T.C.
ISTANBUL AYDIN UNIVERSITY
INSTITUTE OF GRADUATE STUDIES

THE ROLE OF SOFT POWER IN AFRICA: CASE STUDY OF CHINA'S HEALTH DIPLOMACY IN NIGERIA (2014-2020)

DOCTORATE'S THESIS

Usman Aliyu UBA

Department of Political Science and International Relations
Political Science and International Relations Program

FEBRUARY, 2024

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APPROVAL PAGE

DECLARATION

This study avoids research misconduct and irregularities such as fabrication of fake data or results. The study is conducted and supported with credible sources. It also avoids the falsification of data, changing or omission of collected data, and incorrect reporting of the research findings. Plagiarism or copying of other research works without full citation was cautiously avoided and full references were attributed to the original sources. (07/02/2024)

Usman Aliyu UBA

FOREWORD

The success of this research piece is owed to several people whom I appreciate very much. Firstly, I would like to thank my supervisor Assist Prof. Dr. Filiz Katman, who guided me from the beginning to its end. I appreciate the undivided attention she gave to my thesis and the time she put in to read every line and advise me accordingly.

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February, 2024   Usman Aliyu UBA

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ABSTRACT

Nigeria's relations with the rest of the world are not limited to ties with past colonial powers such as the United Kingdom and the West. In recent decades, China has become a global competitor challenging colonial powers and the United States. Beijing has also emerged as a major player on the continent, establishing footprints in many African countries. Chinese institutions have ramped up infrastructure development, loan support, and aid delivery to nearly all African states. This is presumably to improve China's global reputation. As a case study, the thesis focused on China's health diplomacy with Nigeria during the Ebola epidemic and the Coronavirus pandemic. The period between 2014 and 2020 has been a significant period for China's relations with Nigeria, with both opportunities and challenges. The thesis focuses on the concept of 'soft power' adopted by the neo-liberal American scholar, Joseph Nye. It argues that China is using health diplomacy as a tool and strategy for boosting its relationship with Nigeria. A quantitative research method has been applied through a survey to understand the perception of the Nigerian population towards China. As a result, a significant conclusion from the study argues that China's influence in Nigeria is effective. However, many Nigerians still have an unfavorable opinion about Chinese soft power in the country.

Keywords: Africa, China-Nigeria Relations, Global Crisis, Health Diplomacy, Soft Power.

AFRİKA'DA YUMUŞAK GÜCÜNÜN ROLÜ: ÇİN'İN NİJERYA'DAKİ SAĞLIK DİPLOMASİSİ ÖRNEĞİ (2014-2020)

ÖZET

Nijerya'nın ve diğer ülkeler arasındaki olan ilişkisi sadece geçmişteki sömürge güçlerine ve özellikle İngiltere, Fransa ve Almanya başta olmak üzere dayanmakla sınırlı değildir. Son yıllarda Çin, ABD ve Batı'ya meydan okuyan küresel bir rakip haline gelmiştir. Başka bir ifade ile, Çin'in yumuşak güç kullanarak Afrika'daki ABD ve Avrupa ülkelerinin etkilerine karşı büyük bir engel olmaktadır. Pekin'in Afrika'da da çok etkili olduğunu ve birçok Afrika ülkelerinde ayak izleri oluşturduğunu söylemek mümkündür. Çin kurumları, büyük bir gayret göstererek ve Çin'in küresel itibarını güçlendirmek amacıyla, neredeyse tüm Afrika devletlerinde yatırım yaparak, borç kredi vererek, yardım ulaştırarak ve altyapı projelerini hızlandırmaktadırlar. Bu tez, bir vaka çalışması olarak, 2014'teki Ebola salgının ve 2020'deki olan Koronavirüs salgını sırasında Çin ve Nijerya arasındaki olan sağlık diplomasinin üzerine odaklanmıştır. Elbette, bu dönem, Çin'in ve Nijerya ile olan ilişkisi üzerinde hem fırsatlarla hem de zorluklarla beraber getiren bir dönüm noktası olmuştur. Bu nedenle, Çin'in Nijerya'daki sağlık diplomasisinin etkilerini tam olarak araştıran ve anlayan önemli bir dönem olmuştur. Bu tez, günümüzdeki en önde gelen neo-liberal olan Joseph Nye tarafından benimsenen "yumuşak güç" kavramını atfederek, Çin'in Nijerya ile ortaklığını güçlendirmede bir araç ve strateji olarak sağlık diplomasisini kullandığını savunmaktadır. Tezin çalışmasında niceliksel araştırma uygulanarak ve Nijerya halkına anket yapılmıştır. Çalışma, Çin'in Nijerya'daki yumuşak gücünü artırmak için sağlık diplomasisini kullandığını savunur.

Anahtar Kelimeler: Afrika, Çin-Nijerya İlişkileri, Küresel Kriz, Sağlık Diplomasisi, Yumuşak Güç.

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LIST OF ABBREVIATIONS

BP : British Petroleum

COVID-19 **:** Coronavirus

CMT : China Medical Team

CDC : Chinese Centre for Disease Control

COVAX : COVID-19 Vaccines Global Access

FOCAC **:** Forum on China–Africa Cooperation

EU : European Union

GDP : Gross Domestic Product

HIV/AIDS : Human immunodeficiency virus

IGAD : Intergovernmental Authority on Development

MDG : Millennium Development Goals

MoU : Memorandum of Understanding

NEMA : Nigeria Emergency Agency

PRC : People's Republic of China

PHEIC : Public Health Emergency of International Concern

UHC : Universal Health Coverage

UN : United Nations

UNICEF : United Nations Children's Fund

UNITA **:** The National Union for the Total Independence of Angola

UK : United Kingdom

USA : United State of America

NAID : National Institute of Allergy and Infectious Diseases

SDG   : Sustainable Development Goals

WHO   : World Health Organization

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I.   INTRODUCTION

International relations' experts and scholars have been studying the ever-expanding relations between China and African states. During the last decade, China as an emerging global power has ramped up its race to overtake the West. It has consistently maintained a different strategy and pursued an international agenda in contrast with the US and European countries. Consequently, China's rise has sparked debates in the academic world. According to several studies, China as a major global power exhibits controversial political and economic influences within the international system (Yi-Chong, 2014). Cox (2004) argues that countries' strategies to get the result they want through attracting other states to admire and pursue their agenda are likely to be more successful than applying military and economic means against others. Thus, states that use coercion are less likely to succeed than states that use consent to achieve their objectives within the international system. Lina Benabdallah (2020), studies China's relations with Africa, with a particular focus on human development. She categorizes China's contemporary diplomacy in Africa into three main periods: "the anticolonial period, the 1970s developmental period, and the post-2000 (first China-Africa Forum) period." These periods highlighted China's relations with various African states through "investments in human resource development" and how they have succeeded over time (Benabdallah 2020, p. 26). According to Moyo (2016), there are three different types of interconnected perspectives through which China's existence in Africa can be evaluated. The first approach displays China as an independent and "hegemonic force" that aims to re-colonize Africa. The second approach views China as a friendly aspect of the globalization process, delinking Eurocentric dominance to provide opportunities and create room for African states to achieve their goals and objectives. In the third perspective, China is seen as a "sub-imperial" force competing with the "Euro-American" for African resources (Moyo, 2016). However, other scholars claim that China's expansion in Africa began even before the white colonialists, as Chinese mariners arrived in East Africa in the 15th century. Some artifacts including Chinese

coins and porcelain during the 12th century (Wallerstein, 2005). Ersan (2017) argues that other approaches regarding China's relations with Africa are attributed to some scholars who claim that it is "Neo-colonial," "Neo-imperialist," or "Neo-mercantilist," while others argue that it develops within the context of South-South relations, both for China and Africa (Ersan, 2017).

Moreover, other studies have argued that one of the main reasons behind China's growing ties with Africa is the increasing demand for energy and other mineral resources on the continent (Alden, 2007, p. 12). This could be a huge opportunity for China to maintain a stable and strong economy by developing ties with Africa (Cetintas, 2019). According to the 2019 British Petroleum statistical review, the growth in oil demand was dominated by the developing world including China; 0.7 million barrels per day, and India; 0.3 million barrels per day, accounting for nearly two-thirds of the global demand for oil (BP, 2019). Already a large percentage of all China's oil and gas consumption is sourced from Africa, and demand is expected to expand further following the signing of significant agreements between Beijing and several African countries like Nigeria and Angola decades ago (Alden, 2007, p. 14). Expectedly, the "oil-for-infrastructure" contracts provide African nations with what they want, in terms of capital to fund investments, create jobs for the people and grow a robust economy (Moyo, 2009).

Meanwhile, Bayram (2018) argues that China's relations with Africa is not limited only to the partnership between Beijing and all African states on an individual basis. The ties in this case are more understandable as "China's Africa policy" and as part of the general view of how African nations view China (Bayram, 2018). Likewise, Rebol (2010) claims that China is an investor, a donor, and a competitor on the continent. However, according to Alden (2007), there are three possible reasons for China's presence in Africa: China as a "development partner," an "economic competitor," or a "colonizer." China as a "development partner" refers to the process of exchanging experiences with African countries for mutual benefit. China as an "economic competitor" aims at exploiting mineral resources on the continent without considering the needs and concerns of the states. Based on this argument, Africa is underdeveloped due to the influx of Chinese workers on the continent. As a "colonizer," the Chinese took over control from traditional colonizers by building ties with African elites and influencing them socially, politically, and

culturally (Alden, 2007, pp. 5-7).

China's expansion in Africa has been directly linked to the demands of the country's developing economy in the areas of energy, minerals, and other resources (Alden and Alves, 2009). This expansion is forging a diplomatic drive to establish friendly conglomerates with African authorities. It also acquires backing in international forums and enhance China's worldview and long-term market ambitions for her goods and services. China's growing influence in Africa is its economic strength and engagement. Its growing trade and investment in Africa alongside its propagation of infrastructural projects signifies a better view of the future of Africa relative to the intervention from the West. This is still predominantly driven by humanitarian exercises and security. Quite a few Africans view China's involvement in Africa as one that correlates with their own needs as a continent, thereby giving China a significant stake in her development take-off as a nation (Dollar, 2006).

Equally, China has been entangled with the titanic oil producers in Africa namely Nigeria, Sudan, and Angola; thus, Africa supplies at least 30% of China's overall oil importation (Vasquez, 2019). The Chinese government as a way of showing their economic commitment to Africa has given out loans, worth more than $94.4 billion to several African governments and state-owned enterprises between 2000 and 2015 with Kenya, Senegal, and Uganda being top on the list (Oqubay et al., 2019). Apart from loans, the Chinese government has built over 2,233 km of railroads and highways and completed hundreds of various projects in Africa. Stadiums and hospitals were built, and medical and public health practitioners were dispatched to the continent. China also provides training in various sectors and scholarships to the African people. As mentioned previously, after former president Jiang's visit to Africa in 1996, the door to foreign aid and investments was opened while the forum continued to meet every three years (Brautigam, 2011).

Bavier et al. (2021), also reported some reservations about China as a developing economy having per capita income of 10,153 US dollars in 2019, against 45,447 US dollars, involving itself in massive aid projects (Reuters, 2020). They lamented that China only recently became a main financial partner to Africa, as it is still a rising power equally in need of economic and financial investment returns. They raised issue that China's economy is projected to contract within the next three

decades. For the first time, China has indicated small craving to exceed its threadbare playbook of bilateral dialogs with debt-distraught allies (Bavier et al., 2020). One of the strongest elements used by the Chinese Communist Party as a soft power is the Confucius Institute founded in 2004. Since its establishment, the institute has rapidly expanded and opened at least 548 branches in over 150 countries around the world. In Africa, the institute established its first branch in Nairobi in 2005 (Kavas, 2020). Some African countries like Zambia, have adopted the Chinese language as a mandatory course for students after English, perhaps as a strategy to strengthen relations between Zambians and their Chinese counterparts (Emewu, 2019). According to the Afrobarometer (2016) survey conducted in more than 30 African countries, data shows that about 28% of Africans perceive their former colonial powers as having the greatest influence on their countries. This was followed by China at 23% and then the United States with about 22%. Some of the most critical factors contributing to China's positive image are its infrastructural developments and business investments (Lekorwe et al., 2016).

The COVID-19 pandemic caught developed, developing, and undeveloped countries unprepared alike, and caused more damage to the U.S. in terms of death and economic consequences than any other country (Saud and Alvi, 2021). It has wreaked havoc on the global health system and caused anxiety across many states. The pandemic has also pushed states to rejig their foreign policy in their national interest (Fazal, 2020). China leveraged the pandemic to display its benevolent image by extending humanitarian aid, especially to poor countries in Africa and Asia (Gauttam et al., 2020). Beijing has provided support in terms of facemasks, rapid testing kits, personal protective equipment (PPE), and dispatched medical experts to several countries in Africa. Additionally, specialists from dozens of countries interacted with Chinese authorities on how to contain virus spread.

Furthermore, ASEAN countries have maintained close contact with Beijing to acquire more expertise in preventing and containing the pandemic (Saud and Alvi, 2021). The pandemic has witnessed an unprecedented disparity in the distribution of vaccination among states, as a small amount was allocated to African countries (Beaumont, 2021). In April 2021, more than 80 percent was allocated to the rich countries in the West according to the WHO director general. Tedros Adhanom criticized the richer countries' attitude towards vaccine inequality saying it is "not

only a moral outrage but also economically and epidemiologically self-defeating" (UN, 2021). Given the unethical approach of Western countries, the WHO initiated its own vaccine program under COVAX and pledged to distribute over 2 billion doses by the end of 2021 (WHO, 2021). Nevertheless, the WHO has come under huge criticism for its incompetence and mismanagement of the COVID-19 pandemic. World Health Organization-WHO was accused of paying lip service to the Chinese government for appreciating its initial COVID-19 virus prevention efforts. This was at the early stages of the pandemic when China was the first country to impose a stringent lockdown on Wuhan - the origin of the pandemic (Burton, 2020). Although this kind of communication gap is common around the world, several countries have been very slow in reporting previous outbreaks of diseases such as MERS, and Ebola among others (Fazal, 2020). According to Catherine Worsnop (2019), the lack of efficient monitoring capacity and concerns about economic ramifications might hold a country back from reporting an outbreak to the international community. Moreover, the WHO lacks the legitimacy to sanction a country that fails to report the disease (Fazal, 2020). In any case, the Chinese authorities debunked the allegations and pushed for bilateral health diplomacy.

The Chinese government's pursuit of health diplomacy during the COVID-19 pandemic has been described as a tool for enhancing its soft power (Knight, 2020). Scholars have argued that China's health diplomacy was aimed at reshaping the narrative for political leverage. The Chinese government used its resources for countering accusations that it failed to inform and prevent the virus at an early stage. The pandemic is also characterized by big rivalry between China and the U.S. blaming each other for the origin virus's origin.

The former American President Donald Trump called it the "China virus" on numerous occasions. While Chinese officials responded on several platforms by saying that American officials are disturbed by China's efforts to support poor countries. They also said that the U.S. might have been the culprit for the origin of the virus (Chunshan, 2020). In any case, China has adopted both a defensive and offensive strategy (Cabestan, 2022). On the one hand, Chinese officials launched a disinformation campaign claiming the virus was initially brought to the country through American athletes during the international military games that were held in Wuhan province in 2019. On the other hand, the Chinese government demonstrated

itself as a responsible global power and a role model member of the international community, especially the WHO (Xinhua, 2020). It boasted about the Communist government's competency in tackling the health crisis through proper management and capitalized on the weaknesses of countries in the global north and south. Certainly, China has promoted the idea of "nationalist discourse" as well as a world champion capable of tackling a global pandemic (Zhao, 2022).

Several reports suggest, however, that China put enormous pressure on the WHO to postpone the declaration of the virus until January 30th as a public health emergency of international concern (PHEIC), and until March 11th to raise it to the status of a pandemic, reducing county-based and international efforts to tackle COVID-19 (Cabestan, 2022). Arguably, the WHO failed to thoroughly inquire about the virus' origin and control, and the Chinese authorities changed the narrative by not allowing the outbreak to be labelled "Wuhan Virus" but instead COVID-19. This is partly due to the high dependency of the organization on rich countries like China. No doubt the WHO's attitude to bow to China's pressure and its failure to direct China on how to contain the virus has cost mankind a heavy price worldwide.

Notwithstanding China's control of the pandemic, the way it approached the WHO experts deployed for investigation has generated many debates over China's lack of transparency and accountability. Furthermore, several reports have indicated much higher number of cases and deaths as against what the Chinese authorities reported - nearly 130,000 cases and less than 5,000 fatalities from early 2020 until 25 February 2022 (BBC, 2022). Although China was at the forefront of medical aid delivery to countries, especially in the global south, it was criticized for combining humanitarian efforts alongside commerce, which led to the impression that it was capitalizing on the pandemic rather than being the so-called most "generous country" worldwide (ChinaPower, 2022). Developed countries compete fiercely to produce vaccines against COVID-19 and China was not left behind in fact, reports suggest that Chinese authorities were very willing to deliver millions of doses of its vaccines to poor countries even before approved by the WHO. Moreover, China joined the COVAX program and contributed to the delivery of millions of vaccine doses to undeveloped countries in the global south (Cabestan, 2022). China's efforts to contribute masks, PPE, medical equipment, and vaccines to poor countries have generated more appreciation from poor countries than condemnation over its

inability to properly manage COVID-19. However, the pandemic has also deepened the already-existing animosity between China and the West.

China has fully engaged in vaccine diplomacy to help poor countries since locally made Sinopharm was approved in December 2020. The Sinopharm vaccine was the first Chinese product approved by WHO in May 2021, followed by the CoronaVac vaccine in October 2021. These vaccines account for nearly half of the world's vaccine distribution with CoronaVac being the most frequently used vaccine more than Western-made vaccines (Mallapaty, 2021). Notwithstanding the low efficacy level of the Chinese vaccine compared to Western-made such as Pfizer and BioNTech, China, however, claimed to have contributed more doses than any rich country worldwide (Leng, S, and Yuwei Hu. (2021). Several studies indicate China's global image and reputation had slid down a bit particularly in Africa compared to pre-pandemic time (Sanny et al., 2020). It is obvious that China is perceived positively in many African countries. It has been trying to regain confidence and win hearts and minds by involving itself in several projects and debt restructuring.

One of the significant components of the intense transformation occurring in the global political space is the dynamic growth in the rapport between China and Africa. As one of the first among developing economies to formalize its affiliation with Africa, irrespective of several years of historical aptitude for skirmishes against humanistic aspirations and imperialism, China's involvement with African economies continues to grow as witnessed by its varying levels of involvement in the energy, mining, cobalt, copper, and health care industry. For over 60 years, China has assisted Africa medically in various forms and capacities with records of remarkable contributions to the continent`s health care sector (Sun, 2014). In 2014, several West African countries including Nigeria encountered the deadliest Ebola viral disease outbreak in modern history. The epidemic highlighted the massive failure of the "global health governance" particularly in Africa (Fidler, 2014). For nearly a century, notwithstanding the consequences caused by World War II and the subsequent global economic crisis, the universe has never come to a standstill, as humanity surrendered to an invisible enemy—the Coronavirus disease; COVID-19. Having been contracted by many, killed millions, and ravaged the strongest international economies, the year 2020 will be remembered as one of the most tragic periods in the history of the modern world. The Coronavirus pandemic has taught

humanity the need to revisit and strengthen international responses to a worldwide crisis.

To further portray its obligation to Universal Health Coverage (UHC), China has collaborated with African governments to assist them in building capacity for UHC by focusing on improving pharmaceutically essential drugs, transferring technology, and training medical workers (Cheng, 2015). During the outbreak of COVID-19 in 2020, China's growing involvement in global affairs attracted more attention from the rest of the world. This research aims to answer the question: What is the role of China's health diplomacy in Nigeria from 2014 to 2020? China's relations with Africa have gone through a critical period during this period, presenting both opportunities and challenges.

It is worth noting that although the motivations for these interventions are relatively limited, their strategic impact as a diplomatic strategy to enhance China's international image and influence has been harshly criticized (Huang, 2017). A trip down historical lanes seems to support this perspective. Reviewing the 1950s and 1960s, China's connection with African nations was first an attempt to pawn Taiwan's recognition as China's main representative and rack up votes for the subsequent denunciation of Taiwan's qualifications at the UN. Second, it was to compete with both the West and Russia (Lyman, 2005).

Gauttam et al. (2020) argues that China has been using the COVID-19 pandemic as an opportunity to further push its "Health Silk Road" diplomacy and boost its geo-political and geostrategic agenda. The criticisms against China's handling of the virus notwithstanding, the country has handled the pandemic compared to the US and several European countries, which have remained at crossroads in their handling of the pandemic (Campbell, 2020). Although, no scientific evidence has proved the origins of COVID-19, including research findings from the World health organization (WHO, 2014). The pandemic has been politicized, with the US and several European countries pointing fingers at China for covering up its mishandling of the virus and spread beyond its borders. Beijing has repeatedly denied all allegations and called for more global responses to the pandemic. Despite Beijing's criticism from the West, business continued as usual regarding China's relations with African countries. There has not been strong official condemnation or perhaps "bandwagoning" attitudes from most African nations in

terms of aligning themselves with the West to heat up anti-Beijing sentiments. During the early days of the pandemic, some African countries including Nigeria summoned Chinese envoys to their respective ministries of foreign affairs. They interrogated them about what they perceived as "racist" attitudes towards their fellow Africans. On the one hand, government-level responses from Africa have quickly shifted from a strong critique of China to a soft return to a mutual relationship. However, China's economy has shown a strong growth trajectory amidst a global recession especially during the pandemic (Bermingham and Wang, 2020). Nevertheless, the economic fallout from the pandemic was the "recession" experienced by many African countries and which pushed several indebted African countries to raise eyebrows and request China to postpone or suspend their debt (FT, 2020). In addition to the perception of China as acting opportunistically, concerns have also been raised as to whether China has the wherewithal to expand and sustain its health obligation to Africa.

Case study selection

Nigeria is the most populous country on the African continent. The country has many opportunities and potential challenges of all kinds, including political, economic, and social ones. The country was supposedly better off as a sovereign state. However, since its independence from the British in 1960, many challenges remain, partly due to poor governance. Despite Nigeria's oil and mineral reserves, many Nigerians grapple with a lack of a safety net and health problems. There are several health challenges from both communicable and non-communicable diseases facing the population. Millions of Nigerians are vulnerable to diseases and are more likely to die due to the lack of preventive measures. The country records disease outbreaks that kill thousands annually (Aregbeshola, 2012). Despite a high mortality rate, the country has failed to learn from experiences caused by disease outbreaks. Ostensibly, several governments have failed to improve the country's emergency response to tackle diseases. Public health specialists have suggested that Nigeria should create an agency that oversees emergency response and preparedness before an outbreak (Isere et al., 2015). According to a report by the World Health Organization (WHO), Nigeria is among the developing countries worst hit by non-communicable diseases (Aregbeshola, 2012). In addition, for the communicable diseases, Nigeria records 3 to 5 million cholera outbreaks that kill more than one

hundred thousand lives every year. Like in many other developing countries around the world, women and children are mostly vulnerable to both communicable and non-communicable diseases in Nigeria.

Nigeria operates multi-dimensional health care services delivered by the public and private sectors. But the healthcare provision is offered at three levels of government namely federal, state, and local. The primary system is operated and managed by 774 local government areas (LGAs) across the country, with the support of the respective state health departments and the private sectors. The secondary system is run and managed by the ministry of health. While the tertiary system is administered by teaching and specialist hospitals under the federal ministry of health. The secondary and tertiary systems also collaborate with government and non-government organizations (NGOs), and private medical professionals (Adeyemo, 2005). However, for many years Nigeria's overall health care system had a record of poor performance, given that the primary health care system, which is the backbone of the country's health service is in dire condition and has been battered by incompetence, corruption, and inadequate medical infrastructures (Irinoye, 2014).

Incompetent health care workers and under-qualified staff are some of the biggest challenges facing the Nigerian health sector. The country has failed to meet the WHO ratio of one doctor per five hundred patients (WHO, 2006). Most public hospitals and emergency units across the country are overwhelmed with patients who arrive early in the morning and queue for many hours to receive treatment. On several occasions, some patients have lost their lives while waiting to be attended to by overwhelmed health workers. Experienced and qualified doctors and nurses are more likely to work in private hospitals or seek employment outside Nigeria. This is where they will receive better pay and work in a safe and secure environment. While underfunding of the health sector has left many public health workers untrained for professional services (Omoleke and Taleat, 2018). Primary and secondary healthcare at the local and state levels has dilapidated infrastructures, rampant electricity cuts, or a total lack of energy needed to operate critical medical equipment. Essential advanced technologies used in testing and diagnosing diseases are mostly unavailable or outdated, which results in the premature or unfortunate death of patients, especially women and children.

Most Nigerian health workers succumb to despair, psychological stress, and

frustrations due to the superficial absence of a complement to their duties by the authorities. Compared to several developing and developed countries, the Nigerian government rarely rewards doctors and nurses with adequate pay and better salary and allowance increments. These often result in incessant strikes and brain drain of health professionals in the country (Omoleke and Taleat, 2018). Rampant insecurity and political unrest in several regions across Nigeria harm health sectors. This is a major concern for doctors, nurses, and health specialists who refrain from working in hostile environments prone to violence and killings. Agitations by separatists and successionist groups especially in the Niger Delta region have resulted in the underdevelopment of the region. This has made it harder for federal and local governments to build and develop health facilities there (Omoleke and Taleat, 2018). In the Northeast, terror groups including Boko Haram and ISWAP have damaged hospitals and health facilities, especially in remote areas. They have harmed innocent workers and patients. In the Northwest and Northcentral, kidnapping for ransom and banditry have resulted in the forced disappearances and killings of thousands of civilians.

Institutional corruption has been a cankerworm that severely deteriorates the health system in Nigeria. It replaces professionalism with nepotism and favouritism as in several instances where authorities in major teaching hospitals temporarily hire health specialists from the private sector. This is just for the sake of passing inspections by officials assigned to supervise and scrutinize health facilities. In other instances, what is unethical is the bribery of doctors, nurses, and pharmacists to transfer patients to private hospitals without profound reasons or paying much attention to the people (Omoleke and Taleat, 2018). Job racketeering is another unethical behaviour in Nigeria's health sector. Unqualified workers can pay a stipulated amount of money to corrupt officials who offer them a job in hospitals or public health facilities. Mistreatment and lack of mutual respect in hospitals have resulted in unhappiness in the hospitals, as in many instances where doctors and nurses are accused of maltreatment. Pregnant women have reported several cases of abuse and harassment during labor by nurses in delivery wards (Omoleke and Taleat, 2018). Consequentially this may lead to premature death or violent responses by the patient's family members. Nigeria has been plagued with infectious diseases for decades (Fatiregun et al., 2017). Some notable outbreaks of the disease include

Ebola, Lassa fever, Cholera, and Monkeypox (Garba et al., 2020). In Africa, the first Ebola outbreak was discovered between 1975-1976, in the Democratic Republic of Congo and Sudan (Shears et al., 2015). The virus re-emerged again in 2014, in Guinea and spread very fast to Liberia and Sierra Leone. WHO declared the Ebola outbreak in August 2014 an "international health emergency" after crossing international borders (Adelakun et al., 2017). The first Ebola virus case in Nigeria was detected in July 2014, when a sick traveller arrived at Murtala Mohammed airport in Lagos. He was admitted to a hospital and diagnosed with virus symptoms (Shuaib et al., 2014). Nigeria's Federal Ministry of Health declared the disease an emergency based on the advice of the National Centre for Disease Control (CDC). Subsequently, an "Ebola Incident Management Centre" was established by the Ministry of Health in collaboration with the Lagos state government and international partners (Shuaib et al., 2014). During the Ebola epidemic in Nigeria, there was a shortage of experienced doctors and nurses. This was intertwined with a lack of sophisticated medical facilities and government action for prompt surveillance and control of the disease (Adelakun et al., 2017). The first patient, who was exposed to the virus died of the disease (Shuaib et al., 2014). Some doctors and nurses also succumbed to the virus and died (WHO, 2015). After reporting over 28,600 cases and recorded fatalities of more than 11,300, the WHO officially lifted the Public Health Emergency of International Concern regarding the Ebola virus in West Africa.

In 2018, Nigeria recorded its largest Lassa fever outbreak caused by a virus and characterized by a viral haemorrhagic illness. It can be spread to humans through various ways including contact with urine, faeces, food, or households already contaminated by rats as hosts of the virus (Du Toit, 2018). The virus was first discovered in 1969 in Lassa town northeast of Nigeria by American medical practitioners, three of whom were killed while studying the virus Grady, D. (2015). Some of the symptoms of an infection include coughing, sore throat, abdominal pain, and nausea. The disease is common in West African countries like Nigeria, Sierra Leone, Guinea, and Liberia. It has reported cases ranging from 100,000 - 300,000 and recorded fatalities of at least 5000 every year (Adelakun et al., 2017). The Ebola epidemic and the Lassa fever outbreak have highlighted how essential national and international responses are to contain the spread of an unknown disease in the future.

It was therefore assumed that lessons learned from previous epidemics and outbreaks might lead to a robust emergency response. In addition, it might contribute to effective preparedness and monitoring of unforeseeable diseases (Garba et al., 2020). However, many lapses and challenges were encountered in the early days of COVID-19. This was particularly due to a lack of essential equipment and facilities in most public healthcare centres. In 2020, Nigeria's already fragile health system was hit by the COVID-19 pandemic. In comparison with the previous epidemics and outbreaks, the country had a shortage of doctors and inadequate health facilities when the pandemic struck. Funding for public health care has long been low. Although the Abuja declaration has demanded African leaders to allocate at least 15% of the annual national budget (Okunola, 2020). However, several past Nigerian governments had allocated less than 10 percent of annual budget to the health system, an indication of poor funding for the public health system in the country (Babaranti, 2017). As a major ramification, many hospitals across the country were unable to treat COVID-19 patients due to inadequate facilities and equipment. It is worth mentioning, however, that the Federal Ministry of Health in collaboration with the NCDC coordinated responses to prevent the virus from spreading. In March 2020, an Emergency Outbreak Committee (EOC) was established alongside an Incident Action Plan (IAP). Eight pillars were then identified by authorities - Point of Entry (POE), Laboratories, Epidemiology and Surveillance, Infection Prevention and Control, Case Management, Risk Communication, Logistics, and Coordination. Hospitals were mandated to set up isolation and treatment centers, laboratories were equipped with essential equipment including PCR technology for virus testing, and some staff were trained on how to manage the cases, test the patients, and track contaminated patients (Oleribe et al., 2020). As a result, Lagos and Ogun states were the first to deploy resources for contact tracing, testing, and isolation of confirmed COVID-19-positive cases. Another measure taken by the Nigerian health authorities was vigorous campaigns to educate the public about the COVID-19 pandemic risk. The government used several means of mass media including television, radio, social media, and newspapers to inform the public. Additionally, people were encouraged to maintain social distancing and wear facemasks in public. They were also encouraged to wash their hands regularly, use sanitizer, and maintain a hygienic environment (NCDC, 2020). Nigerian borders were closed and lockdown measures in the three most affected states were implemented as cases spiked (Omeiza, 2020).

