

# Beyond the Death and Infection Plagues of COVID-19 on the Globe a Critical Analysis of its Diverse Effects

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## ABSTRACT

The From Wuhan to almost all parts of the globe, the deadly corona virus (COVID-19) hard-hit humanity like no other deadly disease has ever. This paper analyses the devastating diverse effects of COVID-19 on various aspects of human life, looking beyond its death and infection plagues on humans across the globe. Drawing from secondary data, observation and intuition, the study reveals heart-blowing infection and death rates, variants and non/survivability factors of COVID-19. Next, it shows that besides reducing world's population and causing global panic and public health challenges, COVID-19 has exerted devastating effects on socio-economic, psychological, clinical, educational, behavioral, nutritional, personal and general aspects of life. Virtually, all nations of the world were/are affected. Although no cogent or permanent solution has been found, alternative orthodox and traditional (herbal) remedies are so far used for recovering the health of infected persons and for prevention. The lockdown, imposed on nations to control the spread, also brought untold difficult situations and diverse effects upon the citizenry. The peak of the effects is the distortion of normal ways of life, which ushered in uncommon new ways of life that most people still battle with. The study concludes that COVID-19 pandemic, which so far defies absolute remedy, has diverse long-term devastating effects on humans and phenomena across the globe. It recommends the harmonized efforts, research findings and remedies, and the subversion of international politics over COVID-19 with more global cooperation and meaningful strategies among all nations of the globe.

**Keywords:** COVID-19; Diverse; Effects; Humanity; Globe; Harmonized

## INTRODUCTION

The deadly corona virus (COVID-19) pandemic, initially recorded in China on 31 December 2019, spread like wild fire to over 220 countries of the world. This virus had never been

reported in humans until its first case in Wuhan, China. On 30 January, 2020, this newly emerged pathogen (2019-nCoV), inducing pneumonia in humans, was the WHO declared an international public health emergency. On 11 February, 2020, became officially known as novel Corona Virus-19. World

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Health Organization (WHO) named the deadly disease COVID-19 on 11 February, 2020, following its biological composition and the year it rose in Wuhan. Ever since 2019, various countries of the world have been battle with the challenges of controlling this deadly pandemic [1-5].

The COVID-19 continues to infect and kill the human population world over. As at 22 February, 2021, the COVID-19 had infected over 115 million and killed about 205 million across the globe. In addition to infecting and causing millions of death, the pandemic has exerted both short- and long- term devastating effects on various spheres of life. Virtually, every aspect of life is affected and all nations of the world are continuously affected by the by devastating effects of the COVID-19 pandemic.

For example, the COVID-19 has caused a paradigm shift from the conventional or normal analogue ways of life to digital ways, whereby activities involving social gathering are undertaken through digital means. Meanwhile, less than 50% of the world's population can duly engage in technology-based digital activities. This is one of the most serious challenges the pandemic has posed to humanity. In view of the foregoing, this article rises to describe the short- and long- term devastating effects of COVID-19 from a multidimensional approach.

### Instances of Reported Cases of COVID-19

Although the first reported cases of COVID-19 were in China, the afterward reported cases in other populous and advanced nations in particular are higher than those in China, as a whole, not in Wuhan alone. Infection and death rates in USA, UK, Germany, Italy, Brazil, etc. were very high. For examples, the first case of a COVID-19 in the USA was identified (precisely in California) on February 26, 2020. Approximately 486,634 total cases of COVID-19 infection and a total of 10,311 deaths respectively were reported in Pakistan [6-11].

Up to December 29, 2020, the prevalence of COVID-19 in different provinces of the country is reported as: 217,636 positive cases in Sindh; 140,188 in Punjab; 18,218 in Baluchistan; GilgitBaltistan had 4,866; Azad Jammu and Kashmir recorded 8352; KPK (Khyber Pakhtunkwah) had 59,255 and 38,146 in Islamabad. However, out of these reported cases, 440,660 were recovered. A total of 6,819,699 tests were performed to confirm the positive corona cases.

