ASSESSMENT OF SOCIO-ECONOMIC IMPACT OF COVID-19 PANDEMIC AMONG THE RESIDENTS OF GWAGWALADA, FCT ABUJA, NIGERIA

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ABSTRACT

Purpose: The emergence of COVID-19 and the measures put in place to curtail the spread of the virus and the perceived hardship imposed on people prompted this study with the view to assess the level of awareness of COVID-19 pandemic among the residents of Gwagwalada, examine the level of their access to basic health, social facilities and identify needs and level of support they received during COVID-19 lockdown.

Methodology: A cross section survey research was employed and a stratified random sampling was employed in the selection of the respondents. Krejcie & Morgan, (1970) model was use in determining the sample size, a sample of 373 respondents out of 22308 population was selected and used for this study. The first respondent was selected at random and the subsequent ones systematically. The selected people were served with the questionnaire. The information collected were analyzed and the results were presented in tables and percentages.

Findings: The results showed that majority of the respondents are within the ages of 30-39yrs which constituted 38.6%. It showed that 55.4% of the respondents are married, 61% had tertiary education, 53.7% was farmers, and 18.3% was civil servants. The average monthly income of the respondents was between N18.000-N35, 000, results showed that 99% was aware of the COVID-19 pandemic. About 39% of them knew the symptoms of COVID-19 as cough, fever, tiredness, sore throat, and difficulty in breathing. Their sources of information include rumors (79%), social networks (70%), and TV/Radio jingles (75%). The lockdown affected the social and economic activities of the people such as education, family interaction, their leisure, security among others. Economic effects such as poverty, loss of job, closure of small and medium scale businesses among others. About 87% of the respondents indicated that they never received any assistance/support during the lockdown. As a coping strategies, the respondents sold their assets, reduce their rate of consumption, play games, accepted low wages etcetera and the youths went into protest which lead to looting COVID-19 warehouses in the study area in search of palliatives. The study recommends among others, prompt economy recovery plans in terms of expanded palliatives, social security safety nets and stimulus to residents and Small Medium Enterprises (SMEs).

Key words: *COVID-19, Lockdown, Hardship, Looting, Palliatives, and Public.*

INTRODUCTION

A mysterious case of pneumonia with no known cause was reported in China on December 31, 2019, 3 days later, the number of patients with such cases was 44 and continues to grow to the present number of thousands of cases [1]. Initially epidemiological data showed that 66% of patients were related or exposed with a seafood market or live market in Wuhan, Hubei Province, China [1,2]. Based on the phenomena that have occurred, this virus can be transmitted from human to human and has spread widely in China. On March 12, 2020, WHO announced COVID-19 as a pandemic [3]. As of March 29, 2020, there were 634,835 cases and 33,106 deaths worldwide. As of 3 April 2020, the number of COVID-19 confirmed cases have surpassed one million across over 200 countries and territories worldwide. Fatalities have reached 53,000 with a case fatality rate around 5 percent.

In Nigeria, confirmed cases had increased to 190 with 2 fatalities as at February 9th. Cases have been registered in twelve states and the Federal Capital Territory (FCT), with Lagos and the FCT reporting the highest number of cases. Efforts to contain the spread of the virus are underway. The clinical signs and symptoms reported are mostly acute respiratory disorders such as fever, coughing and shortness of breath, in severe cases can cause pneumonia, acute respiratory syndrome, kidney failure, and even death [4].

There has been confirmed cases of COVID-19 across the 36 states of Nigeria, including the Federal Capital Territory (FCT). In response to curtail the spread of the virus most countries of the world, including Nigeria have imposed restriction measure which led to total and or partial closure of the economy. In the process, economies are grinding to a halt, jobs and livelihoods are lost on scales never seen before. It was estimated that 49 million individuals will be driven into extreme poverty in 2020 (living on less than $1.90 per day) [5].

Due to widespread business closures, especially in lower income populations, national economies are expected to contract, leading to a dramatic rise in unemployment and poverty rates [6]. The impact is huge and increasing in low and middle-income countries, especially in Nigeria with over 202 million population [7]. Cross River State, residents are having to pay double for transportation due to the measures put in place during the ongoing pandemic. It will be difficult to understand the true impact of COVID-19 in the country as many of its victims may die before they are diagnosed and recorded accordingly.

