



The Influence of Islamic Clerics on the Acceptance and Response of COVID-19 Prevention Protocols in Northeast Nigeria

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Abstract

COVID-19 is the recent global pandemic that affected all facets of human endeavour worldwide. Pandemics are usually heralded with allegations and perception of conspiracies which is associated with culture and environment. In Nigeria, especially, the Northeast, the pandemic was reluctantly welcomed owing to perception and culture, which created the fear of rapid spread because protocols were breached. In this regard, religious clerics played an instrumental role in influencing people to accept and respond to the prevention protocols. This study investigated the role played by Islamic clerics in making people believe in the pandemic and accept and respond positively to preventing it through adopting the set protocols. The study utilised both primary and secondary sources. The primary sources included a survey in the area of study, in-depth personal expert interviews, and participant observation, while the secondary sources consisted of documented materials. The assembled data were discussed and interpreted using manual SPSS for the survey, where tables were designed for simple percentage analysis, content analysis for the in-depth interview, and participant observation. The study reports that Islamic clerics played a significant role in persuading people to accept COVID-19 as a pandemic and to adopt prevention protocols initially after hesitation. The clerics succeeded in convincing the public to accept the prevention protocols using religious injunctions. The study, therefore, recommends, among several others, that Islamic clerics and other religious leaders need to be integrated into critical issues of public interest and public-agenda setting to avoid mutual suspicion, hostilities, and practices that will negatively affect the wellbeing of the populace.

Keywords: COVID-19; Influence; Islamic Clerics; Northeast Nigeria; Prevention Protocols; Response.

Abstrak

COVID-19 adalah pandemi global yang baru-baru ini memengaruhi semua aspek kehidupan manusia di seluruh dunia. Pandemi biasanya digembar-gemborkan dengan tuduhan dan persepsi konspirasi yang dikaitkan dengan budaya dan lingkungan. Di Nigeria khususnya, Timur Laut, pandemi disambut dengan enggan karena persepsi dan budaya dan itu telah menciptakan ketakutan akan penyebaran yang cepat karena protokol yang dilanggar. Dalam hal ini, ulama memainkan peran penting dalam mempengaruhi masyarakat untuk menerima dan merespon protokol pencegahan. Penelitian ini menyelidiki peran yang dimainkan oleh ulama Islam dalam membuat orang percaya pada pandemi dan menerima dan merespons secara positif untuk mencegahnya melalui penerapan protokol kesehatan. Penelitian ini menggunakan sumber primer dan sekunder. Sumber utama termasuk survei, wawancara mendalam dan observasi sedangkan sumber sekunder terdiri dari bahan terdokumentasi. Data yang terkumpul didiskusikan dan diinterpretasikan menggunakan SPSS untuk survei di mana tabel dirancang untuk analisis persentase sederhana, analisis isi untuk wawancara mendalam dan observasi partisipan. Studi tersebut melaporkan bahwa ulama Islam memainkan peran yang sangat berpengaruh dalam membujuk orang untuk menerima COVID-19 sebagai pandemi dan untuk mengadopsi protokol pencegahan setelah awalnya ragu-ragu. Para ulama berhasil meyakinkan masyarakat untuk menerima protokol pencegahan dengan menggunakan tuntunan agama. Oleh karena itu, penelitian ini merekomendasikan antara lain bahwa ulama dan pemimpin agama lainnya perlu diintegrasikan ke dalam isu-isu kritis kepentingan publik dan pengaturan agenda publik untuk menghindari saling curiga, permusuhan dan praktik yang akan berdampak negatif pada kesejahteraan rakyat.

Kata Kunci: COVID-19; Pengaruh; Ulama; Nigeria Timur Laut; Protokol Pencegahan; Respon.

INTRODUCTION

The COVID-19 pandemic emerged as a global epidemic barely a few months after its first record outbreak in the industrial city of Wuhan in China (Chakraborty & Maity, 2020; Ciotti et al., 2020; Darsono, Rohmana, & Busro, 2020; Lone & Ahmad, 2020). The virus has particular characteristics of difficulty in breathing, severe fever, catarrh, stomach disturbance, and possible malfunction of some internal organs (He et al., 2021; Sattar et al., 2020; Weng, Su, & Wang, 2021) spreads rapidly across China and within its six months of outbreak from December 2019, the pandemic spread like wildfire almost hitting all countries of the world emanating from the complex disentangled nature of the global world in the 21st-century (Faghih & Forouharfar, 2022). The pandemic paralysed the globe in awe. Economic activities were halted abruptly (Bashir, MA, & Shahzad, 2020; Ozili, 2021), political gatherings stopped (Nyasulu et al., 2021), and sociocultural events were suspended and by extension (Evans et al., 2020; Gupta, Parker, Priyadarshi, & Parker, 2020; Sheptak & Menaker, 2020), most countries of the world slammed down lockdown and banned internal travel to prevent the spread of the virus. Over a hundred million were infected, millions killed, and still, millions are battling the virus across the world. The World Health Organisation bounced into action by announcing the virus as a global pandemic and presenting some prevention protocols (Caron, 2021).