## LITERATURE REVIEW

It is recently reported that novel corona virus new strains have been identified in South Africa and United Kingdom. The chief medical officer of England reported that new corona virus strain can be highly contagious and serious preventive measures are required to control its spread. Due to the emergence of new variant of this virus, UK government has imposed a complete lockdown to minimize the risk of spreading it. Most of the countries also stopped the flights to control the spread of new strain. The lockdown measure had been unanimously adopted in many countries of the world, with peak of the declaration in March, 2020. While some countries eased their lockdown around May/June, many others continued with theirs up to

September/October. In fact, by virtue of the social distancing parameters, it is partial lockdown still exists in some parts of the globe [12-14].

### Variants of COVID-19

The genomic recombination of coronavirus RNA without the proof-reading ability mechanisms gives rise to novel strains and recombination. This frequency of alterations and mutations are more reported in the spike glycoprotein of the virus which stimulates the host's immune response. These kinds of mutations gave rise to the novel coronavirus SARS-CoV-2 responsible for the current pandemic, and it could be deduced that this strain will undergo further modifications. These mutations also allow the virus to cross the host-species barrier; thereby enhancing the hot spectrum for infection and as well increase issues of public health.

A comprehensive sequence analysis of the SARS-CoV-2 in conjunction with different animal species indicated that the virus originated from bat coronavirus and a coronavirus of unknown origin. The homologous recombination has most likely occurred on Spike glycoprotein of the virus, indicating a strong cross-species transmission. A study conducted in Hong Kong identified a variant of SARS-CoV2 in a re-infection case in an immune competent patient. The whole-genome sequences of the first and second infection in the individual showed around 23 nucleotide and 13 amino acid differences in the two strains.

In Zhejiang province of China, sequencing from a mild case of COVID-19 showed 35 specific gene mutations concerning the original virus identified in Wuhan. After studying 13 mutations in the Spike protein of SARS-CoV-2, the mutation Spike D614G was seen as an urgent concern, as it was circulating in Europe and became dominant when introduced to new regions. Another study analyzed the SARS-CoV-2 strains circulating in the US and found 4 sub-strains using various genetic and computational parameters [15-22].

Similarly, a study analyzed more than 48000 SARS-CoV-2 sequences available in online databases. They compared the sequences with Wuhan reference sequence NC\_045512.2 and found 7.23 mutations per sample, most prevalent of which were single nucleotide transitions. A US study analyzed 1134 complete or f1ab polyprotein sequences of local SARS-CoV-2 strains and found 4 significant mutations in the non-structural proteins. The estimated mutation rate in corona viruses is higher than other single-stranded RNA viruses with an average of  $\sim 10^4$  substitutions per site per year. This high rate of mutation, coupled with a comparatively larger genome of corona viruses, makes it highly likely to give rise to new strains.

In February 2020, a variant of SARS-CoV-2, with a D614G point mutation in the gene encoding spike protein, was reported. By July 2020, this substitution mainly replaced the original sequence from a strain isolated from Wuhan and began circulating globally. This strain did not cause symptoms other than what has been linked to COVID-19. By September 2020, a variant of SARS-CoV -2, linked to farmed minks, was reported in Denmark which was reported as 'Cluster 5'. Although this strain has not been reported widely, studies are indicating low

virus neutralization in humans which suggest various hindrances in vaccine development. In December 2020, a new strain of SARS-CoV-2 (SARS-CoV-2 VOC 202012/01; Variant of concern, the year 2020, month 12, and variant 01) was reported in the UK by the World Health Organization, which caused mass confusion and fear among the general population about the plasticity of the virus [23-29].

About 23 genetic changes have been reported in this strain; thus, increasing the concerns of being more contagious and infectious. This variant strain has also been reported in Denmark, Northern Ireland and South Africa. Coronaviruses continue to mutate over time. Intensive epidemiological and genetic investigations are needed on a geographic basis to fully understand the strain distribution and their effect on human life.

### The Survivability and Otherwise of COVID-19

Corona virus survives best in dry and cool environment. The virus is unable to survive at high temperature and humidity level. SARS-CoV-2 is unstable to ultraviolet rays, some organic solvents (chloroform, ether, ethanol and chlorine based disinfectants, etc.) and heat that destroy its protective covering respectively. COVID-19 can stay alive for up to 3 days on hard surfaces (stainless steel and plastic) at temperatures of 21-23°C and 40% relative humidity. Also, it can be alive for approximately one month at 4°C.