It is against this background that this study aimed at investigating how the lockdown as a result of COVID-19 pandemic affected the social and economic activities of the residents of Gwagwalada. It will achieve this by identifying the demographic Characteristics of the residents of Gwagwalada, their level of awareness of COVID-19 pandemic, their access to basic health facilities and social services, and as well, to find out their coping strategies and the level of support received by the residents of Gwagwalada accordingly.

METHODOLOGY

Study area

The Federal Capital Territory (FCT) Abuja is located between latitudes 8°25′ and 9°25′ north of the equator and longitudes 6°45′ and 7°45′ east of Greenwich meridian (Figure1). It occupies an area of approximately 8,000km^2 and it is bounded by Kaduna State to the North, Nasarawa State to the East, Kogi State to the Southwest and Niger State to the West, [8].
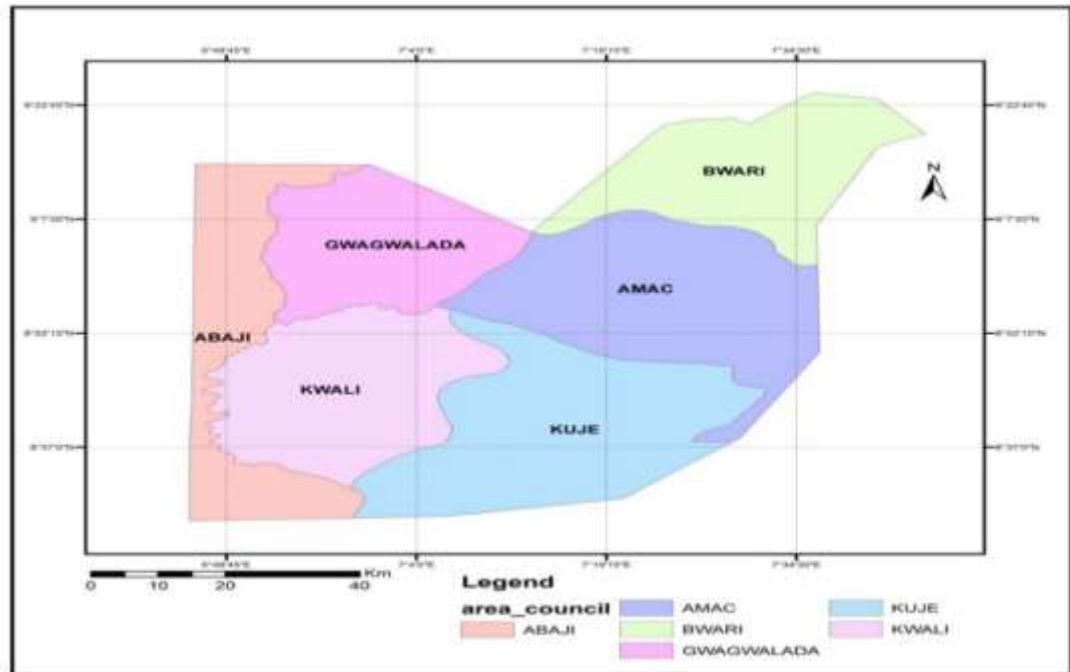
Figure 1: Map of FCT Showing the six are councils including Gwagwalada, the

study Area

Source: Office of the Surveyor General of the Federation, (OSGOF) Abuja, 2018.

The Federal Capital City (Abuja) is located in Gwagwa plain, which is virtually enclosed by ranges of hills, and dissected terrains. The plain rises from 305 metres in the west, to about 610 metres above sea level in the northeast. With an aerial extent of 1,297km^2, it is the second largest of the plains. The plain is drained by the tributaries of River Usuma for example, River Jabi, Keji, Wuye and Wupa among others.

It records the highest temperatures during the dry season months, which are generally cloudless. The maximum temperatures occur in the month of March with amounts varying from 37°C in the Southwest to about 30°C in the Northeast. The mean annual rainfall total ranges from 1,145mm to 1,631.7mm while the duration of the rainy season varies from about 240 days in the south to about 190 days in the north [8].

