Melinda Gates Foundation with a promise of immunization, starting from Africa, irrespective of the fact that Africa was the least affected continent. Why Africa, people wondered?

No sooner Chinese racial attacks on black Africans were flashed across social media in video clips. The same Chinese rushing to aid Africa and urgently prevent the spread of the disease were ejecting black Africans from their homes in the heat of the epidemic. Conspiracy theories that China had actually targeted Africa for annihilation, using the coronavirus, rented the air and proved quite difficult to dispel. Africa's exceptionally hot atmospheric temperature provided a divine protection from the virus, perhaps to the disappointment of the political pundits. All that Africans needed to effectively fight the virus was constant exposure to heat, which nature has already provided in abundance. Attempts were allegedly made to bribe the Nigerian law-makers to legislate over forceful immunization, which some interpreted as an effort to insert the mark of the beast and part of the apocalyptic prophesy.

President Donald Trump of the United States quietly appeared to have been rattled by the global disposition of China over the pandemic. Several suspicious developments prompted Trump to engage in diplomatic exclusion of anything China or at best a national distancing if only to re-launch a competitive engagement or reassert an American global hegemony. Trump's conviction that China had plotted to destroy America evolved into a patriotic hysteria. As an already rated enigmatic, eccentric and inscrutable President he quickly developed a sense of duty to deploy strategies that would mentally strengthen the United States against Chinese imperialism. In several ways these eccentricities proved diplomatically pricey and probably even cost him the presidency. First, he insisted on referring to the disease as the 'China virus', as though to stamp it on and globally discredit China. Secondly, he rejected any form of aid, support, supply or assistance from China, instigating a form of national capabilities instinct. Third, and perhaps the most costly, was his golf-playing dismissiveness of the galloping casualty figures. In utter confusion Trump even recommended the use of antibiotics and insecticides while, perhaps on racial grounds, rejecting Dr. Stella Emmanuel's claim, supported by America's Frontline Doctors, to have cured over 350 covid-19 patients using a combination of hydrochloroquine, zinc and zithromax as antiviral therapy.

The control of coronaviruses is based on biosecurity regarding animals as well as on shifts in food habits, including discouraging the consumption of bushmeat and of animal products without appropriate cooking. Ban of wet marketplaces where live or dead animals are handled should be implemented. Surveillance among people who have contact with wildlife and improvement of biosecurity regarding wildlife trade are urgently needed to prevent the next pandemic outbreak (Helmy et al, 2020, p. 1-30).

With these facts and their ancillary possibilities Trump's securitization of any contact with the United States, particularly from China, would be justifiable. However, Trump's approach to the politics of Covid-19 pandemic management ironically began to endanger the citizens of the United States. By refusing to accept the reality or seriousness of the situation many that would have been saved were caught in the cross-fire. Refusing to be proactive but rather guarding his ego President Trump simply ignored all entreaties, suggestions, proposals and even the raw facts,

as though denial would serve as enough remedy to extirpate the plague. Today, November, 2020, the United States posts the highest record of cases of infections and fatalities in the whole world.

President Trump's idiosyncrasies wouldn't spare the WHO, which he isolated and from which he withdrew US funding, based on another conspiracy theory that its Ethiopian Director-General, Tedros Adhanom Ghebreyesus had been sponsored to assume that position by China and had conspired with China against the United States in concealing the spread of the novel coronavirus in the early stages of its outbreak. The veracity or otherwise is yet to be established but is nonetheless a reflection of global hegemonic politics between China and the United States. Trump's anger might be that the United States had been beaten in a familiar game by an emerging force, perhaps realizing too late that it was being systematically torpedoed in the global institutions of political, economic and now medical control. The full story of different shades of China's role in originating, spread, control, and advancing its strategic interest in the Covid-19 pandemic still appears to be shrouded in secrecy.

A notable aspect of global hegemonic politics was the discovery of an efficacious drug against coronavirus by Madagascar, an apparently insignificant island-nation in the Indian Ocean. Many advanced nations in Europe, America and even Asia simply ignored it, while Nigeria, which had already imported it for use in May 2020, quickly discredited "COVID Organics", as it was named, arguing that it had not been scientifically proven. The National Institute of Pharmaceutical Research and Development (NIPRD) declared that it lacked potency against the virus. Even when countries like Senegal used it to reduce fatalities to 0.64% compared to the United States' 3.45 the negative attitude from Europe and America, never changed. By the age-old global division of labour Africa's role remains the consumption of manufactured European and American goods rather than become the producer. Consequently, the world had to wait for several months before Pfizer announced its discovery late in November 2020. Meanwhile Bill Gates Foundation surfaced with its \$156 million (N59.3 billion) sponsorship of a drug against the virus to ensure that everyone gets equal access to tests, drugs and vaccines, especially the poor. The inclusion of a vaccine with a suggestion of immunization raised serious doubts and suspicion, particularly among Christian groups which linked it to the 666 mark of the beast, especially when he hinted that it would be tested in Africa and the same with immunization, despite the low rate of fatalities in Africa.