Moreover, other states have followed suit after recording positive COVID-19 cases. Social gatherings were banned, and religious gatherings of more than 20 persons were also prohibited according to the lockdown guidelines. In some states, security forces were deployed to enforce the lockdown. Markets were shut down according to the directives except for essential businesses providing essential items including food, fuel, and gas. However, despite the aggressive measures imposed by the Nigerian authorities, the number of COVID-19 cases has increased across the country (Omaka-Amari et al., 2020).

In 2020, China was one of the success stories that put public health policies into practice during the COVID-19 pandemic. In addition, China is becoming the country with the fastest growing influence and a strategic partner with Africa after the US. The study attempts to explore the role of China's soft power on African states by selecting Nigeria as a case study. The country provides a crucial basis to understand Sino-African relations in several aspects including health diplomacy. Primarily, Nigeria's long-standing relations with Beijing date back to the 1970s. For decades, Nigeria has been one of China's top strategic partners in Africa. Regardless of the strategic partnership between Nigeria and China in terms of economic and political points of view, little has been done in scholarly literature about the health diplomacy between the two countries. Moreover, Nigeria is the most populous African nation, and one of the largest economies on the continent. The country's strategic position makes it vulnerable to diseases and epidemics transmitted into the country by travelers and foreign visitors. Given the poor health infrastructure in Nigeria, health diplomacy has become imperative for the country.

In recent years, the Chinese government has disbursed substantial amounts of foreign aid to Nigeria, particularly during the Ebola epidemic and the COVID-19 pandemic. The foreign aid has gone a long way in helping Nigeria to manage spread of the diseases. Arguably, the country is somewhat prepared to respond to health emergencies and has strengthened its public health capacity. The government has implemented public health measures to reduce the spread of diseases. The Chinese-funded infrastructure projects have also greatly improved access to healthcare for millions of Nigerians. However, one of the major challenges this study faces is the lack of adequate information from the Chinese authorities regarding the amount of foreign aid allocated to the health sectors in Africa. Although Chinese officials often

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announce the total amount of aid package delivery to support cooperation with Africa, it is hard to mentioned how much of the fund was allocated to medical aid. Some studies have shown that the lack of transparency indicates China's effort to avoid backlash both from within its territory where poverty still exists and from the African states who seek for more funding for their health sectors (Lin et al., 2016). Others have pointed out that it was also difficult to ascertain the exact number of doctors dispatched to Africa for medical aid (Li, 2011). Another challenge of this research is the lack of adequate data on the number of Nigerians who embarked on health trips to China for healthcare treatment from 2014 to 2020. There is the substantial issue of under-reporting of COVID-19 infections and the death toll in many countries. Although under-reporting occurs in every disease outbreak globally; however, keeping track of COVID-19 cases in developing countries has been particularly difficult partly due to a lack of transparency and accountability in the government system (Kisa, 2020).

Objectives of the study

This study therefore aims to explore Sino-African partnership in terms of health diplomacy during the period of 2014 and 2020; as a significant period to fully investigate and understand the patterns and impact of China's health diplomacy in Nigeria. While official data from the UN shows that Africa has not been the hardest-hit region by COVID-19 unlike the US, Europe and Latin American countries, the pandemic has ignited unprecedented and tremendous efforts from many African states struggling to improve health security through bilateral relations with other nations. This study examines Nigerians' perceptions regarding China's health diplomacy as a soft tool in their country.

Structure of the thesis

This thesis is divided into seven chapters, including the introduction, which explains the research questions and the literature review. Chapter 2, titled Conceptual and theoretical framework, details the literature review about soft power particularly from the neo-liberal perspective, as the theoretical framework for this thesis. It also examines the different definitions and explanations of soft power. It also elaborates on why Joseph Nye's argument is among the most relevant theories that fit this study. Furthermore, Wu's (2018) and Brand Finance's (2021) soft power approaches have been used to conceptualize the main argument of the study. Chapter 3, History

of Sino-African Relations, examines the colonial powers' interest in Africa vis-à-vis China's relations and shared identities with African countries. As a historical context for the study, the chapter examines differences between the West and China's past relations with the continent. Chapter 4, China's health diplomacy during the Ebola epidemic, discusses bilateral relations between China and Africa, particularly through health diplomacy. It analyses China's past diplomatic efforts to support African nations, particularly during the Ebola outbreak. These became pivotal moments for China's bilateral relations with the continent. Chapter 5, China's health diplomacy during the Coronavirus pandemic in Nigeria and explains the international struggles for the development and securing COVID-19 vaccines, particularly in the global south. The chapter explains the unfair distribution of vaccine roll-out and how rich countries overtake the global south. The chapter focuses on how China is exploiting the gap to display a positive image by distributing vaccines through bilateral agreements and via the World Health Organization scheme to help many African countries. Chapter Six, aimed to understand China's strategies in a specific African country as a case study. This chapter discusses China's relations with Nigeria and the significant role Nigeria as a strategic partner in Africa. A survey was conducted to explain and understand China's pursuit of soft power through health diplomacy in Nigeria. Chapter Seven entails conclusion, discussion the role of Africa in China's global pursuit of soft power. It explains the significant role of health diplomacy in the post-COVID-19 period, but also critically explains how too much influence from China could harm Africa. Future studies have been discussed in this chapter.

II.   CONCEPTUAL AND THEORETICAL FRAMEWORK: SOFT POWER

The conceptual framework of this study is designed to explain the key concepts related to this thesis research. Thus, it is important to take into consideration concepts such as power, soft power, diplomacy, and health diplomacy to provide a more comprehensive understanding of the topic and to enhance the main argument of the research.

A. Power

The concept of "power" in global politics has taken on a multifaceted meaning according to international relations scholars. For many scholars, including realists and their critics, power refers to using material resources against another state's interests (Barnett and Duvall, 2005). Similarly, Carr (1964) treats power explicitly through the lens of one of the main classical disciplines of international relations, "realism," as opposed to the "utopian" approach. Carr's studies split power into military, economic, and propaganda. This is like the use of threats, violence, non-violent sanctions, or pressure (Carr 1964). Others also treated power by attaching it to a realist perspective: the process of using material resources to compel another state to do something it does not want to do (Mearsheimer, 2001). Power, according to Barnett and Duvall (2005), is "shaped by the effects produced in and through social relations on actors." According to them, the concept of power has two dimensions: "the type of social relationship through which actors' capacities are affected (and effected)", and the uniqueness of such relationships. (Barnett and Duvall, 2005).

In the first dimension, power is exercised as social interactions or constitutions. Through interaction, power becomes an attribute that an actor can use intentionally to influence others' actions. In comparison, the other part is composed of power as a "social relation of constitution" that constitutes actors as "sociable beings with their respective capacities and interests." The interaction and constitutive

dimensions of power reveal further characteristics of the effects. There is a strong likelihood that power is exercised through the object's interactive behaviour. However, it is perceived as constitutive through a producing effect in terms of the actor's social identity and position (Barnett and Duvall, 2005). In the second dimension, "specificity of power" is concerned with how specific the social relations between objects and subjects are. The specific relations could be immediate and usually "causal or constitutive" relations between the subject and the object, or between two actors. For more clarity, the two dimensions were further classified into four classifications – described as the "fourfold taxonomy of power" (Barnett and Duvall, 2005).

Compulsory power

Max Weber (1947) defined compulsory power as the "tendency of one actor within a social relation willing to act against the resistance of the targeted subject and regardless of the basis of the probability existence". Likewise, Blau (1964) defined it as the use of negative sanctions to influence the behavior of the subject. However, Dahl (1957) described "power as the ability of X to get what Y otherwise would not do". He further expanded his view into three features. First, there is a desire from X, which wants Y to carry out an action in a particular direction. Two, there must be "conflict of desire", in way that the Y will be compelled to change its behavior. Three, the use of "material and ideational resources" by X that will coerce Y to change it behavior (Dahl, 1957). Bertrand Russell (2004), claimed that power is *the production of intended effects."* To get the intended effect, power must be observed and contextualized. It depends not only on resources, but also upon the relational interplay between the wielder and the target. In some cases, certain resources cannot be used towards a goal. In others, resources produce unintended effects. In yet others, one resource may get the same outcome as another, but at a significantly higher price. This could be a higher price due to the inefficient choice of resources to expend. It could also be simply because a party the wielder wished to influence was less inclined to be influenced and fought back (Russell, 2004). As a result, it is imperative to look at the different types of power, and the different resources, that may be used to accomplish a state's goals.

As Baldwin (2002) claimed, compulsory power is not only restricted to

material resources but also involves "normative" and "symbolic" means. Civil organizations or non-government organizations can deploy normative resources through shaming strategies like protests, or condemnation to push targeted states to change their policies. According to Barnett (1998), some states have used symbolic sanctions to compel others to change their policies. International organizations also used their specialists and legal authorities to compel both states and non-states actors to change their attitudes (Barnett and Finnemore, 2004).

Institutional power

The main difference between compulsory and institutional power is that the former involves the use of "direct control" while the latter emphasizes the use of "indirect control" (Barnett and Duvall, 2005). Institutional power is defined as sets of rules, principles, and values that constrain the activity of "already-constituted actors" with fixed inclinations. Neoliberal scholars, however, have argued on how states with similar interests create international institutions or arrangements to checkmate the power of states, leaving the assumption that institutions are the remedies to power (Keohane and Nye, 1977).

According to Nye (1990), power has been historically judged by countries' military and capacity. Other factors such as population, land and mineral deposits, political stability, and economic strength are also critically significant (Nye, 1990). If a state had a strong navy, a well-trained army, and economic and demographic capabilities, it would likely be able to coerce, force, or bribe its neighbors into compliance with its objectives. In addition, applying these resources might encourage neighbors to maintain a balance against a powerful state.

Structural power

Structural power is an international cooperation between structure A and B positions (Bhaskar, 1979). Master-slave relationship and capital-labor relationship are classical examples of this school of thought, showing how individuals, communities, and human beings are interrelated to one another and that the social relations, the interests of actors, and their capacities are shaped by the social positions they tend to occupy (Barnett and Duvall, 2005). Scholars who studied institutional power argued that institutions and structures have similar features. World-system theorists believe that economic production structure creates a

particular set of classes of states described as core, semi-periphery, and periphery. According to this school of thought, "identities", and "interests" play an important role between the dominant and the subordinate (Wallerstein, 1996). Theorists from the world polity school contend that international and non-governmental organizations are better served by the institutionalization of an international authority structure based on accepted legal norms and values (Boli and Thomas, 1999).

Productive power

According to Macdonell (1986), productive power refers to the social process, the knowledge system, and the discourse by which meaning is produced, altered, experienced, or transformed. The concept includes the identification of socially disadvantaged or advantaged persons, their capacities for action, and their propensity for action; multiple social subjects are not based on a binary hierarchy (Barnett and Duvall, 2005). Scholars suggested that the best analytical framework for the study of productive power in international relations is to consider the discursive production of the subjects, the making of meanings, and the setting of terms of action. "Civilized," "Western," "European," "democratic states" and "rogue" are some representatives of the productive power, and these are examples of social classification that creates asymmetries between social capacities (Doty, 1996).

B. Soft power

As discussed earlier in this chapter, international relations theories like neo-realism and neo-liberalism seek to explain how sovereign states pursue their own interests for survival and development. On the one hand, neo-realists, such as Waltz (2010), claim that states are concerned with "relative gains," meaning interests pursued in comparative terms. On the other hand, neo-liberals argue that states are more concerned with maximizing their 'absolute gains', meaning gains assessed through shared interests (Burchill, 2013).

Joseph Nye (2005) proposed two classifications of power. First, there is "hard power," which includes the use of military force against another country or the use of economic sanctions and tariffs to cripple other countries' economies. Second, Nye (2005), identified "soft power," which includes a country's history, geography, cultural diversity, economic strength, social pattern, democratic development, civil

society organizations' prevalence and impacts, science and technology infrastructure, and values like the arts and sports (Nye, 2005).

Hard power has been the standard issue in history, particularly since the early days of the Cold War. Even though people already recognized the significance of culture and ideas as influential arms for policy realization. However, it was until the 1980s or thereabouts that Joseph Nye coined the term "soft power" and theorized its importance. Nye (2004) explained, "Soft power is the ability to obtain what you want through attraction instead of payment or coercion." People will follow the expected direction without resistance if they are able to make others deliver a desired result. Hard power on the other hand is born out of a nation's economic and military might and therefore confers on them the ability to strong-arm. Soft power emanates from a nation's policies, political ideas, and culture. In terms of soft power, policies perceived as legitimate by others culminate in a country's soft power (Nye, 2004, p. 256). Nye also described the three major resources of a nation that can be used to measure its soft power including foreign policy, political values, and culture (Nye, 2004, p. 11). Broadly speaking, soft power is based on influence and persuasion and not military or tactical coercion, which hard power relies on. (Wilson, 2008, p. 114).

Nye (1990) originally limited the soft power definition to foreign influence excluding investment, aid delivery, and diplomacy. The concept presents "oxymoronic" characteristics that spark debates among scholars over the precise meaning and understanding of the term (Nye, 2017). However, policymakers have tried to use the notion of soft power embedded in social values and public diplomacy to reshape foreign policy. While most scholars have in the past focused on the influence of the West including European countries and the United States, Ullah (2005), argues that the influence of China's soft power has recently become the prime focus of many researchers attempting to understand the efforts made by Chinese actors to impose their global agenda through social values and public diplomacy.

Such persuasive influences are further cemented if there exists a sense of legitimacy assigned to the policies of such a state by the nation it is eyeing or by the international community. Growing globalization as seen by the rising engagement in interaction between countries, as well as the enhancement of ease of information through the internet, has paved the way for more nations of the world to exploit its

"soft power." This is important for public diplomacy and national branding in line with the responses they wish to evoke amongst nations of the world, to gain influence and respect. In retrospect, the information revolution has given much power to networks and virtual communities, regardless of national physical borders. The dissemination of information and knowledge has become an important attraction source and as a tool for "soft power" (Nye, 2004, p. 31). The increasing awareness about soft power in the information age is partly attributable to the by-products of society and the economy and not mainly traceable to the action of any government as it relies on attraction tools and principles of culture, entertainment, communication, etc. To garner influence in a discreet but subtle manner (Nye, 2004, p. 32).

Also tagged as the "second face of power," as it indirectly enables the achievement of the desired outcome, soft power does not just apply to states, nations, or politics, but also to international institutions, politics, and other ramifications of life. Nye (2004) asserted that coercion is not as effective as seduction as seen in numerous values like human rights, and democracy. However, soft power has inhibitors that work against its influence such as when culture, values or policies are repulsive instead of attractive. Governments find it harder to acquire or exercise soft power, as many of its significant elements are not within governmental control, and its indirect mode of operation takes years to yield (Nye, 2004).

Measurement of soft power

Scholars and international organizations have developed methods of measuring a country's influence on another country. A country's soft power could be determined through several factors, such as economics, culture, and social and political factors. Below are some of the well-known methods developed by scholars and international institutions regarding soft power influence on another country.

Irene Wu's soft power rubric

Irene Wu's Rubric (2018) was premised on communication and social interaction between humans as critical for cooperation, even though only the two are not required for cooperation. However, without them, she acknowledged that there would be no cooperation. Her framework is based on measuring the magnitude of social interactions between people in different nations to deduce the potential intensity and scale of influence they both have on one another. As depicted in the

table below, her "soft power rubric" highlights four kinds of social interactions. If someone is interested in or influenced by a foreign nation, they might watch a movie from that nation. They might also visit the place, attend school there, or completely migrate (Wu, 2018).

Wu's studies (2018), in political communication, social capital and foreign policy have measured soft power using unconventional and conventional methods. Conventional methods use variables such as number of tourist visitors, cultural interactions; immigrants etc. for their measurement and on the long run possibly generate datasets for measuring soft power using transparent data collection methods that is repeatable over time. For greater clarification, this method is as the national GDP datasets used in the field of Economics (Wu, 2018). Unconventional methods however, dealt with trailing digital content to their generations, determining the physical connections and generating meaningful insights from it. Unconventional measures rely on digital data, which although is more challenging to use, helps to bring in the effect of digital communication in measuring the construct. This is critical, because cyber space hosts wealthy evidence of how influential and attractive a nation is to another nation. The simple link however between conventional measures and the unconventional is in education and entertainment. Movies and other entertainment forms have a huge presence online; therefore, assessing participants in this light will expose a new international relations community. In addition, the e-learning delivery systems are rapidly increasing and hold some promise for studying transnational relations (Wu, 2018). McClory (2016) likewise developed an annual index ranking nations according to their soft power using cultural output, quality of government, diplomatic infrastructure, etc.

Equally The RAND Corporation (2005), proposed measuring soft power by using the effectiveness of non-state actors in international negotiations. Furthermore, Ernst and Young (2012) released a soft power measuring index for rapidly developing economies, identifying India, Russia, and China as the three biggest soft powers in terms of rule of law, integrity, immigration, tourism, and global media image. Pew Centre (2002) in an Attitude survey, measured American soft power using a public appraisal of its scientific and technological advancement, culture (spread of American customs, TV, music, and movies), politics (America's democratic stand), and economy (how Americans do business). The method was

described however, as more useful in cross-national contexts in which comparisons are made to determine the specific superiority or inferiority of soft power resources per domain (Pew Centre, 2002). Lastly, as reported by Jhee and Lee (2009), two distinct dimensions of evaluating soft power can be achieved based on normative and affective insights i.e., matching two essential perception sources of soft power legitimacy and attraction. Affective dimensions entail using national assets such as scientific advancement, political development, cultural richness, economic competitiveness, and other attractions suitable for emotionally connecting with people from other countries. The normative dimension on the other hand involves relying on economic contributions, international aid for resolving humanitarian issues and complying with international norms that strengthen a nation's legitimacy. This is premised on Nye (2004), postulation of attraction and legitimacy being the constituents of a nation's soft power. This, he also claimed, is supported by current empirical studies in the field of social cognition proposing that perceptions between groups can be framed based on the evaluative dimensions of competence and morality. Even though these measures shed more insight into the origins of soft power, their common weakness as noted by Wu (2018), is their focus on the nation projecting the soft power and not on the way it is received by the recipient nation. In addition to this, their data sources might not be readily translucent or replicable as required.

Brand Finance soft power index

Brand Finance (2020), defined soft power as "a nation's ability to influence the preferences and behaviors of various actors in the international arena (States, Corporations, Communities, and Publics etc.) through attraction or persuasion rather than coercion." The institution launches a highly comprehensive research study on perceptions of soft power, with a survey of 55,000 people across over 100 countries. Sampling the responses from both the public and specialist audiences in an online interview, they used three key metrics: Influence, Reputation, Familiarity, as well as the seven soft power pillars: People and values, business and trade, media and communications, governance, culture, and heritage, as well as education and science. They also included a variable on response to the COVID-19 pandemic (Brand Finance, 2021). The index is one of the bases for choosing China as it clearly has a good positioning on the global level, hence it seems quite noteworthy to establish its

soft power perception in Africa as a country to whom it has invested massively in matters of health diplomacy. China ranks 8th on the global soft power 2021 index amongst the 100 countries surveyed in its research. Germany, Japan, and United Kingdom topped the list (Brand Finance, 2021).

According to Brand Finance (2021) report, Germany is at the top of the global soft power ranking followed by Japan, the United Kingdom, Canada, and Switzerland, respectively. Among the top 20 countries, the United States of America ranks 6th, China is 8th, and Russia is 13th. The report also indicates the total scores each country received over the previous year, in terms of comparing the country's place in the global ranking. New Zealand and Qatar have emerged as the biggest winners, while the Unites States of America and China emerged as the biggest losers, compared to the previous year. In the Asian region, Japan is the leading country considering its 2nd place in the global ranking followed by China and Australia. In the Middle East and North Africa, the United Arab Emirates is leading considering its 17th place globally followed by Saudi Arabia and Israel. South Africa, which is ranked 37th in the world, is the leading in Sub-Saharan Africa, followed by Nigeria and Ethiopia ranking 82nd and 83rd respectively. Brazil's leadership prevails in South America with its 35th place in the world, followed by Argentina 41st, and Mexico 44th in the region, respectively (Brand Finance, 2021). Apart from Germany ranking as the first in terms of international relations, the 2021 soft power index has shown other significant findings revealing that the United States is in the 1st place in terms of influence and familiarity. While Japan has gained global leadership in areas of business and trade, Switzerland emerged as the frontrunner in terms of global reputation and governance. Italy ranks 1st in terms of culture and heritage, the United Kingdom for media and communication, and Canada for public awareness and values. New Zealand has gained global leadership in terms of its COVID-19 policies (Brand Finance, 2021).

C. Diplomacy

First and foremost, it is important to note that the concept of diplomacy has different meanings depending on how it is used and interpreted. The British historian and diplomat Sir Harold Nicolson (1988, p.3) argues that the term diplomacy is "carelessly" used to refer to a wide variety of meanings, leading to a "confusion of

thought" and misunderstandings. According to De Magalhaes (1988, p.49), the meaning of the word is inexact, causing "conceptual confusion". Furthermore, Marshall (1997) pointed out that this concept can be misused as it implies several different meanings with reference to key words such as "art", "content", "method", "conduct", and "manner". However, several scholars in literature have provided typologies to address the concept confusions.

According to Sharp (2003, p.857), diplomacy refers to the art of statecraft, international relations, and the creative process involved in the development of foreign policy. While according to De Magalhaes (1998), diplomacy can be viewed from four perspectives: "as a tool of foreign policy, as an activity of diplomats, as an element of international negotiations, and as a component of foreign policy". Murray (2008) identified three fundamental schools of thought that offer a more nuanced explanation: "traditional state-based diplomatic methods, focusing on state actors; nascent diplomatic methods that emphasize non-state actors; and innovative diplomacy approaches that examine the relationship between conventional and 'new' diplomatic approaches."

Moreover, diplomacy is simply the art of polite persuasion of another country, organization, or individual in international affairs. Alternatively, it can be described as a 'civilized' method that substitutes conflict for interests. There is a strong relationship between the concept of power and diplomacy as a tactical arsenal for achieving objectives (Bjola and Holmes, 2015). According to Sir Harold Nicholson (1969), the Italian state system formed in the early modern period utilized diplomacy as a source of power rather than relying on the power of coercion to achieve the interests of the state. Nicholson however, argued that diplomacy came into existence as a means of commercial interactions and security interests that exist among states. The "Venetian diplomatic service" was believed to be one the first professional diplomatic corps in the field of commercial service (Nicholson 1969). The use of diplomacy has become increasingly common among democratic and non-democratic nations, multinational organizations, non-governmental organizations, and civil society organizations in many forms as a means of negotiating to achieve a desired objective in the international system.

A study by Bjola et al. (2015) suggests that diplomacy is an art of persuasion

which changes with time and must reflect the prerogatives of the time it is being conducted. Francois de Callieres published *On the Manner of Negotiating with Princes in 1716*, a work that examined a set of practices that were rapidly becoming established norms for understanding the relationship between developing European nations. The main point of his argument was the importance of diplomats' talents in tempering our conflicts for the national interest. According to him, diplomats should be able to listen well and win the good graces of everyone (Wilson, 1963). Efficacy of diplomacy depends on dialogue and communication between nations or individuals involved in negotiations.

The "instrumental conception of power" has been considered one of the traditional perspectives that has shaped how diplomacy is understood and managed as a strategy and a means of persuasion among nations and states (Bjola and Holmes, 2015). As a result of the multipolarity of the world, involving a variety of actors and interests, international relations are more than just state security or commercial relationships between nations. There is often a lack of clarity regarding how actors are understood or their agendas (Bjola and Holmes, 2015). Essentially, diplomacy practices can be useful for increasing a nation's understanding of its strength as well as adopting different types of diplomacy, such as health diplomacy, to accomplish its objectives.

It has been suggested by several scholars that a key to the success of diplomacy lies in the way nations or organizations utilize soft power to attract other countries or organizations. According to Ociepka (2014), diplomacy is undergoing rapid transformations, partly due to the use of soft power as a tool for public diplomacy. Countries in the Nordic and Scandinavian region, including Sweden and Finland, provide an example of a positive soft power effect in development aid programs (Ociepka, 2014). Therefore, this study focuses more on the effect of soft power as an independent variable that correlates with health diplomacy to gain a deeper understanding of China's influence in Nigeria.

D. Health diplomacy

Health diplomacy refers to the utilization of significant health resources of a country as "soft power" in accordance with its foreign policy to improve human well-being internationally. To ensure that such diplomacy is successful, the government of

the country engaged in it must ensure that it has access to adequate health resources (Sancak, 2016). Former Director of the US National Institute of Allergy and Infectious Diseases (NAID), Anthony Fauci, stated that health diplomacy is about distributing health services, experiences, and support to target countries (Fauci, 2007). Hence, the conduct of health diplomacy is carried out through bilateral relations between nations (Fidler, 2013). Prior to the COVID-19 pandemic, Peter Bourne (1978), advisor to former US president Jimmy Carter, was an avid supporter of health diplomacy. He described it at the time as "Medical diplomacy" and suggested that the US should use it to achieve its foreign policy objectives (Bourne, 1978). Although Bourne emphasized the importance of health diplomacy, the concept was adopted and became increasingly popular after American scholar Joseph Nye described it as a soft power tool for international relations (Nye, 2017). During the 2000s, the concept of health as a soft power tool became increasingly popular, with calls to address global health challenges not only during pandemics and epidemics but also on a regular basis. One of the most contemporary scholars to focus on health diplomacy was Ilona Kickbusch who argued that nations used it as a tool for political objectives. Furthermore, Kickbusch made a substantial contribution to conceptualizing health diplomacy, which she redefined as the use of health-related matters to advance a country's foreign policy interests, social economic interests, and ethical values (Novotny et al, 2013). Following the Coronavirus pandemic in 2020, the use of health diplomacy has become more common as countries have realized its importance during and after outbreaks of diseases.

According to Katz et al. (2011), the concept has gained mainstream acceptance, and a different taxonomy for it has been proposed by categorizing it into three main diplomatic approaches. (1) *Core diplomacy*: Diplomacy that involves formal negotiations between nations on international public health issues. (2) *multistakeholder diplomacy:* Diplomacy involving negotiations between nations and other actors may not necessarily result in a binding agreement. (3) *Informal diplomacy:* The development of public health policies and programs involves the interaction between the government of a country, nongovernmental organizations, the public and private sectors, and international public health agencies, along with their counterparts around the world (Katz et al., 2011). For this study to be able to articulate its main argument, it is imperative to fuse the concept of health diplomacy

with an appropriate theoretical framework.
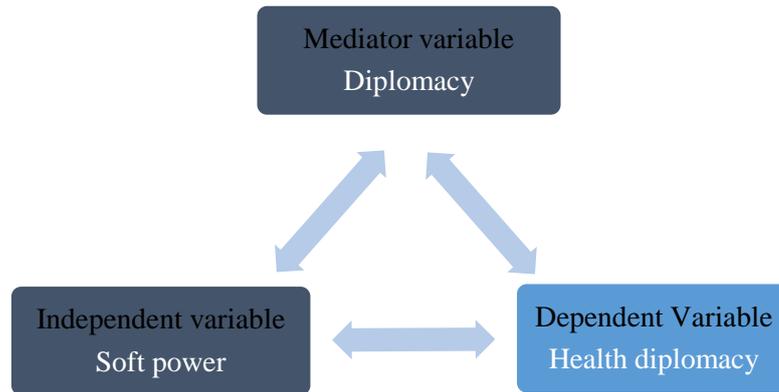
Figure 1: Conceptual framework on soft power

E. Theoretical Framework

A theoretical framework is a 'blueprint' or guide used in research or study (Grant and Osanloo, 2014). It is 'borrowed' by the researcher to construct their own study. The theoretical frameworks simply refer to the existing theory or theories that help a researcher to explain their area of studies in an understandable and clear manner. All issues of the study should be linked to theoretical theory. It defines the research study in terms of the philosophical point of view, epistemological position of the study, help in the methodological explanation and particular ways of analyzing the study (Grant and Osanloo, 2014). Those theories that have been accepted and published are the theoretical theories. It helps to provide the roadmap for the researcher to understand whatever is the field they're focusing on. Simon and Goes (2011), have identified some essential guidelines for the researcher to help describe their study:

I. Identify the main problem of the research.

II. The main variables in the research.

III. Literature review of existing studies related to the topic of the research.

IV. Consider how the key variables are connected to each other in the study.

This research explores two major theoretical approaches to the study of China's health diplomacy in Nigeria. These include, theory of power transition, which argues that the global hegemon perceives emerging powers as threat to international order and the status quo. Second, is the underdevelopment/dependency

theory, which argues that underdevelopment was born out of the failure by poor countries to utilize their resources for their own benefit. It also claimed that undeveloped countries are dependent on developed countries because they were forced to cooperate and form relationships rather than compete (Rabiu, 2019).

1. Power transition theory

Considering China's rapid rise on the global stage, several scholarly literatures have been developed that explores theories related to China's interaction with other states. A power transition theory sought to argue that fast emerging or rapidly growing countries pose a threat to international stability by challenging the status quo. (Chan, 2007). As well, this theory suggests that conflicts result from a rising 'latecomer' challenging the existing hegemon to gain that hegemon's position of dominance at the international level. According to Chan (2007) the theory is about competition for world dominance by the most powerful states, and as such, it relates to their positions of power within the international system. Additionally, it is influenced by national power relative to other nations.

As per this school of thought, a state's level of 'satisfaction' impacts its behavior and its interaction with the international order. Despite this, it is possible for a country to be 'dissatisfied' and therefore recognized as being against the established status quo, if it perceives the international system as performing in accordance with rules and regulations that undermine the interests of the competing state due to several reason which could be territorial, ideological, religious, or cultural among others (Yilmaz et al., 2019). As argued by Ronald et al (2000), if a nation is dissatisfied and possesses sufficient national strength and political will, it is often more likely to challenge the hegemon's authority, by trying to change the established laws and regulations and attempt to create new set of rules in its interest, and perhaps even create inter-state conflict. Furthermore, Organski (1989) pointed out that the dominant nation is necessarily more satisfied with existing international norms than any other nation since the rules are largely created by it alongside its allies.