Nigeria recorded its first confirmed case in March 2020 in the city of Lagos. The pandemic gradually but steadily spread into other parts of the country to the extent that by June 2020, the pandemic had been reported in all 36 states of the federation and Federal Capital Territory Abuja (FCTA) (Sambo & Sule, 2021). To prevent the spread, the policymakers adopted prevention protocols, which included using a facemask, washing hands regularly with hand sanitiser, social distancing, quarantine of international travelers, inter-state travel ban and later lockdown. Accepting and adopting prevention protocols in many countries become difficult due to conspiracy theories, lack of confidence and trust in governments, politics, culture and religious perceptions. This case has been reported in America, Europe, Asia and Africa (Chaudhary et al., 2022; Damooei, 2022). Indeed, even some policymakers are part of the problem. For instance, President Donald Trump called COVID-19 political nonsense that should not be allowed to halt world progress because of politics (Hosseini-Nezhad, Safdar, Hosseini-Nezhad, & Luu, 2022). This means the issue is not peculiar to Nigeria even though other countries recorded success in convincing the populace to adopt the measures. However, the protocols were not readily welcomed by the populace, particularly in Northern Nigeria. Mutual suspicions, hostilities, misperceptions and allegations of conspiracy accompanied the perception of COVID-19 as a global pandemic, leading to a breach of protocols. The situation is even more pronounced in Northeast Nigeria where the inhabitants continued to exhibit a nonchalant attitude toward prevention measures (Attah, Usman Sambo, Babayo Sule, Muhammad A. Bello, & M. Yoserizal Saragih, 2021).

To persuade the public to accept COVID-19 as a pandemic and to adopt preventive measures to counter its spread in Northeast Nigeria, the Islamic clerics are credited with a giant effort in awareness which influenced perception positively. Northern Nigeria and Northeast particularly revered religious clerics and their opinions always influence people's perceptions and attitudes (Attah et al., 2021; Falade, 2014; Habib, Dayyab, Iliyasu, & Habib, 2021). However, many clerics whose outrageous outbursts and negative comments against COVID-19 in the Northeast made the task of influencing the people to accept it and practice prevention protocols difficult. They quickly dismissed COVID-19 as a conspiracy (Islam et al., 2021; Khan et al., 2020), particularly against Muslims observing their Ramadan rituals in the congregation because the travel ban and lockdown came on the eve of the month of Ramadan, a month in which Muslims intensify worship and rituals. But the other side of the clerics worked hard to demystify the negative views

and convinced the public that pandemics have cultural and historical roots in religious practice citing scriptural evidence to buttress their arguments (Sule & Sambo, 2020). This study examined the role played by Islamic clerics in Northeast Nigeria in influencing the public to accept COVID-19 as a pandemic and to adopt prevention protocols which are believed to have been significantly instrumental in curbing and minimising the spread of the Virus in the area of study.

The study is motivated by inadequate studies on the focus of the role of religious clerics in countering and preventing COVID-19 in Nigeria. Only Sule & Sambo (2020) pays attention to the role of religious clerics in preventing COVID-19 pandemics. The focus of this study differs entirely from that of Sule & Sambo (2020) in the sense that it pays more attention to how the religious clerics convinced the public in Northern Nigeria, specifically the Northeast, to adopt the prevention protocols. On the other hand, Sule & Sambo (2020) showed how the clerics convinced the public to agree that the virus is a pandemic. In essence, this study fills a gap that Sule & Sambo (2020) left unattended to. The study by Sule & Sambo (2020) should have advanced after investigating how the Islamic clerics succeeded in convincing the public to accept the virus, to examine how they influenced the public to adopt the prevention protocols, but it has not done that. This makes this study unique, a good contribution, and a sound filling of the research gap.

This research aims to fill a vacuum of knowledge, contribute to knowledge, and present practical policy implications. It is observed that there were few efforts in looking at the issues of COVID-19 research in Nigeria from the perspective of the role of religious clerics. Additionally, the study is expected to present some suggestions to the policymakers, religious clerics, and the public on the best model that will simplify perception, influence, and strategies of willingly adopting measures to prevent COVID-19 and suggest models of engagement in the future if such global pandemics break out.