Two firms, first, on November 9th, Pfizer, an American pharma giant and BioNTech, a German minnow, announced that they had jointly developed an effective vaccine for Covid-19, followed, on November 16th, by Moderna, an American biotech firm. Moderna says what its offering is 94.5% effective. Pfizer says the efficacy of its drug is 95%. Moderna's figure is an estimate based on a peek at data being gathered in a continuing trial involving 30,000 volunteers. Pfizer's comes from the final analysis of a trial involving 43,000 people, in which 170 cases of covid-19 were seen (The Economist, 19 November, 2020).

Under such circumstances whatever little that may have been achieved could be credited to the bureaucracy, the functioning mechanisms of which, once established, to a great extent, assumes a dynamic of its own and could be far-reaching in emergency situations like the Covid-19 pandemic. This role is what the paper examines next.

Bureaucratic Theory and Institutional Management during Covid-19 Pandemic

Biosecurity measures under conditions of almost complete absence of proper test-kits, where affliction had been established the prospect of receiving treatment and surviving, how to feed an entire population under lock down, some quarantined others self-isolated, effective information dissemination for avoiding infection, ensuring that daily instructions or directives from the CDCs were obeyed, ascertaining that cases of infection were promptly reported and victims evacuated, contact tracing and isolation of both victims and potential victims, all introduced acute problems

of mass administration and management. Domination is an essential attribute of bureaucratic administration and no global condition affirms this theory better than the Covid-19 pandemic.

We are primarily interested in "domination" insofar as it is combined with "administration". Every domination both expresses itself and functions through administration. Every administration, on the other hand, needs domination, because it is always necessary that some powers of command be in the hands of somebody (Weber, 1978, p. 948).

When Weber defined the state as the only institution that monopolizes the use of force to secure obedience, that determinate role is played at the instance of the state by the bureaucracy in any modern society. Domination, explained in terms of force or coercion, is what drives public administration. At a time even the most prominent and conspicuous state actors, like Presidents, Prime Ministers, Ministers and Central legislators had to be isolated or protected against any form of contact to preserve their lives the bureaucracy functioned as “the factor of cohesion . . . the regulating factor of its global equilibrium as a system (Poulantzas, 1978, pp. 44-45). System maintenance and adaptation functions are central for sustainability and continuity in any society or organisation and this crucial role is played by the bureaucracy. It weaves the tentacles of administration together and ensures the survival of the system, particularly during crisis or emergency. The principle of administration being conveyed is that:

whoever controls, manages and occupies the main nodes of power within the state apparatus (the “bureaucracy”), regardless of social origin, faith or specific motivations, has no choice but to reproduce the objective function of the state, which consists of maintaining the social cohesion of a given social formation; this is equally valid for any type of political regime, bourgeois democracy, military dictatorship, fascism, authoritarianism (Codato & Perissinotto, 2011).

Every entity has the primary objective of survival or maintenance before anything else and as far as Weber is concerned this intrinsic role of the bureaucracy in any large organisation is both indisputable and indispensable. One central advantage that bureaucracy possesses over other theories of administration is its ability to sustain or maintain large organisations or the entire society, by effectively coordinating its far-flung branches or agencies to achieve set goals. However, legitimate force or coercion remains an abiding element in bureaucratic authority for successful system maintenance and sustainability. When strictly applied bureaucracy makes it possible for social distinctions to be apparent and not too obvious because of the driving principles of impartiality, rationality and neutrality.

Such a system offers the governed the possibility of appealing, in a precisely regulated manner, the decision of a lower office to the corresponding superior authority. With the full development of the bureaucratic type, the office hierarchy is monocratically organized. The principle of hierarchical office authority is found in all bureaucratic structures: in state and ecclesiastical structures as well as in large party organizations and private enterprises. It does not matter for the character of bureaucracy whether its authority is called "private" or "public (Weber, 1978, p. 957).