On the other hand, it is reported that COVID-19 cannot survive well when RH (relative humidity) below 70% and temperature is more than 28°C. COVID-19 has 82% similarity with that of human genetic source (SARS-CoV) and 89% nucleotide identity with bat genetic source (CoVZXC21). Therefore, the reported virus was considered a result of mutation from a strain found in bats and named as SARS-CoV-2. Pangolins serve as intermediate host and humans are final host for SARS-CoV-2, aka COVID-19. Be it a result of mutation from a strain found in bats, it is logically deduced that scientific or experimental actions of animal scientists had led to the mutation that brought to place COVID-19 [30].

Winter season is usually associated with flu season. Most of the countries around the globe are facing the issue of COVID-19 second wave. It means there is the presence of both viruses together and coinfection with both viruses seemingly heightens the situation. The prevalence of the virus has been diagnosed in many countries (up to 213). The new mutant coronavirus (COVID-19) has shown high prevalence. Corona virus is highly prone to mutation. No kind of immunity has been developed against this new novel pathogen until someone is infected and then recovered. Therefore, COVID-19 is prevailing, infecting and affecting health in a way quite different from other common viruses. On a general note, COVID-19 spreads from one individual to another amongst those having close contact. The virus can also be spread by respiratory droplets discharged when an infected person sneezing and/or coughing and severely affects the respiratory system in later stages.

### Human population, COVID-19 and some other epidemics

The rising population of human beings across the globe is being slashed down by infectious diseases of different kinds. During the last thirty years, several viral epidemics have caused a large number of deaths worldwide. These include Middle East Respiratory Syndrome (MERS-CoV) in 2012; H1N1 influenza in 2009 and Severe Acute Respiratory Syndrome (SARS) coronavirus prevailed in 2002 to 2003. Corona viruses belong to the family of single-stranded positive sense RNA viruses that have been isolated in various species of animals. They are proven to have inter-specie transmission potential. These viruses are very infectious or communicable and have widespread prevalence in humans. More so, they are responsible for about 30% of common flu or cold to further severe infections, such as SARS and MERS.

Diseases compound the death tolls from insecurity, terrorism, inter-group conflicts, poverty, hunger and starvation, suicides, hired assassination, political and ritual killings and various others. In fact, it is rumored that scientists, especially Western scientists, sometimes evolve some of the chronic lives-claiming diseases so as to control the population of the world. On that line of thought, some persons purport that Wuhan scientists did so as a way of fighting against USA. According to Fujii (n.d.: 231), rumors, inventions, denials, evasions and silences are 'meta-data' and integral to the process of data collection and analysis. Also, eye-witness or hear-say accounts of events (such as COVID-19 emergence or root cause, infection and death rates, etc.) may or may not have been witnessed by the informants themselves [31-34].

And, a maxim has it that every rumor has an element of truth. Therefore, the rumored thought or view purporting that sustained covert efforts are being made to reduce world's population, particularly the population of Africa and Asia, cannot be completely disputed or swept under the carpet only because the view is considered a rumor and/or a hear-say account of the population reduction technique, as in the case of COVID-19 root cause and its other allied matters. If so be it, then the scientists who invented the Covid-19 virus could not go beyond that scientific creation and ended up putting themselves and the world in a serious problem. The corona virus (COVID-19), like the Human Immune Virus (HIV), defy defies scientific and non-scientific measures, which is why it is said to have no cure currently. It is like HIV because since rise of HIV, no cure has been found.

### COVID-19 treatment approaches

There is currently no proper remedy available for COVID-19. However, mechanical ventilation and hemodynamic therapy are being used to manage respiratory dysfunction and septic shock. Chinese conventional herbal medicine 4-MU (4-Methylumbelliferone) is reported to be used effectively in China. The Madagascar herbal formulation was reported to have been efficacious in the country and beyond, where it was used. Recently, the Government of Punjab, Pakistan, also approved the use of Actemra (Tocilizumab) to treat COVID-19. However,

these are not approved therapeutic treatments. The Corona Experts Advisory group has also issued Standard Operating Procedures (SOPs) with regard to the use of the Actemra injection. Dexamethasone therapy has also shown good results to treat the serious patients [35-37].