It is widely accepted by scholars around the world that China's current rise portends the beginning of an impending power transition between it and the United States, and that this development is bound to alter the established international

norms. Moreover, it has been argued by Yilmaz et al (2019) that the US' dissatisfaction with the current international system can be largely attributed to the rise and contentment of the Chinese development, which is poised in several respects to eclipse the global hegemon. Against this background, China's continuous expansion on the African continent, and particularly in Nigeria, cannot be considered surprising. While claiming that it promotes relations without any strings attached and is not opposed to US actions and policies on the continent, its rapid expansion has been challenged by the West.

2. Dependency theory and China's health diplomacy

Several scholars have made significant contributions to the development of dependency theory, which was used to explain the economic underdevelopment of some nations. Frank explains, the terms "development" and "underdevelopment" from Marxist approach referring to countries within the global capitalist economy. According to him, the global economy can be divided into two parts, namely the "metropolis" and the "satellite" meaning developed and undeveloped respectively. Underdevelopment continues to plague poor countries because of resource extraction from them by rich capitalist countries, according to Frank's theory of development of underdevelopment. He argued that the underdevelopment of some nations has been a catalyst for the development of others. Similarly, some nations have developed at the expense of others (Frank, 1966). Similarly, Samir Amin (1974) argued that industrialized countries have highly articulated economies in the sense that growth in one part of their economies leads to development in another part. A non-articulated economy, however, belonged to the underdeveloped nations. The situation in Nigeria demonstrates the lack of alignment between the economic conditions, which has resulted in the country's underdevelopment.

A study by Theotonio Dos Santos (1970) identified three historical stages for undeveloped countries. Firstly, "colonial dependence" dates to around the 16th century when European capitalist nations invaded weak nations around the world and exploited their people, lands, resources, and territories. Second is "financial and industrial dependence", which appeared around the 19th century when rich nations and capitalist states of the world invested heavily in poor nations to obtain their raw materials, that will be exported to the industrialized regions. The third stage is referred to as "new dependency", which can be described as the phenomenon that

emerged following World War II. A common example of this type of dependence occurs when transnational companies invest heavily in poor or developing nations (Santos, 1970). Additionally, other various forms and patterns of dependency have also been discussed and debated by other scholars (Delacroix and Ragin, 1981; Barrett and Whyte, 1982), including "elite complicity" and "structural distortion".

Walter Rodney (1972) suggested that there are two approaches to understanding who and what are responsible for the underdevelopment of African nations. Firstly, he maintained, the imperialist system was responsible for economic stagnation in most African countries, thus preventing the continent from becoming wealthy and catching up with the industrialized world. Secondly, he blamed those who abused the system that was designed to provide fairness and equity. In Nigeria, abuse of power and corruption have been some of the most persistent problems bedevilling the country since it gained independence from Britain in 1960. As a result, the country is lagging and fails to catch up quickly with the industrialized countries around the world.

Gaps in literature

There have been several academic studies and theories that help explain China's soft power in Africa. Several studies focused on investments, political interventions, cultural training, as well as the media and educational sectors to influence African states. Also other emphasized the fact that China is developing its human capital, building bilateral relations, and providing aid to the most vulnerable countries in Africa in a generous manner. This could be assumed that it is in pursuit of expanding its political agenda on the continent to become more influential. This is used by China as a soft power tool. However, considering the dearth of academic literature and theories on health diplomacy in general, as a tool of soft power in Africa, the study aimed to fill in the gap, by providing an answer to the research question; How did China's health diplomacy affect its soft power in Nigeria from 2014 to 2020? The thesis argued that China used health diplomacy as a soft power tool to boost its partnership with Nigeria. The study elaborates on the possible connection between soft power and health diplomacy. In this context, soft power is the independent variable while health diplomacy is dependent variable.

Contributions to literature

While this study complements previous research about China's relations with Africa, it has substantial and sterling contributions to make to the existing body of knowledge. The topic of this dissertation was chosen with the aim of empirically and theoretically enriching literature regarding the use of soft power through health diplomacy. It is also envisaged that Africa will soon learn how to boost sustainable development through health diplomacy, during and after a global crisis. That could potentially create policies for mutual partnership vis-à-vis developed countries based on a win-win approach. The study contributes to scholarly literature to improve resources on measuring health diplomacy and soft power. Soft power has significant impacts on diplomacy across Africa and around the world. However, this could be a zero-sum game for many African states, due to developed countries' achievements and investments. The study is designed to create a road map on how African states could improve health security through diplomacy vis-à-vis developed countries for a more positive sum game. Additionally, it also seeks to educate foreign policymakers in China and other countries to understand further the perception of soft power by African countries, particularly Nigeria. It will help them to assess probable areas for improvement and exploit available opportunities. The study is based on the premise that health diplomacy would contribute a long way to address global health security needs. This is done via binding or non-binding instruments imposed through global governance mechanisms. The thesis is not intended to study the origin of Ebola or COVID-19 diseases. The thesis focused neither on China's military presence nor on its use of "hard power" in Africa.

III. HISTORICAL FRAMEWORK: CHINA AND AFRICA RELATIONS BEFORE 2020

The historical framework in this chapter gives an insight into past colonial powers including the Great Britain, France, and Germany among others in contrast to China's past and present relations with Africa. The chapter examines how the relationship evolved, specific focus areas and the present situation between the West, China, and Africa. This part also aims to find out if shared identities are another major source of soft power for China in Africa. Retrospectively, Chinese discourse relates to the mutual experiences witnessed as targets of colonialism by the West in the 19th century.

Afro-Chinese relations can also be referred to as Sino-African relations. The term describes the cultural, military, historical and social connections between Africa as a continent and China as a country. Even though some sort of substantiation exists about trade between both continents in the early ages, not much is documented about their primeval dealings. History holds it that in the 14th century, two different scholars; Ibn Battuta and Said of Mogadishu (one from Morocco and the other from Somalia respectively) embarked on a journey to some parts of China (Parker and Bentley, 2007, p. 160).

In the 15th century, voyages of a Chinese admiral reportedly followed the coast of Somalia and proceeded down to the Mozambique Channel. Equally, the Great Zimbabwe National Monument (n.d) reported the discovery of porcelain and glass beads in Great Zimbabwe, a city located in modern Zimbabwe. The relations between China and Africa started off slowly in 1950s, just after the maiden edition of the Asia-Africa Conference tagged the Bandung conference at a time when Beijing commenced attempts to avow leadership on the non-aligned movement and developing economies. In May 1956, Egypt kicked off diplomatic relations with China, thereby becoming the first African country to relate with China (Alden et al., 2007). Fast forward to 1960, other African countries such as Sudan, Morocco and Algeria had also commenced diplomatic relations with Beijing, and the trend

continued to 1970, by which time 44 African countries had embraced China.

According to Brautigam (2008, p. 209), the initial involvement of China with Africa revolved primarily around the establishment of ideological camaraderie to propagate their Chinese model of communism. In Africa, Chinese support of independent movement was not only limited to rhetoric or morals but also included the provision of military training and use of weapons. The main objectives of China's policy in Africa were two-fold in nature. First, it was to upturn the acknowledgement of Taiwan as China's main representative to pile up votes for ultimately rejecting her United Nations credentials (Pere and Shelton, 2006). Second, to obstruct the influence of both the West and the Soviet Union on Africa. As this political re-orientation progressed, China kept providing aid to Africa, regardless of her own economic condition that could still be described as upcoming during that period. In comparison to the assistance provided by the West, China's efforts could best be described as paltry; they donated around $2.5 billion in between 1950 to 1970 across thirty-six African countries (Alden, 2008). Gradually, China began to acquire a good reputation for herself and by the assistance of African countries, the replacement of the Taiwan-based Republic of China with the People's Republic of China in the United Nations occurred in 1971. It was one of the main achievements for China during that period (Alden, 2008).

A. Shared identities between China and Africa

Between years of 1884 to 1885, Otto von Bismarck, the then German Chancellor assembled the United States and 13 other European nations to direct commercial activities in Africa and this gave rise to the "General Act." Even though, this act did not explicitly state colonialism, it connoted colonial philosophies with its attempt to standardize imperial activity in the African continent by instituting terms and conditions for territory acquisition, slave trade abolishment and globalization of the Niger and Congo rivers. History has it that such imperial activities were mainly related to trade securement, private firm endorsement, establishment of infrastructure and expansion in the inlands, before the much-acclaimed Berlin Conference. After the conference, the term "Scramble for Africa," was coined by the Times Newspaper, and the imperial authorities started to build colonies and extract African resources under the guise of private businesses (Yachysen, 2020).

Shared identities in relation to African and Chinese discourse relates to the mutual experiences witnessed as targets of colonialism by the West in the 19th century. History has it that due to such similar experiences, the Chinese accords high respect to the sovereign parity of seemingly weaker economies and refuses to exploit such countries. Unequivocally, Africans also responded to the heavy presence of China in their region with a welcoming and positive disposition in contradiction to the hostility targeted at other foreign actors emanating from Africa's tragic and long antiquity with the colonials from the West. As implied by the name, colonialism then mainly involved European countries acting as imperialists and conquerors in Africa. The notorious transatlantic trade of slaves and apartheid in South Africa are experiences of that period that still holds resultant effects until date in Africa. This was not however the story with China, the country did not forcibly impound Africa's resources nor impose its authority or policies, but rather devoted time and effort in establishing connections with countries in Africa; gradually building trust, providing enormous economic aid with nothing much attached and importantly respecting the sovereignty of the economy by not interfering in their situation.

B. The period between 1978 to the 1990s

In 1978, China launched some economic reforms that concentrated on its domestic economy and opened its shores up to the West, thus decreasing its political divestment in Nigeria and undoubtedly neglecting the Sino-African relations for a large part of the 1980s. However, in June 1989, a protest held at the Tiananmen Square by students advocating for freedom of press, speech and democracy led to a bloody crackdown by the Chinese security forces. Consequently, that affected relations between the West and China. Because of this isolation by the West, China's foreign policies were re-evaluated and its political attention to Africa eventually reinvigorated with the assistance of its former African associates (Alden et al., 2008).

As China renewed its attention towards Africa, it simultaneously increased its ongoing campaign for the isolation of Taiwan in the continent, resulting in the cutting off diplomatic ties between South Africa and Taiwan. To this date, only a few countries in Africa are still in any form of diplomatic relations with Taiwan and those relations are strategically unimportant and minute in nature. In the beginning of 1990, a huge opportunity was presented to China to boost its African influence as the

Civil war ended with waning interest and involvement in Africa. China, inadvertently capitalized on this gap to enhance its economic and political relations with Africa. The Chinese president Jiang Zemin at that time buttressed this by paying a state visit to Zimbabwe, Namibia and 3 other African countries in May 1996. During his visit, he delivered a speech to the Organization of African Union (OAU) later renamed African Union (AU), where he proposed a 5-point Agenda for developing a long term, better structured relationship with Africa. This ultimately kicked off the cooperation for China-African forum in 2000 (FOCAC) in Beijing for the facilitation of South-South cooperation. After these series of events, China who evidently recognized the massive potential in Africa, increased its economic investments throughout the 1990s, but its share in African trade was comparatively small to the tune of about $4 billion (Alden et al., 2008, p. 5).

C. China-Africa forum and period after 2000

In the year 2000, somewhere in Beijing, China held its first official platform on African and Chinese cooperation, calling for a Sino-African collaboration in socio-economic development. The forum was dubbed FOCAC (Forum on China-Africa Cooperation). Since the establishment of this forum, Schoeman (2007) argues that Africa has become the focal point of China's diplomacy, with several top official visits of Chinese leaders like Hu Jintao who visited about 17 African countries between April 2006 to February 2007 period. Hu's visit to the continent surpassed any previous high-profile visit by foreign leaders during that period, indicating the significance of China's partnership with Africa (Schoeman, 2007).

Sino-African relations exploded exponentially with the start of the new millennium witnessing a rapid growth. The year 2006 was then declared "the Year of Africa," in recognition of half a century of Sino-African diplomatic dealings. The year gradually progressed with increasing focus on Africa by undertaking more economic and political arrangements between the country China, and the continent Africa (Tu, 2008). As the economic ties increased, China equally increased its development assistance to Africa. By the month of June in the "year of Africa" (2006), China declared that it had assisted the African continent with a sum of $5.7 billion between 1957 and 2006. The country also stated that between the years 2000 and 2003, its aid to Africa stood at 44% of its entire foreign aid (Brautigam, 2008).

China publicly announced its strategic involvement with Africa on January 12, 2006, via its first white paper on its African policy while stressing its willingness to advance the collaboration in the continent's education, politics, science, culture, environment, health, and security in the future (Fmprc.gov.cn, 2006). This strategic partnership was unveiled in November (2006) at the Forum on China-Africa Cooperation (FOCAC) held in Beijing. As a response to the white paper published, more than 1,700 representatives were sent from 48 African countries, with 41 being the heads of state of those countries. At the summit, an action plan was unanimously adopted for the strengthening of strategic partnership for enhanced economic cooperation and trust particularly in the field of energy exploration.

At the sixth meeting of the FOCAC, exactly 18 years after the first meeting was held, the forum rounded off its deliberations with a pledge of loan worth 60 billion US dollars to be disbursed to African countries, in order to ensure that security becomes top priority in those countries. In between these two conferences, by September 2013, President Xi Jinping founded the "Belt and Road Initiative" (BRI), a coalition of development alliances, primarily aimed at connecting China with different borders across Africa and the world. Several scholars have opined that China's assistance to Africa is opportunistic and has political and economic motivations (Rudyak et al., 2019, p. 219).

According to Yachyshen (2020), the Sino-African relations is achieved using two different strategies namely, the "Angola Model" and the "Infrastructure Projects Approach." The initial model entails the disbursement of loans by China to resource-rich countries that are underdeveloped and willing to compensate the loan financially or with its natural resource endowment. While the latter entails the establishment of laudable infrastructural-based schemes such as constructing dams and railways, the Chinese are usually attracted to states rich in natural resources like Angola, Zambia, Nigeria etc. For example, in 2004, Angola entered into an agreement that involved contracting 10,000 barrels of oil daily over a period of 17 years to China in return for a 2 billion US dollars loan. Equally, Algeria (rich in energy), committed to giving Chinese firms a lease to explore 6 billion worth of phosphate in exchange for a railway and agreement to become Algeria's biggest arms dealer (Yachyshen, 2020).

Even though a few stakeholders were under the notion that China's aid to Africa was purely altruistic, there is no denying the fact that China's "no strings" framework to aid nurtured sizeable concerns about ultimately enabling the violation of human rights. As a reaction to the afore-mentioned, China attempted to modify the structure of its foreign aid in 2018, by establishing the China International Development Cooperation Agency with the acronym CIDCA (Rudyak et al., 2019). Their main mandate was to condense the fragmentation between all parastatals involved in aid disbursement, improve management amongst governmental bodies and ease off the tensions existing between commercial ventures and diplomacy. The CIDCA was also tasked with providing oversight for the BRI and promoting global cooperation, while offering potential prospects for investments in health, knowledge sharing on potential health concerns, capacity building and enhancement of health governance (Tambo et al., 2019, pp. 46-49).

Between 2010 and 2012, China provided aid to 51 African countries, and the African Union as a body (English.gov.cn, 2014). In 2015, another white Paper was published by the Chinese President Xi, to depict the major spheres, vision, strategy, and direction of Beijing's trade economic relations with African countries. The release of this publication coincided with the 15th anniversary of the establishment of the FOCAC. China stated its readiness to assist Africa achieve the aim of accelerated modernization, economic integration, and industrialization. The desire to preserve China's increasing African investments has caused a major shift from its traditional non-interference disposition in the internal affairs of other nations to creating innovative military and diplomatic initiatives for resolving the unrest in Mali and South Sudan. In 2015, at the FOCAC meeting held in South Africa, Xi Jinping pledged a sum of 60 billion dollars to be disbursed to Africans as assistance and loans for supporting export factories.

Chinese investments continue to rise in the African energy sector with oil and gas deals rising to over $2 billion. China ensures to lace the investments with loans and aids while exchanging it for trade deals and infrastructure. According to Calabrese et al. (2020), her economic relations with China have supported the economic transformation experienced by Africa significantly. The cancellation or restructuring of debts owed by Africans was another expression of China's dedication to foster its relations with foreign economies and acquire soft power.

Previously, President Xi had affirmed finance packages and a $60 billion debt relief at a China-Africa summit, where he stated that China would cancel outstanding debt belonging to 32 African countries in the same year. The country has progressively done this regardless of domestic worries from its home front, which would ultimately benefit from the dividends of soft power that will accrue.

D. Historical health relations between China and African countries

The involvement of China in the health sector with African countries extends to the 1960s after the Chinese people began sending their medical teams to Africa (Maddelena, 2020). These were made up of Chinese healthcare professionals who delivered effective treatment to Africans, established local capacity, trained medical staff, and constructed hospitals as a visible demonstration of collaboration amid developing nations against imperial and colonial powers (Maddelena, 2020). Until 1972, China was completely isolated from any global health governance, since international institutions like World Health Organization (WHO), including the United Nations acknowledged Taiwan as the legal government in replacement of the People's Republic of China (PRC). China deployed medical care to attain political goals; namely control over the Soviet Union, Europe, and the United States in Africa, as well as worldwide acceptance of the People's Republic of China over Taiwan. In 1971, about 26 countries in Africa agreed that the United Nations (UN) General Assembly acknowledges the People's Republic of China; China, hence, became a member of WHO the following year, and thus the international multidimensional health service. Regardless of the obvious foreign goals, China's help to Africa occurs when China's resources and capabilities were limited, making its attempts more respectable and harmony amid equal Sino-African countries (Maddelena, 2020).

In 2006, China's African Regulation outlined the emerging correlation, and in terms of health considerably increased the number of alliances to the flagship development of traditional medicine, anti-malaria campaign, rehabilitation, and construction of hospitals in Africa, China-supported medications, HIV/AIDS prevention investment including other infectious diseases, together with parental and child health (Maddelena, 2020). The year 2015 represented a watershed moment in Sino-African ties, as China retained its diplomatic tradition by supporting special consultations in favour of South-South support, the Commerce bloc, Sino-African

Trade, and the Intergovernmental Authority on Development (IGAD). The Chinese global health initiatives are the most relevant geopolitical collaboration in present times. The China initiative in the promotion of social justice and peace has contributed to the rate at which the Chinese participate in assisting African countries in conflict resolutions. FOCAC develops a modern type of deliberate cooperation among China-Africa by evolving trade and economic cooperation, and keenly seeking monitoring and evaluation that recognize both Africa and China's reality in identifying the key reasons of rising challenges including illnesses in both nations (Ernest et al., 2016).

FOCAC spent the past two decades fostering win-win humanitarian relief under the multilateral structure, thereby enhancing collaboration in agriculture, health, and food safety. FOCAC have used the Millennium Development Goals (MDGs) to strengthened business and financial cooperation by enabling Africa's industrial development demands and capability building in accomplishing UHC to the Sustainable Development Goals (SDGs) through the China-Africa "One Health" initiative. For instance, Ebola outbreak in West Africa that struck Liberia, Guinea, and Sierra Leone illustrated China's assistance in the fight against Ebola outbreak, and the need for economic sector and social sector restoration in the post-period of Ebola. The Chinese government collaborated with the humanitarian agencies, the global community, and non-governmental frontline groups, as well as other African countries to prevent and eradicate the Ebola epidemic in West Africa. In correlation to all other advanced countries, China offered great official and non-official support to 13 countries within the stricken West Africa sub-region, valued at an estimated $120 million, and offered an additional $5 million to the Multi-partner UN Response Trust Fund to help the affected countries' relief and reconstruction efforts. Furthermore, China supplied logistics in key impacted provinces, such as the free supply of Ebola protective kits, mobile vans for laboratory tests, and the creation of new general Ebola research facilities (Ernest et al. 2016). Furthermore, this section examined the historical background of health relations between China and selected African countries, Algeria, Angola, Rwanda, Kenya, and Tanzania.

1. China's soft power in the modern era

In 2007, Chinese leader Hu Jintao officially commented on "soft power" at the 17th Communist Party Congress. He elaborated on its role in the People's

Republic of China. President Hu emphasized Jiang Zemin's idea of using Chinese culture to foster national development (Mingjiang, 2008). He lamented that traditional culture should be studied diligently and applied to contemporary realities. Hu urged the Chinese people to apply culture in domestic and international affairs and encourage cultural exchanges (Hu, 2007). Five years on, during the Communist Party congress in 2012, Hu Jintao stressed the significance of culture and the need to improve China's international reputation through a socialist culture (Fliegel and Kříž, 2020). Hu's successor President Xi Jinping continues to develop soft power. Xi pointed out that soft power is a significant part of the 'Chinese Dream'. In his view, the so-called great restoration encapsulates socialism, welfare for the people, and new laws for international relations based on mutual respect between developed and developing countries. (China Daily, 2014). Xi has highlighted China's growing global influence as a good model for other nations. This is the kind of value system China is trying to persuade emerging nations to follow as an alternative to Western values. According to Xi, the pursuit of the Chinese Dream will not only contribute to China's development but also enhance peace and progress for humanity. The Chinese leader also urged his people to endeavour to pursue peaceful development, uphold international fairness and justice for humankind, and help other nations achieve their goals (Fliegel and Kříž, 2020).

In 2017, during the 19th Communist Party Congress, Secretary General Xi Jinping mentioned that Chinese soft power and global influence had increased significantly from 2012 until 2017. According to him, Chinese culture has gained global appeal more than ever before, and more efforts are needed to foster the socialist culture in a greater capacity. Furthermore, he called for the expansion of international communications channels to convey to the world the real stories of the Chinese people (Jinping, 2017). Important steps were taken during the 19th Party Congress to promote China's soft power. This included the addition of several amendments to the CPC Constitution, primarily those that mentioned as 'develop and advance socialist culture; enhance our country's soft power' (Xinhua, 2017).

Several prominent Chinese scholars have contributed to understanding how China has used it both domestically and internationally to achieve its global objectives. One of the most famous schools of thought is the Cultural or Shanghai school (Courmont, 2015). This school has gained recognition from both the academic

community and the Chinese government (Fliegel and Kříž, 2020). It is based mainly on the idea that China's historical and cultural background are critical to enhancing the attractiveness of the country. A prominent theoretician from the school Yu Xintian argues that soft power refers to "ideas, principles, institutions, and policies" that are ultimately rooted in culture (Yu, 2008 cited in Courmont, 2015).

The second school of thought, whose leading scholar is Yan Xuetong, received only minimal attention and is known as the political school. He focused on soft power in domestic and foreign contexts. In the domestic context, Yan emphasized the necessity of high moral principles, legal system, and ideology. He perceived soft power as an element used by the Chinese government to harmonize and unite its people. Yan argued that after years of economic boom, the country must catch up with the modern world (Yan, 2006). Yan called for solutions in some critical areas including income disparity, underdevelopment in some regions, tackling corruption, and human relations with the environment. He argued that problems linked to these areas must be tackled for China to achieve domestic development that will improve its image on the global stage. China's cultural value is promoted in several ways, especially through media. Children are also well-trained at the grassroots until the tertiary level about the country's norms and values. The promotion of traditional norms and values can easily be seen in public spaces in the form of billboards and other modes of advertisement. This always serves as a reminder to the Chinese people (Fliegel and Kříž, 2020).

Moreover, the Chinese government has taken concrete steps to tackle inequality problems and income disparities across several regions. A worthy example of this initiative is the easing of the "Hokou system" which limited citizens' access to national health and social benefits (Fliegel and Kříž, 2020). Another significant example is the One Belt, One Road Initiative, which is a mega project aimed at linking Chinese markets with Eurasia and Africa. Therefore, changing some of the existing trade routes in the eastern coastal part of the country to the western areas will significantly boost economic development (Kings, 2016). Since 2012, President Xi Jinping has tackled corruption in China as one of his top priorities, ensuring such unethical behavior is eradicated from all government institutions and such conduct will never be tolerated (Desheng, 2019). In addition, to safeguard the environment, the government has been deploying necessary resources and authorities across the

country. Inspectors monitor and enforce environmental regulations in residential and industrial areas (Gan, 2017). The Shanghai School suggested the idea of displaying Chinese cultural values to the world. Li Ying (2017) highlighted some key criteria for China to attract other nations. He argued that China should build trust with other countries by exhibiting high morals and values through traditional culture. China should conduct its relations with other nations benevolently, peacefully, and harmoniously. While doing this, Chinese people should not only show their traditional arts to foreigners but also inform them about modern China (Ying, 2017).

Wu Yingjie (2016) argues that China should ramp up cultural exchanges with other nations to promote trust especially due to the One Belt, One Road Initiative. This will help bridge the gap between different languages, and national, cultural, and institutional barriers. Yingjie (2016) also suggested that Chinese people should learn foreign languages and the traditions of other nationals to overcome cultural shocks whenever they travel outside China. He called on the Chinese government to resolve domestic problems and make people feel confident. This will upgrade its soft power and make Chinese cultural values more visible locally and abroad. Some scholars like Hu Jian, suggest that China uses modern media to boost its soft power. Jian argues that China lagged Western culture and is often misrepresented abroad. As a result, various modern media will enhance and promote China's soft power (Jian, 2007). Moreover Chen Shaofeng (2010) furthers this argument by claiming that China has long been misunderstood abroad and confronted with lack of acceptance. He calls on the officials to repair and develop China's reputation. Shaofeng says the government should set a comprehensive strategic plan and create strong quality content that engages foreigners and resonates abroad (Shaofeng, 2010). These scholars focus on China's image representation, especially through media and social and economic relations with other nations. In their opinion, it is important for the world to be informed about the real face of China by the Chinese people rather than by misrepresenting it by Westerners.

Yan Xuetong postulated China's peace and development policy. He argued that China is interested in the peace and development of the world and other nations' prosperity. Xuetong rejected Western conspiracy theories that portrayed China as a global threat (The State Council, The People's Republic of China, 2011). Together with Xu Jin, Xeutong contributed to the concept of harmony in the world and in

China's society with equality and justice as the top agenda. Their view was against the Western idea that a strong nation claims legitimate authority to intervene in other countries' affairs (Xeutong and Jin, 2008). While Cui Wenjia (2017) believes that Westerners often perceive China through their own interpretation of soft power. He argued that China's main goal is not to challenge the US or other countries' soft power. However, it informs the world about its "institutional culture, peaceful growth, and developmental model". China has set up various media outlets including television channels and radio stations, for foreigners to get a real sense of what is happening in the country (The Economist, 2018). Several Chinese broadcasting companies including China Global Television Network (CGTN), China Central Television (CCTV), China Radio International (CRI), and China National Radio (CNR), have joined together to form a single network known as the "Voice of China." The network aims to disseminate China's story and make the voice of the Chinese people heard across the world. (Fliegel & Kříž, 2020). President Xi Jinping says media outlets are meant to be gatekeepers of public opinion by disseminating compelling stories and generating positive reactions from both local and international audiences (Zhihui, 2018). Additionally, Chinese media outlets combat fake news and misrepresentation from the Western media (Fliegel & Kříž, 2020). Nevertheless, many international audiences perceive the Chinese media as a pure propaganda machine that aims to promote China's goals and objectives across the globe.

2. China and Algeria health relations

Algeria is Africa's biggest country on map, with a populace of about 40 million people. The country has a national healthcare structure that is independent and accessible to every Algerian resident (Lamri et al., 2014). The Algerian government funds the public health care system (Tiliouine, 2009). Considering Algeria has a diverse population, the policy emphasizes preventive health care and clinics over hospitals.

In 1963, China and Algeria's medical collaboration began when China deployed the first-ever medical team to Algeria (Li, 2011). After the independence movement's triumph and the evacuation of French medical personnel in 1962, the Algerian government requested medical aid from the international community. The information was delivered to the Chinese government by the Algerian minister of health and the Red Cross society. China initially, announced its intentions to give

medical help to Algeria in 1963. Ever since, the Hubei province from China has been in control of deploying Chinese Medical Teams (CMTs) to Algeria. The province had deployed about 3,000 medical personnel to Algeria in 2006 (Li, 2011).

Over the last 45 years, the CMT initiative has extended its 16 medical facilities to 21 cities and provinces, comprising over 10 health professionals. As a result, this CMT initiative has expanded to be one of the largest and most prominent in Africa. The supply of Chinese traditional medical therapy, mainly acupuncture, plays a significant benefit of the CMT program. Algeria's minister of defense fractured his leg and was unable to get it healed The Chinese doctors used an acupuncture method of healing to cure his wound (Li, 2011). CMTs in Algeria provided acupuncture-training programs without constraint. They did everything to improve the standards of health locally, including short workshops on reattaching severed limbs, acupuncture, and anesthetic observation, all of which were well received by local medical personnel. In 2008, the CMT in Algeria held over 20 training courses, offered over 30 speeches, and taught over 300 health workers, who have founded the bedrock of local medical institutions (Li, 2011, p. 20).

3.   China and Angola health relations

Angola is one of Africa's wealthiest nations; yet this does not transfer to its people. Thus, considering its vast riches, the GDP of Angola per capita is part of the smallest in the world, and subsistence agriculture is among the major financial activities, occupying about 85% of the populace (Begu et al., 2018). Angola has faced a worsened health crisis after three decades of war, according to the government and foreign relief groups (Pana Press, 2002). The war between both the government and the UNITA rebel organization ended in 2002, but the southern African country learned about the health tragedies left behind from the warfare.

After the war, the government of Angola made it a primary responsibility to restore the medical facilities and health systems of the country, which acts as an imperative role in the country's efficiency for human capital. In Angola, the major causes of death by illness are typhoid and malaria; 14,000 deaths were recorded from malaria annually and 60% of hospitals admission are occupied by under- 5years children, 35% death occurs in children of same age range, and 25% maternal mortality (Fighting Malaria, 2010) frequent cholera outbreak across the country

occurs due to inadequate access to good water and lack of clean environmental hygiene.

The Chinese government promised to give medical assistance to facilitate Angola's health sector. Most facilities have been upgraded by the Chinese officials representing the ministry of health. In Angola, Luanda central hospital building in Kilamba Kiaxi was funded by the Chinese in 2006. This contract worth $8 million was allotted to a company in China and the building lasted for 15 months. Over 100 patients were accommodated in the hospital and provide special services like dermatology, laryngology, ophthalmology, neurology, and physiotherapy (Kiala, 2010). In 2006, President Hu Jintao paid a visit to the hospital and evaluated it as a sign of a strong partnership between China and Angola (Kiala, 2010).