Without the element of legitimate force, coercion or domination, it would be practically impossible to close down stadia, airports, seaports, schools, instruct the cancellation of any form or public or even private gathering, forceful isolation or quarantine, etc. such as the world witnessed during the Covid-19 pandemic. It posed a very serious threat to the continued survival of the society because it is living humans that make up a society. Several prominent state actors, including President Donald Trump of the United States and Boris Johnson of Great Britain, announced being infected and had to be taken into isolation, but the bureaucracy functioned for system maintenance and stability. It was not a period of claiming fundamental rights as rights had to be forcefully compromised in order to generally secure the lives of citizens.

All EU Member States introduced physical and social distancing measures to contain the COVID-19 outbreak, including forms of quarantine. Such measures can affect

many fundamental rights, including the rights to liberty and security (Article 6), respect for private and family life (Article 7), freedom of thought, conscience and religion (Article 10), freedom of expression and information keep together on one line, freedom of assembly and of association (Article 12), freedom of the arts and sciences (Article 13), and freedom of movement and of residence (Article 45). They can also affect the rights of specific groups including children, older persons and persons with disabilities (O'Flaherty, 2020, p. 8).

In a national emergency as under Covid-19 rights had to be deemphasised to secure both the state and the citizens. Public administration under such circumstances is put into severe stress as things need to get done as quickly as possible in order to save lives. It matters less who is involved as all are citizens that need urgent attention to save those already infected and prevent other from the scourge. Impersonal and rational decision-making are key in that enterprise and under such exigencies. Bureaucracy, imbued with its attributes such as hierarchy of authority, system of procedures and rules dealing with all contingencies, division of labour based on specialization, i.e. rationality, as well as impersonality in human relations (Obikeze & Anthony, 2004, p. 82) is best suited to save the society under national emergencies.

Covid-19 Pandemic Administration in the African Context

Africa, with its peculiarities was not spared by Covid-19. Coming through Europe, Egypt recorded the first confirmed case on the 14th February 2020, followed by Algeria on the 25th February 2020. Nigeria recorded her index case on the 27th February 2020 (Anjorin, 2020, 13(5): 199-203). Senegal reported its first case on the 1st March 2020, followed by Morocco and Tunisia on the 2nd March 2020. In the southern African region, South Africa was the first to report Covid-19 on the 5th March 2020 while in West Africa Cameroon reported two cases along with Togo on 6th March 2020; and Burkina Faso on 9th March 2020 (Anjorin, 2020, 13(5): 199-203). As stated earlier, the expected mass deaths failed to occur as it was soon discovered that weather conditions were a factor in the spread of the plague and nature came to the rescue. Heavy casualties were nonetheless recorded in several parts of Africa.

In Nigeria, after the confirmation of the first case health institutions were called to duty for public administration, and “for the first time, researchers from the Centre for Human and Zoonotic Virology in Lagos University Teaching Hospital/College of Medicine of the University of Lagos, African Centre for Genomics of Infectious Diseases in Redeemers University and the Nigeria Institute of Medical Research, Lagos, successfully performed the genome sequencing of COVID-19 (Anjorin, 2020, 13(5): 199-203). According to the Nigeria Centre for Disease Control (NCDC), a second confirmed case was detected in the country on 9th March 2020, which was a contact of the index case. NCDC consistently provided updates on cases across the Nigerian federation and politics, spiced with corruption, stepped in to take full advantage of grace of nature. Miraculously Sadiya Umar Farouq, the Minister of Humanitarian Affairs, Disaster Management and Social Development, announced that eleven (11) million school children, in their various homes during lockdown, were mysteriously accessed and fed in 48 hours. It was reported that 3.1 million households nationwide, and at a cost of N13.5 billion had been reached and fed within two (2) days.

The National Publicity Secretary of the Peoples Democratic Party (PDP), the main opposition party, Kola Ologbondiyan, described the claim as a “colossal racketeering taken too far”, and as “sacrilegious, wicked and completely unpardonable, the use of innocent school children as cover to steal and funnel not less than N679 million daily to private pockets” (Guardian Newspaper, 23 May, 2020; Sahara Reporters, August 04, 2020; Premium Times, March 30, 2020). Then the Lagos State Commissioner for Health, Professor Akin Abayomi, said the State spent between N100,000.00 and N1 million on each Covid-19 patient daily. With these humongous claims it was obvious that the Covid-19 pandemic had been transformed into a cash cow by politicians in power. The Federal Government, through the Minister Sadiya Umar Farouq,

also announced the immediate disbursement of N20,000.00 Relief Cash Transfers to poor households across the country by zones in the following figures:

North West – N112.7 billion

North Central – N88.1 billion

North East – N44.4 billion

South West – N39.1 billion

South South – N10.4 billion

South East – N3.3 billion

How the poor families or households were identified, enumerated and paid remains a mystery. In Nigeria the poorest people can hardly boast of owning bank accounts, but even if they did questions could be raised regarding how the bank accounts were collated and disbursement effected at a rate even faster than the speed of light. One cannot recollect anyone confirming receipt of the amount. Examining the regional figures it could be gleaned how impunity and deliberate provocation reigned supreme in the Buhari regime where the whole of the southern regions, where the resources were derived from, put together were allocated less than half of the North-West alone. It took the #EndSARS protests to further expose the palliatives that were locked up in warehouses in virtually all the states of the Nigerian federation, at a time that there was so much poverty and the economy already in recession. A private sector coalition against the coronavirus, known as CA-COVID, had collected tens of millions of dollars' worth of aid for coronavirus victims and given it to the government but an elite conspiracy ensured that the people never received it. "To think that certain persons could lock down this quantum of food and materials as we are seeing them in their premises, in their custody and watching while people wallow in poverty and difficulty, is really unthinkable" (Obiezu, VOA, 2020).

All the food donated as palliatives by international non-governmental organisations, foreign countries, charity foundations, etc. were stolen by the elite. It was so disheartening that some families of three or four received only a pack of spaghetti or two cups of rice as their palliative, whereas there was so much locked away to rot. That explains the true nature and mentality of the Nigerian elite.

Covid-19 pandemic also exposed the monumental fraud in the Niger Delta Development Commission (NDDC) in the oil-rich but miserably impoverished Niger Delta region. Acting Managing Director of NDDC, Kemebradikumo Pondei, who fainted in course of a Senate probe and the Interim Management Committee of the NDDC set up by Senator Godswill Akpabio spent N1.5 billion to take care of themselves during the Covid-19 pandemic. It was further disclosed that N1.5 billion was spent as Covid-19 relief fund at the Senate hearing on the N40 billion corruption allegation against the Commission in May 2020. Other disclosures under the guise of tackling Covid-19 were:

N81.5 billion as sundry expenses, including graduation ceremonies in the United Kingdom during the lockdown, N3.14 billion on Covid-19 palliatives for staff, N85.6 million on travels during the lockdown between February and May 2020, N122.9 million on condolences to victims of the plague, perhaps in their graves, between February and May 2020, N1.9 billion as Covid-19 relief among staff, N2.6 billion overseas travels during lockdown between February and May 2020, and N475 million on facemasks, hand sanitizers and Personal Protective Equipment (PPE). A total of N81.5 billion had been mismanaged between January and May 2020, out of which Covid-19 expenses gulped about N31.4 billion.

The urgency of responding to the pandemic required that regulatory oversight functions and procurement rules designed to curb corruption be relaxed, but ironically, that created loopholes for corruption to thrive. Corruption "undermined efforts to respond to the emergency by wasting and diverting needed resources and supplies" (World Justice Project, p. 15). The implication is that since bureaucracy is associated with red-tapism, standard rules and procedures had to be circumvented, and in the process massive corruption and discrimination became inevitable, resulting in increased fatalities.

It would be erroneous to interpret this as the failure of bureaucracy or public administration but rather that these great concepts were trampled upon and disregarded in favour of kleptocratic, prebendal and ethnic considerations in Nigeria. For more details the paper turns to a discussion on the state and social privileges during the Covid-19.

Covid-19, the State and Social Privileges

In situations like Covid-19 governments plan for the security, health and welfare of the citizens, to ameliorate the effect. The state, supported by the administrative institutions and effected through bureaucratic principles, takes active steps to reduce the pain on the people, both rich and poor. It is a global practice, having experienced such an emergency health challenge to plan for the future. That is the expectation of global institutions like the UNDP.

“Governments are fast-tracking plans to support the health sector and a weakening economy. We are witnessing perhaps the greatest fiscal response in history (amounting to more than \$8 trillion dollars). The policies to be implemented have the potential to affect the shape of technological innovation, the energy mix between renewables and fossil fuels and the distribution of wealth. There will be several practical—unavoidable—choices: about rescuing productive sectors, promoting different types of innovations with different effects on job creation, redesigning social services, investing in infrastructure and distributing the cost of action with implications for taxpayers” (UNDP, 2020, pp. 22-23).