The Research Design adopted for this study is the descriptive survey research. The sources of data used for this study comprises of both Primary and Secondary sources of data. The Primary sources

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include the personal observation and field survey using a designed questionnaire, information was obtained from the residents of Gwagwalada such as the socio-economic data, data on knowledge and awareness of COVID-19, its effects on the socio-economic characteristics of the respondents, and their copping strategies. The secondary data was acquired from the NCDC reports and research articles among others.

Sample Size and Sampling Procedure

The study area was stratified into ten existing political wards. Thereafter, five political wards were randomly selected these include:- Central ward, Kutunku ward, Paiko ward, Zuba ward and Gwako ward. A list of all the identified households was compiled during the reconnaissance survey making a total of 22308. A sample population of 373 respondents was determined by adopting the [9] model for sample size determination. The random sampling was use to select the first respondent after which the systematic sampling was employed for the subsequent selection of the respondents in each selected ward (Table 1).

Table 1: Sampling Frame

S/N	Wards	No. of Household	Sampled Household
1	Central	5875	98
2	Kutunku	3592	60
3	Paiko	4552	76
4	Zuba	4130	69
5	Gwako	4159	70
Total		22308	373

Source: Field survey, 2020

Instrumentation

The instrument used for this study was the questionnaire. The questionnaire was divided into six sections. The first section is the demographic characteristics of the respondents and the second section is the awareness of COVID-19 pandemic among the residents, the third section is the survey of the degree of access to basic health facilities and social services, fourth is to examine the effect of COVID-19 on socio-economic activities of the residents, to find out their adopted coping mechanism and also to identify the level of support received by the residents of Gwagwalada. The questionnaire was then distributed to the 373 respondents that were selected.

The statistical method used for the analysis of the data collected was descriptive statistics and the results was presented on charts and frequency tables, with the aid of Microsoft Excel and Statistical Package for Social Sciences (SPSS).

RESULTS AND DISCUSSION

## DEMOGRAPHIC CHARACTERISTICS OF THE RESPONDENTS

Gender
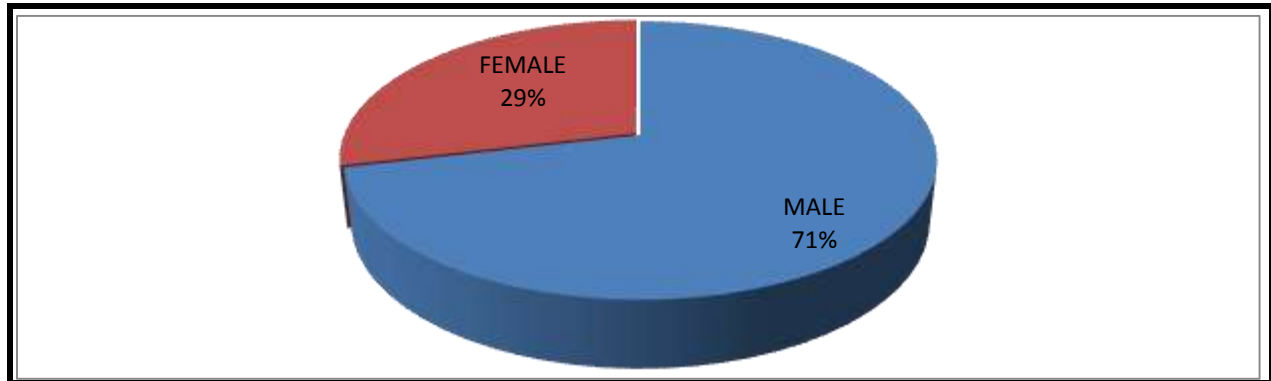
Figure 2: Sex distribution of the respondents