It could be understood that the ageing clash between Western (Orthodox) and Alternative (Traditional) Medicine, bordering on superiority complex drive, largely accounts for the counter claims against the efficacy of the herbal remedies to COVID-19, particularly those from African and Asian nations. Come to think of it critically and logically, if Chinese conventional herbal medicine 4-MU is affirmed to have been effectively used against COVID-19, then it implies that exploring the opportunity and improving the efficacy of this herbal medicine would have brought forth a tangible remedy to the pandemic since. The same thing is applicable to the medicines of Madagascar and those of several other non-European and non-American nations.

Moreover, antiviral therapy with Lopinavir 400 mg P/O, Ritonavir 100 mg P/O, Chloroquine 500 mg P/O and Hydroxychloroquine 400 mg P/O are also claimed to be helpful in the reduction of viral load. Researchers also add that Aspirin is also helpful to reduce the critical effect of COVID-19, especially in diabetic and cardiovascular patients. Supplementation of N-acetylcysteine are also proved helpful to prevent and or treatment of COVID-19. Remdesivir is an inhibitor of RNA polymerase against multiple RNA viruses, including Ebola and has shown therapeutic and prophylaxis effect against Corona virus disease [38,39].

### COVID-19 effects on the economy

The economy of virtually all nations of the world was and still remains adversely affected by the hard hit of COVID-19 pandemic. It spared neither the economy of developed nations nor that of developing nations. That of Pakistan and Nigeria is affected in the same regard. Take the case of Pakistan, for instance, in which the Asian development bank reports that Pakistani economy has diminished from 3.3% in 2019 to 2.6% in 2020. During such crises, the COVID-19 lockdown was an intense decision for a nation like Pakistan, as countless destitute individuals would be starving to death. That would mean double death indices.

## DISCUSSION

Pakistan, as a nation with the guidance of health and government officials, defeated the disaster with great courage and endurance. The foregoing applies to the situation in Nigeria. The Pakistan Government also decided to privatize some of the state-run industries, including Pakistan Steel Mills, which led to the over 9300 employees to become unemployed. The Federal Government of Nigeria did not take to privatization, but pandemic increased the unemployment situations in the country. However, the misdeeds of the government (Robert, 2020) worsened the plights of Nigerian masses during the lockdown and beyond. Restructuring and readjustment compelled many private organizations to retrench their employees. Overall, the government of Pakistan declared

an economy loss of Rs 2.5 trillion due to the corona-virus pandemic on April 2, 2020. Nigeria has also lost trillions of Naira to the COVID-19 pandemic.

Economic organizations, like World Bank and International Monetary Fund, are seriously worried about the economic loss of COVID-19 pandemic. A slowdown in domestic economies and a decline in global trade are obvious, with possible long-lasting effects. Economists are struggling to devise plausible viable measures to coup the economic loss along with fighting the prevailing issues of the pandemic. A great pressure from investors has been faced by the stock exchange market during the lockdown period [40].

Stock market has faced a very high decline since the financial crisis of 2008. Thus, the COVID-19 pandemic has compounded the existing economic crisis. Economic forecasts suggest that economic effect of COVID-19 pandemic on travel and trade industries is in trillions and continuously rising. Both industries are involved in the global supply chain. However, central banks are easing financial terms and conditions to overcome the economic impact of pandemic.

### Effects of COVID-19 on Healthcare Workers

Healthcare workers are on the frontline of the fight against COVID-19. They have faced a plethora of issues in battling with this disease, of which mental health is the most important. Many countries have not released the accurate numbers of the healthcare professionals affected by COVID-19. In the US, about 20% of the healthcare workers are over the age of 55, which are the most susceptible age group. The number of deaths reported in various studies in the US is over 800 in healthcare workers, including both physicians and nurses.

In Italy, one of the most affected countries, the numbers of deaths reported in healthcare professionals is more than 2,600. The extra-ordinary workload of these healthcare workers during the pandemic, insufficiency of the personal protective equipment, and the aura of being let down by the public and the media are some of the major challenges faced by the healthcare workers so far in the fight against COVID-19. The turnaround from saving the patient from the diseases to being a patient poses psychological problems like exasperation, stigma, and peer pressure from the medical staff.

Moral injury, predominantly used in the military, is posed to healthcare professionals handling issues of the pandemic. It causes a sense of guilt, anxiety and depression in the healthcare staff, when they are not being able to do what they are meant to do due to illness. Not being able to be with their families, fear of transmitting the virus to their children, spouses, friends and/or relatives, and the dilemma of unknown aspects of the virus is always in the minds of healthcare professionals. Studies have shown that healthcare professionals working in COVID-19 wards show more depressive symptoms than those in other healthcare units. This situation is aggravated by the extended stay with critical COVID-19 patients, signing death certificates, and seeing their colleagues in isolation wards. These lead to traumatic experiences and PTSS [41-43].