However, quite the contrary is the case in Nigeria and several African countries where the elite is used to embarking on medical tourism, neglect their health facilities and consequently get flustered when confronted with emergencies. Covid-19 dealt a devastating blow on the elite who thought it was business-as-usual. Nigeria’s President Buhari’s Chief of Staff embarked on a trip to Germany that ordinarily he had no business getting involved in, contacted the disease, refused to self-isolate, coupled with his advanced age, was forced by the prevailing circumstances to visit the neglected Gwagwalada Hospital in Abuja and other domestic clinics in Lagos, all airports having been closed. Not even private jets could save him as impunity haunted him till his eventual death. The same fate visited several other members of the elite, like Ismaila Isa Funtua, one of the three musketeers in the Buhari regime, who also died.

“Inequality in human development affects countries’ capacity to respond to Covid-19. Countries with lower human development have a fraction of the resources of developed economies to support their health systems” (UNDP, 2020, p. 19). The African challenge is largely self-inflicted as medical tourism seems a more attractive option, a status symbol, than the upgrade of medical facilities. Availability of hospital beds, doctor to citizen ratio, test-kits, are some of the biggest constraints for health systems in Africa. “Low human development countries have only 0.2 physician per 1,000 people, compared with 3.1 in very high human development countries” (UNDP, 2020 p. 19). Very few countries are conducting widespread testing, based on which crucial decisions could be made at the individual, community and national levels, but Africa, as usual with its visionless leaders, has been left behind.

One crucial observation has to do with the successful treatment of elite personalities. At a point some could proudly announce their being infected and decision on self-isolation, like the Kaduna State Governor, El Rufai and the Oyo State Governor, Seyi Makinde. Several other celebrities across the world, including US President, Donald Trump and British Prime Minister Boris Johnson, at a time that no cure had been discovered, boldly declared undergoing self-isolation having contacted the virus. What treatment did they receive to keep them alive while fatalities remained high among the low and middle-income groups? Obviously not the same treatment and attention were equally and democratically applied. This observation is corroborated by the UNDP report that:

Losses in income for workers who were in precarious employment are likely to increase poverty and deprivation across key human development outcomes.

Across all levels of human development, people in low-income groups are much more vulnerable, in part because they lack the ability to come up with emergency funds. They are days away from a collapse in living standards. The economic response would need to reach those weak links of the social and economic fabric as well as those who have already been left behind, supporting their basic capabilities and enabling subsistence. Improving access to social protection is one policy that reduces existing inequality and promotes human development objectives by empowering people (UNDP, 2020, p. 21).

Inequality and, sometimes, racial discrimination were widely reported during the pandemic. Even when the drug is made available for commercial use would it be affordable by the poor? “Covid-19 is not colour-blind. In England a black man is nearly four times more likely to die from the disease than a white man of a similar age. In the state of New York, in the first months of the pandemic, black and Hispanic children were more than twice as likely to lose a parent or caregiver to covid-19 than those who were white or Asian” (UNDP, 2020, p. 21). In Africa, by divine providence, apart from the hostile weather several other locally available natural products, like herbs, roots, and chemicals with therapeutic value made it easier for the poor to defeat the virus. In fact Covid-19 is regarded an elitist curse in Africa.

The predominance of the members of such a structure of domination rests upon the so-called "law of the small number." The ruling minority can quickly reach understanding among its members; it is thus able at any time quickly to initiate that rationally organized action which is necessary to preserve its position of power. Consequently it can easily squelch any action of the masses threatening its power as long as the opponents have not created the same kind of organization for the planned direction of their own struggle for domination (Weber, 1978, p. 952).

These are unavoidable universal phenomena but the efficient deployment of public administration and bureaucratic theories or principles of management could effectively address them and bring succour to the people. In Africa, particularly Nigeria, these principles were never given the chance to operate. But for nature the effect of Covid-19 on Africa would have been unimaginable.

Conclusion

In conclusion the Covid-19 has introduced a new global hegemonic politics among the advanced countries and between them and the developing countries of the world, particularly between the United States and China. It has also thrown up several conspiracy theories involving the controversial role of China as the source of the virus, information dissemination, test-kits distribution and other issues. The management of the disease is highly political in many dimensions that are still unfolding. Covid-19 has also exposed the inadequacies of the elite in many countries to adequately fund their health facilities, particularly Africa. Both class and racial disparities in access to health in several countries across the world have also been demonstrated in the paper.

Recommendations

- The international community needs to monitor and enforce global best practices in health management
- Governments should be supported in capacity building efforts necessary to ensure that Covid-19 relief materials reach the intended beneficiaries.
- Existing class and racial cleavages need to be bridged in order for advances in medical science to serve humanity effectively and dispassionately.
- Stronger mechanisms to curb corruption, which is a major impediment to the management of the pandemic, should be activated and implemented.

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