Source: Field Survey, 2020

Figure 2 shows the sex distribution of the respondents; it revealed that 71% representing 268 respondents were males, while 29% representing 109 respondents were female. This shows a fair sex distribution of the respondents.
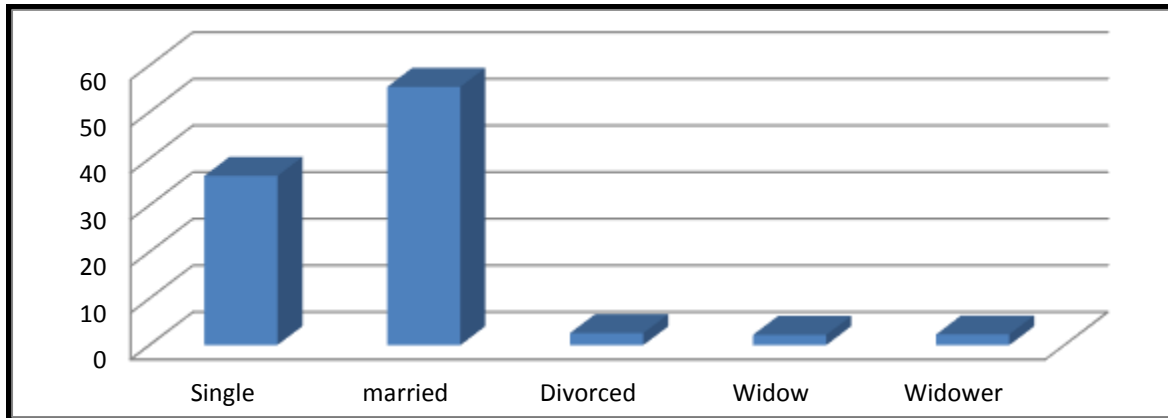
Age of the respondents
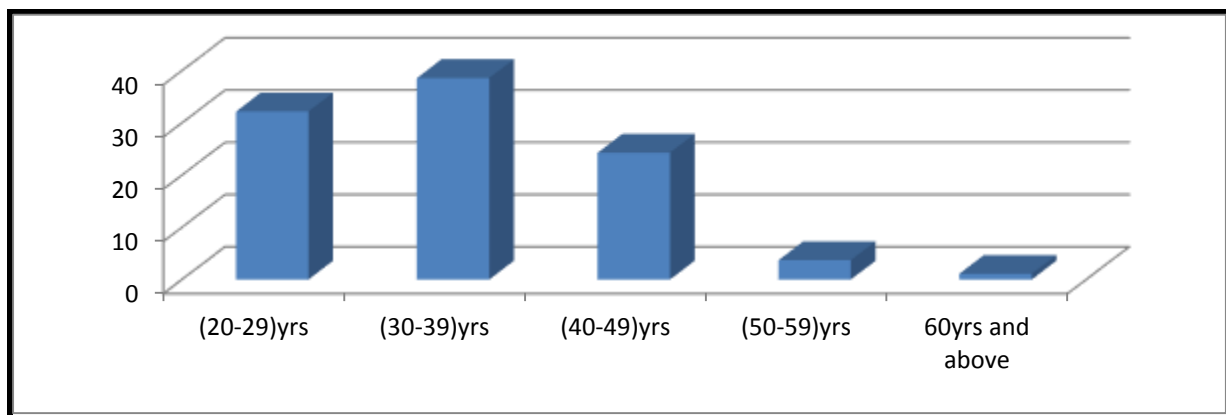
Figure 3: Distribution of the respondents based on Age

Source: Field Survey, 2020

Figure 3 shows the age distribution of the respondents that 146 of them representing 38.6% were between the age of 30-39yrs, 32.2% representing 122 respondents were between the ages of 20-29yrs, while 24.3%, 3.7% and 1.1% were between the ages of 40-49yrs, 50-59yrs, and above 60 years which represents 65%, 10% and 3% respondents respectively. This implies that respondents between the age bracket (30-39) years constituted 38.6% were the majority.