4. China and Kenya health relations

Kenya has helped to refine and enact policies that promote inclusion of and access to advanced healthcare ever since its independence in 1963, in a quest to achieve the long-term goal of "health for all" (Kimalu et al., 2004). When the country gained independence, the government pledged to offer "free" health care as part of its development measures to reduce poverty and enhance the nation's welfare and productivity. Kenya's growth in the health sector has been extremely favourable when considered to other Sub-Saharan African countries. After independence, there has been quality and good enhancement of healthcare services and infrastructure in terms of geographical coverage, staff training, and tertiary healthcare delivery services. Notwithstanding Kenya's physical infrastructure for health care has developed rapidly, distribution and coverage remain unequal, particularly in rural regions (Kimalu et al., 2004). The Chinese government also contributed to the health sector of Kenyans in the following ways.

a. Construction of hospitals in Kenya

The construction of the Mama Lucy Kibaki Hospital cost about $6.4 million. The Kenyan government financed the entire area, which the hospital was constructed, and other additional cash for the building of reinforcement structures and equipment acquisition. In 2013, the hospital was reported to have treated about 200,000 outpatients and up to 7,000 inpatients, in conjunction with 3,000 births (Kenya hospital management, 2013). Likewise, the hospital by the Chinese

government serves as part of the major Centers for Malaria Treatment (Ibid). The University Teaching Hospital for exploration in Kenyatta obtained the most assistance from the Chinese government (Anyanzwa, 2011).

China also assisted in the development of a modern division at the Moi Teaching and Referral Hospital in Eldoret. An additional 1,000-bedded wing enhanced the hospital's maximum capacity to 1,800 beds (Mathews, 2013). The Chinese government launched the construction of a new in-patient building as one of their initiatives. This boosted the reputation of the hospital as a referral teaching hospital, while still assisting in the institution's capacity to serve a diverse clientele (Ibid). Initially, the Chinese government was involved in giving funds to the sum of 380 million shillings for renovation of numerous districts level hospitals, such as Nyamira Clinic, Nyeri Hospital, Kakamega Hospital, and Malindi Clinic. These medical facilities are situated in the Coastal areas, Western, and Central areas of Kenya (Pana Press, 2015).

b. Establishment of medical camps

In 2010, the medical ship of the Chinese Navy "Peace Ark" arrived in Mombasa (Simon, 2017). The citizens and members of the Kenyan military forces were given free medical services by the teams. The core services delivered were screening and treatment of the Kenya Red Cross students and officials-Mombasa Branch, medical testing for Kenya Navy officers and soldiers, government officials in Kenya, journalists, and surgical procedures overseas for poor patients. The Peace Ark's tour was meant to promote relationships and partnerships between Kenya and China. The major process carried out during the visit involved medical training and contributions of the medical workers that were trained and were allowed to participate in diagnosis and treatment activities in the Peace Ark (Mathews, 2013). A combination of nursing techniques and Chinese treatment procedures, such as acupuncture and cupping treatment, were also seen by medical officials on board ships. They paid a visit to a nearby orphanage and elementary school, where medical services were provided to the pupils and were educated about healthcare (Mathews, 2013).

c. Training and contributions

Chinese medical teams visited Kenya frequently and contributed medical supplies, stationery, and other health-related items. Several healthcare workers in Kenya travel to China to receive training under the Chinese government's scholarship fund. Moreover, there are relationships between tertiary institutions in Kenya and their Chinese counterparts. The Chinese specialists have undertaken intensive malaria prevention and treatment training in Kenya. Some other donations made by the Chinese government to the Kenyan government include that in 2002, the Kenyan Ministry of Health received anti-tuberculosis drugs. In 2003 and 2019, anti-malaria drugs were donated among others (Simon, 2017).

5. China and Rwanda health relations

In 1985, after the 35th summit of the African regional committee by the world health organizations in Lusaka, Rwanda approved a medical development plan focused on localized administration and divisional services. The establishment of provincial-level health offices for health system administration began the decentralization trend. During the 1994 genocide, the advancement of the health system was halted. Most of the infrastructure, equipment, and people, as well as the health systems, were damaged. The administration has been attempting to reinstate the health system, ever since peace was restored. The government formed a new policy to lead the restoration of the health operation in 1995 (Republic of Rwanda, 2001). The Chinese government also play a significant role in the Rwandan health sectors.

Since 1980, the Rwandese health sector has been a major concern to the Chinese government. Two regional hospitals were established with the assistance of the Chinese government in Masaka and Kibungo respectively (Paterne, n.d.). In 2011, the regional hospital in Masaka was established and is intended to become Rwanda's Central Hospital. Other initiatives with Chinese assistance include the construction of a Polyclinic in Masaka (Kagire, 2009). In 1982, China began deploying medical teams to Rwanda, primarily from Inner Mongolia (Xia et al., 2014, p. 4). The number of Chinese medical teams increased substantially just after the massacre. For over 30 years, Chinese medical teams at Kibungo hospital have treated over 470,000 patients in another nearly connected initiative aimed at

enhancing the infrastructure of the country's health care (Paterne, n.d.).

Chinese medical teams have been giving continual training to Indigenous medical personnel. Every two years, the teams rotate. Several scholarships were provided by the Chinese government to Rwandan students in a variety of disciplines, including medical care. The medical facilities located where the Chinese medical teams are posted are managed and controlled by the Chinese government, For instance, Kibungo regional hospital and Masaka hospital (Paterne n.d.). The Chinese embassy located in Kigali decided to divide the CMT's into two teams due to the problems of conducting preliminaries at Kibungo regional hospital without the presence of a Chinese team. The two teams created are team one in Masaka while the second team is in Kibungo. Other institutions, like Kinihira Hospital, have indeed profited since the paraphernalia and personnel provided by Chinese administration (Babijja, 2013).

According to China's Ministry of Foreign Affairs (2013), the talk with Ambassador Zhan revealed that Chinese health professionals in Rwanda worked incredibly hard over the last 30 years, treating around 47 thousand local citizens. The mass of people that have profited from medical therapies provided by Chinese medical teams are Rwandan massacre survivors, including those with HIV/AIDS infection. Similarly, Chinese professionals have struggled under immense stress on many occasions to perform complex procedures in under-equipped hospitals in Rwanda. In 2009, the Kigukijo's malaria treatment center was opened, as a major beneficiary of antimalarial medications (Xia et al., 2014). In 2013, Rwanda ministry of health received medical goods worth $1 million from the Chinese government (Rwanda Ministry of Health, 2013). Additional donations were volunteers to visit the survivors of the 2008 earthquake in the western region of the country (Karuhanga, 2008).

6. China and Tanzania health relations

Tanzania, located on Africa's eastern coast, is a country battling massive issues. Personal conflicts such as lack of infrastructure, substandard education, poverty, and illnesses increase the enormity of these issues. The audacious initiative made by the United Nations (UN) in the format of the Millennium Development Goals (MDG) to eradicate poverty, death, and illness remains vital for countries

trying to enhance the general state of wellbeing of their populations. The government has acknowledged that a lack of health professionals is hampering its capacity to make progress toward attaining health related MDGs (WHO, n.d.). The 1970s were known as the crucial period when the Chinese commenced the building of the renowned Tanzam railway. The very first skilled professional that participated in the train project included medical doctors (Jeremy, 2010).

Tanzania has benefitted from China through deploying specialists to teach its medical professionals, as well as yearly scholarships granted to Tanzania citizens to study in China (Yuan, 2010). In 2009, The Chinese government developed a Malaria care center at the Leah Amana Hospital. It was often used to teach medical personnel in Tanzania (Xia et al 2014, p. 17). The general hospital located in Zanzibar gained the involvement of a Chinese medical team and medical facilities theatre, while Butiama regional hospital obtained Malaria medicines supplies. From 2008 to 2012, the Chinese administration subsidized the price of malaria treatment medications that are provided to the Tanzanian health ministry (Zenko, 2013).

Chinese government has facilitated the development of a splitting cardiology section at Muhimbili hospital (Bilham, 2015). The hospital in Muhimbili also acts as a crucial facility in the treatment of Malaria. As described by Mwilongo (2011, p. 13), pharmaceutical production is also another field of activity in which the Chinese are active; Tanzansino United Pharmaceuticals Ltd is one uncommon example. This company continues to manufacture medicines to treat infectious illnesses. Large numbers of African leaders have expressed their positive responses on the dividends of China's embrace; depicting an exchange that is mutually beneficial unlike past exchanges. China on the other hand, is arching its soft power for everyone's benefit. Shared values on non-interference in domestic affairs is a main aspect of this shared identity revolving around historical grievances. China supports African development actively by providing aid, which in turn brings approval as more, and more African leaders in return offer support by acknowledging the Chinese Communist Party to be China's official government. Thus, via a mixture of trade and aid, the Chinese government has influenced many African nations to accept countries from East Asia with open arms as against the coercion by the European powers witnessed in history. Lastly, China does not criticize or question African's human rights or situation, which has earned much admiration and trust from African leaders. This has also

created a generally favorable reception for China on African soil. There are still many questions to be answered in line with the way China provides aid, its guiding principles, effectiveness, implementation etc.

IV. CHINA'S HEALTH DIPLOMACY IN AFRICA

Africa was the first region in the world that China established its health diplomacy with, by sending its first medical team to Algeria in 1963 (Jin et al., 2011). Since then, Beijing continues to deliver medical aid to the continent by sending doctors, delivering medicines, building hospitals, training, and educating African medical staff etc. As portrayed in the previous chapter, China has contributed enormously to the development of many African countries. However, the fundamental question is on what China seeks to get from this aid assistance to African countries? Nantulya (2018) posits that the goal of China is to restore itself to the status of great power. The country seeks to become a world power. This it wants to achieve through Africa, as it recognizes the continent as an emerging market with high dividends despite its seemingly great risks. China attempts to be in Africa's good books by providing developmental assistance, which Africa is in dire need of. Assistance in the form of loans, debt cancellation, economic support, agriculture, education, infrastructure, and health aid, to sell its image to Africa. The reasons for these actions are in the recognition that Africa can control and modify international decisions and offers the largest votes at the United Nations General Assembly. Furthermore, China acknowledges that Africa's regional organizations hold myriads of international positions that Beijing desires to influence, to boost its own international agenda. Africa also has minerals and natural resources that are essential for the sustainable growth of China's economy.

China has been providing medical aid to Africa for decades (Chen, 2016). The initial Chinese medical aid to Africa was officially dispatched by the Chinese government to Algeria in January 1963. China's increasing aid has sparked a fierce global argument about the alleged negative consequences of China's initiatives in developing nations. This seems to have startled the Chinese authorities, not least since it had previously embraced international aid as a mechanism for portraying the appearance of China as a "responsible stakeholder" (Chen 2016). The major aim of China providing relief to health sectors in Africa varies according to the context of

history (Li, 2011). Chinese government officials have insisted that medical assistance is provided to enhance the health of Africans and that the objectives were mainly altruistic. However, the choice of China to offer medical aid to Africa might be considered primarily motivated by political concerns. The medical aid provided by China to Africa has been intrinsically linked to the position of China in the international geopolitical environment and the foreign policy decisions of China (Brautigam, 2011). The motives behind the medical assistance provided by China to Africa include the following: Competing with Taiwan for United Nations vote by obtaining the African countries support; Extracting the belief system of socialist perception and revolutionary globalism; and addressing issues in a rapidly changing global setting, such as climate change (Brautigam, 2011).

Following the establishment of the United Nations after World War II, Africa played a significant responsibility in the international organization election, following the "one country per vote" rule making it critically valuable for China to sustain strong relations with Africa. Providing medical attention was viewed as an essential strategy by the Chinese government for ensuring assistance from Africa. The economic benefits have been a source of motivation for China for providing medical help constantly to Africa. Although the Chinese officials have repeatedly denied the allegations. It can be said that China's medical aid is utilized as a major approach to assist China's public-sector organizations to regain route to the African market. They may be motivated in gaining from mineral wealth in nations with lesser negotiation strength. However, Chinese officials have rejected such arguments, stating that strategic benefit might be only a prospective result instead of a purpose. During the period of China's advancement, they tried to give aid to Africa countries without any political sentiment and conditions to benefit Africans through economic development (Ernest et al., 2016). China adopted measures that were implemented at the ministerial conference of FOCAC. China has keenly established relations with African areas related to medical care, public amenities, environmental protection, humanitarian aid, climate change, and other areas. They have also reinforced educational, cultural exchanges, scientific and technological relations to enhance independent development in Africa.

For decades, Chinese aid and involvement in the health development of African countries have proven enormous advances to the growth of the continent.

The health development forum of China and Africa gained momentum after FOCAC forum was established to integrate a health development program, aimed at promoting ability and technology transfers to cutting-edge research (Ernest et al., 2016). The relevance of China in global medical objectives is a major sustainable development, which is focused not only on eliminating poverty and on health imbalances among the population of the world, but also providing chances to live freely, healthy, and full life (Wang et al., 2016). Optimizing every citizen's health remains a critical aspect of the SDG objectives, as it decreases the public health problem of contagious diseases. Resolving gaps in awareness between poor and advanced nations requires creative global and multilateral cooperation, with an emphasis on major contagious diseases, new epidemics, and growth of obesity-related cardio-metabolic and other prolonged disorders (Wang et al., 2016).

A. China health diplomacy during Ebola epidemic in Africa

The Ebola virus was discovered in 1976 and has spread to about a dozen countries around the world, on a low scale (Breman et al., 2016). However, in 2014, there was a twist to its occurrence as the Ebola haemorrhagic fever broke out first in Guinea, spread to other countries and became prevalent in Guinea, Liberia, and Sierra Leone. The WHO declared it a Public Health Emergency of International Concern (PHEIC) on the 8th of August 2014 (WHO, 2014). The occurrence was the largest Ebola outbreak in history (Huang, Xu, and Mao, 2018). Even though the outbreak revealed the failure of global health governance, it also revealed the part China played in tackling emergencies related to health and on an international scale (Huang, 2017). China gained popularity by coming to the aid of West African countries that had multiple occurrences of Ebola. During the outbreak, China became the first country to provide aid in the form of medical supplies and the dispatch of health workers (Cheng, 2015). Shortly after the World Health Organization had declared Ebola as a Public Health Emergency of International Concern (PHEIC), a joint prevention and control mechanism was set up by China to address the control and prevention of the disease and to create an exigency plan for the possibility of the occurrence of another epidemic. (Kunming Daily, 2014). Consequently, China's leveraged the opportunities provided by the Ebola epidemic, and the dwindling global commitments of world powers such as the European Union and United States,

to pave way for its soft power in Africa. According to Nantulya (2018), this provided the potential of an intentional long-term plan and the possibility of sustained efforts by China.

The theory of soft power was aptly captured by Seymour (2017) who posited that State A is likely to do the biddings of State B if the actions of State A appeals to State B. China presumably adopted the strategy by providing healthcare assistance to African countries, and there was no best time to seduce the continent than when it was in trouble with the Ebola epidemic in West Africa. Guinea, Liberia, and Sierra Leone were the West African countries that were mostly affected by the Ebola virus and thus regarded as the epicenters.

Emergency aid supplies such as protective suits, disinfectants, rescue monitoring equipment and cash aid were provided as Ebola relief. Furthermore, an agreement between the Chinese government and the World Food Program (WFP) was reached. The Chinese government entrusted three African countries that were the most affected by the Ebola virus Guinea, Liberia, and Sierra Leone to the WFP, to get food assistance as a way of reducing the shock and perhaps food shortage that was likely to occur because of the disease (People's Daily, 2014).

Guinea was one of the three countries that was entrusted to the WFP to get food assistance, to reduce the impact of the Ebola disease outbreak. China has been involved in the healthcare system of Guinea in the following ways:

- During the Ebola outbreak, the Red Cross Society of China responded to the epidemics by donating $50,000 (People's Daily, 2014).

- Emergency aid supplies such as protective suits, disinfectants, and other equipment in the fight against Ebola (People's Daily, 2014).

In Sierra Leone, it is on record that China contributed to containing the spread of Ebola through the following ways:

- The construction of a 100-bed capacity Ebola treatment center in Sierra Leone (Global Health Governance, 2018).

- Sierra Leone was one of the three countries that was entrusted to the WFP to get food aid, to mitigate food shortages that may have occurred because of the outbreak (World Health Governance, 2018 and People's Daily, 2014).

- Provision of health infrastructural facilities such as the BLS-3 Laboratory. It represents the first BSL-3 laboratory in Africa (Huang, 2017).

- A team was sent to Sierra Leone to establish the laboratory testing program (Huang, 2017).

Athletic travelers from West Africa were quarantined by the Chinese government in 2014 (Huang, 2017). As a result, these countries became the focus of international efforts to contain the spread of the disease. China provided aid to these countries in batches. The first four batches of assistance were based on crisis response. The fifth batch was the post-disaster reconstruction.

1. **First batch**

Chinese healthcare assistance to several African countries in April 2014 was noted as follows (Xinhua News, 2014):

- Large, charted airplanes were used to dispatch healthcare supplies.

- Medical personnel were dispatched to help in controlling the disease.

- A Biosafety Level 3 (BSL-3) laboratory was built.

- An infectious center for the control of the disease was set up.

2. **Second batch**

The followings were noted as healthcare assistance China gave to several African countries in August 2014 (China ministry of commerce, 2014):

- The mechanism for joint Ebola prevention and control was launched by the Chinese government.

- Medical supplies relevant for the control and treatment of the disease worth 30 million Yuan were sent to the affected countries.

- A team of experts in epidemiology, virology and testing were sent by the Chinese government.

- Capacity development activities were carried out specifically, training was held on the utilization of the medical supplies that were sent. Local health personnel were trained on the treatment and control of the disease (China CDC, 2014).

- The group of medical experts that were sent to the affected countries joined in the treatment of patients with Ebola (China CDC, 2014a and 2014b).

3. Third batch

China continued to dispatch expert groups to affected countries monthly. The following were noted as China's healthcare assistance to African countries in September 2014.

- Laboratories were erected, equipment for the detection of the virus was provided, and protective materials were also provided for the medical staff.

- Delegates of the Disease Control and Prevention Office of the Chinese Centre for Disease Control and Prevention (China CDC), in collaboration with members of the CDC in the affected countries carried out research on the infectious disease.

- The Ebola virus detection kit verification was completed (China Radio, 2014).

- The World Food Program (WFP) was directed to provide food aid worth 2 million USD (Chinese Ministry of Commerce, 2014a).

- To curtail the infectious disease from spreading, China extended its aid to countries close to the affected countries like Nigeria, Mali, Congo, Cote d'Ivoire, Benin, and Senegal (China ministry of commerce, 2014b).

4. Fourth batch

The Chinese government announced in October 2014 that it would help fight Ebola in West Africa (Chinese Ministry of Commerce, 2014).

- Send public health expert advisory groups to affected countries to assist in the prevention and control of Ebola. The Chinese government also averred that they would assist in training medical personnel.

- Provide aid supplies such as beds for hospitals, personal protective equipment (PPE), incinerators, and ambulances to aid mobility. Focus was on treating and transporting patients to safety, as well as strengthening disinfection and medical waste treatment.

- Build treatment centres, dispatch medical personnel, and assist in running the treatment centre.

- Give the sum of 6 million USD to the United Nations Multi-Trust Fund, so that the United Nations will respond to the Ebola epidemic.

- Launch the China-Africa Cooperation on public health. Training was also provided on the prevention and control of epidemics.

- Strengthen international cooperation and attend regular meetings for the Ebola Emergency Response.

5. **Fifth batch**

The fifth round was a post-disaster reconstruction aimed at the following (Chinese Ministry of Commerce, 2014):

- Boost support in the continued effort to curb the spread of Ebola.

- Establish and strengthen public healthcare systems to boost the capacity of affected countries in the fight against the disease.

B. **China's benefit from healthcare assistance during Ebola epidemic**

With the loophole in Africa's healthcare system, which has consequently led to the death of millions of people, China provides healthcare assistance to Africa and renews her engagement with the continent. This provision has always been welcomed by African leaders with praises of the "no strings attached" policy. However, this is a ploy to build social network, develop trust, gain respect, and influence relations through personal favors, ties and hierarchies that could pave the way for business and political dealings. Hence, it can be said that China deliberately uses healthcare assistance, to gain soft power in Africa. The strategy of China is aptly described in the assertion of Nye (2004) which states that it is easier to obtain something from someone by simply getting the person to admire your ideals, rather than using the reward and punishment approach which in many situations are not as effective. This was referred to the "art of seduction." (Nye, 2004). The act of seduction paves way for soft power. Therefore, soft power can be used as a tool to handle international relations for foreign policies.

The global north and international organizations increasingly exercise global health diplomacy through the provision of humanitarian assistance during emergencies such as a pandemic or an epidemic. Hence, health diplomacy is a vital instrument for enhancing bilateral/multilateral relations (Drager and Fidler, 2007). It is also a relatively new domain of competition particularly between China and the United States of America. Health diplomacy as a soft power helps in building the ideal image or reputation through the provision of healthcare assistance and programs especially in times of emergencies. Thus, it can be said that health diplomacy falls within the scope of soft power. Additionally, soft power provides an opportunity for the donor country to exert its authority with the consent of the recipient country.

The increase in globalization accompanied by a corresponding increase in infectious diseases necessitates global health diplomacy for addressing global health threats. Coincidentally, with the emergence of the recent COVID-19 pandemic and other diseases such as Ebola, Zika and Chikungunya, health issues cannot be sufficiently treated in isolated units. Consequently, there is no best time to emphasize global health diplomacy than now in order to neutralize and manage health threats. Traditionally, health diplomacy was based on international partnership with the state to protect human life, and trade interest from the spread of infectious disease. Health diplomacy then was used as a tool to prevent commercial interruptions and less of a strategy to encourage closer relations among nations (Youde, 2010). Specifically, this was seen during the Bubonic or Cholera plague when ports were closed and quarantine measures were imposed to prevent the exchange of goods, and movement of people (Youde, 2010). Conversely, in contemporary times, health diplomacy is more of a political activity that seeks to improve the health of the state while enhancing international relations (Thomas and Ilona, 2008). Thus, the policy making processes in which actors within and outside the state act on global health issues occurring in and outside the health sector describes global health diplomacy (Norman, 1975).

In historical contexts, the motive for China's health diplomacy with Africa varies. The initial claim by Chinese officials was that it was offered primarily for humanitarian purposes, to help improve the health of Africans. Another school of thought opined that China's medical aid to Africa was basically driven by politics, as

it was closely linked to her foreign policymaking and was the major focus of her global geo-political setting. Hence, Wang and Sun (2014) picked up this perspective and attributed reasons for the aid being offered to Africa to compete with Taiwan for the UN seat through the support facilitated by African countries, exportation of the ideology of proletarian internationalism and socialist experience and endeavors to handle the challenges in the dynamic global context.

Notwithstanding China's rising role as a major and international health donor, the country has also been facing comparable challenges as other players in the international health funding space. These challenges are namely: synchronization of health investments, resource prioritization, programmatic and financial accountability, health workforce shortage and problems of sustainability (Tambo et al, 2019). Health support was evidently a part of this huge feat, as China now has a place among the top 10 ranking bilateral African health donors in the world. Overall, records show that between year 2000 to 2012, China had committed a minimum of $3 billion to around 260 health, water, and sanitation projects in Africa (Grepin et al., 2014). Typical forms of healthcare assistances done by China were the dispatch of medical teams in different batches to tackle different health challenges in the African continent. For instance, in 2014, China sent out 43 medical teams to 42 African nations that cost an estimated $60 million (Liu et al., 2014). Similarly, Wang and Su (20as,), also reported the dispatch of medical teams, provision of medical equipment and medicine, donation of health funds and the construction of health care structures as prominent activities conducted in medical assistance from China to Africa. The report confirmed that the country posted 2000 medical teams to 46 African nations and treated over 200 million African patients. It also stated how the country assisted in the building of various health facilities, training of health care personnel and donation of medical equipment. Fast forward to 2014, China had assisted in training more than 3,000 health officials, built over 30 malaria-treatment centers and hospitals, while investing about $124 million in medical kits.

A top challenge in assessing the impact and scope of China's health diplomacy to Africa has been described as a lack of information as to the quantity of such aid, the standard decisions behind releasing aid, and the determinants of aid impact (Weston et al. 2011). As an example, Li (2011), had difficulty in laying hands on any reliable report that depicts the exact number of medical teams sent to Africa.

This buttressed critics' assertions of an absence of transparency by the Chinese government presumably aimed at avoiding either the burden from Africans to do more, or from the home front on how much was done when their own citizens were evidently impoverished. A research partnership between Development Gateway, Brigham Young University, and a college in Virginia through a body named "Aid Data" attempted to trace foreign aid provided by China in Africa. Some scholars made use of this data to report a $231 million pledge for health project by China over the past decade (Grepin et al. 2014). However, other scholars reported that China's disbursement on health-related project on an annual basis is valued around $150 million (Liu et al. 2014).

C. China health diplomacy during COVID-19 Pandemic in Africa

During the peak of COVID-19 pandemic, China was the first country in the world to organize an anti-pandemic summit with Africa. Furthermore, it has called on other rich countries to do more to support African nations during the pandemic. It has shown an example by dispatching medical aid such as protective gears, masks, and ventilators to almost all the 53 African nations. From the beginning of the pandemic until November 2021, China has distributed over 1.7 billion doses of COVID-19 vaccines to more than 110 countries and agencies around the world, including 50 African nations (Klomegah, 2021).

At the beginning of 2021, China was one of the main producers of COVID-19 vaccines, but it is 'vaccine diplomacy' gained momentum in July 2021 when Beijing first donated dosses of vaccines to some Latin American countries (Lawler, 2021). Egypt was one of the first countries to receive the donation Chinese vaccines manufactured by Sinopharm in December 2020 (Lee, 2021).

In November 2021, following the 8th FOCAC Ministerial conference which was held in Dakar, China has renewed its promise to provide about 1 billion doses of COVID-19 vaccines to African countries, comprising of 600 million doses as donation, and 400 million doses through commercial agreement. Until mid-2022, nearly 50 African countries have continued to receive vaccines from China. While the pace of the delivery has gained momentum, the total number of delivered vaccines has constantly diminished due to financial restrictions of some of the African countries and over reliance on the UN initiated program for COVID-19

vaccines known as COVAX (Bridge, 2022).

China's president XI Jinping has pledged to support South Africa's effort to combat COVID-19 due to the solidarity shown by Pretoria towards Beijing during the early days of the pandemic (VOA, 2020). Xi also called on Chinese people residing in South Africa to support the government's effort in tackling the pandemic (VOA, 2020). On the issue of COVID-19 vaccines, China has contributed 300,000 doses of the CoronaVac to the South African National Defence Force (SANDF), although South African authorities opted not to administer the Chinese vaccines due to the abundance of other products such as Pfizer, Johnson and Johnson, AstraZeneca and decided to distribute them to other African countries in need. (Daily Maverick, 2020). However, like many other sub-Saharan African countries, South Africa heavily depends on China for the supply of Personal Protective Equipment (PPE). In 2020, more than 55% of South Africa's PPE import came from China which was a sharp increase from about 18% demand in 2019 (China Power, 2021).

The assistance provided by China during the Ebola epidemic has been one of the largest, most benevolent aid and developmental succor given for African healthcare in the history of China. Furthermore, significant contributions were made by China in containing the spread of the disease. This was followed by capacity building of the local healthcare personnel of the affected countries with the realization of the immunity of the Chinese personnel. China leveraged the utilization of healthcare technologies provided by the military health personnel for the promotion of bilateral relations. China also enhanced the national biosecurity capacity of the affected countries. This is reflected in the construction of biosafety laboratories, the development of anti-viral drugs, therapeutic antibodies, and vaccines. Thus, the prompt response of China to the Ebola epidemics provides opportunity for future international collaboration on global health security.

V. CHINA'S COVID-19 DIPLOMACY IN NIGERIA

Even before the COVID-19 pandemic, China contributed financial resources, protection, and treatment supplies to several African countries including Nigeria, to prevent the spread of the Ebola virus to Nigeria (Embassy of China, 2014). Notwithstanding strong criticism from The United States and its western allies against China's transparency towards COVID-19 pandemic, Nigeria neither issued an official condemnation nor embarked on "band wagoning" attitudes to heat up anti-Beijing sentiments. However, during the early days of the pandemic, some African countries including Nigeria summoned Chinese envoys in their respective countries and interrogated them over allegations of maltreatment and racist attitudes against their citizens, residing in China (PM News, 2020). Against the backdrop of the allegations, African government-level responses have quickly shifted from strong critique of China to a soft return to normality. However, China's economy has shown a strong growth trajectory amidst a global recession especially during the pandemic (Finbarr, 2020). In April 2020, Nigerian doctors held demonstrations against the federal government's plan to invite Chinese doctors to Nigeria for sharing their experience with the Nigeria center for disease control (NCDC). However, the plan was rejected by the Nigerian medical association (NMA) to support the country's fight against COVID-19 (Premium Time, 2020). The tables below indicate the perceptions of respondents about China's health diplomacy.

There were many concerns, particularly from the West about how China distributed the COVID-19 vaccines to countries in dire need especially those in the global south. The pattern and flurry of health diplomacy in which Beijing reached out to so many countries including poor and rich nations for assistance might be described as what some experts called "Chinese vaccine diplomacy" while others called it China's politics or "global soft power drive. John Campbell who was a senior fellow for African policy studies at the Council for Foreign Relations in the US, described China's activities as "vaccine diplomacy" and claimed that Beijing attempted to frame itself "as the solution rather than the cause of the COVID-19

pandemic (Campbell, 2021)." The Western countries were more reactive in terms of distributing the vaccines to poor countries and were heavily criticized for hoarding tons of the vaccines. While Russia and India competed with the Chinese eagerly to develop and distribute vaccines. Nwachukwu the Sub-Saharan Africa Community Manager for the independent journalism website Global Voice argued, "it's hypocritical to heckle China for soft power COVID-19 vaccine diplomacy as Western countries pursue vaccine nationalism (Egbunike, 2021)".

During the early days of COVID-19, the Nigerian government hesitated to contact the Chinese authorities to request vaccines. However, as the number of reported cases and fatalities rose, the then-foreign affairs minister Geoffrey Onyeama revealed to the media that Nigeria was in talks with the Chinese counterpart to secure the vaccines (AA, 2021). Although Nigeria is part of the WHO COVAX program scheme, many rich Nigerians or those with dual nationalities have opted to access the vaccine in other developed countries. They do not have to rely on the Nigerian authorities to receive vaccinations. Others, however, do not care much about the origin of the vaccine if it is effective and endorsed by the Nigerian health authorities (Egbunike, 2021). As Eric (Online interview, 11.02.2021) argues, that Nigeria has more complex relations with China in terms of strange optics from authorities and citizens despite the US hangover during the Trump administration. The year 2020 was a tough year for Nigeria and China due to the pandemic impact, and corruption allegations against illegal mining activities by the Chinese in several parts of Nigeria. In addition, there were speculations surrounding China's loan to the country as well as territorial sovereignty, which Beijing kept debunking as a smear campaign to tarnish its international reputation. (The China in Africa Podcast, 2021)." However, according to Nwachukwu (Online interview, 11.02.2021), China has performed much better than the West in terms of optics to help Nigeria during the pandemic. One such example was how China's Alibaba, a multinational technology giant, donated at least two consignments of medical equipment to Nigeria in an obvious symbolic gesture to help the country tackle the pandemic. Indeed, China took advantage of the pandemic to boost its international relations at a time when the US government was not willing to support other nations. "During the pandemic, China took the initiative to set up a COVID-19 vaccine distribution hub in Ethiopia and roll out a production center in Morocco. China is strategically trying to boost its health

silk project by creating more options for rich and middle-class Nigerians to travel to these destinations than the United Arab Emirates for medical assistance. It's a strategic alliance that can yield win-win relations for both China and the entire African region (The China in Africa Podcast, 2021)".