LITERATURE REVIEW

In this section, the relevant literature on the subject matter of study includes perspectives on COVID-19, COVID-19 in Northeast Nigeria, protocols of prevention and responses toward countering the spread of COVID-19, and the impacts of COVID-19 on the Nigerian political economy.

Perspectives on COVID-19

COVID-19 is a shorter term for 'Coronavirus Disease 2019', a Virus that broke out in Wuhan in China in December 2019. The Virus was obtainable in most global pandemics before it became mysterious and rapidly spread beyond Wuhan within a shorter period of time. The COVID-19 pandemic is an infectious disease that is easily contracted through close contact with the victim of the Virus. Once a person gets infected, his breath becomes impaired with much difficulty, causes severe cold and catarrh, severe fever, loss of weight, and the Virus is difficult to counter in the patients, thereby causing rapid death (Hosseini-Nezhad et al., 2022). COVID-19 was not the major global pandemic in world history. Historical records indicate that there were more than twenty (20) major global pandemics, including Hamin Mangha circa 3.000, Antonine Plague in AD. 165-180, Plague of Cyprian AD. 250-271, Plague of Justinian AD. 541-542, Black Death in 1346-1353, the Cocoliztli Epidemic in 1545-1548, the American Plague in 16th century, the Great Plague of London in 1665-1666, the Great Plague of Marseille in 1720-1723, the Russian Plague of 1770- 1772, the Philadelphia Yellow Fever Epidemic in 1793, the Flu Pandemic of 1889-1890, the American Polio epidemic in 1916, the Spanish Flu 1918-1920, the Asian Flu of 1957-1958, the Acquired Immune Deficiency Syndrome (AIDS) pandemic from 1981 to date, the H1N1 Swine Flu in 2009-2010, the West Africa Ebola of 2014-2016, the Zika Virus of 2016 and recently the COVID 19 epidemic of 2019 (Jarus,

2022). However, COVID-19 is more disturbing because there was never a time in the history of the globe that the world borders collapsed and inter-relationships became disentangled like the current globalisation period. The development of modern technology and the internet made travel faster and easier, which has bridged the huge gap or barriers of national boundaries (Caron, 2021).

COVID-19 continues to spread rapidly and randomly, affecting the young and old, both male and female. The total global cases as of 31 May 2022 stand at 531,770,740 million, total deaths 6,311,139, and total doses administered 11,390,872,695. The United States has the highest incidence of 85,716,214 cases and total deaths of 1,031,273, followed by India with 43,155,749 cases and total deaths of 524,611, Brazil with 30,953,579 cases with total deaths of 666,496 (Worldometer, 2022). Africa has its share of COVID-19 cases. A total number of 47 countries were affected in Africa, with 11,549,076 cases and 171,598 deaths. South Africa is the most affected, with a total number of cases of 3,677,686 followed by Morocco at 1,161,290, Tunisia at 999,441, Libya at 496,778, and Egypt at 486,381 (Statista, 2022). The countries of the world, Africa inclusive rapidly introduced survival and austerity measures against the global economy that was hit hard by COVID-19. There emerged galloping inflation, the surge in the prices of foodstuffs and commodities, declining revenue for governments, curtailed global economic activities and job losses (Damooei, 2022). The world governments across all countries introduced palliatives to mitigate the scorch of poverty, food scarcity, and inflation affecting households. More importantly, measures were pushed forward in countering the Virus through the universal adoption and application of COVID-19 protocols including social distancing, use of facemasks, washing hands with sanitisers, travel ban and lockdown (Choudhary, Ranjan, Sharma, & Asthana, 2022). In the case of countries bedeviled with insecurity like Nigeria, measures were taken to address the escalating insecurity in the wake of the outbreak of COVID-19.

COVID-19 in Northeast Nigeria

The outbreak of COVID-19 in Nigeria led to a fast spread of the pandemic across all geopolitical zones. Lagos and FCT Abuja seemed to be the most affected because they are the gateway to and out of the country for international travelers (Oyeranti & Sokeye, 2020). Those who returned from international journeys could not be given the adequate quarantine process, thereby allowing them to inter-relate freely with the healthy ones causing the untamed spread of the Virus. Besides, Lagos and FCT were the centres of administrative and commercial activities in the country with population density. The pandemic spread across all the states in the federation to the extent that by April 2020, inter-state travel was banned followed by lockdown in June. The total number of cases in Nigeria as of 31 May 2022 is samples tested 5,160,280, total confirmed cases 256,028, active cases 2,849, discharged cases 250,036, and total deaths 3,143. States that are affected most are Lagos, 99,483, FCT Abuja 28,674, Rivers 16,696, Kaduna 11,305, Plateau 10,255, Oyo 10,230, Edo 7,694, Ogun 5,810, Delta 5,403 and Ondo 5,173 (National Centre for Disease Control, 2022).