Medical health care professionals did not continue their activities due to the threat of COVID-19 pandemic. Some of the health workers got infected, sacked for refusing to work without preventive gadgets, and affected indirectly by virtue of its effects on their families respectively. Consequent upon health workers' decline to work amidst the hazards, patients suffered devastating health conditions. In nations like Nigeria, a wholesome number of people refrained from hospitals, clinics and so on for health check-ups. Going there could result to being labeled a COVID-19 carrier/patient without the person really testing positive for the virus.

There are various reasons for healthcare workers being infected by COVID-19. The predominant reason is the inadequate supply of personal protective equipment for healthcare workers. During the start of infection, the transmission nature of the pathogen was not well established, and many healthcare workers were exposed during this period. Another main reason is the prolonged exposure of the healthcare staff to infected patients, which undoubtedly further enhance the risk of infection for the physicians and nurses. Lack of awareness of the spread of the virus, accompanied with flaws and loopholes in the effective implementation of control policy, also put the healthcare workers to the increased risk of getting the disease. Insufficient training of healthcare workers to work with COVID-19 related Infection Control and Prevention (IPC), use of Intratracheal intubation and emergency respiratory cases also lead to the increased contact time with patients; thus, enhancing the risk of infection.

Healthcare staff is dominated by females in both developed and developing countries. Many studies in China, India and Singapore report that the female gender is a significant risk factor in COVID-19 related mental disturbances in healthcare workers. There could be many reasons for this pattern. The predominant reason is the involvement of women in household matters in these countries, and the division of personal and professional duties. In a study conducted in Pakistan, a significant number of healthcare professionals on the frontline of the battle with COVID-19 exhibited stress, anxiety and depression. More than 80% were afraid of getting COVID-19 or transferring them to their families.

The resilience shown by the healthcare professionals while indulged in critical clinical situations is historically proven to help cope with many psychological disorders. This resilience can be achieved by various emotionally controlled traits. Self-care is an important trait that helps in improving the quality of life and relieving from stress. Following good-sleep patterns, maintaining the circadian rhythm and a balance between personal and professional lives of healthcare workers can help them to maintain and senses of logical reasoning and avoid psychological disturbances. A good organizational structure to divide the workload and compensate the healthcare staff is vital to avoid any subsequent psychological problems. It also includes providing opportunities for professional development, offering the feeling of being heard to physicians and nurses, and creating a healthy work environment.

From the studies on the mental stage of healthcare workers following the SARS-CoV-1 outbreak, it was revealed that opting a

multipronged approach including the building of self-confidence and being proactive was vital for healthcare workers to hold themselves during these troubling times. Confidence in training to respond to the pandemic, along with the style of coping with diseases and interpersonal problems better equip the healthcare professionals for things to come. Finally, a psychotherapy program at the organizational level, such as the Psychosocial Pandemic Committee (PPC) formed by the Mount Sinai Hospital in Toronto, can help healthcare professional by proper education, training and exposure to the mental effects caused by dealing with the pandemics.

### **Social and psychological effects of COVID-19 on people in general**

Social set up of all the nations around the world is also adversely affected by COVID-19 pandemic. Most of the normal life shifted to digital activities. Currently people avoid getting together, handshake, attending occasions, hosting parties like birthday, and so on in order to maintain social distance. The implication thus is the rise of solitude life style or living. Universally, about 55% of the individuals are reported to have no appropriate social insurance. The fear about being infected and the possible stigma against those who have recovered from COVID-19 infection causes lots of social and psychological issues. Many of those who lost their dear ones continue to suffer the trauma of the loss.

COVID-19 pandemic may cause long lasting devastating effects not just on economy, psychological well-being and job creation cum job opportunities but also cause the possible increase in criminal activities, starvation, suffering, etc. in the coming years. The pandemic is not just causing high death rate but also mental disaster to the rest of the world. Mass isolation could cause a feeling of aggregate insanity, dread, and nervousness in the wellbeing of laborers working in emergency clinics, inpatient and outpatient care, nursing homes and all seclusion units. The clinical human services laborers, who are uncovered and in direct contact with the affirmed and suspected corona virus cases, are defenseless against both contamination and psychological wellness issues like stress, fright and encountering loss and injury, among others.