Moreover, Nwachukwu (Online interview, 11.02.2021), claimed that Chinese soft power vaccine diplomacy is not just a gift considering the presence of protagonists and actors in Nigeria and across Africa. Some Chinese private enterprises in Nigeria use methods of educating and training Nigerians in China and in return, they work in their companies under an agreement that could be a win-win for both parties. Thus, the distribution of China's COVID-19 vaccines will also be essential for Chinese government agencies and private firms that are doing business on the ground, especially in Nigeria, but also benefit Nigerians. That said, it does not mean Nigerians will abandon Western medical assistance despite "vaccine nationalism" in the US and Europe. In addition, considering the large number of Nigerians in the diaspora, they can foster relationships with their country of residence and Nigeria. Nevertheless, China provides another option for Nigeria's market, and no longer are the days of absolute dependence on Western nations. This is because China is now an alternative partner that accounts for at least fifty percent of Nigeria's partnership with the globe. "If Nigeria cannot get what it needs from the West, then it looks up to the East, for China has the capacity to help (The China in Africa Podcast, 2021)".

On the contrary, however, according to Steve Itugbu, a former presidential advisor to a former Nigerian President (Online interview, 08.03.2021), claimed that African countries had been abandoned for far too long by their traditional Western allies. This has left a vacuum that other nations like China have capitalized on to foster relations with African nations. The West has again attempted to spread misinformation against Chinese vaccine diplomacy to dissuade African countries from accepting China's efforts during the COVID-19 pandemic. He argued that the debate about China using its vaccine diplomacy to persuade other countries and boost its global influence is narrow-minded. Instead, "China's efforts to provide COVID-19 vaccines should be appreciated as a global public good." This cannot be compared to the American attempt to partnered with countries like India and Japan to distribute vaccines and counter China in the Asian region. Additionally, he claimed

that the West tried to tarnish China's genuine efforts by portraying Chinese activities on the African continent as a soft power tool. Steve, however, suggested that the entire world needed to come up with an effective health response to contain the COVID-19 pandemic and to prepare for a future pandemic (SOAS University, 2021). It is obvious that China's vaccines were produced for financial gain. However, it has distributed free COVID-19 vaccines to several African countries like South Africa, Nigeria, and Zimbabwe among others according to their needs and the number of fatalities caused by the virus.

A. China Public health emergency conference against COVID-19

After nearly five decades of diplomatic relationship between Nigeria and China, and before the COVID-19 virus case was detected in any Sub-Saharan African country, the former Chinese ambassador to Nigeria Zhou Pingjian organized a public health emergency conference in Abuja. He underscored China's strong relationship with the country. The ambassador mentioned that "prevention and control" remains his country's top priority against the virus. Moreover, he added, "China is fulfilling its responsibilities for the health and welfare of its people and the global population as a whole." Zhou also claimed that "China's effective response has averted the further spread of the virus across the world." A Nigerian official at the meeting said "facts have shown that the virus has been contained and that Nigerians have little to fear from it. He further noted that Nigeria's bilateral cooperation with China is too significant to be distracted by COVID-19 or any other virus". (CGTN, 2020)

As global news continues to spread about the spread of COVID-19 in China, ambassador Pingjian held a presser about the spread of the virus. He explained China's effort in trying to contain the spread of the disease. He says (Pingjian, 2020a): "This is going to be unforgettable spring festival for the Chinese people as families are separated but united to stand together in the face of the pandemic. The safety and health of the people always come first, and thus the prevention and control of the outbreak is the country's most important work for now. The Chinese government attached great importance to the epidemic. President Xi Jinping has repeatedly given important instructions on preventions and control of the virus. He personally held a meeting of the lunar year for deployment and remobilization. Many

of our friends here were celebrating with us at the Chinese temple fair, at China's culture center. That was the biggest and most important traditional holiday for the Chinese people and leaders attended. Based on the leadership and commitment of President Xi China has built a nationwide control and prevention system with focus on Wuhan – the epicenter and the capital city of the Hubei province. From the central government to local level, all aspects of and works and conducts are open and transparent and we're speeding up our progress in a scientific and orderly manner. The pandemic can be contained, controlled, and treated. We, believed that under the leadership of the communist party of China, and the Chinese government, the people of the country were united, and were fully capable and confident to win this battle and boost prevention and control at an early date. The one-thousand bed makeshift-hospital at the Wuhan hospital that was built just in 9 days and is in full operation today, and another hospital with 1500 beds will be operational soon which was constructed within 10 days. You can see the determination of the Chinese people to fight this disease. Fighting the disease is a common concern of the international community. China is determined to work with other countries in the world including Nigeria to respond to the epidemic actively. We have informed the World Health organization (WHO), about the latest epidemic situation and have shared information about the virus genes sequences with all parties at the first attempt. We have taken the most comprehensive, containment and mitigation measures, which many of them going beyond the requirement of the international health regulations from the 2005 version. By doing so China is not protecting the health of its people but also that of the people around the world. Such efforts have been recognized by governments around the world as well as the WHO."

As the Director-General of the WHO Dr Tedros says on many occasions, China deserves gratitude and respect for its effort to contain the outbreak, and that China's experience is worth learning for other countries. As he highlighted, China has even taken more measures to contain the outbreak than it's required to do in case of an emergency. China is setting a new standard for outbreak responses for other countries (Pingjian, 2020a). We thank the international community including Nigeria, for its full understanding and support for China, as you are aware the WHO declared the outbreak as public health emergency of international concern (PHEIC), and as the Dr Tedros clearly stated, that the main reason of this declaration is not

because of what is happening in China, its more about the protection of countries with weaker health system, and which are ill-prepared to deal with the potential spread of the disease. WHO continues to have full confidence in China's capacity to control the outbreak. There is no reason for measures that unnecessarily interfere with international travel and trade. WHO does not recommend limiting trade and movement and the director-general's recommendation should be seriously considered. On the current circumstances solidarity is what the World needs. The epidemic is mainly occurring in China with limited spread to other countries. China has enormously contributed to the World with its concrete actions. All countries should adopt a responsible attitude, work together to combat the virus, and avoid overreaction that will result in more spillover effect of the virus. Life comes first, the Chinese government is committed to safeguarding the safety and life of its people of every foreign national in China, including the Nigerian expatriate and address their legitimate concern in a timely manner. The embassy has constantly kept in touch with the Nigerian embassy in China. As of now, there's no Nigerian nationals or Chinese nationals that are affected by the epidemic. We will continue to strengthen communication and cooperation with the international community and work together for prevention and control. Finally, I would like to echo what Dr Tedros pointed out during the previous conference. "He says this is the time for facts do not fear, this is the time for science not rumors". "This is the time for solidarity not stigma (Pingjian, 2020a)."

It is not the first time we faced an epidemic as you may remember in 2003, the SARS outbreak and 2008, the earthquake. We believe we will get over it soon because the fundamentals of the Chinese economy will not be affected by the epidemic. So, with the victory over the epidemic the economy will pick-up, and we have confidence to achieve our goals today, and we have confidence over China's economic and trade cooperation internationally. We discovered that the Nigerian community in China have taken this issue seriously. The health cooperation between China and Nigeria and Africa is an important part of China's external relations. As you can remember, health cooperation is one of the eight major initiatives, we put forward at the FOCAC summit back in 2018. After the announcement of PHEIC, the Chinese relevant authorities have strengthened the communication and cooperation with its foreign counterpart. The cooperation will be based on case by case, and any

request made to our foreign partners will be taken very seriously (Pingjian, 2020a).

B. Chinese Confucius Institute's public awareness of COVID-19

Chinese Director of the Confucius institute at the University of Lagos, Wang Yongjin explained about China's record-breaking efforts and how Nigerians can protect themselves during the pandemic (Yongjin, 2020): "I think all the Chinese people together with our consulate in Lagos, we just try to pay enough attention to the news every day. Since we learnt about the very sudden and very quick spread of the disease, we decided what we should do for the city of Wuhan. We tried to explain about the truth of the situation in China to many of our Nigerian students in Lagos. We decided to donate something for the city, because the city was facing a disaster and together with the government and the consulate's help, we donated some money to the city.

In the beginning of the outbreak, Wuhan city was locked down, and no one worked hard as efficient as the Chinese government. As the virus became widespread, we compared all the governments and countries around the world, and so no one is doing it better than China. The Chinese government is the most efficient around the world. Scientists are working hard to produce vaccines, and we are confident that the vaccines will work out. Prof, Yongjin (2020) claimed that what the Chinese has done regarding the virus is perfect and 100% correct, but I cannot comment on whether other countries are wrong or have not been doing the right thing to contain the virus. On the issue of stigmatization against the Chinese people the professor said (Yongjin, 2020): "I just learnt that there has been violent attack against the Chinese people, this is not good, if you are scared of contracting the virus from a Chinese person then just keep your distance away from that person, but you don't have the right to fight a Chinese person which you are not aware whether they are the real carrier of the virus. I just feel it is not correct for people to be violent. The Chinese are generous people to even those who have wrong ideas about them, take for example, we have been helping many countries outside China to fight against the disease because we have experienced it and we have got a lot of experiences. As the epidemic is almost over now in China, we can spere some doctors and experts to work in other countries and help them. So, I'm sure people have correct ideas about what the Chinese people are, and they must have correct

ideas about us. I am sure people have been following what has been happening in other countries, and the various governments' reactions to this epidemic, and if people will have made a comparison, surely, they will tell if China is to be blamed as the carrier of the virus."

According to (Yongjin, 2020), when the Chinese people realized that the virus was already in Wuhan, people decided to warn each other but we never tried to escape from taking the responsibility and took lesson from the epidemic. Now people all over the world have realized that it's very possible that the virus did not originate from Wuhan, therefore it is very wrong to name it as Wuhan epidemic. While it was discovered in Wuhan, but nobody knows whether it started earlier in other countries. Many people have jumped to a conclusion and claimed to the world that it could have started earlier in Hawaii (Yongjin, 2020).

According to (Yongjin, 2020), it is always wrong to name it as Wuhan epidemic. "We Chinese people are totally against this. Many believed that Chinese people including professor Yongjin, claimed that President Xi Jinping regularly conduct his PCR test and thus encouraged all the Chinese people because people work together every day. We must make sure that we are safe to each other. Authorities are very strict in China, because if they test you and found out you have a high body temperature you will be told to wear a face mask otherwise you will not be allowed to appear in the public, just to make sure that we are helping each other and don't cause trouble for each other. Since the beginning of the epidemic and before it arrived in Nigeria, my fellow colleagues have been taking care and looking after ourselves, we test our body temperature to make sure that we are in a good condition and feel safe. We encouraged ourselves to have regular physical exercises because we have a good sport center on the campus. Many Chinese people are aware that Nigeria is very good at containing previous epidemics like the Lassa fever and Ebola. So, Nigeria is famous for dealing and fighting against epidemics and I am sure that the Nigerian government will tackle COVID-19 very well".

C. Allegations of maltreatment and the plight of Nigerians in China

The alleged maltreatment of Nigerians in China's Guangzhou city has sent shockwaves across Nigeria and the diaspora. Many Nigerians were stunned when a video on several social media platforms showed how the Nigerian Consul General

confronted Chinese officials, whom he accused of "maltreatment". The Consul appeared wearing a face mask and his traditional dress, expressed anger with a loud voice at the Chinese authorities while raising a Nigerian passport saying (Sahara TV, 2020): "This passport belongs to the Federal Republic of Nigeria. No country has the right to seize another country's international passport. Why only Nigerians? You didn't say only Nigerians should go to work, and the Chinese should be quarantined. Everybody must be seated at home. Those who refused to sit at home, Nigerians will report them to the police and fined them. In that case, if you want your policy to work, I'm suggesting you do this: Everybody including the Chinese should sit at home for fourteen days so that issues of discrimination should not arise. Why are your authorities seizing Nigerian passports which do not belong to China? If you confiscate a Nigerian passport, it is just like you seize Nigeria as a whole. This is unacceptable! Also, you failed to communicate with us that you visited all Nigerian residents and asked them to evacuate their homes and be quarantined. Do you communicate with us? No! Nobody communicates with us. If you want to do a fourteen-day policy shut down everywhere and no discrimination. Everybody must sit at home. In Nigeria, we have a lot of Chinese people as I mentioned to you last time. However, our authorities never visited and quarantined them. You will never receive such information. Why then Africans and Nigerians in particular? You have people from Europe, the US, and other countries. The Nigerian government will not accept this. It is unacceptable. I am a Nigerian diplomat and in line with the Vienna Convention of 1963, the consular has the right to protect his people. What I am doing now is to protect all our Nigerian nationalities. They are not criminals, so why are you harassing them? Your police harass and humiliate them."

1. Nigerian top officials' response to alleged maltreatment of Nigerians in China

The Former Speaker of the House of Representatives Femi Gbajabiamila also weighed in on the alleged inhumane treatment of Nigerians in China. According to Channel television (2020c) reports, the former speaker demanded an explanation from the Chinese ambassador to Nigeria. Gbajabiamila met with the Chinese envoy and described the situation as unacceptable. He confronted the Chinese ambassador with the protest video showing the Nigerian consul - who expressed his anger about the plight of Nigerians in Guangzhou. According to reports Channel television

(2020c), the viral video also showed how Nigerians were forced out of their homes, rounded up, and their passports seized by Chinese police. The video also showed how Nigerians were forced into another fourteen days of quarantine after an initial fourteen days spent. The Former Speaker told the Chinese Ambassador (Gbajabiamila, 2020): *"If the diplomatic relationships between our two countries are for the mutual benefit of our citizens, then there must be respect for our citizens, and we should not compromise it. As a government we will not allow Chinese or other nationals to be maltreated, just as we will not allow Nigerians to be maltreated in other countries."*

The Former Secretary of the Government of the Federation, Boss Mustapha said the Chinese Ambassador was informed about Nigeria's response to the alleged incident. Mustapha also gave Nigerians living in China assurance of the government's commitment to their safety and well-being. The Former Secretary who was also the Head of the Presidential Task Force on COVID-19, held a media briefing and announced that (Mustapha, 2020): *"We met with the Chinese ambassador yesterday, to convey to him our concern about the information coming out. I saw some of the clips that are being ran on social media, but I must commend the efforts of our officials there, our diplomatic officers in China. Because in one of the videos I saw, was one of our Nigerian officials holding a Nigerian passport, and he was confronting the Chinese official, and was asking him whether he has the right to do what he was doing. We are taking steps and one of the steps is diplomatically inviting the ambassador, to formerly launched that complain to him, and I believed we will receive a positive response to that. I can assure you that it is the responsibility of the Nigerian government to protect our citizens wherever they are on the face of the earth. And we will not renege on that responsibility. We will do everything to assure them and secure their protection. If they also desired to return home, we will facilitate that, for them to come back home."*

2. Nigeria's Ministry of Foreign Affairs' diplomatic response

Upon the allegations of the maltreatment of Nigerians who are residents in China, the Ministry of Foreign Affairs summoned the Chinese ambassador to Abuja to clarify the matter. In a televised interview (Onyeama, 2020a), with the former Nigerian Minister of Foreign Affairs, Geoffrey Onyeama, the top diplomat addressed the issue of the alleged maltreatment of Nigerians in China. Onyeama said the

government is extremely concerned about the video that appeared in the media. He continued by saying (Onyeama, 2020a): "It was totally unacceptable to see what appeared to be Nigerians and other Africans being expelled from their residences and hotels. In another video, black Africans were not allowed to enter a restaurant. So, we investigated those circumstances. First and foremost, I must clarify that we were not in China. So, we must rely on those who were there. We have an embassy in Beijing, a Consul General, a Consulate in Shanghai, and a Consulate in Guangzhou - where the incident took place. Therefore, we were in touch with all of them, as well as the Chinese ambassador here in Nigeria. We tried to get to the bottom of the issue. At the very beginning, it took many people by surprise. It also took a while for the people in China, to fully get a sense of what was happening. As far as our investigation is concerned, this was confirmed by our officials there".

The minister continued by saying (Onyeama, 2020a): "Our officials there confirmed that essentially, the flight came in late March, carrying Nigerians and about 7-9 of them tested positive for COVID-19. One of them was a woman who operated a restaurant there. This restaurant was patronized by Nigerians and other people of African descent. Chinese officials were concerned that new COVID-19 cases arrived in the country after the Wuhan epidemic was contained. Chinese authorities decided to act quickly by reaching out to the Nigerians and Africans in that community. As we understood, they put strong measures in place including quarantine. They were told to stay at their residences, hotels, or other places. They were also instructed that anyone who left their places should not be allowed back in. It was something they intended to enforce. I think there were also some confusions among Nigerians and Africans, about why it seemed to target them. Some of them ventured out and were not allowed to return. Some of them were not happy to have to retake tests after spending fourteen days in isolation already. As we saw it, there was a lack of communication. The consul in Guangzhou argued about the seizure of Nigerian passports. At the end of the day, we felt it was poor communication. Although the authorities in Guangzhou had issued their directives, they unfortunately failed to communicate them to the African consulates there. It was a dialogue with the deaf. And we felt that this led to a lot of problems".

The minister stated that there must be some vague information delivered to some of the African business owners in the city of Guangzhou about the spread of

the virus from arrivals. Former minister Onyeama also revealed that his ministry was not aware of the confiscation of some Nigerian passports. He further assured the Nigerian public that a similar incident would not arise again. He said: "We have an embassy in Beijing. Our first court on-call was to the Ministry of Foreign Affairs in Beijing. We registered our protest and made it clear that we would not accept the violation of Nigerian rights anywhere in the world. We expressed our outrage over what we saw on social media from the people living there. We demanded several things, including that the Chinese government investigate what is going on there, and take immediate action. Also, we wanted an unequivocal statement from China's government about what happened and whether there was racism or discrimination. They responded and engaged with us. The Chinese government released a statement saying they have zero tolerance for discrimination or racism, they also sent a team to Guangzhou to investigate what was taking place. Now, the Chinese authorities in Guangzhou are engaging with our consulate, something that should have happened earlier. I have been assured by our officials in Beijing, Shanghai, and Guangzhou that the matter has been resolved. Of all the accusations made, there is nothing to indicate any threat to Nigerians' physical, and material well-being and properties. I think their safety is assured. But more importantly, is that we determined that they should be treated well, and their dignity should be respected. Under no circumstances should we see images of Nigerians out on the streets with their possessions and with nowhere to go apparently. The Chinese government has assured us that even Nigerians who cannot afford the isolation facility will be assisted. Another area in which I think there was a lack of communication was that the Chinese authorities were keen to send both Nigerians and other Africans to a specific isolation center, and that was not welcomed by many."

About Nigerians who wanted to return home from China, minister Onyeama said his ministry is working closely with the Nigeria Emergency Agency (NEMA), to evacuate them. He said (Onyeama, 2020a): "We asked several airlines about the price on how we could safely bring back our citizens." But he also stated that there are several other challenges, including a lack of isolation facilities to accommodate our people when they return to Nigeria. "There are thousands of Nigerians from the United States, the UK, the UAE, Sudan, and others who want to come home. We just don't have enough capability and resources to accommodate them all immediately.

We probably must bring them back in stages. They also need to be tested before they leave the country, which is also quite difficult due to the lack of adequate testing equipment." But the Minister hoped that the Nigerian government could soon dispatch planes to bring back those who wanted to return home.

As more information is revealed, on the 18th of April 2020, the minister addressed members of the press. This was after receiving some information about the different categories of Nigerians involved in the incident. The told the media that (Onyeama, 2020b): "According to the Nigerian authorities, there are different categories of Nigerians, those who have been there for a long time (10-15 years or so), and those who are married to Chinese people, who have their papers. There are categories of those who have lived for 10-15 years but are illegal, there are those who have come for a very long time but don't have Nigerian passports, those who arrived there with a passport from another country, and there are those who just came for a short period and are supposed to return. Some live in hotels like businesspeople who have just arrived, and others have their own homes. The Chinese authorities claim that some are running away from testing. Some Nigerians run away because they don't have legal papers to stay. We have different conflicting narratives. But clearly, there is a narrative that cannot be denied about certain treatment toward Africans and Nigerians that is taking place. These treatments are reprehensible and unacceptable. Whatever the circumstances, like I said the last time I spoke, any situation that smacks of racism, is an absolute red line for us, as a people."

Notwithstanding the strong relationship between Abuja and Beijing, the minister warned and reiterated that Nigeria will never accept any form of discrimination against its people residing in China (Onyeama, 2020b): "We have an excellent relationship with China. One of the things we have been looking out for is to ensure that there is no government or state sanction for whatever might be happening. You cannot control what an individual Chinese may or may not have been doing, which is why we engaged with the central government knowing that they have full authority over the government in Guangdong province. Up to now, the Chinese government has insisted on zero tolerance for discrimination and racism. That they have no interest in discriminating against Nigerians, or other Africans with whom they have positive relations. The Chinese ambassador told us to give the list of individuals and their complaints and assured us that they would act upon that. Our

bottom line is that whatever the issue, whatever the measures to contain the virus or address any other issue of illegality, that is fine. But what we would not accept, and what is the red line for us, is discrimination against Nigerians, Africans, or blacks or any form of racism. Things like denying access to public facilities and places based on your color. For us, that is a red line, and we cannot accept that. We made that clear and the Chinese government denied any such thing can take place, but we need to see that in action."

While addressing journalists about the issues, the minister explained the flurry of diplomacy the Nigerian government has engaged in with China. He said various channels of communication had been explored to resolve diplomatic tensions (Onyeama, 2020b): "It is a three-track approach, while my ministry uses the channel available here which is the Chinese ambassador. Our ambassador in Beijing is also in contact with the Foreign Ministry there. Also, our consulate in Guangzhou is in contact with the local government. The Chinese ambassador has already suggested documenting any rights violation, any person who has been tested, with time and location. These are the approaches we will work on with the Chinese. Our ambassador has met with the authorities there. He brought this to the government's attention about our concerns and the red line we have drawn. We don't expect our people to suffer this kind of incident, which constitutes discrimination. As a result, we are now starting to document every act, getting the names, times, and so forth. We will submit that to the Chinese authorities, and where the case was, demand compensation, and whatever sanction needs to be taken, should be taken."

However, despite Nigeria's efforts to address the matter, the minister attested that more disturbing incidents against Nigerians continue to unfold in China (Onyeama, 2020b): "I continue to receive information from Nigerians in China. I engage directly with our officials in Guangzhou in Guandong Province, and the people on the ground I must say that contrary to what we believe, the situation was now under control and stabilized, and there were no other issues. It became apparent that there were still very distressing incidents. This was an almost institutionalized attack on Nigerians' and Africans' rights and dignity there. With confirmation from people who were there, I invited again the Chinese ambassador and presented these facts to him. I told him that contrary to what was agreed, the promises made, and the guarantees given, the situation did not seem to have been ameliorated. This is

unacceptable. We have stories of Nigerians who have been evicted from their residences and unable to return. Some moved from cheap hotels to more expensive hotels for isolation. Furthermore, Nigerians are not served in Chinese restaurants, shopping malls, and so forth. This is unacceptable. How could it be possible that landlords are no longer accepting Nigerian tenants into their accommodation? This is something we cannot accept. Whatever must be done has to be done." He finally highlighted the Federal government's effort to tackle the issue through diplomatic channels and assured Nigerians that the matter would be laid to rest (Onyeama, 2020b):

"The narratives are conflicting. Even among some of the Africans living there. There is a main and persuasive narrative of unacceptable maltreatment of Nigerians and other Africans in Guangdong province. There is an effort to contain COVID-19 outbreaks, some of those that visited the country were Africans. But that is no reason whatever to trespass on the rights and dignity of Nigerians and Africans in the city. The ambassador presented the other side of the story that 98% of the issue had been resolved. Not only that but they will bend over backwards to make sure nobody is maltreated, and everyone is accommodated. I also pointed out that we have seen videos and pictures of people giving their blood. This is contrary to how COVID-19 testing is conducted through the nose and throat. It appears that only Nigerians and Africans experience such treatment. Again, I registered, very forcefully expressing our displeasure and concern for the situation. I also spoke to some of our colleagues in Guangzhou about what we should do from here. Many of our people want to return home. We are putting in place the mechanism to bring them back home. That seems to be the immediate solution here. I call on the Chinese government to safeguard our people's rights. The Chinese ambassador informed us that he is getting different feedback from Guangzhou, and he wanted the name and actions complained about he assured us that immediate action would be taken after presenting the list to him. He is also confident that the alleged incidents are not taking place. I will inform our people in Guangzhou that they should record every single incident with the name of anybody who has suffered in any way. We will discuss them with the Chinese authorities. But parallel to that, we will do everything possible to get our people back. We will make every effort to facilitate that."

In another press conference, the foreign affairs minister reiterated Nigerian

government concern over the alleged maltreatment of Nigerians in China, he said (Onyeama, 2020c): *"We've made clear to the Chinese government unequivocally that under no circumstance, we will accept racial discrimination, against Nigerians, Africans, or blacks in China. That is a red line for us. They have told us that there is no case of that ongoing, but clearly, we are seeing video and received report, and we told them it is unacceptable. We are also engaging with some African countries, to decide and work together on definitive steps and measures that we will take, because of this situation. In addition, I have directed our consulate in Guangzhou to systematically detail every single case of discrimination and every single case of loss or damage suffered by every Nigerian. We will pursue each an everyone very robustly with the Chinese government. If it requires compensation and damages etc. For us as I said, is a red line and we are going to fight it to the very end".*

3. Chinese ambassador's diplomatic response

Amid fierce criticism and backlash by Nigerian locals and top officials, against China's COVID-19 policy, the Chinese ambassador Zhou Pingjian to Abuja addressed Nigerians during a press conference held at the Nigerian Foreign Affairs Ministry. First and foremost, the ambassador opened his speech by highlighting the strong relationship between China, African countries and specifically (Pingjian, 2020b): *"There is nothing whatsoever changed in China's policy of friendship towards Africa. We cherish and fully committed to our strategic partnership with Nigeria."*

However, the Chinese ambassador strongly denied allegations of racism, maltreatment, and discrimination (Pingjian, 2020b): *"Guangzhou is fighting for the virus, not any Nigerian, not any African, not any foreign nationals and not any Chinese. They are fighting the virus. While some Nigerians at earliest days feared selected".* The ambassador cited the lockdown imposed by the Nigeria in the capital Abuja as a safety measure to prevent the lives of people against the virus. He said (Pingjian, 2020c): "I will not complain about the FCT lockdown. Why? Because the Nigerian government protects me as an Abuja resident. Why does the government select FCT, Lagos, and Ogun? Is Nigeria's government discriminating against FCT? I don't think so. The same logic applies to Guangzhou. Since February 17th, the policy to fight against the disease in Guangzhou has been evolving, until yesterday, each has changed ten times, why? You need to be precise in your attack against the virus.

So, you need some policy changes. And on March 24th, the first imported connected case was reported in Guangzhou. That is a very serious thing. As of February, the first targeted country was an Asian country, due to the deteriorating conditions at the time. So, the first targeted country were Northeast Asian countries. According to statistics, Africans are very vulnerable in the fight against the disease. The city must protect them. Until yesterday, all the imported cases in Guangzhou were 119. Among this number, most of them were Chinese. Foreign nationals were 26, among this, 19 were from Africa, and among this number only nine were from Nigeria. Also, it was reported yesterday, that there are 60 asymptomatic patients, 57 of whom are from Africa. 14 of them came from foreign countries. Which means there is a high likelihood of close contact with imported cases. Among those 14 cases, seven were Chinese while the other seven were foreign nationals. All seven foreign nationals were Africans. Six of those seven were Nigerians. We must protect all Nigerians for their health, because according to statistics, they are most vulnerable. The logic is that the city was trying to test everyone, for the safety and health of themselves and others. That is my understanding about the logic."

After defending China's policy in fighting against the virus, the ambassador agreed with some of the Nigerian Foreign Ministers' points. He admitted that there might have been a lack of communication, which has led to misunderstandings between the nations. He said (Pingjian, 2020c): "As the minister pointed out rightly, poor communications, or isolated incidents, can occur during this time. After the minister and government intervened in a timely manner, Beijing took it very seriously. There has been a remarkable improvement in coordination between Beijing and Guangzhou in recent days. An effective communication mechanism has been set up between the Nigerian consulate general and the authority of Guangzhou. The authorities have made it very clear that there is zero tolerance for discrimination. Any resident, Chinese or foreign national, cannot do or stay in that manner. I think with joint efforts, the Chinese authorities from Beijing and Guangzhou and with the Nigerian embassy in Beijing and the consulate general, believed that the legitimate concerns were addressed and will continue to be addressed in a smooth way."

4. **Nigerian lawmakers call for retaliation against maltreatment**

During a plenary session on the 28th of April 2020, a Nigerian lawmaker alongside nine other colleagues, in the House of Representatives raised a motion

about the alleged maltreatment of Nigerians. In his motion addressed to the house Kalu Benjamin Okezie said (Okezie, 2020): "This morning I rise to humbly seek the support of this house to present a motion on maltreatment and institutional act of racial discrimination against Nigerians living in China, by the government of China. I do this in conjunction with nine others honorable members. The house is aware about the mutually beneficial diplomatic and economic relationship between Nigeria and China. About 10,000 Nigerians including investors, traders, workers, and students currently reside in and around Guangzhou in Guangdong province of the People's Republic of China and have generated massive volume trade between the two countries such that; 2019 alone Nigeria-China value was worth over $8.6 billion. The house recalls that on the 8th of April 2020, photos and videos appeared on various social media outlets, depicting institutionalized act of social discrimination, maltreatment, xenophobic assault, embarrassment, illegal detention, and forceful eviction of Nigerians and other Africans living in Guangzhou. Concerned that under the pretext of the spread of COVID-19, which currently originated from Wuhan China, several kinds of maltreatments of Nigerian citizens, in Guangzhou have been perpetrated by the Chinese people and authorities - including wrongful confiscation of Nigerian international passports, prolong and illegal detentions of Nigerians in the name of mandatory quarantine, despite having the certificate of clean health and no recent travel history. After refusal to test or release the test result, and the evictions of Nigerians from their homes, and hotel accommodations etcetera."