In the Northeast, COVID-19 spread, but most states recorded low incidences compared to their counterparts in the Northwest and Southern part of the country (Tijjani & Ma, 2020). The Northeast states have incidences as follows; total cases in the zone 10,187, total deaths 209 and the distribution by states indicates that Gombe has 3,307 cases and 66 deaths, Bauchi 1,966 total cases and 24 deaths, Borno 1,629 total cases and 44 deaths, Taraba 1,473 total cases and 34 deaths, Adamawa 1,203 total cases and 32 deaths and Yobe 609 total cases and 9 deaths (National Centre for Disease Control, 2022). Perhaps, some of the reasons why the Northeast recorded low cases of infection and deaths compared to other regions are the states are less in economic activities than other regions, the region is one of the least populous areas

than other zones and the great role played by Islamic clerics in altering or influencing the perception of the people to accept the prevention protocols which helped immensely in curbing the spread of the virus as reported in the findings section from the conducted survey and in-depth interview.

Protocols of Prevention and Responses towards Countering the Spread of COVID-19

Nigeria, like other countries in the world, introduced quick responses to counter the COVID-19 pandemic. One of the measures adopted was the full adoption and implementation of the COVID-19 protocols designed and promoted by the World Health Organisation. The protocols consist of identification and provision of isolation centres for quarantine of suspected carriers, the establishment of centres for the treatment of infected patients, social distancing, inter-state travel ban, lockdown, constant use of facemasks and hand sanitisers for hygiene and practice of all other hygienic processes during and after public contacts. Additionally, the NCDC supplied testing kits for COVID-19 and the Centre engaged Nigerians in massive awareness through individual mobile phones text messages, media programmes on local radios and televisions using the medium of local languages, using of public posters, banners, and exhibitions across cities and rural areas and the utilisation of public-key figures such as traditional rulers and religious clerics to help in informing the people in pulpits and other places of worship (Sambo & Sule, 2021).

The Nigerian Government further introduced additional measures including the provision and distribution of palliatives, procurement of facilities for testing and isolation centres, evacuation of Nigerian diasporas back home after they became stranded owing to global lockdown by all countries, and an effort was made in sponsoring Infectious Disease Bill 2020 by the National Assembly which met a stumbling block because of allegations of bribery by Bill Gate Foundation and some draconian clauses enshrined in it which to some observers and analysts, nearly set to give the NCDC Director powers equals that of the Nigerian President in the declaration of a state of emergency (Attah et al., 2021).

The Federal Government introduced some economic relief measures to ameliorate the hardship due to the lockdown. Some of these relief measures included social investment programmes payment, ease of repayment of loans from anchor borrowers and *Trader Moni*, reaching out to households, distribution of cash and food items to the low-income families across the 36 states of the federation and FCT Abuja and a continuation of the school feeding programme introduced by the Government in 2017 (Sambo & Sule, 2021).

Impacts of COVID-19 on the Nigerian Political Economy

The outbreak of COVID-19 exposed the vulnerable Nigerian mono-economy to the hazards of instability, fluctuation and global economic oscillation of oil prices which is the sole mainstay of sources of foreign revenue. The decaying healthcare system in the country, coupled with ineffective and inefficient policies on health worsened by a paltry budget of between 5-7% for the health sector for nearly a decade, all exposed the country's health care sector to hazard of stress and inability to prepare adequately for countering a global pandemic of COVID-19 nature. The over-reliance on crude oil as the only foreign export and exchange source made the Nigerian economy weak and vulnerable to global pressure. Immediately after the pandemic broke out, the price of crude oil in the global market encountered a shock of steadily declining in price, which was never witnessed for more than two decades in the oil sector globally. In response to the swinging economic effects of COVID-19, the 2020 budget had to be cut off by 8%, especially the recurrent expenditure of civil servants and political officeholders. The 2020 budget was pegged at \$57 per barrel of crude oil, but before mid-2020, the price declined to \$30 and \$20 by December 2020. This

portends a serious economic crisis for the already recessed Nigerian economy that was crawling to bounce back (Sambo & Sule, 2021).

The option to the economic crisis was borrowing. The country borrowed \$3.4 billion (N1.5 trillion) from International Monetary Fund (IMF) under the auspice of boosting and revamping the health sector. The policymaking and politics shattered public confidence in overcoming the pandemic when medical doctors declared a nationwide strike due to non-payment of allowances and other entitlements. The doctors used the COVID-19 opportunity to press home their demands and to expose the political officeholders for the negligence of duty and responsibility. This is believed by the majority to have occurred because the political class has unfettered access to foreign medical trips against any disease and their families. They don't care about the plight of the governed since they have successfully crossed the threshold. This is also explained as the main reason why the Academic Staff Union of Universities (ASUU) is always on strike. Once the elite discovered an alternative, they neglected the local option and allowed it to naturally die at the detriment of national development (Attah et al., 2021).