With the coming of COVID-19 in Pakistan and other countries, clinical specialists have been feeling the squeeze, including high danger of disease, deficient hardware for wellbeing from infection, seclusion, fatigue, and the absence of contact with family. The seriousness is bringing about additional psychological well-being issues, which adversely impact on clinical specialists' dynamic capacity as well as have long haul adverse impacts on their general prosperity. On the other hand, during COVID-19 pandemic, the people of Pakistan and Nigeria became more aware of hygiene and disinfection procedure. This change has not only led to a cut down in the overall expenses on health commodities but also reduced the death rate. The pandemic thus taught Pakistanis and Nigerians a great lesson to that end. This lesson is certainly applicable to the people of all other nations of the world. For example, washing hands and face, sanitizing hands, cleaning hard surfaces and using certain

drugs, herbal medicine and alcoholic substances and products are all lessons learnt from the pandemic.

Also, COVID-19 pandemic is to be likely linked with severe psychiatric issues. Recent data has illustrated that COVID-19 positive patients have been involved with psychological disturbances, such as insomnia, anxiety, depression and delirium. Severe psychopathological sequelae can occur by the indirect infection through an immune reaction or by the direct infection of central nervous system. Different studies, including those *in vivo*, *in vitro* and clinical trials, have shown that the coronaviruses can cause neural damage and are potentially neuropathic in nature. In spite of potential brain infiltration, production of associated cytokines due to corona virus infection can cause psychiatric symptoms by triggering neuro-inflammation.

### Effects of COVID-19 on the education system

COVID-19 badly hit the education system worldwide. Students, whose parents are wealthy, had access to technology and learnt through online system. Others, who could not, got detached from learning throughout the lockdown. COVID-19 also exposed the weakness of education system. Educational institutions remained closed for a long time during the lockdown to control the COVID-19 pandemic. Most of the educational and business activities shifted to online system, for which the demand for digital media increased. Academic activities got paralyzed for too long a time. Upon resumption, a lot of activities were not covered before moving over to new topics and sessions.

Students had to depend on their media resources of internet, television or radios and thereby could not prepare well. It is an indisputable fact that professional degree students were the most affected students, who are abundant to remain deficient in their field knowledge. Teachers and students faced much difficulty in joining online education in time due to connectivity problems in remote and village areas. Parents, especially working parents, remained worried and frustrated about the children's career. COVID-19 has compounded the extant problems confronting the education system, particularly in developing nations like Nigeria and Pakistan.

### COVID-19 and change in food habits

Balanced diet has been reported to boost immunity. COVID-19 also changed the eating habits of humans. People became aware or rather more conscious of the significance of balanced diet and specific nutrients (protein rich diet, Vitamin C, D, B<sub>1</sub>, B<sub>6</sub> and B<sub>12</sub>, calcium, phosphorus, iron, zinc, copper and chromium) to boost the body immunity so as to be able to resist the corona virus. Some specific nutrients have been reported to control the COVID-19.

During the pandemic, people were advised to eat/take nutritious food, fruits and vegetables, especially those rich in Vitamin C, such as citrus fruits, strawberries, cherry, watermelon, papaya, tomatoes and lemon, etc. Fast food sales became low, unlike before. People tried to avoid drugs, alcohols, sodas and cold drinks. In some nations like Nigeria, eateries,

bars, hotels, clubs and so on, where alcohol of different kind is, were barred from operation. Only essential commodities were allowed to be sold. In Asian region, the use of honey, phytochemicals and herbs such as ginger, onion, garlic, cinnamon, senna leaves and black cumin was encouraged as a traditional herbal therapy against respiratory infection during the pandemic.

### The Multifaceted Effects of COVID-19 Lockdown

Although COVID-19 appeared as a major misfortune for the world in 2019, which influenced all the divisions of society and could be assessed precisely, some efforts are made to lessen the overall impact of COVID-19 on the globe. Firstly, lockdown has been forced globally, bringing about a huge number of dollars' misfortunes to the carriers and the travelling industry. Secondly, logical and beneficial social gatherings, conferences, games, style shows and marriage parties have been strongly and greatly affected in various capacities, owing to efforts made at staying away from whatever could make contacting possible.