The honorable lawmaker continues to express his and colleagues' concern over what he called a violation of the treaty of international relations saying (Okezie, 2020): "The house is worried that the exercise of dysfunction of protecting the interests of nationals of a sending state as provided under article five of the Vienna convention, on consular relation 1963. The Nigerian consul was treated in clear violation of article 40 of the same treaty which requires the receiving state to treat consular officers with due respect and to take all the appropriate steps to prevent attacks on their persons, freedom, or dignity."

The lawmaker argued that the alleged maltreatment is a recurrence of similar past incidents about Nigerians living in China, he claimed that (Okezie, 2020): "The house also recalled that the troubling case of Mr. Felix Awah Elijah – a Nigerian citizen and legal resident in China who mysteriously disappeared after his abduction

and illegal prolong detention, by the Chinese police authority sometime around 6th February 2019. And of which all letters and appeal from honorable Benjamin Okezie Kalu to the house of the Representatives were ignored by the Chinese authorities. The house is also consigned that the house does not reciprocate the favorable treatment of their nationals enjoyed in Nigeria, may had instead, put a strain on the diplomatic and economic relation between Nigeria and China, thereby endangering Nigerian businesses in China, valued millions of dollars. Also, worried that the action and the inaction of the Chinese authorities clearly established a trend of racial discrimination as described in article 1/1 of the international convention on the elimination of all forms of racial discriminations to mean any distinction, exclusion and restriction or preference base on race, color, or national or ethnic which have the purpose of vilifying, or infaring the recognition enjoyment or exercise on an equality of human rights and fundamental freedom in the political and economic, social, cultural or any field of public life and that such actions and inactions are in bridge of several other international conventions to which Nigeria and China are signatories."

The lawmaker further stated that despite all efforts by top Nigerian government officials, Chinese authorities failed to stop maltreating Nigerians, under the pretext of COVID-19 measures. He stated that (Okezie, 2020): "The house is also aware that the honorable speaker of the House of Representatives - Right Honorable Femi Gbajabiamila, the Honorable Minister of Foreign Affairs, Mr. Geoffrey Onyeama, and the Nigerian Ambassador to China, His excellency Ahmad Jidda, undertook various independent and coordinated interventions including meetings with the Chinese Ambassador to Nigeria Dr. Zhou Pingjian, to registered Nigeria's displeasure over the incident. The house further consigned that despite the assurances of the Chinese government, to address the situation, the maltreatment of Nigerians in China persists. The house acknowledges that it has become imperative to take further action to ensure safety and welfare of Nigerians in line with the provisions of section 14-2B of the constitution of the Federal Republic of Nigeria, 1999."

The lawmaker then listed the following actions to be taken by the Nigerian government as retaliatory measures against China and its people (Okezie, 2020):

1. *"To condemn in its entirety, the maltreatment and xenophobic attack against Nigerians in the People's Republic of China."*

2. *"All relevant ministries, departments, and agencies, as a matter of urgency*

to ensure all Nigerians who wish to return home including Nigerians who only visited for business, Nigerians with travel document and identification, Nigerians with passports but with expired visa, Nigerians with passports and valid visas, Nigerians who have tested negative to COVID-19, are evacuated from China and quarantined upon arrival."

3. "The House also urge the Attorney General of the Federation and Minister of Justice, the Ministry of Foreign Affairs and all relevant Ministry, Department, or Agency to provide all necessary financial and other assistance to the affected Nigerian citizens in China, who wish to seek redress in any local or international court for the bridge of their fundamental human rights, loss of property or any actionable caused by this maltreatment or discrimination in China.

4. "The house resolved to mandate the committee of interior, Nigeria Content Development and Monitoring, and Commerce, to investigate Nigeria Immigration, Corporate Affairs Commission, Nigerian Content and Development Monitoring Board, and any other relevant Ministry, Department, or Agency to check the validity of all immigration, document of every Chinese persons in Nigeria and the expatriate quota of all the Chinese businesses in Nigerian to ascertain the number of illegal and undocumented Chinese immigrants in Nigeria and to report back in four weeks."

5. "Also to mandate the committee on interparliamentary relations, foreign affairs, human rights, and diaspora to ascertain the extent of the violation of human rights of Nigerians in China, as well as losses arising from such maltreatments. To further engage a Chinese parliament appropriately to register Nigeria's National Assembly condemnation of the maltreatment, discrimination, and xenophobic attacks against Nigerians in China. To ensure discretion of such action by its people and government, and that treatment to Nigerians are compatible with China's human right obligation, and to report back within four weeks."

6. "Seek the concurrence of the House of the Senate of Federal Republic of Nigeria".

Although many Nigerian lawmakers supported the motion against the alleged maltreatment of Nigerians in China, the Federal Government implemented only a few of the proposals.

5. Nigeria-China expert's analysis of the diplomatic tensions

Nigerian scholars and international relations experts have weighed in on diplomatic tensions between Nigeria and China. Professor Bola Akinteriwa (2020) gave one of the fairest analyses. He is at the time the pioneer secretary and a trustee of the Nigeria-China friendship association, in Lagos. Akinteriwa (2020) criticizes Nigeria's approach to handling the situation, claiming the response is a "reactive foreign policy" and not "programmatic". Nigeria has no articulated foreign policy to apply when Nigerians in the diaspora are in trouble or crisis. In other words, Nigeria has no "protection foreign policy" to protect its citizens abroad, apart from diplomats' protection protocols. These protocols are supposed to be protected according to the 1961 Vienna convention on diplomatic relations and the 1963 Vienna convention on consular relations. Nigeria owes its citizens the responsibility for their protection especially when another foreign country denies them justice. He broke down the situation into two perspectives based on "people-to-people relations" and the "issue of the incident"(Akinteriwa, 2020).

Although the professor agreed with the assertion that some Nigerians might have broken the Chinese law and offended the authorities. He also said the Chinese have the right to defend their domestic laws and should not allow foreigners to break their laws. According to him, the government could be wrong or right when analysing the incident vis-à-vis the policies. However, he strongly condemned China's alleged eviction of Nigerians and Africans from their homes to the streets under the pretext of fighting against COVID-19. Because that could be an issue of sympathy for a fellow human being and hurts the people-to-people relations between China and Nigeria. He suggested that the Chinese might have considered the Pentagon of principles guiding bilateral ties between the two countries. China should have given special treatment to Nigerians considering the positive relationships between the two countries (Akinteriwa, 2020).

D. Discovery of COVID-19 in Nigeria

Nigeria has detected its first COVID-19 case on February 27, 2020, in Ogun state from an Italian patient who flew into the country from Milan through Lagos international airport. On the same day, the patient travelled to his company in Ogun where the infection was detected. From the populous city of Lagos to the capital

Abuja and later Kano, the virus spread to nearly all the 36 states across the country. The World Health Organization identified Nigeria as one of the high-risk priority zones for proactive control, surveillance, detection, and containment of the spread of the virus (Dan-Nwafor, et al). Subsequently preventive measures including online questionnaires before arrival, border screening of temperature and health checks were enhanced across the four largest airports in the country. After the confirmation of the first suspected case, an Emergency Operation Centre (EOC) was established for coordination, surveillance, case management and research among other health related services (Dan-Nwafor, et al).

1. The Presidential task force (PTF)

In early March 2020, President Muhammadu Buhari commissioned the Presidential Task Force (PTF) with an all-out mandate at the federal level, to coordinate and oversee both governmental and non-governmental efforts to contain and prevent the spread of COVID-19 (Dan-Nwafor, et al.). All national responses have been coordinated and organized through the presidential task force (PTF) during the pandemic.

2. The national COVID-19 response center (NCRC)

The national COVID-19 response center is managed by the National Coordinator, which aimed to support the presidential task force, and provide direction for coordination and operations of several health and non-health sectors across the country (State house, 2020)

3. The State task force

Each state including the federal capital territory has constituted a COVID-19 task force presided by the governor or an appointed official to provide overall management and coordination at the sub-national level. However, some states that are overwhelmed with several challenges including lack of adequate resources, influx of internal displaced people and insecurity challenges are prioritized for federal assistance to prevent extra burden on the states (State house, 2020).
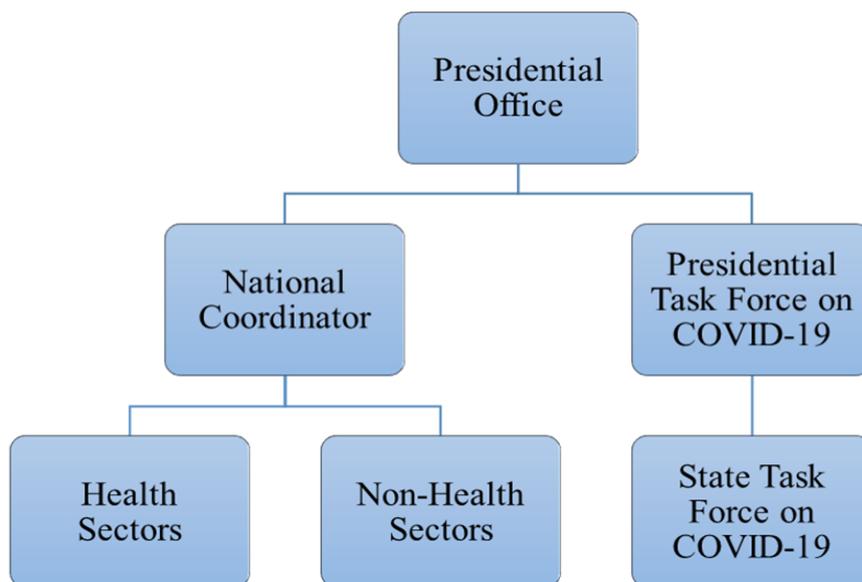
Figure 2 COVID-19 Pandemic Response agencies in Nigeria

E.   Nigeria imposes travel bans on China and other countries

As the number of reported COVID-19 cases continues to rise, in March 2020, the federal government of Nigeria decided to impose temporary travel restrictions on 13 high-risk COVID-19 countries including China, the US, the UK, Iran, Italy, South Korea, Spain, Japan, France, Germany, Norway, Switzerland, and the Netherland. The reason was that each of these countries reported more than 1000 cases within a few weeks (Premium Times, 2020). The Presidential Task Force has also imposed a temporary travel ban of Nigerians particularly public officials to these countries. More details about the travel restriction according to Secretary of the Government of the Federation, Boss Mustapha are as follow (Premium Times, 2020):

I. *"All persons arriving in Nigeria who might visited these countries, fifteen days prior to the arrival, will be subjected to supervised self-isolation and testing for 14 days"*.

II. *"The Federal Government is temporarily suspending the issuance of all visas on arrival."*

III. "*The Federal Government is also counselling all Nigerians to cancel or postpone all non-essential travels to these countries"*.

IV. *"The Federal Government urges Public Health Authorities of countries with high burden to conduct diligent departure of passengers and also endorses travel advisories to their nationals to postpone travels to Nigeria"*.

The Nigerian government's measures mentioned above were enacted for about four weeks from 21 March 2020. They were subjected to review according to the head of the Presidential Task Force (Premium Times, 2020).

F. Federal government guidelines for COVID-19 lockdowns

In the wake of the spread of the COVID-19, the federal government of Nigeria has decided to announce the shutdown of schools, organizations, and businesses particularly in the three affected cities including the federal capital territory (Abuja), Lagos and Ogun state effective from March 30th for the period of two weeks. Below are some of the health measures taken by the Presidential task force across the country during and after the lockdown. (BudgIT, 2021).

Table 1 Lists of essential services exempted from COVID-19 lockdown

List of exempted services	Guidelines for conducting services
Medical service	Public and private hospitals, dental emergency clinics and optic emergency services.
Retail service	All retail services were mandated to abide by the social distancing guidelines and must ensure hygiene measures are in place. Markets and supermarkets selling food and essential groceries were allowed to be open for 4 hours a day.
Food and Drink service	All restaurants and food eating-places were shut down (only delivery service allowed).
Transportation and Logistics	Transportation of essential goods including food items, pharmaceuticals and items related to combatting COVID-19 pandemic were allowed. In addition, fuel stations, post offices as well as courier distribution companies were allowed to operate during the lockdown period.
Hospitality service	Hotels accommodating essential service members were allowed to operate or used as quarantine center (restaurants, bars, or night clubs weren't allowed to operate).
Banking and finance service	Limited number of staff were allowed to oversee the operation of ATM, online banking, and cash activities.
Public institutions and utilities	Essential public services related to distribution and transmission of electricity, water board management, telecommunication environmental cleaning and waste management were allowed to operate.
Places of worship and rituals	Small funeral services limited to 20 people allowed
Agricultural service	Farms were allowed to be operated for cultivation and distribution of food products.
Aviation	Cargo and approved flights for essential passengers
Communication services	Television, radio, and newspaper companies as well as essential workers, journalist were allowed to operate
Security and legal service	Authorities from different security departments were exempt from restrictions to enforce as well as maintain law and order.

Source: State House, (2020). Presidential task force on COVID-19. https://statehouse.gov.ng/wp-content/uploads/2020/04/PTF-COVID-19-Guidance-on-implementation-of-lockdown-policy-FINAL.docx-2.pdf

1. **Nation-wide Lockdown against pandemic**

Every individual is restricted to his or her place of residence, unless strictly for conducting essential services, medical as well as emergency purposes. Lagos, Ogun, and Abuja (FCT) were among the first states to go into lockdown in late March 2020. Other states followed suit in April. All inter states borders connecting with the capital Abuja were closed, except for transportation of essential goods and services, which includes food, medicines, and fuel. Commuting and passenger services including by air, land and sea were suspended for the period of the lockdown. Gathering of people indoors and outdoors for an event was banned, except for funeral purposes, which must be conducted according to the social distancing protocols and not exceeding 20 people. The lockdown has caused an economic meltdown of the country due to shutdown of markets, businesses, and financial activities. Many citizens had complained about lack of income, hunger, and starvation during the lockdown period. Lagos, Kaduna, and Ogun state were the cities that recorded the highest number of compliances across the country (BudgIT, 2021).

2. **Impact of COVID-19 lockdown in Nigeria**

The nation-wide lockdown imposed by Nigerian authorities has generally sparked anger and frustration among Nigerians especially for those who were involved in the informal businesses including vendors, traders, drivers, vocational workers among others. These jobs are often carried out by low-income earners as well as self-employed workers who generally must work on a daily basis to sustain a living wage. However, it became impossible for the locals to travel from their houses to their workplaces, which required human presence (Mogaji, 2020).

Religion is a significant part of life for many Nigerians. According to studies conducted by the Washington-based Pew research center, Nigeria has the fifth-largest Muslims population and sixth-largest Christian population in the world (Diamond, 2019). Generally, millions of Nigerians attend congregational prayers in their local worship areas but also travel to other locations for congregation. Early days of the lockdown period has coincided with Easter season for the Christians and Ramadan for the Muslims, and that has affected millions of worshippers by distancing them from coming together and restricting them to their homes. Moreover,

large part of the Nigerian societies often prefers to socialize with friends and family members outdoor. However, as result of the lockdown, many complained that the restrictions have disrupted their social activities particularly in the populous city like Lagos (Mogaji 2020).

3. Public Health emergency operation centers

At the beginning of pandemic, there was acute shortage of health facilities including medical laboratories for the testing of the COVID-19. As of March 2020, the country had only five laboratories for testing. However, Nigerian authorities decided to increase the number to more than 130 laboratories including both private and public testing units across the country. However, in 2021, all the 37 states have a molecular laboratory according to the National center for disease control (BudgIT, 2021).

4. Awareness and compliance with COVID-19 measures in Nigeria

Several reports and findings have indicated the low level of compliance to the regulation imposed to contain the spread of COVID-19 virus partly due to religious belief or traditions. According to a survey conducted in one of Nigeria's largest cities - Kano, with predominantly Muslim population, shows significant number of the population insisted on conducting their normal life attitude under Islamic religion as well as cultural norms and values. However, most of the population are cognizant of personal hygiene measures against the virus, including washing of hands with soap and water, wearing of facemasks, and avoiding contact with others. Also, a significant number of participants in the city reported their willingness to attend wedding ceremonies, funerals, Eid prayers, as well as attending large gatherings despite their awareness about the pandemic (Habib et al., 2021).

G. China's first medical consignment delivered to Nigeria

In April 2020, China delivered medical equipment to Nigeria, which cost about $2 million according to the Chinese ambassador. The Chinese top diplomat highlighted that China has received all kinds of support and kindness from Nigeria, and as a result it was the time for China to reciprocate. He says China will never impose anything on another country and because Nigeria also requested for medical

assistance that was the reason behind the delivery of the equipment. The Chinese envoy have met with the Nigerian minister of health on several occasion since the beginning of the pandemic, to share medical experiences and address the concerns of the Nigerian people visa-vis the virus.

1. **Nigeria's Health Minister comments about Chinese medical team**

In April 2020, Nigerian Health Minister Osagie Ehanire addressed several concerns and uproar from Nigerians about deploying a Chinese medical team to the country. This was to fight the pandemic. In a televised address attended by several media and journalists at the international terminal of the Abuja airport, according to Channels television (2020) report, the minister said (Ehanire, 2020): "We urge you not to focus on the negative comments but on the positive comments. I congratulate China on its achievements. They have worked hard for it. We want to learn how China handled this problem, from the public health point of view, case management point of view, and after-the-event point of view." According to the Nigerian Health Minister, the deployed 15 people from the Chinese medical team will be in quarantine for two weeks before physically contacting Nigerians or working in the country. The minister added that: "They knew about the quarantine before leaving China, and they underwent tests before leaving their country. The Nigerian NCDC will be responsible for the location of the quarantine and will monitor the Chinese team throughout the 14 days." About the second consignment of Chinese medical equipment deployed to Nigeria the minister said, "We believe it will help us a lot in addressing the gaps that we have. We must have more ventilators and sophisticated equipment which we don't have here in this country. These are extremely significant additions to our treatment regimens options (Ehanire, 2020)." Notwithstanding the allegations about the inefficiency of Chinese medical equipment, the minister's testimony revealed that Nigeria has approved the Chinese medical items.

According to Nigerian Health Minister, the deployed Chinese medical team are experts in viral disease management options ((Ehanire, 2020). "The novel Coronavirus has new dimensions, and it is a newbie to us. The visit will allow our experts to learn more about the virus from their Chinese counterparts. The medical will not only help us with public health aspects but also the challenges China faced and what they learned from their mistakes. It is from their experiences, that we as a country want to utilize to help our citizens." He then added the medical team are

deployed to Nigeria purposely for "capacity building and to add to the body of knowledge of Nigerian doctors and medical experts, because every specialist told us that there is more to learn about the virus. The visit is very helpful and critical to us. I'm sure that the most curious people will be our own scientists who will have many questions about the virus. Therefore, even as they are in quarantine, I have requested that they keep in contact with our scientists via a teleconference. This is so that we can get started as soon as possible to be able to ask questions and hear their own narratives of how they handled their own cases. China has a large population, likewise, we too have a large population, so the experience they have will be useful to us." Therefore, the minister highlighted the importance of getting in touch with the Chinese medical specialists despite being in quarantine to help fight the disease without losing much time.

On China's medical assistance delivered to Nigeria, minister (Ehanire, 2020) said: "It was a very good initiative and the spirit of a good neighborliness, that you help others who are in trouble especially if you have faced that kind of trouble. I believe all countries around the world, whether Africa or Europe receive help from China. We appreciate it and are grateful. This virus affects the whole world, so all countries should help each other, and we must be our brothers' keepers. The federal government is very grateful and appreciates the initiative and the sacrifice. We understand that all this service has cost about $2 million. It is a good and valuable contribution to the fight against this disease." In Africa, Nigeria was among the top beneficiaries of financial and medical support from China during the pandemic. This was considering the flurry of health diplomatic efforts that took place between the two countries.

After the delivery of the second consignment of medical equipment from China, the health minister also discussed the plan for mass testing (Ehanire, 2020): "We have more than 200 million population, mass testing is not something that authorities are considering, but instead applying a targeted method by testing specific people who most likely contract the virus. We have also set some criteria for those who will take the test, including those who arrived from foreign countries, and those who are living in areas with a cluster of positive cases. We are applying a spat testing to identify the cases that are giving us more concerns." Nigerian authorities were not able to test every citizen partly due to the insufficient of equipment for the exercise

or lack of interest from the public."

2. Federal government funds against COVID-19 pandemic

The Nigerian government has generated more than 90% of its funding for responding to the pandemic mostly from the national and international donors, while only about 10% came from government's coffers (Aregbeshola et al., 2022). Most of the funding worth millions of dollars has been allocated to the public medical response due to the poor state of the country's health infrastructure and lack of adequate facilities to counter the pandemic. The pooled resources were mostly used for the purchase of medical tools including protective gear, testing kits, the building of temporary isolation centres and for individual treatment of patients with severe infections of the virus (BudgIT, 2021). During the early days of the pandemic, Nigerians were not mandated to pay the cost for COVID-19 testing and the treatment of the virus at public health centres, (Health wise, 2020).

Notwithstanding the amount of funding garnered by the Nigeria government, it was inadequate to take cover all the costs and needs of the citizens across the country. In 2020, the cost of administering COVID-19 treatment per day for individual patients with mild-moderate or severe case ranges from $260 up to $2,600 (Muanya, 2020). The pandemic made it a big challenge for the informal sector working-class population to afford the payment of treatment and visiting of the private health facilities (Aregbeshola et al., 2022). During the first wave of the pandemic, the federal government announced the disbursement of cash to over 3.6 million most affected households across the 36 states of the country and the capital city Abuja (BudgIT, 2021). There were reports of insufficient distribution and mismanagement of resources meant for the most vulnerable citizens during the pandemic. Some residents in the Northern populous city of Kano, claimed that the palliative was given to people who were mostly political party members, and failed to reach the poor people. Similarly, in Lagos, politicians were alleged to have hijacked the palliatives and distributed it to their party loyalists at the expense of the most vulnerable people across the city. In addition, in River states, many beneficiaries lamented that they were only given inadequate food items that were not enough to cushion their needs (BudgIT, 2021).

H. China's Foreign Minister visits Nigeria

During the second wave of the pandemic in 2021, Nigeria continued to be engaged in bilateral talks with China to secure more financial support and doses of COVID-19 vaccines. As a result, it secured about a further $15 million from Beijing, for economic recovery of the country, which has already been battered by the pandemic. Furthermore, the Chinese state councilor and foreign minister Wang Yi visited Abuja to meet with his Nigerian Geoffrey Onyeama. The visit was part of a five African countries' tour by the Chinese top diplomat, to express solidarity and boost bilateral cooperation. With COVID-19 top on the agenda, several other areas of bilateral relations, including education, and transportation, were discussed during the meeting with Nigerians and their Chinese counterparts. Officials signed Memorandum of understanding (MoU) on establishment of intergovernmental committee. Onyeama appreciated China's support particularly in the health area during the pandemic and expressed Nigeria's desire to access the COVID-19 vaccines developed by Chinese pharmaceutical companies (TVC News, 2021).

VI. METHODOLOGY AND RESERCH FINDINGS

This chapter presents details about the data collection method, universe, population as well as the sample size of the study. Furthermore, research findings and analysis of the results are also presented. The administered survey was designed to cover the objectives of the study, which include respondents' personal information, perception of Nigerians about China's health diplomacy, challenges facing China's health diplomacy in Nigeria and China's soft power perception in Nigeria. The results are in line with the various specific objectives and research questions of the study. The collected data from the survey questionnaire was ingested into SPSS application software, to conduct the analysis by using tables and figures. The descriptive statistical analysis was conducted to better elaborate the collected data in the form of percentage, frequency, mean, standard deviation and demographic related information. Both primary and secondary data have been used in the study. Primary data were collected by applying a quantitative research method through a survey administered to 1000 respondents in Nigeria. While the secondary data were collected from textbooks, journal articles, dissertations, conference videos, online news, opinions, and editorials as applied in the first, second, third and fifth chapter of the study. The primary data was collected from the survey which targets 1000 participants and was framed to answer the research questions. The survey was aimed to understand Nigerians' perceptions and opinions regarding China's health diplomacy and soft power. The results gathered were mixed with different opinions and perceptions about China's activities in Nigeria particularly in Lagos and Abuja.

A. Universe of the research

The survey targets mostly educated Nigerian adults above the age of 18 years, irrespective of gender, class, and religion. It was conducted between December 2022 to February 2023, in the federal capital territory Abuja and the commercial city of Lagos. The selection of these cities was based on their large population and demographic diversity. In addition, both cities have more educated individuals who

are highly likely to understand Nigeria's foreign policy towards China. The cities also host the largest number of Chinese diplomats, businesspersons, and expatriates. Chinese infrastructure projects in Abuja and Lagos also testify to China's growing engagement with Nigeria. Apart from the media reports of China's activities and medical assistance to Nigeria, during the Ebola and COVID-19 pandemic, it was obvious that the Chinese had several infrastructure developments that could serve as a symbol of its decades of positive diplomacy with Nigeria. Nigerians in the selected cities are highly likely to see Chinese activities on the ground more than in any other part of the country. Some of the multi-billion-dollar Chinese projects that are operational in Lagos include international airport terminals, rail and mass transit, and the Lagos-Ibadan railway, among others. Also, in the capital city of Abuja, massive Chinese projects include the international airport terminals, Abuja-Kaduna railway, Abuja mass transit, Abuja expressway, etc. The selected samples were either young or adults who were presumed to have experienced China's activities in their locations.

B. Sample size and technique

The sample size for this study was determined to be 1000 respondents considering the diversity of respondents in Abuja and Lagos. Most of the respondents were reached through the physical distribution of the questionnaire. Several volunteers helped reach the required target sample by distributing the survey and asking for their time and interests. However, it took a lot of effort to reach about 600 people mostly on the streets, universities, and healthcare facilities to participate in the survey. Additionally, about 400 respondents also participated in the survey by answering questions online. The sampling was neither too small nor too large for the study to accommodate. The time of between three and four months was enough to receive the required data. Most of the respondents who were contacted on the streets or through physical contact were fast and more interested in answering the questionnaire. However, it required more manpower and even more time to get the desired sample. Considering the lack of adequate volunteers and time for conducting the survey, online respondents were contacted and asked to participate in the study. Many online respondents also expressed interest when not asked to reveal their names or national identity numbers. While others were late to reply due to a power

outage or unknown issues in their homes and places of work.

Random sampling was used in this study considering the large number of respondents in Abuja and Lagos. The technique was applied to avoid biases and was easily used to convince most of the respondents, especially those who were nervous about revealing their identity in public. The participants' names or national identity numbers were not requested at the time of the survey. As a result, the random sampling technique was very effective in getting enough responses both from the public spaces and online. The samples targeted were mostly reached around popular tertiary institutions such as Lagos State University and the University of Abuja. Additionally, the sampling included Nigerians who are mostly educated and who work in hospitals or study in several fields, particularly in the field of medical sciences. They also include civil servants who work in government institutions and know Nigeria's international relations and bilateral ties with China.

Table 2 Location of the respondents

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Lagos	500	50.0	50.0	50.0
	Abuja	500	50.0	50.0	100.0
	Total	1000	100.0	100.0	

Source: Survey analysis by SPSS.

The survey sampled 1000 respondents in the Nigerian capital and the populous commercial cities of Abuja and Lagos respectively. This table indicates that all respondents expressed their willingness to participate in the survey, indicating high satisfaction.

C. Demographic variables of the population

As part of the general characteristics of the population, this section discusses demographic variables such as age, gender, marital status, education, and occupation. The section provides data according to the gathered results. The respondents' age was asked to understand better what age limits are more likely to understand China's health diplomacy with Nigeria. People under 18 years were not included in the age category, because they were considered teenagers or children. They might not be aware of Nigeria's relations with China or have hardly any knowledge of it. As a random sampling technique, the survey was not restricted to a specific gender.

However, the gender of the population was significant in determining the category of those who participated more in the survey. It also determined which gender group better comprehended China's health diplomacy with Nigeria. Also, it is because the main goal was to get 1000 respondents. The survey results revealed that females were more willing to participate in the survey. Some of the reasons were that women in Lagos and Abuja are mostly educated and not shy about expressing their opinions to the public. Females in the targeted population are also visible to the public, especially in open markets, schools, and institutions. This is either as traders, students, or civil servants. They often undertake less stressful jobs than their male counterparts. The fact that they work in a comfortable and convenient environment creates more time and willingness to participate in the study. On the contrary, the study encountered the challenge of a smaller proportion of male participants compared to females, in participating in the study. This was partly due to their workloads, lack of time or unknown reasons.

Moreover, Marital status was significant to the study to better understand the category that participated higher and had experiences related to China's health activities in Nigeria. Due to the deteriorating government health management situation, unmarried respondents and married respondents might have different opinions about what Nigeria needs from China to improve the health of its citizens. Education is undoubtedly a significant element that revealed the most experienced category who better understand and experience China's health relations with Nigeria. This is because those with higher educational status provided more feedback than those with lower education. Likewise, the occupation of the population plays a key role in measuring the performance of white-collar jobs versus blue-collar jobs. The figures and tables below provide more information and details about the demographic divergence of the targeted population.

1. Age category of respondents

Age distribution is significant in this study. It provides an insight into the different categories of life at which China's health diplomacy in Nigeria is likely to be most effective. Nigeria's population is young especially in Lagos and Abuja. Nigerian youth attend universities and are more visible on the streets as they try to make ends meet. They are also involved in day-to-day activities in many private and public sectors. Nigerian youth are also more likely to use the internet than any other

age categories. This is partly because most of them were born in the age of the internet and spend more time online than any other age category. The study was neither designed to target Nigerian youth, nor was it for any specific age limit. However, results from the collected data revealed that the percentage of youth, within the age range of 30-39, who participated in the survey was higher than any other age category.

According to the age distribution in table 3, it indicates that more than half of the respondents, 525 (52.5%) were within the age range of 30-39 years. The data include young people who took part in the survey both physically in public spaces and online. Some of the main reasons that resulted in the youth high participation are due to the fact many were contacted around the universities' premises, health facilities and online. The results show that Nigerian youth are willing to get involved in this research that requires their experience of understanding Nigeria's health diplomacy with China. It also indicates that many of them are confident of expressing their opinion both publicly and online. The second age category of respondents with higher participation was within the age range of 40-49, and they were 313 (31.3%). This category also participated through a similar process including physical contact in public spaces and non-physical contact by online. Although they may be familiar with Nigeria's health relations with China, they have not generally expressed their opinions publicly. This is because they might not have the time or were not present during the survey.