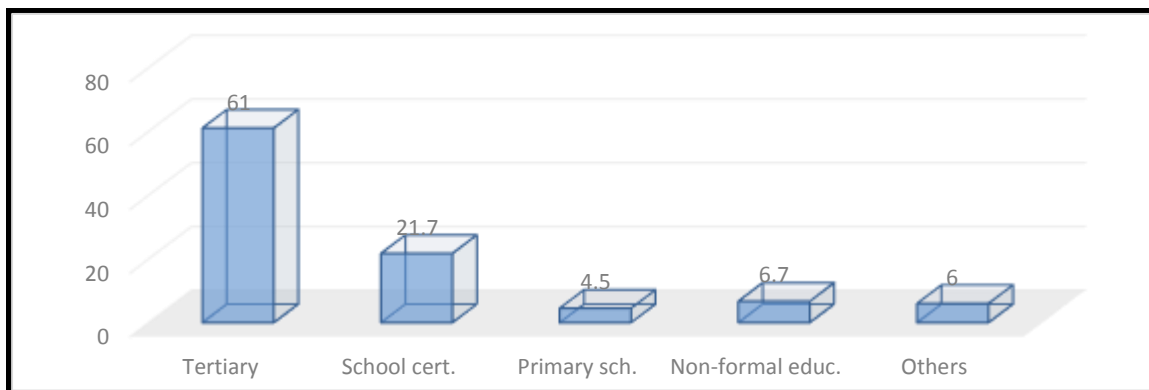**Marital status of the respondents**

Figure 4: Distribution of the respondents according to marital status

Source: Field Survey, 2020

Figure 4 shows the distribution of marital status of the respondents. it showed that 36.3% were Single, 55.4% of them were married, 2.6% were divorcee and 2.2% were Widows, while 2.3% widowers. This implies that the respondents were mostly family men and women.

Educational distribution of the respondents.
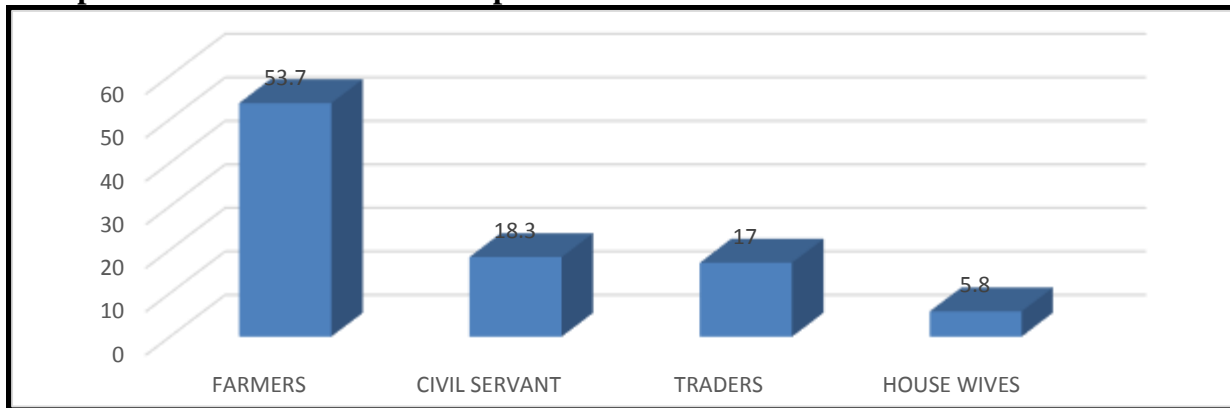

Figure 5:   Educational distribution of the respondents

Source: Field Survey, 2020

Figure 5 presents the educational status of the respondents. Results revealed that most of the respondents are literates and mostly attended higher level of education. Results showed that 61% representing 230 respondents had attended tertiary institutions, 21.7% representing 82 respondents had secondary school certificates while 4.5%, 6.7%, and 6% representing 17, 25 and 23 respondents have primary certificates, non-formal education and others respectively. This distribution shows that most of the respondents have attended higher education which implies that they have sound knowledge about environmental sanitation and can supply the needed information relating to this study. This will also influence their attitude toward environmental sanitation.

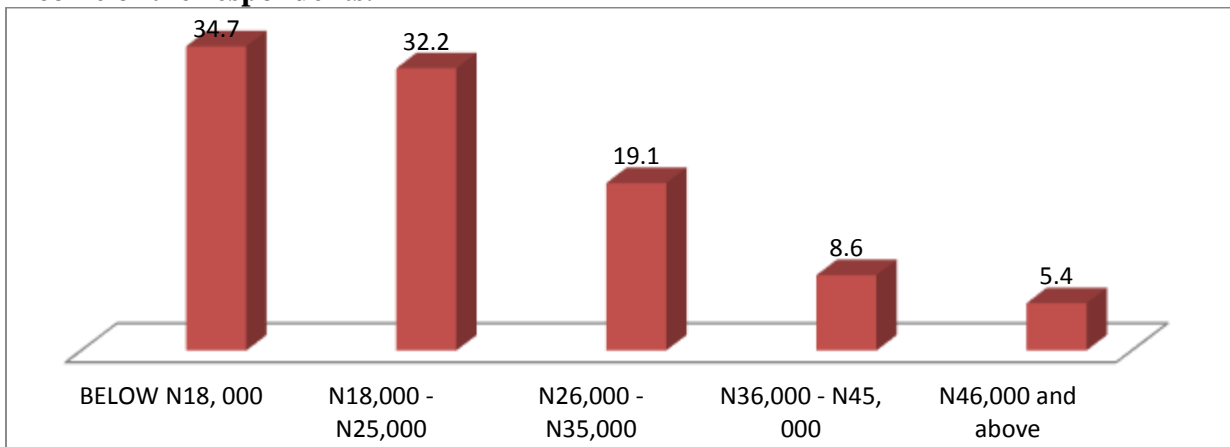**Occupational distribution of the respondents.**