Movement restrictions, closure of land borders, the imposition of travelling bans, good neighborliness and friendship, diplomacy and intergroup relations, the suspension of religious activities (home worshipping rather than group), etc. rose with the pandemic. For example, Kingdom of Saudi Arabia has restricted Umrah (journey) for the pilgrims to Mecca and Medina and allowed only few visitors for pilgrims to avoid the disaster on annual Hajj days. In addition, most of the universities, colleges and schools of the world remained closed and a large number of students could not get proper education.

Be it as it may, the lockdown difficult situation reduced child labor rate in both developed and developing countries. Human trafficking and smuggling across borders was almost impossible. Security operative became faced with the challenge of taking up a new role of checking persons' COVID-19 status. There were different matters arising from the situation. These include corruption, misappropriation of funds meant for the control of the pandemic, abuse of human rights, police harassment of civilians, the misuse of social media for fake news and information that tensed people up the more, and so on.

Also, the pandemic shattered a lot of activities. It incurred so much cost for nations and brought untold economic hardships on people across the globe. It plagued many with pains, irreparable losses, depression, trauma and anxiety. Recovered victims are bound to suffer some stigma. COVID-19 caused psychological, political, educational, intergroup relations and domestic problems. The educational problems arising from the lockdown and the expenses on new strategies in schools have worsened the fallen standard of education in many nations (e.g. Nigeria).

It has created employment issues in some nations and worsened the unemployment in nations like Nigeria and Pakistan. The imposed lockdown generated lots of domestic issues. Examples include quarrels and fights between neighbours, spouses, tenants and landlords, friends, roommates, siblings, parents and children, and between/among relatives; aggression leading to domestic violence, bankruptcy, increased poverty, hunger and

starvation; sexual abuse and related issues; increased pregnancy ratio; fatigue and health issues arising from lack of exercise, and so on.

Being that academic activities were on standstill, research is also badly affected. COVID-19 emerged as a major global health crisis, which tremendously affected scientific research throughout the globe. Amongst the ethical issues of COVID-19 health emergency is the allocation of limited healthcare resources properly and honestly without any discrepancy. So many people think that COVID-19 is prepared in the laboratory. God forbid that it happens so. If it is proven to be true, then it is a great stain on the face of humanity and scientific knowledge.

## CONCLUSION

Corona virus rose from China and spread to other parts of the world. It has plagued the world with difficulties that would last for decades, if not centuries. It exerted drastic effects on both humans and phenomena alike. Animals suffer the effects indirectly from humans and phenomena. The COVID-19 pandemic has confronted humanity with challenges beyond immediate or short-term solutions. Even scientists still battle with finding a lasting solution. All fields of formal endeavor, all aspects of life and all nations, governments, groups and individuals were and are still affected. On the whole, the deadly pandemic has left unquantifiable effects on both developed and developing nations alike in various regards. The effects cut across all facets of life and obtain in all nations of the world.

It is quite surprising that since its emergence to date, no real lasting solution has been discovered and offered. Not even science could offer any reasonable remedy to the epidemic. Religion could not either. It seemingly defies all efforts so far at wiping it out of the planet Earth, though all hope is not yet lost. Be it as it may, we express optimism that COVID-19 can be wiped out our society, just as several other deadly diseases (e.g. smallpox) have got wiped out. Well, the fact that some of those infected were recovered or treated and discharged, it implies that there are several remedies to it. What is yet to come against it is that which will get rid of it completely.

The whole ugly situation calls for more global cooperation and meaningful strategies, innovative research and collective efforts to get rid of this deadly pandemic. It is recommended that research should focus on urgently controlling the spread of this epidemic and exploiting the experience of current pandemic to develop global research platforms that should work to get pre-ready for any next unforeseen pandemic. Institutional review and medical ethics boards (IRBs) and Research Ethics Committees (RECs) around the world should govern the work of research laboratories and ethical status of research staff. It is strongly suggested that scientists should be allowed to work in laboratories after proper screening of their attitude, behavior, manner and values. Strong operational legislations should be evolved and enforced in order to ensure that every individual becomes conscious of the realities about COVID-19 and act in accordance with the new social orders put in place to control its spread.

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