About 6.1% and 9.0% also fall under youth categories between 18-19 and 20-29 respectively. These categories' participation rates were not as high as 30-39. The age range between 18-19 accounted for the least participation at only 6.1% among all the categories. Although the number was small, it showed that most of the participants within this specific age range have a lower participation due to their absence during the survey period. There were not many of them at the time of conducting the survey. However, they were significant to the research because they contributed to reaching the targeted sample and fairly distributed among the population.

Therefore, the age range of 50-59 was 11%, and likewise, 20-29 age range participation was only 9% higher than that of the 18-19 age group at 6%. Additionally, the 50-59 and 20-29 age groups accounted for a small but significant

number of respondents to the survey. They were not present during the conduct of the survey and were unable to respond to the online survey promptly due to unknown circumstances.

Table 3 Age distribution of respondents

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18-19	61	6.1	6.1	6.1
	20-29	90	9.0	9.0	15.1
	30-39	525	52.5	52.5	67.6
	40-49	313	31.3	31.3	98.9
	50-59	11	1.1	1.1	100.0
	Total	1000	100.0	100.0	

Source: Survey analysis by SPSS.

The result implies that most of the respondents in the study are in the prime of their lives and are likely to be more engaged in the issue relating to the role of China's health diplomacy in Nigeria, as they are more likely to be informed and aware of the implications of China's health diplomacy in Nigeria. This could be especially important in terms of evaluating the impact of China's health diplomacy in Nigeria, as the opinions and experiences of those in their 30s and 40s may be more relevant to the discussion than those of younger or older age groups may. These age groups can be used to identify target groups in health activities and campaigns and to measure Nigeria-China health diplomacy initiatives' success. They were and will be significant for Nigeria in fostering its health diplomacy, particularly considering the specific age range which can provide feedback about how to improve the country's health system. They may also be willing to join the government's projects and institutions aimed at promoting health and safety of Nigeria.

2.   Gender category of respondents

Gender is crucial variable to understand China's health diplomacy in Nigeria. Gender roles and identities can influence how individuals and communities interact with and perceive China's health diplomacy initiatives. Additionally, gender can affect individuals' responses to health initiatives and programs. Understanding gender roles and identities can help to inform health policies, initiatives, and interventions tailored to the needs of both men and women in Nigeria.

Table 4 Gender category of respondents

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	male	395	39.5	39.5	39.5
	female	605	60.5	60.5	100.0
	Total	1000	100.0	100.0	

Source: Survey analysis by SPSS.

Table 4 shows that 605 respondents were female, while 395 were male. The result suggests that most of the population with highest participation in both Lagos and Abuja is female. These cities are quite egalitarian areas where females have higher freedom of expression than in any other city across the country. Volunteers who conducted the survey reported that female respondents are highly likely to provide their time and attention when approached with the request to participate in the research. Moreover, it indicates that female respondents were more visible in tertiary institutions and universities and knew about Nigeria and China relations. Also, the results of online participation indicated that women participated more than men.

Volunteers have revealed that many women who participated in the study felt it was their national duty and responsibility to express their opinion about how the country can improve their livelihood. Also, volunteers reported that male respondents showed less interest when approached and mostly claimed to have no idea about Nigeria's health relationship with China. As a result, participants did not experience any sort of compulsion or pressure in making sure that the number of female participants is the same as the male. The study was conducted in a similar environment as fairly as possible, by applying the same physical and online method. Hence, there were no biases or prejudices regarding gender identity in the distribution.
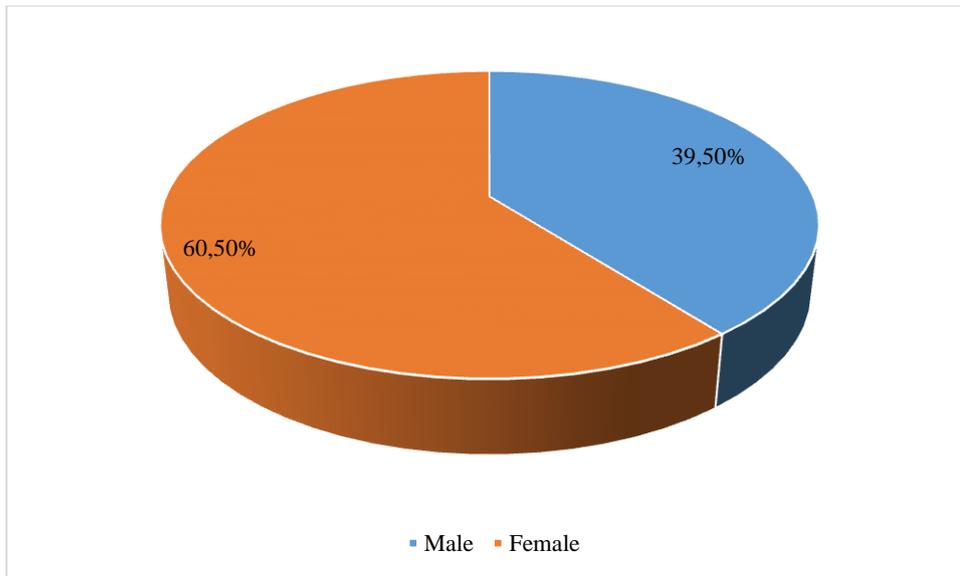
Figure 3 Percentage distribution of respondents' Gender

Source: SPSS survey analysis

Figure 3 indicates that most (60.5%) of the respondents were females, while (39.5%) of the respondents were male. this indicates that more females were involved in the study than males. It also indicates that males and females perceive or experience China's health diplomacy differently. Female respondents have high representation due to several reasons including, their presence at health facilities, universities and around in educational institutions as students or lecturers.

Gender disparity of respondents

Although the main goal of this research was not aimed for gender study and was conducted through random sampling of the respondents. However, there is a gender disparity of 60.50% and 39.50% between females and males' respondents respectively, when it comes to public decision-making and particularly for providing solutions to Nigerian health problems. As highlighted in the literature of this study, this is partly because Nigerian women face the brunt of deteriorating health facilities in the country, more than their male counterparts. Although previous studies conducted in Nigeria about female university enrolment show a lower proportion compared to their male counterpart, especially in Northern Nigeria (Akinsowon et al., 2014). It is obvious, however, that these results reflect quite the opposite and demonstrate a staggering number of women as civil servants, self-employed individuals, and students in Nigerian society who are determined to make a positive difference in the country.

In addition, the findings of this survey indicate that gender access to public space is higher in Abuja and Lagos combined, than in other cities in Nigeria, partly due to their characteristics and population density. Nigeria is no exception in the fact that men and women are visible in public spaces according to their social and economic responsibilities. Although the division of labor has not changed in Nigerian society, over the last decade, women have increased their participation in formal and informal jobs outside of their household responsibilities (Abdullah et al., 2022). In addition, according to several reports, Nigeria has experienced an upsurge in the number of women joining the labor market in rural and urban areas. This is partly due to relentless campaigns conducted by civil organizations to create awareness of female education, financial inclusion, and women's empowerment (Thisday, 2021). Further analysis of the gender disparity in the results indicates that male respondents who fall under the category of "uncertain" either opted not to participate in the survey or do not have much information about China's health diplomacy with Nigeria.

Even though the Nigerian constitution has given women their full right equally to that of men, to exercise their freedom, they remain underrepresented in many cities across the country. Females are obviously underrepresented in politics and decision making, both at the federal level and across Nigeria's 36 states. Also, Nigeria's female population is almost equal to males, but women feel marginalized when exercising their rights. In recent years, however, they have come to terms with this issue. They are now trying harder than ever before to be visible, and let their voices be heard. The result of the study which shows 60% of female respondents' participation, is an indication about how women are now advocating for more representation in many aspects of the society. They are working hard to be able to make decisions in every facet of the country as first-class citizens and not as second-class citizens. As a result, they get equal opportunities and benefits as those of their male counterparts. There is a possibility that this high representation could serve as a roadmap for the Nigerian and Chinese government to address the main concern, especially in relation to women's health.

3. Marital status of respondents

Marital status can be an indicator of access to healthcare in Nigeria, as married individuals may have partners who can access and pay for healthcare

services, whereas single individuals are more likely to rely on public services or pay higher bills on healthcare. It could also be an indicator of access to support and resources, as married individuals may have access to more financial, emotional, and social support.

In 2018, the Nigerian national health demographic survey indicated that unmarried adults had higher demands for government medical support than married couples (Ibrahim, 2022). There are several reasons why this happens, including: Decision making process - in which most of the time the husband or relatives make decisions about the marriage affairs as well as access to health-related support. That is one of the biggest deterrents for married women to take unilateral decisions about health affairs. There was a gap between married and unmarried population which occurred mostly because of cultural practices in many Nigerian society. The high demand for government health support likewise is tied to individuals' purchasing power in which many singles are highly likely to require government health assistance due to the lack of a partner or husband that can render support. Moreover, one of the biggest challenges encountered by single men or women when it comes to accessing government health support is the issue of anxiety and fear to reveal their health problem. This is also something that has to do with cultural practices which are sometimes perceived as taboo in some Nigerian societies. Also, health workers at government facilities are judgmental toward single individuals, and that creates stigma and prejudice.

Nevertheless, Nigerian health officials say it is against the law that health workers, especially in public health institutions, ascertain the marital status of especially women, to decide whether to give them medical assistance (Ibrahim, 2020).
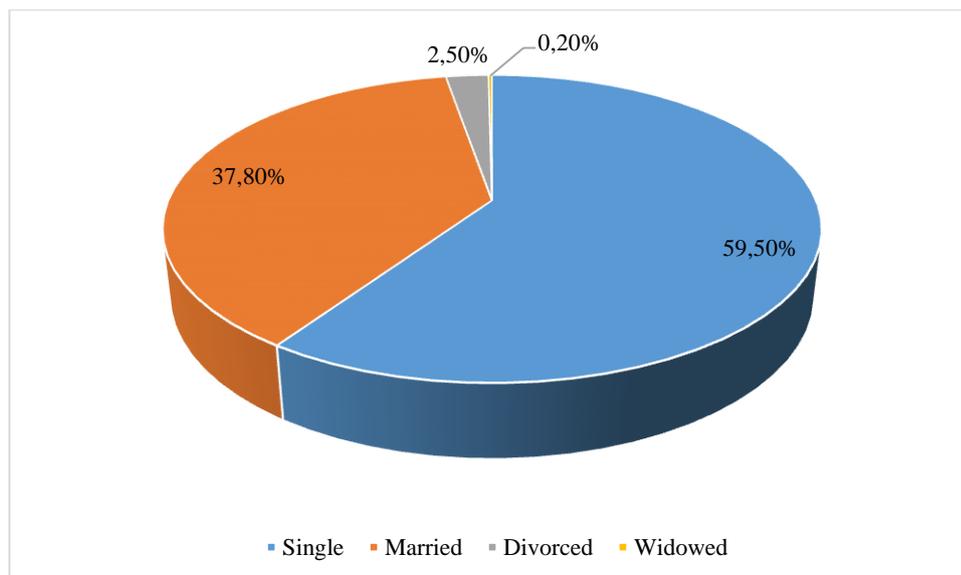
Figure 4 Percentage distribution of respondents' marital status

Source: SPSS survey analysis

The result in Figure 4 indicates that 59.3% of the respondents were single, 37.8% of the respondents were married, while 2.5% and 0.2% were widowed and divorced, respectively. This indicates a preponderance of singles among the respondents. The low percentage of divorced and widowed respondents could indicate that the population surveyed is generally single or married. Although divorce is on the rise in the country according to some studies, the number of those divorced is the smallest of all the respondents. However, it is significant that those represented no longer worry about being recognized for their divorce status. Divorced people may likely seek government assistance because they are separated from their spouse. Nevertheless, the burden of purchasing medical services could also be less if the separated person had no child or partner to care for. Widowed people in Nigeria are those who lost their spouses through natural death, accident, or other causes. Nigerians generally regard mostly women as widows in society rather than men. A widow who lost her husband through death and was left lonely with no financial inheritance is likely to receive private or government support. Thus, 2.5% is significant for the study in identifying part of the surveyed population who are widowed. It also identifies what support is needed for them in terms of health assistance. Also, the number represents a significant percentage of the population's perception of China's health diplomacy in Nigeria. All the categories, regardless of small or large representations from the population could have implications for

China's health diplomacy success in Nigeria. There was not an issue of underrepresentation from the data collected because the research is not concerned about a targeted number that must be reached to consider the data valid. Hence, the result is valid and shows that single respondents are more likely to express opinions about China's health relation with Nigeria.

Table 5 Marital status of respondents

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single	595	59.5	59.5	59.5
	Married	378	37.8	37.8	97.3
	Divorced	25	2.5	2.5	99.8
	Widowed	2	.2	.2	100.0
	Total	1000	100.0	100.0	

Source: Survey analysis by SPSS.

Table 5 explains more about the statistical distribution of the survey's population. It has nothing to do with their perceptions of China's health diplomacy with Nigeria. The table shows that 595 of respondents were single, while 378 were married, 25 divorced, and 2 widowed. As a result, most of the respondents were health workers, university students or employed, as well as public servants who were unmarried. The preponderance of single in Nigeria society are mostly common in cities of Lagos and Abuja. It was important that the research explore the demographic divergence of the population because, it will help in future research targeting marital status as a variable to evaluate people's dependence on Nigeria's health system.

4. Level of education

Education provides insight into individuals' ability to comprehend and evaluate the different aspects of the topic at hand. Additionally, it may reveal clear perception or preconceived notions about the issue that could affect the results of the study. Lagos and Abuja offer private and public education. Most families and students who can afford tuition attend schools of their own choice. However, government institutions and universities in these cities also receive high student enrolment rates.
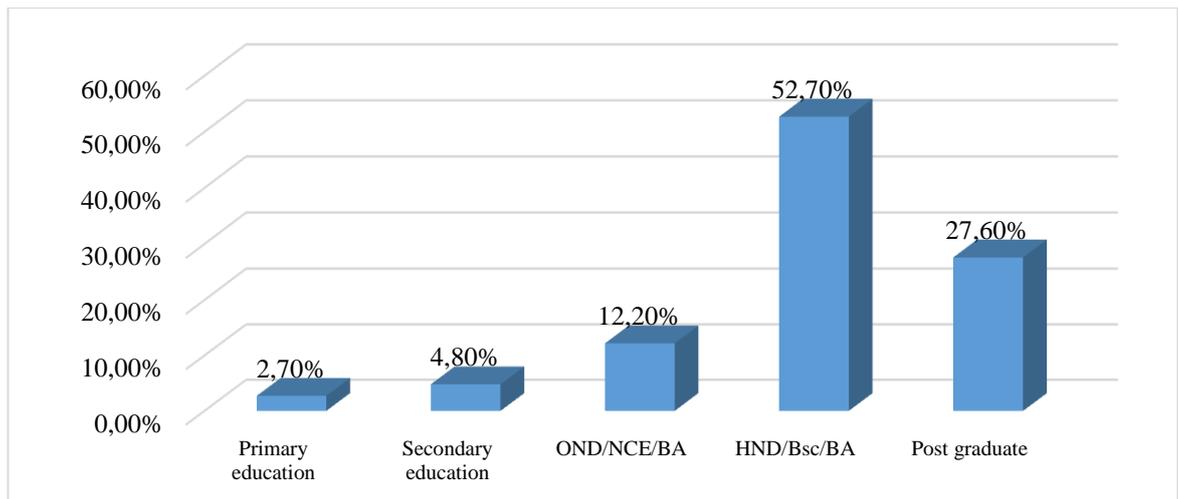
Figure 5 Percentage distribution of respondents' educational qualification

Source: SPSS survey analysis

Result in Figure 5 indicates that 52.7% of the respondents had first degree, ranging from Higher National Diploma and bachelor's degrees, 27.6% had postgraduate degrees, while 4.8% and 2.7% had secondary and primary education, respectively. This suggests that most individuals surveyed had some form of higher education, such as a Bachelor or Higher National Diploma degree. The fact that more than a quarter of the respondents had postgraduate degrees indicates that there is an emphasis on furthering education in the population. The low percentages of those with secondary and primary education is evidence that the population surveyed is highly educated. With this level of education, the respondents are likely to be more informed and better able to understand the complex issues surrounding China's health diplomacy in Nigeria. It also suggests that the respondents are likely to have a higher level of understanding of the roles and responsibilities of both countries in the context of health diplomacy. The data implies that most of the respondents were literate and able to read and write, understand international relations as well the health diplomacy China and Nigeria. The representation of elementary school graduates was too low because the population in Lagos and Abuja was randomly surveyed. This was not targeted specifically at a section of graduates to avoid biases. Primary school graduates are equally likely to understand China's relations with Nigeria because they live in Lagos and Abuja where Chinese projects and infrastructures are common. They also listen, watch, or read news about China's activities in Nigeria. They may also be friends or connected to people who work closely with Chinese in Nigeria. Hence, most of the respondents were educated

including university students and civil servants who could read write and understand international relations and the health diplomacy between China and Nigeria.

5. Occupation of respondents in Abuja and Lagos

People, who are involved in different occupations, may have different motivations and interests when it comes to China's health diplomacy efforts. Therefore, understanding these differences can provide valuable insight into the study and help draw more accurate conclusions.

Table 6 Occupations of respondents

Type of Occupation	Frequency (N=100)	Percentage
Artisan	83	8.3
Business developer	45	4.5
Corp members	118	11.8
Civil servants	43	4.3
Entrepreneur	60	6.0
ICT developer	21	2.1
Journalism	4	0.4
Lawyer	12	1.2
Medical practitioner	441	44.1
Police officer	3	0.3
Student	100	10.0
Self-employed	38	3.8
Others	32	3.2

Source: Survey analysis by SPSS.

Table 6 reveals the occupation respondents engaged in. It further indicates that a large proportion (44.1%) were medical practitioners, 11.8% were Corp members, 10.0% were students, 8.3% of the respondents were artisans. Other occupation respondents engaged in include ICT developer, journalism, civil servants, business developer, police officer and entrepreneur. The result suggests that most of the respondents were likely to be knowledgeable about health-related issues, given that 44.1% of them were medical practitioners. This could be an indication that the respondents would be more likely to provide insightful opinions and perspectives on the role of China's health diplomacy in Nigeria. Additionally, the presence of students and Corp members also suggests that the respondents may be aware of the impacts of health diplomacy in Nigeria, as students and Corp members are typically more engaged in their local communities.

D. Perception of Nigerians about China's health diplomacy

Table 7 presents the perception of Nigerians about China's health diplomacy. The result indicates that 65.0% of the respondents agreed that Nigeria appreciates China's Health assistance to fight COVID-19 and Ebola, 61.1% agreed that China medical intervention is in good faith, 54.8% of the respondents agreed that China is a good ally to Nigeria in terms of providing health assistance. In addition, 62.8% of the respondents disagreed that Chinese government should not intervened in the Ebola crisis in Nigeria, 52.4% of the respondents disagreed that Chinese government should not have intervene in the COVID-19 pandemic in Nigeria. This implies that there is a strong sentiment among the respondents that the Chinese government should be more involved in global health crises, such as the Ebola crisis and the COVID-19 pandemic, in Nigeria. This could indicate that the respondents believe that the Chinese government has the resources and expertise to be of assistance in a crisis such as these and that they should be involved in helping to alleviate the suffering of the Nigerian people. In addition, it can be deduced from the result that most respondents view China's health assistance to Nigeria in a positive light, suggesting that there is strong support for China's efforts to help Nigeria fight disease such as COVID-19 and Ebola. This indicate a good relationship between the two countries and shows that China is seen as a reliable ally in providing health assistance.

Furthermore, there are categories of respondents who either do not know the answer to the questions or do not want to answer them. From the highest to the lowest data , the result indicates 18% of respondents were uncertain (I do not know" or "I do not want to answer) that China medical intervention is in good faith, followed by 16.3% of respondents, who were uncertain about China's health infrastructure to Nigeria is of inferior quality, 14.7% of the respondents were uncertain that China is a good ally to Nigeria in terms of providing health assistance, 13,7% of respondents were uncertain that China was responsible for the public health issue the world is facing during COVID-19 and 10.7% of respondent were uncertain that Nigeria appreciates China's Health assistance to fight COVID-19 and Ebola. Similarly, 10.2% of the respondents were certain that Nigeria does not need China health diplomacy. While the least figures of 9.6% and 8.6%, respondents were uncertain that Chinese government should not have intervened in the Ebola and the

COVID-19 pandemic in Nigeria respectively.

Lastly, there are categories of respondents who disagree with the questions, from the highest to the lowest; 62.8% of the respondents disagree that the Chinese government should not have intervened in the Ebola crisis in Nigeria, 52.4% disagree that Chinese government should not have intervened in COVID-19 pandemic in Nigeria, 48.4% disagree that Nigeria does not need Chinese health diplomacy, 46.2% disagree that China's health infrastructure to Nigeria is of inferior quality, 30.5% disagree that China is a good ally to Nigeria in terms of providing health assistance. About 26.9% disagree that China is responsible for the public health issue the world is facing during COVID-19, 24.3% disagree that Nigeria appreciates China's Health assistance to fight COVID-19 and Ebola, while the least data indicate that 20.9% disagree that China medical intervention in Nigeria is in good faith.

Table 7 Perception of Nigerians about China's health diplomacy

Perception statements	Agree	Uncertain	Disagree	Mean
China medical intervention in Nigeria is in good faith	61.1	18.0	20.9	2.40±0.81
Chinese government should not intervene in the Ebola crisis in Nigeria	27.8	9.6	62.8	2.35±0.88
Chinese government should not have intervened in the COVID-19 pandemic in Nigeria	39.6	8.0	52.4	2.13±0.95
Nigeria appreciates China's Health assistance to fight COVID-19 and Ebola	65.0	10.7	24.3	2.41±0.85
China is responsible for the public health issue the world is facing during COVID-19	59.4	13.7	26.9	1.68±0.17
Nigeria does not need Chinese health diplomacy	41.2	10.4	48.4	2.07±0.94
China's Health infrastructure to Nigeria is of inferior quality	43.5	16.3	46.2	1.97±0.91
China is a good ally to Nigeria in terms of providing health assistance	54.8	14.7	30.5	2.24±0.89

Source: Survey analysis by SPSS.

Note: Uncertain covers "I don't know", "I don't want to answer"

Cause and effect analysis of respondents' answers

It is noteworthy to explain further the cause-and-effect relationship between the highest and lowest proportion in the "Agree" category. According to the result, 65% of the respondents agree that Nigeria appreciates China's health assistance to

fight the COVID-19 pandemic and the Ebola epidemic. While the statement "the Chinese government should not have intervened in Ebola in Nigeria" received the lowest responses of 27.8%. In comparison, the result clearly shows that most of the respondents have realized the impact of China's intervention during these challenging periods that helped the Nigerian government to curtail the two diseases. Likewise, for the cause-and-effect relationship between the highest and lowest proportion in the "disagree" category, about 52.4% of the respondents disagreed with the statement that "the Chinese government should not have intervened in the COVID-19 pandemic in Nigeria". While the statement "China's medical intervention is in good faith" received only 20.9%. Again, the result implies that most of the respondents are aware of the importance of China's health intervention in Nigeria to boost the prevention and control of the diseases.

E.   The challenges facing China's health diplomacy in Nigeria

Table 8 shows that 70.3% of the respondents identified the problem of lack of sustainability as a major barrier to health diplomacy in Nigeria, 68.5% of the respondents also identified the problem of divergence between political and business agendas, 64.0% of the respondents viewed cultural perspectives and historical as a barrier to China health diplomacy in Nigeria. 62.2% of respondents agreed on challenges in communication and 58.8% viewed organizations of aid and implementation related challenges.

In addition, some of the respondents were uncertain, who either do not know the answer to the questions or do not want to answer them. From the highest to lowest proportions, the result indicates 14.2% of respondents were uncertain that lack of sustainability was a major obstacle to the health diplomacy in Nigeria, 14.0% were uncertain that cultural perspectives and historical context was a major challenge, 13.6% were uncertain that organization of aid implementation, was a challenge, while 11.3% and 8.6% were uncertain that challenges in communication and divergence between political, business agenda were the main barriers respectively.

Moreover, some respondents disagreed with the listed challenges. The highest proportion of 29.2% of the respondents disagreed that challenges in communication were an obstacle, 27.6% were uncertain about the organization of aid implementation, 22,0% were uncertain about cultural perspectives and historical

context, 20.2% were uncertain about divergence between political and business agendas, while the lowest proportion result shows that 15.5% were uncertain about lack of sustainability as a major barrier to China's health diplomacy with Nigeria.

Overall, the result implies that there are multiple challenges to China's health diplomacy in Nigeria, including the lack of sustainability, divergence between political and business agendas, and cultural and historical perspectives. These findings suggest that for a successful outcome, China's health diplomacy in Nigeria should address these challenges to be effective.

Table 8 Challenges facing China's health diplomacy in Nigeria

Challenges	Agree	Uncertain	Disagree	Mean
Sustainability	70.3	14.2	15.5	2.55±0.75
Challenges in communication	62.2	8.6	29.2	2.33±0.90
Cultural perspectives and historical context	64.0	14.0	22.0	2.42±0.83
Divergence between political and business agendas	68.5	11.3	20.2	2.48±0.81
Organization of aid implementation	58.8	13.6	27.6	2.31±0.88

Source: Survey analysis by SPSS.

Note: Uncertain covers "I do not know", "I do not want to answer"

Cause and effect analysis of respondents' answers

It is crucial to explain further the cause-and-effect relationship between the highest and lowest proportion in the "Agree" category. Firstly, according to the result in table 8, about 70.3% of the respondents agree that lack of sustainability is a major challenge facing China's health diplomacy in Nigeria. Lack of organization of aid and its implementation received the lowest responses of 58.8%. In comparison, the result clearly shows that most of the respondents have realized the lack of continuity and consistency in China's health intervention to help the Nigerian government beyond the Ebola epidemic and COVID-19 pandemic.

Similarly, for the cause-and-effect relationship between the highest and lowest proportion in the "disagree" category, about 29.2% of the respondents disagreed with that lack of communication posed challenge to China's health diplomacy in Nigeria. While lack of sustainability received only 15.5%. Again, the

result implies that most of the respondents are aware of the importance of China's constant communication with the Nigerian officials during those periods, but also sustaining the communication channels beyond the epidemic and pandemic moments will boost the country's health sector.

F. Familiarity of China's Soft Power Perception in Nigeria

As highlighted in the beginning of this study, soft power is used by China to attract or influence a targeted country. Both China and Nigeria have ramped up efforts to strengthen their diplomatic relations particularly in the last decades. On one hand, China possesses the capability as a major global power to complement positively Nigeria's demands. On the other hand, Nigerian government has tried to establish major domestic and political reforms to eradicate some of the outstanding challenges that could impede Nigeria's bilateral relationship with global powers as well as Sino-Nigeria relationship (Mthembu-Salter, 2009). The result obtained from tables below were aimed to understand the level of familiarity, reputation, and influence of China's soft power in Nigeria.

Relative to familiarity of China's soft power perception in Nigeria. The grand mean score of 2.29 was obtained and used as a cut-off point to decide respondents' perception of China's Soft power in Nigeria. Scores within and above the grand mean score were categorized as agreement to the statements, while scores lower than the grand mean score were categorized as disagreement to the statements. Table 9 shows that the statement; I am quite knowledgeable about China's health aid to my country has the highest proportion, with 57.7% of the respondents agreeing to the statements.

Similarly, substantial number of 28.9% disagree over having knowledge about China's health aid to Nigeria, while 13.4% were uncertain (Note: Uncertain covers "I do not know", "I do not want to answer") in their response to the statement.

Table 9 Familiarity of China's soft power perception in Nigeria

China's soft power perception in Nigeria/Familiarity	Agree	Uncertain	Disagree	Mean/ SD
I am quite knowledgeable about China's health aid to my country	57.7	13.4	28.9	2.29±0.89

Source: Survey analysis by SPSS.

Note: Uncertain covers "I do not know", "I do not want to answer"

- *Cause and effect analysis of respondents' answers*

According to result in Table 9, the cause-and-effect relationship between the highest and lowest proportion in the "Agree" is as follows; 57.7% have the highest representation against those who disagree 28.9% and those who are uncertain 13.4%. The result implies most of the respondents are knowledgeable about China's health relations with Nigeria because of their locations have presence of Chinese projects and watch, listen, or read about China's activities in Nigeria. While other categories may have little knowledge or uncertain (do not know or do not want to answer).

G. Reputation of China's Soft Power Perception in Nigeria

Most of the respondents of 53.4% agreed that they do not mind travelling to China for medical treatment if need be ($\bar{X}$ =2.17). 50.7% of the respondents also believed that China has highly trained and very experienced medical professionals and modern facilities; hence, I can recommend this to people ($\bar{X}$ =2.14). Conversely, 44.5% of the respondents opined that the established partnership between Nigeria's health system and China do not make them more confident of the health care services rendered in China ($\bar{X}$ =2.06). This is explained further as 38.8% disagreed that the established partnership between Nigeria's health system and China make them more confident of the health care services rendered in China, 36.6% disagree that they do not mind travelling to China for medical purposes, and 36.3% disagreed that China has highly trained and experienced medical professionals.

The result indicates those who are uncertain (I do not know, or I do not want to answer), with 16.7% respondents unsure about the health care service rendered in China. 13.0% respondents were uncertain about China has highly trained and experienced medical professionals while 10.0% were uncertain about travelling to China for medical treatment if need be. Overall, the result implies that though most

Nigerians are aware of China's health aid to their country, they are still not well informed about the specific details pertaining to China's commitment to health care, medical treatment and the established partnership between Nigeria's health system and China. This suggests that there is a need for more awareness and education on the specific details of China's health aid in Nigeria to increase familiarity and trust in China's soft power perception in the country.

Cause and effect analysis of respondents' answers

According to result in Table 10, the cause-and-effect relationship between the highest and lowest proportion for the "Agree" is as follows; 53.4% of respondents agree that they do not mind travelling to China for medical treatment, while the lowest proportion of 44.5% respondents are confident over the health care services rendered in China. Although more than half of the respondents agreed to visit China for medical treatment for emergency purpose, less are not confident about the Chinese treatment under normal circumstances. Similarly, for the cause-and-effect relationship between the highest proportions in the "disagree" category, 38.8% of the respondents disagree about confidence of health care services rendered in China. This implies that despite the need for China's assistance during epidemics and pandemics, Nigerians are less confident about Chinese medical treatment during normal situations.

Table 10 Reputation of China's soft power perception in Nigeria

China's soft power perception in Nigeria/ Reputation	Agree	Uncertain	Disagree	Mean/ SD
I do not mind travelling to China for medical treatment if need be	53.4	10.0	36.6	2.17±0.93
I am confident of the health care services rendered in China	44.5	16.7	38.8	2.06±0.91
I believe China has highly trained and very experienced medical professionals	50.7	13.0	36.3	2.14±0.92

Source: Survey analysis by SPSS.