RESEARCH METHODS

The research design is quantitative in nature because the study used a survey method (Hammersley, 2017; Lakshman, Sinha, Biswas, Charles, & Arora, 2000). The study assembled data from two sources, primary and secondary sources. The primary source is the conduct of interviews through the administration of questionnaires. The questionnaire was designed in a close-ended form where questions were asked and the respondents were allowed to tick from multiple choice based on their perceptions. A sample of 100 was selected randomly by the researchers in the six (6) states of the Northeast, including Adamawa, Bauchi, Borno, Gombe, Taraba, and Yobe States. This is informed by simple SPSS random choice based on an equal proportion distributed for the states under study. From the selected six hundred (600) in the six (6) states, the researchers administered a hundred questionnaires in each state, but a total of 496 were returned, which is a significant percentage of 82.67 while 11.33% did not respond or return the questionnaires. Another primary source is the direct participant observation, where the researchers are actors that watched closely how people responded, acted and perceived COVID-19 after the rigours of sermons and preaching by the Islamic clerics.

Another primary source is an in-depth interview with selected informants in the study area conducted through direct physical contact during the study period. The informants were selected using cluster sampling. In each of the six (6) states of the Northeast, two (2) Muslim clerics were selected for the interview. In the Northwest, two (2) Muslim clerics and one Christian clergyman were selected. A total of twelve (12) informants were, thus, interviewed who are Islamic clerics because the study is specifically on their role and influence. The secondary source of data is documented materials including books, journal articles, newspapers, internet sources, and reports written on the subject of study. The data obtained from the field were discussed and interpreted using SPSS manual version. A simple tabular form was designed, and percentages of responses were analysed based on the views of the respondents. Also, the information obtained from informants in the in-depth interview was discussed using content analysis where the major words or views are interpreted.

DISCUSSIONS AND FINDINGS

In this section, the data obtained from the field survey were presented using grouping, discussed and interpreted leading to some findings and contributions to knowledge. Tables were designed for the

questionnaire section, while the in-depth personal interviews conducted with informants were analysed using content analysis. The discussion was made in reference to the existing works on the subject matter. The following information revealed the main views of the respondents derived from the administered questionnaires.

Table 1 Responses of the interviewers on the influence of Islamic clerics in public acceptance and responses towards COVID-19 prevention protocol in Northeast Nigeria

No.	Responses	Agreed	Disagreed	Total
1.	Islamic clerics' views are highly influential in determining the public perception of COVID-19 in Northeast Nigeria	417 (84.07%)	79 (15.93%)	496 (100%)
2.	Islamic clerics' efforts and public sermons influenced the public to perceive COVID-19 as a global pandemic in Northeast Nigeria.	406 (81.85%)	90 (18.15%)	496 (100%)
3.	The Islamic clerics succeeded in influencing the acceptance of the COVID-19 pandemic from a religious perspective in Northeast Nigeria.	423 (85.28%)	73 (14.72%)	496 (100%)
4.	Islamic clerics convinced the public in Northeast Nigeria to accept and practice COVID-19 prevention protocols	389 (78.43%)	107 (21.57%)	496 (100%)
5.	The public accepted and was influenced by spiritual alternatives provided by Islamic clerics towards COVID-19 prevention protocol in Northeast Nigeria.	403 (81.25%)	93 (18.75%)	496 (100%)
6.	Islamic clerics in Northeast Nigeria influenced the public to support and accept the COVID-19 vaccine as an immunisation	295 (59.48%)	201 (40.52%)	496 (100%)
7.	The position of Islamic clerics affects the acceptance and responses toward countering COVID-19 and its protection in Northeast Nigeria.	387 (78.02%)	109 (21.98%)	496 (100%)
8.	Low cases of COVID-19 are associated with the influence of Islamic clerics in persuading the public to accept COVID-19 prevention protocols	316 (63.71%)	180 (32.29%)	496 (100%)

Source: Field Survey 2021.

Question number asked the respondents about the influence of Islamic clerics' views on public perception of COVID-19 as a pandemic in Northeast Nigeria. The respondents responded differently, in which 417 (84.07%) agreed while 79 (15.93%) disagreed with the position. This can be interpreted as an overwhelming majority acceptance from the distributed questionnaires that Islamic clerics positively influenced the inhabitants' perceptions of Northeast Nigeria to accept that COVID-19 is a real pandemic and not an orchestrated conspiracy, as assumed by some.