Note: Uncertain covers "I do not know", "I do not want to answer"

H. Influence of China's soft power perception in Nigeria

In terms of influence of China's soft power perception in Nigeria, most of the respondents commended China's health aid response to Africa on Ebola crisis ($\bar{X}$ =2.20). This is expressed further in the result as 50.9% of them agreed that China's health aid response to Africa on Ebola crisis is commendable. In the same vein, a substantial number of the respondents believed China's intervention in Nigeria during the COVID-19 pandemic significantly increase their perception positively ($\bar{X}$ =2.10). This is seen clearly in Table 11 as 47.4% of the respondents agreed that China's intervention in Nigeria during the COVID-19 pandemic significantly increase its influence positively.

On the contrary, some respondents disbelieved that China's health diplomacy to Nigeria has had much impact on the way Ebola was curtailed ($\bar{X}$ =2.05). This is further depicted in Table 11 as 36.7% disagreed with the statement, while 21.4% were uncertain (I do not know, or I do not want to answer), in their response. Similarly, less than half of the respondents believed that China's intervention in Nigeria during Ebola crisis increase its influence positively. This is further explained in Table 11, as 37.4% of the respondents disagreed that China's intervention in Nigeria during Ebola crisis increase its influence positively, while 19.9% were uncertain (I do not know, or I do not want to answer), in their response to the statement. The results imply that the influence of China's soft power perception in Nigeria is not as strong as it could be. While most of the respondents commended China's health aid response to Africa on Ebola crisis and its intervention in Nigeria during the COVID-19 pandemic, fewer people believe that China's health diplomacy to Nigeria has had much impact on the way Ebola was curtailed and its intervention in Nigeria during the Ebola crisis significantly increased its influence positively. This suggests that Nigeria is still hesitant towards China's soft power, and that more effort is needed to positively improve China's influence in Nigeria.

Cause and effect analysis of respondents' answers

According to Table 11, the cause-and-effect relationship between the highest and lowest proportion in the "agree" responses is as follows: 50.9% of respondents agree that China's health aid to Africa during Ebola epidemic was commendable. However, the lowest proportion of respondents, 41.9%, agreed that China's health

diplomacy had a significant impact on the control of the Ebola epidemic. This is because respondents are more likely to know the keyword "health aid" than "health diplomacy".

Similarly, for the cause-and-effect relationship between the highest proportions in the "disagree" category, 37.6% of the respondents said that China's intervention during COVID-19 in Nigeria increased its influence positively, while 31.4% of the respondents disagreed that China's health aid to Africa on Ebola epidemic was commendable. This implies that despite the need for China's assistance during epidemics, Nigerians are less confident about Chinese intervention in their country during the pandemic. This is due to some accusations of maltreatment of fellow Nigerians in China. As a result, the Chinese ambassador to Nigeria was summoned by the then Nigerian foreign minister of affairs as mentioned earlier in the chapter five.

Table 11 Influence of China's soft power perception in Nigeria

China's soft power perception in Nigeria /Influence	Agree	Uncertain	Disagree	Mean/ SD
China's health diplomacy to Nigeria has had much impact on the way Ebola was curtailed	41.9	21.4	36.7	2.05±0.89
China's health aid response to Africa on Ebola crisis is commendable	50.9	17.7	31.4	2.20±0.89
China's intervention in Nigeria during the COVID-19 pandemic significantly increase its perception positively	47.4	15.0	37.6	2.10±0.92
China's intervention in Nigeria during Ebola crisis increases its perception positively	42.7	19.9	37.4	2.05±0.89

Source: Survey analysis by SPSS.

Note: Uncertain covers (I do not know, or I do not want to answer).

İ. Categorization of China's soft power perception in Nigeria

In a bid to categorize respondents' opinion on China's soft power in Nigeria, scores of the two indices (familiarity and influence) used in operationalizing the variable were pooled and an index was generated for each. The mean scores for each of familiarity and influence were obtained and their mean scores were generated. Similarly, the overall scores of Chinese soft power perception in Nigeria index was generated by pooling the scores of all the items together. A mean score of 23.2 was generated and used to categorize respondents into unfavorable (<23.2) and favorable

(≥23.2).

Table 12 shows that relative to familiarity, 50.0% of the respondents had an unfavorable of China's soft power perception in Nigeria, while 50.0% had favorable perception. Furthermore, Table 13 shows 62.2% of the respondents had unfavorable perception of reputation of China's soft power in Nigeria, while 37.8% exhibited a favorable perception. On the contrary, relative to influence, Table 14 shows 68.6% of the respondents had a favorable perception of China's soft power perception in Nigeria, while 31.4% of the respondents manifested an unfavorable perception. The fact that respondents were favorably disposed to perceive influence of China's soft power in Nigeria is an indication that the respondents recognize the growing power of China in Nigerian affairs. However, familiarity with China's soft power in Nigeria is evenly split relatively between favorable and unfavorable, while the reputation of China's soft power in Nigeria is viewed less favorably. This could be due to several factors, such as the perception of China's economic and political practices in the country, or the perception of Chinese people or companies in Nigeria. Therefore, it is important for China to consider how it can improve its reputation in Nigeria to increase its soft power in the country.

Overall, Table 15 reveals that 56.4% of the respondents had unfavorable perception of China's soft power in Nigeria, while 43.6% of the respondents exhibited a favorable perception. This implies is that the Chinese soft power in Nigeria is still relatively weak, and more efforts need to be applied to improve the perception among Nigerians. The unfavorable perception of China's soft power in Nigeria could be attributed to several challenges, such as a lack of sustainability, divergence views between political and business agenda and cultural and historical perspectives.

Table 12 Categorization of China's soft power perception in Nigeria (Familiarity)

	Frequency	Percentages	Minimum value	Maximum value	Mean/SD
Familiarity			4	12	8.4±2.3
Unfavorable	500	50.0			
Favorable	500	50.0			

Source: Survey analysis by SPSS.

Table 13 Categorization of China's soft power perception in Nigeria
(Reputation)

	Frequency	Percentages	Minimum value	Maximum value	Mean/SD
Reputation			3	9	6.4±1.9
Unfavorable	622	62.2			
Favorable	378	37.8			

Source: Survey analysis by SPSS.

Table 14 Categorization of China's soft power perception in Nigeria (Influence)

	Frequency	Percentages	Minimum value	Maximum value	Mean/SD
Influence			4	12	8.4±2.3
Unfavorable	314	31.4			
Favorable	68.6	68.6			

Source: Survey analysis by SPSS.

Table 15 Overall Categorization of China's soft power perception in Nigeria

	Frequency	Percentages	Minimum value	Maximum value	Mean/SD
Overall China's soft power perception in Nigeria			19	33	23.2±4.6
Unfavorable	564	56.4			
Favorable	436	43.6			

Source: Survey analysis by SPSS.

Cause and effect *relationship between Perception of Nigerians about China's health diplomacy and China's soft power perception in Nigeria*

Table 16 indicates that there is a significant relationship between Perception of Nigerians about China's health diplomacy and China's soft power perception in Nigeria (r= 0.192, p<0.04). It implies that the more positive Nigerians perceive China's health diplomacy, the more likely they will have a positive perception of China's soft power in Nigeria. This suggests that China's humanitarian efforts in Nigeria, such as providing aid and medical assistance, have a positive influence on how Nigerians perceive China's soft power. It also suggests that if Nigerians perceive China as engaging in beneficial health diplomacy, they are more likely to view China as having a positive influence in the country.

Table 16 Correlation between Perception of Nigerians about China's health diplomacy and China's soft power

		Perception health diplomacy	China soft power
Perception health diplomacy	Pearson Correlation	1	.192[**]
	Sig. (2-tailed)		.004
	N	1000	1000
China soft power	Pearson Correlation	.192[**]	1
	Sig. (2-tailed)	.004	
	N	1000	1000

Source: Survey analysis by SPSS.

Cause and effect relationship between the challenges facing China's health diplomacy and China's soft power perception in Nigeria

Table 17 shows that a significant and negative relationship exist between the challenges facing China's health diplomacy in Nigeria and China's soft power perception in Nigeria (r= -0.148, p <0.04). This suggests that the more challenges China faces in its health diplomacy efforts in Nigeria, the less positively China is viewed in terms of its soft power in the country. it also implies that the challenges facing China's health diplomacy in Nigeria are negatively impacting China's soft power perception in Nigeria. This could be due to a lack of trust in China's actions in the region, or a negative perception of China's motives in Nigeria. It could also be due to a lack of cultural exchange or any other issues that could be causing a rift between the two countries.

Table 17 Correlation between the challenges facing China's health diplomacy and soft power perception in Nigeria

		Challenges index	China soft power
Challenges index	Pearson Correlation	1	-.148[**]
	Sig. (2-tailed)		.000
	N	1000	1000
China soft power index	Pearson Correlation	-.148[**]	1
	Sig. (2-tailed)	.000	
	N	1000	1000

Source: Survey analysis by SPSS.

VII. CONCLUSION AND DISCUSSION

The objective of the research was to study Nigerians' opinions regarding the role that China's health diplomacy plays in Nigeria. An overview of the general introduction is provided. It includes a summary of the background of the study, the statement of the problem, the significance of the study and a description of the scope of the study. All variables used in the study were operationally defined. As part of the research process, questions were raised and answered. This study aimed to demonstrate that health diplomacy as a dependent variable has been utilized by China as a tool of soft power. Chapters one and two of this study contain an extensive literature review of relevant previous works related to the variables that were examined in this study. Moreover, chapter two explained the conceptual and theoretical framework. It also provides a foundation for understanding the significance of health diplomacy and soft power in international relations. The concept of power, soft power, diplomacy, and health diplomacy were defined and conceptualized. Two major theoretical approaches were selected including the power transition theory, underdevelopment theory as well as dependency theory were applied to better explain the correlation between health diplomacy and soft power. The theoretical framework was significant in providing the answer to the research question.

Furthermore, secondary data collected from the Brand Finance Soft Power Index 2020 and 2021, explained the global rankings of different countries regarding China's pursuit of soft power vis-à-vis other countries. The Brand Finance (2021) report highlights one of the most important findings that can be drawn from it, and that was countries' international perceptions and practices have been important in forming their soft power at the international level. Thus, soft power policies depend heavily on perceptions of reality from international public opinion. During the COVID-19 pandemic, for instance, China has been one of the most successful countries in putting public health policies into practice in the most effective way possible. Despite this, neither China has been recognized for its performance in

tackling the pandemic nor for its soft power ranking in the global arena. There is a significant discrepancy between reality and perception when it comes to China's policy, and this discrepancy clearly illustrates the importance of global communication to build soft power. In addition, another conclusion from the report is that the value of soft power is relative to the level of global competition among countries and that it can be a zero-sum game, which means that, if one country gains, the other will lose.

Chapter three develops a historical framework giving an insight into past colonial powers such as Great Britain, France, Germany, and many others, as well as China's past and present relations with Africa and their historical influences. The chapter examines the development, focus areas, and current situation between the Western, Chinese, and African countries and how they relate to each other. An array of African leaders had expressed their enthusiasm about the dividends of China's embrace; depicting the exchange as equally beneficial to both parties, unlike past inter-African exchanges that were purely transactional. Conversely, China on the other hand has been utilizing its soft power to everyone's advantage to benefit from it as much as possible. An important part of this shared identity revolving around historical grievances revolves around the shared values of non-interference in domestic affairs as one of its main characteristics. Several African leaders have applauded the Chinese Communist Party for its support of Africa's development by providing aid, which in turn has generated approval among African leaders, who in turn have acknowledged the Chinese Communist Party to be Beijing's official government.

In the fourth chapter of the study, China's health diplomacy with Africa over the past decade was analyzed. According to the literature, China's health aid has significantly improved access to better healthcare and medical services in Africa. The study also found that China's health aid has had a positive impact on African countries' public health systems and contributed to the reduction of poverty and disease. However, the study also noted that there is still a need for more effective coordination between Chinese and African governments to ensure that China's health aid is used in an effective and efficient manner. Chapter Five focuses on China's COVID-19 diplomacy in Nigeria. Several mechanisms introduced by the Nigerian authorities to fight the disease as well as the pattern of relations with China during

the pandemic was examined. In addition, some challenges were identified in China's strengthening efforts to boost bilateral relations with Nigeria, especially in health care. These challenges include distrust of Chinese health workers, lack of coordination and efficient communication between the two countries. Inadequate resources for health care delivery in Nigeria, is also another major challenge during the pandemic.

An in-depth survey was conducted to measure the various opinions of Nigerians particularly about China's health relationship with Nigeria, utilizing a quantitative research method through an evaluation of the opinions of Nigerians. As a unit of analysis, random selection of Nigerian adults above the age of 18 years were included in the study, regardless of their gender, class, or religion. The survey was conducted in Abuja, the country's capital, as well as Lagos, the country's commercial capital. The selection of these cities was based on their cosmopolitan characteristics. Moreover, it is assumed that both cities' residents were likely to be more knowledgeable about Nigeria's relationship with China. A simple random sampling technique was used to select one thousand respondents for the study. According to the results, most of the respondents had a negative view of China's health diplomacy based on the responses. A lack of sustainability, divergence between the political and the business agendas, cultural perspectives, and historical factors among other factors, were identified by respondents as major barriers to China's health diplomacy efforts in the West African country.

A further finding of the study indicated that respondents had a positive view of Chinese soft power's impact on Nigeria. However, it was found that familiarity with China's soft power in Nigeria was evenly split between those who viewed it positively and those who viewed it negatively. In contrast, respondents perceived China's soft power reputation as unfavorable. Even though the survey was conducted in two cities that are mostly well educated and familiar with Chinese culture. It may not have reflected the full picture of the country's perception of China, nonetheless, these are valuable data that may be helpful in future research regarding the use of health diplomacy as a soft power tool. One of China's biggest failures that led to unfavorable perceptions of its health diplomacy with Nigeria was the lack of efficient communication between official and public in Nigeria.

Notwithstanding China's rising role as a major and international health donor,

the country has also been facing comparable challenges as other players in the international health funding space. Some of the major challenges are synchronization of health investments, resource prioritization, programmatic and financial accountability, health workforce shortage and problems of sustainability (Ernest, 2019). Other challenges that could impede China's efforts in Nigeria are due to lack of coherent governmental policies, rampant corruption, insecurity, public misconduct, and mismanagement. Several reports suggested that Chinese people are often negligent of domestic laws and working standards in Nigeria that could hamper the ability of China's government to responsible in Nigeria (Yanzhuo, 2014). Furthermore, this study focused mainly on the following challenges: (1) Lack of sustainability (2) Challenges in communication between Chinese and Nigeria health officials (3) Divergence between political and business agendas. (4) Challenges of implementation and aid delivery to the people in need. (5) Challenges due to cultural perspectives and historical context. Despite its benevolent attitude of distributing free vaccines to some African countries, China has failed to be in contact directly with the Nigerian people for instance, to thoroughly understand their needs and implement solutions to their problems, as well as assess the impact of their projects on the public. Instead, it opted to reach out to the elites, with loans and financial support. The continuation of such behavior could harm China's future activities in Nigeria.

China's health assistance during the COVID-19 pandemic has been one of the largest, most benevolent aid and developmental succor given for African healthcare in China's history. In addition, China contributed significantly to containing the spread of the disease. Beijing has exploited the gap to showcase a positive image by distributing COVID-19 vaccines through bilateral agreements and via the WHO scheme to help many African countries. Nevertheless, the diplomatic tensions that happened after the alleged maltreatment of Nigerians in China, could have caused serious damages especially to China's positive image in Nigeria. It was in both China and Nigeria's best interest that they resolved the issue to achieve damage control. Thus, the prompt response of Nigeria and China to COVID-19 diseases provides an opportunity for future international collaboration on global health security.

Consequently, it is vital that China ensures the activities it is undertaking in Nigeria are transparent and that they benefit the Nigerian people. The study, however, found a significant and positive relationship between Nigerians' perception

of China's health diplomacy in Nigeria and China's perception of soft power in the country. Moreover, it was found that the challenges facing China's health diplomacy in Nigeria are closely related to China's soft power perception as well as the challenges China faces when it comes to its health diplomacy. Consequently, the more challenges China faces in its health diplomacy efforts in Nigeria, the less positively its soft power is perceived by Nigerians. From the collected data, the study findings indicate that Nigerians have an unfavorable opinion of China's health diplomacy in their country. However, this is a result of just a sample of the population from Abuja and Lagos and not of the entire country.

- *Limitations of the research findings*

As with every study, this thesis has limitations. Above all, it was challenging to find the latest studies because of the lack of up-to-date research about China's health diplomacy in Nigeria during the Ebola epidemic and COVID-19 pandemic. Even though some previous studies have generally examined the historical background and China medical aid delivery to African countries, it was largely prior to the period selected for this study.

Additionally, limitation was about the representativeness of a random sampling. Although the study is not specifically designed for a particular gender, the findings indicated more female respondents' participation than male counterpart. It was presumed the research encountered a lesser representation of the male participants partly due to a lack of willingness and adequate attention from the male participants. However, it was envisaged that 1000 participants would be sufficient for the survey, irrespective of their gender.

Another limitation of the study was geographical constraints targeting only two cities, Lagos, and Abuja. It was highly likely that people in the northern part of the country would perceive China's soft power in Nigeria differently from people in the south-south. Because of level of education, religious and ethnic influences, Nigerians outside Lagos, and Abuja may have radical and mixed perceptions of China's soft power assessment in the country. However, it was logistically impossible to travel to some areas in the north and south due to security challenges. As a result, Lagos and Abuja were considered to be the safest cities for conducting the survey.

- *Recommendation*

The study identified that various factors that impede China's ability to succeed in its soft power using health diplomacy as a tool. These factors include a lack of sustainability, conflicting political and business agendas, and cultural and historical differences. China should therefore try to strengthen its health diplomacy in Nigeria by building trust and addressing issues that impede its success. This could involve long-term commitments to health projects, managing cultural differences through language training, and working with local stakeholders to ensure sustainability and mutual advantages. This further indicates the importance of China's health diplomacy efforts in Nigeria and the need for Beijing to improve its soft power perception in the country. Better engagement with the Nigerian public and by providing more tangible and visible benefits from China's presence in the country. Considering the findings of the study, the following recommendations were made:

- Authorities should take steps to ensure that Chinese companies and organizations operating in Nigeria are held to the same standards as those in their home countries. This is in terms of service delivery and the quality of products. For instance, it may be possible to increase transparency and accountability, as well as improve labor and environmental protection standards. This can be done through better regulation and enforcement by Chinese authorities, as well as through cooperation with local governments in Nigeria. Additionally, Chinese companies should strive to gain the trust of the local population and be willing to engage in dialogue and consultation with local stakeholders.

- It is significant to ensure that Chinese and Nigerian medical professionals are encouraged to communicate and work together to enhance the perception of Chinese health diplomacy in Nigeria. This could be achieved by providing better training for Chinese medical personnel in Nigeria, and by creating opportunities for both countries to collaborate on research projects and other initiatives. This would help to bridge cultural and language barriers and foster a strong relationship between the two countries.

- The Chinese government should establish more projects in Nigeria through cultural exchange programs and other initiatives. This will provide an

opportunity for the two countries to strengthen their understanding and appreciation of one another. This will facilitate better diplomatic relations between the two countries and build trust and mutual respect. Such initiatives will also help to reduce cultural misunderstandings and create a more stable relationship between China and Nigeria.

- The Chinese government and health agencies should create sustainable health initiatives tailored specifically to the needs of the Nigerian population to make them more effective. It is hoped that this will foster stronger relationships between Chinese and Nigerian health organizations as well as promote long-term cooperation and knowledge sharing between them. Such initiatives should focus on improving access to healthcare services and increasing education on health and wellness. Additionally, the initiatives should aim to reduce social disparities in health outcomes.

- The need to invest in research and capacity building for Nigeria's health challenges to pinpoint and develop appropriate solutions, as well as better understand their historical context, is apparent. This research should include an analysis of the country's current health system and how it has evolved over time. Additionally, the research should identify the strengths and weaknesses of the system, as well as potential areas for improvement. This knowledge will be essential in creating effective interventions to address Nigeria's health challenges.

- The Chinese government is recommended to focus on improving its soft power in Nigeria to improve its reputation. Several initiatives may be taken to achieve this, and that could include exchanges between the two cultures and the launch of public awareness campaigns between the two countries. The Chinese soft power contributions in Nigeria could be highlighted in this way.

- Furthermore, the Chinese government should work hard to create a more open dialogue with Nigerian citizens and listen to their concerns about Chinese activities in the country. In this way, Chinese soft power could be perceived in Nigeria as being more positive, which could lead to an increase in trust between the two nations. This could also facilitate better collaboration and understanding on both sides. It could help to foster a more mutually

beneficial relationship between the two countries.

- A very effective way to improve the perception of China's soft power in Nigeria is for the Chinese government to take active measures by proactively engaging with Nigerian citizens and communities to improve positive perceptions in the country. Among these are establishing relationships with local businesses, NGOs, and other organizations associated with civil societies.

- A great deal of attention should be paid by the Chinese government to the communication and transparency of aid and investment projects in Nigeria. In this way, the Nigerian public can be assured that China has beneficial intentions for the country in the future. This can be done by providing detailed information about the projects and allowing local media to report on them. Additionally, the Chinese government should ensure that there is a mechanism in place to allow for the monitoring and evaluation of the projects.

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APPENDICES

APPENDIX A Survey Questions

APPENDIX B Ethical Approval Form

APPENDIX A Survey Questions

Personal information

1. Age: 18-19 ( ) 20-29 ( ) 30 -39 ( ) 40 - 49 ( ) 50-59 ( ) 60 and above

2. Gender: Male ( ) Female ( )

3. Marital status: Single ( ) Married ( ) Divorced ( ) Widowed ( )

4. Educational Status: No Formal Education ( ) Primary ( ) Secondary
( ) OND/NCE ( ) HND/B.Sc. /B.A. ( ) Post- Graduate ( ) Other ( )

5. Place of Work:

6. Job Title/Type of Occupation:

• Survey questions about Nigerians' perception on China's health diplomacy

Perception Statement	Agree	Disagree	Uncertain
China's medical intervention in Nigeria is in good faith.			
Chinese government should not have intervened in the Ebola crisis / COVID-19 pandemic in Nigeria.			
Nigeria should appreciate China's health assistance to fight Ebola and COVID-19.			
China is responsible for the public health issue the world is facing during COVID-19 pandemic.			
Nigeria does not need Chinese health diplomacy.			
China's health infrastructure to Nigeria is of inferior quality.			
China is a good ally to Nigeria in terms of providing health assistance.			

• Survey questions about challenges facing China's health diplomacy in Nigeria

Challenges	Agree	Disagree	Uncertain
Sustainability			
Challenges in communication			
Cultural perspectives and historical context			
Divergence between political and business agendas			
Organization of aid implementation			
Challenges in communication			

APPENDIX B Ethical Approval Form

T.C.
İSTANBUL AYDIN ÜNİVERSİTESİ REKTÖRLÜĞÜ
Lisansüstü Eğitim Enstitüsü Müdürlüğü

Sayı : E-88083623-020-54100   20.06.2022
Konu : Etik Onayı Hk.

Sayın USMAN ALİYU UBA

Tez çalışmanızda kullanmak üzere yapmayı talep ettiğiniz anketiniz İstanbul Aydın Üniversitesi Etik Komisyonu'nun 09.06.2022 tarihli ve 2022/10 sayılı kararıyla uygun bulunmuştur.
Bilgilerinize rica ederim.

Dr.Öğr.Üyesi Alper FİDAN
Müdür Yardımcısı

RESUME

PERSONAL INFORMATION

Name/Surname: Usman Aliyu UBA

EDUCATION

- ❖ **Bachelor:** 2015, B.A: Sociology (in English), Fatih University, Istanbul (Türkiye)
- ❖ **Master's:** 2018, M.A Journalism (in Turkish), Marmara University, Istanbul (Türkiye)
- ❖ **Ph.D.:** 2024, Political Science and International Relations (in English), Istanbul Aydin University, Istanbul (Türkiye)

WORK EXPERIENCE

- ❖ **December 2023 – Present:** Program Editor / TRT World

Responsibilities include coordination of daily news bulletin for broadcast. Also responsible for writing headlines, proofreading, subbing scripts, editing, and production of international news stories and content for broadcast. I collaborate closely with other editorial team members to ensure accuracy and quality.

- ❖ **July 2020 – November 2023:** Output Producer / TRT World

My responsibilities as an output producer include writing, editing, and voicing packages for international news stories. I report on various topics, from politics to business to culture. I collaborate closely with other editorial team members to ensure content accuracy and quality.

- ❖ **June 2019 – July 2020:** Deputy Output Producer / TRT World

Upon my promotion to the output department, I oversaw the writing and production of broadcast content. I enjoyed the challenge of summarizing complex stories into concise reports. I also learned a lot about different cultures and politics.

- ❖ **June 2018- June 2019:** Deputy Planning Producer / TRT World

As a deputy planning producer, I was required to pitch current or feature stories and plan broadcast coverage. I was also responsible for researching and writing scripts for stories and managing all aspects of production. I also had to work with the newsroom staff to ensure all reports were timely and accurate. Additionally, I worked with the production and creative teams to create engaging content for local and international audiences.

❖ **February 2017 - May 2018:** Assistant Planning Producer / TRT World

The position of assistant planning producer required me to pitch current or feature stories and plan broadcast coverage. I was also responsible for researching and writing scripts for stories and managing all aspects of content production. I also liaise with correspondents and freelancers to commission content.

❖ **May 2015 – January 2017:** Associate Producer, Digital Producer / TRT World

My career at TRT World began in 2015 as an associate producer. During that time, I assisted with news gathering and planning. I created and edited broadcast content. I also worked closely with the editorial team to ensure the accuracy and integrity of the stories we reported. I have also worked as a digital producer writing for online publications. I have experience developing content for social media, creating web copy, and optimizing articles for search engine optimization.

❖ **September 2014 – January 2015:** Project Volunteer / ICYF-DC Istanbul

My experiences include the preparation of publications and reports containing research findings. Consult with and advise individuals such as administrators regarding social issues and policies, as well as the implications of research findings. I also assisted with special events or programs.

❖ **September 2012 – June 2013:** Project Assistant / AIESEC ISTANBUL

I collaborated with team members to achieve target results. Participated in team-building activities to enhance working relationships. Used critical thinking to break down problems, evaluate solutions, and make decisions.

PUBLICATIONS AND CONFERENCES

- Uba, U. A., & Katman, F. (2023). THE ROLE OF SOFT POWER IN AFRICA: CASE STUDY OF CHINA'S HEALTH DIPLOMACY IN NIGERIA (2014-2020). *Russian Law Journal*, *11*(5), 1808-1822.
- Uba, U. A. (2023). Seminar on International journalism. Istanbul Aydin University. Istanbul

- Uba, U. A. (2022). The Failure of AU's Policies and the Prospect of a New Security Architecture in Africa. TASAM.

- Uba, U. A. (2018). Yolsuzlukla mücadelede görsel medyanın rolü: Nijerya örneği [master's Thesis]. Marmara University.

- Uba, U. A. (2023). The Securitization of Global Digital Transformation in a Multipolar World. 9th Istanbul Security Conference (ISC), Istanbul. TASAM

- Uba, U. A. (2021). Turkiye's involvement in Libyan Crisis: A Game Changer for Peace in North Africa. 7th Istanbul Security Conference (ISC), Istanbul. TASAM

- SCARBORO, A., Kübra, A. Y., ALIYU, U., EKICI, Y., & UYLAŞ, S. (2013). Out of the classroom, onto the streets: Learning social research by doing social research. *International Journal of Global Education (IJGE) ISSN: 2146-9296*, *2*(4).

CONFERENCES AND CERTIFICATE

- ❖ Certificate of participation as a speaker at the 9th Istanbul Security Conference (2023), organised by TASAM, Istanbul (Türkiye)
- ❖ Certificate of participation as a speaker at the 8th Istanbul Security Conference (2022), organised by TASAM, Istanbul (Türkiye)
- ❖ Certificate of participation as a moderator at the 8th Istanbul Security Conference (2022), organised by TASAM, Istanbul (Türkiye)
- ❖ Certificate of honour in journalism and broadcasting, Istanbul Media Academy (2014).

PERSONAL SKILLS

- ❖ **Language Skills:**

    English (Official/Advance)

    Hausa (Native)

- ➢ Arabic: B2 C1 C1 B2 B2 (Understanding, Listening, Reading, Speaking, Writing)
- ➢ Turkish: C1 C1 C1 B2 B2 (Understanding, Listening, Reading, Speaking, Writing)

Levels: A1 and A2: Basic user - B1 and B2: Independent user - C1 and C2: Proficient user

- ❖ **Communication skills:**

I possess excellent communication skills gained from my experiences as a journalist.

- ❖ **Job-related skills-Innovative skills:**

I have acquired skills in communication strategy and networking within the media sector. Well-trained in reporting in the field and the newsroom. Trained in using various production and editing software used in broadcasting. Create scripts for on-air talent, cut pictures through a newsroom production system, commission, and write graphics as needed. I'm a hardworking, flexible, and passionate journalist with strong organizational skills. Organized and reliable, successful at managing multiple priorities with a positive attitude. Willingness to take on additional responsibilities to meet team goals. Cultivate a collaborative approach to newsgathering and excellent content delivery for the media.

Organizational-managerial skills/Leadership skills:

Teambuilding and networking, independent decision making, Critical thinking, Cultural awareness.

- ❖ **Digital skills:**

Good in using Microsoft Office, Power point presentation, Ms Excel.

Script and video editing software: INews, Edius, Stratus, Final cut.

- ❖ **Other skills:**

Analytical Skills gathered from my PhD experience (from courses like Research Methodology, Political Thought, Political Sociology, and others)

- ❖ **Showreel:**

1. Türkiye-Africa summit 2021

https://x.com/usmanaliyuuba/status/1472460133515071489?s=20

https://x.com/usmanaliyuuba/status/1472480081381576704?s=20

2. One-on-One - Nigerian Presidential Candidate Prince Malik Ado-Ibrahim

https://www.youtube.com/watch?v=s4yLXdOBERA

3. A Night of Defiance: Interview with Usman Aliyu Uba

https://www.youtube.com/watch?v=uzXBgs2lYNk

4. Turkey to boost co-operation in trade, defence with Nigeria

https://www.youtube.com/watch?v=P5tU4jzPR0s&t=178s

5. Interview with Turkey's Trade Minister Ruhsar Pekcan

https://www.youtube.com/watch?v=M3e52TXy0JM&t=25s