On the issue of Islamic clerics' efforts and public sermons influenced the public to perceive COVID 19 as a global pandemic in Northeast Nigeria. The respondents agreed 406 (81.855) that the Islamic clerics influenced the acceptance of COVID-19 as a global pandemic while 90 (18.15%) disagreed. This means that but for the efforts of Islamic clerics in Northeast Nigeria, people may not likely believe that COVID-19 is a global pandemic and that may lead to negligence of preventive measures which may cause the Virus to spread more than expected in the region.

The respondents were asked whether the Islamic clerics succeeded in influencing the acceptance of the COVID-19 pandemic from a religious perspective in Northeast Nigeria and they responded in the

following way. A significant number of 423 (85.28%) agreed while 73 (14.72%) disagreed with the view. This is interpreted as a great influence on the part of Islamic clerics since the majority accepted that the presentation of religious perspectives of pandemics and methods of countering them helped the inhabitants of Northeast Nigeria to support and agree to address the pandemic religiously.

Whether the Islamic clerics convinced the public in Northeast Nigeria to accept and practice COVID-19 prevention protocols, the respondents in their majority agreed with this view. Out of the total of 496, 389 (78.43%) accepted the submission while 107 (21.57%) disagreed. This means that Islamic clerics succeeded in positively influencing the people to adopt preventive practices including wearing facemasks, washing hands regularly with hand sanitisers, social distancing and even abstaining from places of worship or congregational prayers. Thus, the clerics earned credit in this regard.

The respondents believed that the public accepted and was influenced by spiritual alternatives provided by Islamic clerics towards COVID-19 prevention protocol in Northeast Nigeria where 403 (81.25%) agreed with only 93 (18.75%) disagreed. Some of these majors according to the respondents included withdrawing from congregational prayers even during the month of Ramadan, adherence to inter-state travel, lockdown for the infected and suspected patients, social distancing, abstaining from patients and some spiritual prayers from the authentic Qur'anic and Prophetic Hadiths that are to be recited and observed during pandemics which helped in providing relief to the people to agree.

The respondents were asked about the role of Islamic clerics in Northeast Nigeria in influencing the public to support and accept the COVID-19 vaccine as immunisation, they responded with a simple majority of 295 (59.48%) agreed with a significant percentage of 201 (40.52%) disagreed. This means that the area of COVID-19 vaccine is still not positively influenced by Islamic clerics as expected and that is why the rate of the vaccine intake in Northeast is less than 16% in the Northeast according to NCDC (2022). It means that there is a need to intensify public awareness and sensitisation to understand the purpose and benefit of taking the vaccine in preventing the further spread of the Virus.

On the position of Islamic clerics affects the acceptance and responses towards countering COVID-19 and its protection in Northeast Nigeria, the respondents agreed 387 (78.02%) with 109 (21.98%) disagreed. This means the sermons, speeches, preaching and engagements of Islamic clerics with the public in Northeast Nigeria helped immensely in the counter and prevention of COVID-19 in the zone. This means no agency or institution is as influential as a religious one in channeling people towards adopting practical measures in countering and preventing the COVID-19 pandemic.

On the issue of the role of Islamic clerics contributed to the low cases of COVID-19 by influencing the public to accept COVID-19 prevention protocols, 316 (63.71%) accepted or agreed while 180 (32.295) did not agree. This means that majority believed that it was because of the influential role of Islamic clerics in persuading people to adopt the prevention protocols that the Virus was tamed and its spread was curtailed which perhaps, explained why the Northeast has the lowest cases as reported by NCDC (2022). This implies that if Islamic or any religious clerics played the same influential role in other zones, the cases might have been lower than recorded.

The above are various responses of the respondents that were consulted in the survey. Differently, the informants that were interviewed through direct contact expressed their varied views as analysed below. It should be noted that all the informants accepted that COVID-19 is a pandemic and they have agreed that pandemics has historical and spiritual roots religiously. In an interview, one of the informants narrated that:

Pandemics are religious and they have their roots in religious history and spiritual perspectives. They are believed to have been natural trials, afflictions for generations' sins, tribulations for

disobedience to the Creator and many other reasons by the mercy of our Lord. However, there are ways of responding to them from religious teachings (An interview with an informant on 6 March 2022 at 11 am in Damaturu, Yobe State).

In another similar view, an informant disclosed that

Our religious teachings shaped our understanding of our environment, including pandemics which are well known in Islamic history. The Glorious Quran mentioned in several places how the people of Noah, Joab, Lot, Moses and many others were afflicted with varied nature of pandemics because of their sins and disobedience. Likewise, the Prophet Muhammad (PBUH) experienced pandemics during his lifetime and the companions too suffered the same we were taught from authentic Hadiths how to handle them and respond accordingly. The measures are not contradictory to the current COVID-19 protocols, so adopting them is no harm (An interview with an informant on 3 March 2022 at 8 pm in Jalingo, Taraba State).

In another view, an Islamic cleric submitted that:

Northeast Nigeria and Nigeria by extension, respect religious scholars exceptionally and I believed that one of the reasons why the COVID-19 pandemic was quickly countered in the region is due to a greater influence of the clerics who engaged rigorously the populace in their sermons, speeches, pulpits and all means through the media to sensitise them on the need to understand that the situation has religious root in it and it can be perceived from religious context (An interview with an informant on 10 March 2022 at 2 pm in Maiduguri, Borno State).

In another view, a cleric argued that:

In the public perception and responses toward COVID-19 and acceptance of its protocol and vaccination, there is no doubt that no institution or any public figure that influenced the active participation and values like Islamic clerics in Northeast positively, hadn't it been they presented a negative perspective of the pandemic, it will be practically impossible to make people believe in it even though, some of us id the opposite, but the majority succeeded in influencing the people to accept and adopt measures of prevention including vaccine" (An interview with an informant on 9 March 2022 at 9 in Bauchi, Bauchi State).

Additionally, another cleric submitted that:

In the beginning, some negative utterances of some clerics nearly misled people to disbelief COVID-19 but when we intensify our approach, people readily embraced and perceived the pandemic and that has contributed in positively influencing the way the preventive measures are adopted and accepted (An interview with an informant on 1 March 2022 at 10 am in Gombe, Gombe State).

Also, another Islamic cleric confessed that:

We had to embark on aggressive awareness from the perspective of Islam relying on Islamic sources of Glorious Quran and Prophetic Hadiths to influence the public to accept COVID-19 as a global pandemic that requires caution and prevention. This is because in the beginning, rumours of conspiracy affected people's psychology seriously but Alhamdulillah, we worked hard on that and it paid off (An interview with an informant on 14 March 2022 at 7 pm in Yola, Adamawa State).

Besides the above submission which was extracted from the informants' views, several injunctions and historical causes were identified from the Islamic viewpoints on pandemics. The Holy Prophet (PBUH) recommends and emphasises the relevance of travel bans and quarantine in places contaminated with the disease to mitigate the spread of illness. He said, "*If you hear of an outbreak of plague in a land, do not enter it; and if the plague breaks out in a place while you are in it, do not leave that place*" (Bukhārī, 2014). The second measure from a religious perspective in Islam specifically is social distancing. The Holy Prophet (PBUH) was reported to have observed social distancing to avoid a pandemic. It is reported that a leprous man once wished to pledge his allegiance to him, an act that would require him to touch or hold

the Holy Prophet's (PBUH) hand. Keeping his distance, the Holy Prophet (PBUH) said kindly send word to him that his pledge had already been accepted and that he should return home (Majah, 2011). Additionally, the Prophet (PBUH) taught his companions a prayer that will prevent them from pandemics of all kinds. The Prophet (PBUH) asked them to recite this prayer "*All praise belongs to Almighty Creator who shield me from the epidemic and bestow His many favours on me over many of His creatures*" (Muslim, 2010).

It was reported that during the rule of Caliph Umar, who was one of the four righteous caliphs after the Prophet, Muslims also tried to practice what the Prophet urged them to do in the time of an epidemic. When one of the Muslim armies approached a location in current Syria or in the old Levant, where there was a plague, back in the mid-7th Century, the commanders fell into confusion over what to do. "*Caliph Umar urged the army commander to retreat from the expedition in the face of the plague,*" But the order did not appear to be fulfilled wholeheartedly. Then, he moved to a location to meet with commanders to discuss the situation. When the disagreement continued, he consulted with a diverse range of advisers to reach an ultimate decision. On the spot of argument, Abdurrahman Bin Awf emerged from a short sojourn and inquired about what they were arguing about. When Caliph Umar briefed him, he replied that I have a remedy. He narrated that he once heard the Prophet (PBUH) say that "if you hear of a pandemic elsewhere, do not go there and if it breaks in your place, do not travel outside stay where you are, quarantine yourself". Finally, he settled on the decision to stay away from the plague. "I am returning in the morning, so return as well," Umar said, declaring his decision to retreat. Abu Ubaidah ibn Jarrah, the commander of the army and one of Umar's best friends, who passed away later from the plague, expressed his dislike of Umar's decision, asking: "Are you fleeing from the decree of Allah?". "Yes, we are fleeing from the decree of Allah to the decree of Allah," Umar famously replied. Despite Umar's measures, the epidemic still killed many people. "*The plague led to the deaths of nearly 25,000 Muslims at the time epidemic still killed many people. The plague led to the deaths of nearly 25,000 Muslims at the time*" (narrated by Bukhari).

The above are some of the evidence advanced from an Islamic point of view to justify the existence and respond toward pandemics if they occur. There are several other cases in which space may not allow here to avoid a prolonged discourse that may lengthen the work.

Findings

The study discovered that Islamic clerics are highly revered in Northeast Nigeria to the extent that they can influence public perception and sway their opinion toward a certain agenda setting. Islamic clerics played an influential role in persuading the people in the Northeast to accept COVID-19 as a pandemic and to adopt the prevention protocol. It is reported from the respondents' views and informants' submissions that one of the reasons why the cases of COVID-19 are lower in the Northeast than in any other region in Nigeria is because of the positive role played by Islamic clerics in influencing people to accept that pandemics are religiously obtainable and there are spiritual measures to counter them. The clerics succeeded in making the public perceive that the prevention protocols are not contradictory to Islamic values which invoked their confidence in supporting the approved measures. The study further uncovered that but for the positive role of Islamic clerics in influencing the perception of the people to believe in the COVID-19 pandemic, it may be difficult to have the majority to respond and accept it and that may lead to more cases and more death incidences than the ones recorded currently. The study also found that it is pertinent to allow religious clerics to play their role in issues like this, particularly if it will help policymakers in generating obedience and required response as necessary.

It is discovered that the study further confirmed the earlier findings by Sule & Sambo (2020), the only study that investigated the role of Islamic clerics in influencing the perception on COVID-19 in

Northern Nigeria, those religious clerics convinced the public to accept. In this study, the questions raised are successfully answered from the findings in the field that religious clerics helped immensely in convincing the public in Northeast Nigeria to accept and adopt COVID-19 prevention protocols. The study also confirmed as raised in the research question, that but for the effective role of the clerics, most of the inhabitants in Northeast Nigeria may not adopt the protocols and that may end up escalating the spread of the virus and the number of casualties.

Most of the answers derived from the respondents revealed that the religious clerics might have negatively influenced some perception because of their utterances as speculated in the background of the study and the questions asked. However, the positive role far outweighed the negative role. For instance, about 78% of the respondents believed that but for the role of the religious clerics in preaching, Friday sermons, and other public lectures, people would never cooperate in Northeast Nigeria to accept lockdown, inter-state travel bans, and use hand sanitiser and practise social distancing. But when the religious clerics convinced them that all these strategies were derived or borrowed by governments and health agencies from the Islamic teaching and Prophetic traditions, they readily succumbed and accepted. That means the study established the hypothesis that it aimed to investigate in the background. This finding corresponds with what Sule & Sambo (2020) reported in their study despite the difference in focus, but the same actors are involved which means there is the possibility that the actors may continue to respond in the same pattern if interviewed on the same topic with different focuses.

However, the study is limited by data collection, financial constraints, time and religious focus. Future studies may secure a grant and expand the study. It is good if such effort will come from Christian and traditional religious perspectives to enable comparison and a wider coverage. It is also suggested that other regional studies be carried out because this study only collected data in Northeast Nigeria. Other researchers should endeavour to cover other areas such as Southern Nigeria and other parts of Northern Nigeria. Additionally, other areas such as the response to vaccines, post-COVID settlement, and political economy aspects should be examined to cover all angles in research.

CONCLUSION

The outbreak of COVID-19 pandemics has undoubtedly exposed the globe to vicissitudes of history-making and changes that may influence future life processes in the world. Nigeria is one of the countries that should have a serious concern in addressing the process of preventing and countering COVID-19 because of its population leverage, thereby exposing the country to vulnerability. This is more pronounced in Northern Nigeria and specifically in the Northeast, where religion and culture are playing important role in influencing public perception. This study investigated the influence of religious clerics in the Northeast in making people believe in COVID-19 as a global pandemic and accept the protocols of prevention. The study reported an encouraging trend of the positive role of Islamic clerics in countering and preventing the Virus through rigorous work of influencing the public in their daily engagements in the pulpits, in speeches, in sermons and in media programmes.

Hence, this study recommends that issues that border on health, security, peacebuilding and other public agenda settings programmes should integrate and use religious clerics to influence the public to accept them since the public respects them. Additionally, religious clerics should desist from negative comments and incisive remarks that may trigger chaos or disobedience to the constituted authorities when the issue is critical.

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