Figure 6: Occupational distributions of the respondents

Source: Field Survey, 2020

Figure 6 showed that 53.7% were farmers, 18.3% of them were civil servants, while 17% of them were traders, 5.8%, and 5.2% of them were housewives and others respectively.

Income of the respondents.

**Figure 7: Income distribution of the respondents**

Source: Field Survey, 2020

Figure 7 shows the income distribution of the respondents. It showed that 34.7% representing 131 respondents earned below N18,000, 32.7% representing 123 respondents earned between N18.000-N25,000, 19.1% representing 72 respondents earned between N26.000-N35,000, while 8.6% and 5.4% earned between N36,000-N45,000 and above N46,000 respectively. This distribution implies that majority of the respondents have low income level, which might also influence their living standard and attitudes toward sanitation.

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AWARENESS OF COVID-19 PANDEMIC AMONG THE RESIDENCE OF GWAGWALADA.

**Respondent's awareness of the COVID-19 pandemic**
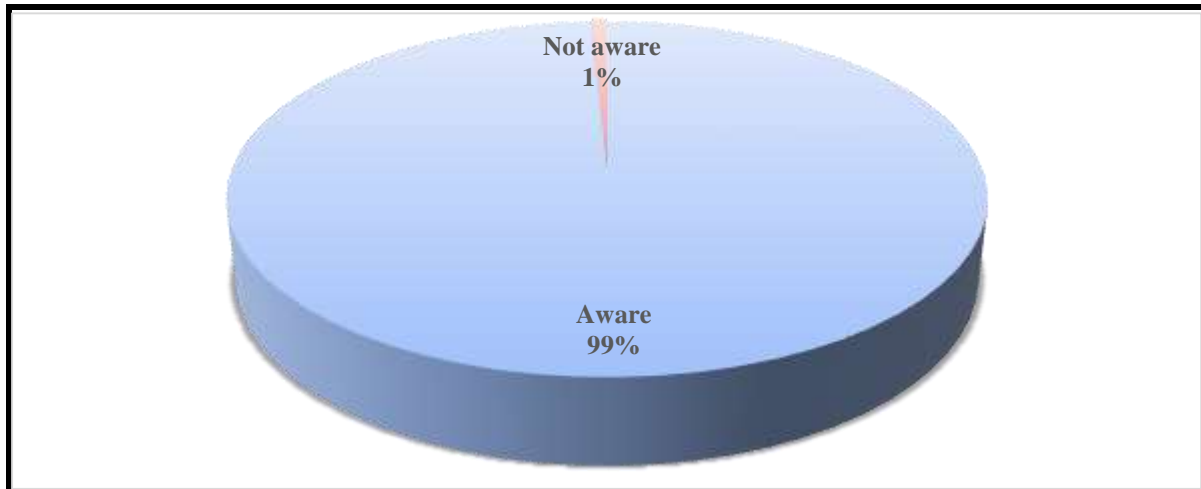
Figure 8: Respondent's awareness of the COVID-19 pandemic

Source: Field Survey, 2020

Figure 8 shows that 99% representing 373 respondents indicated that they were aware of the COVID-19 pandemic while the remaining 1% representing 4 respondents claimed ignorance of COVID-19 pandemic. This implies that there was a wide coverage of public awareness in this regard. Further investigation was made on the symptoms of the COVID-19 pandemic, and the results of their responses is presented in Figure 9

THE SYMPTOMS OF COVID-19
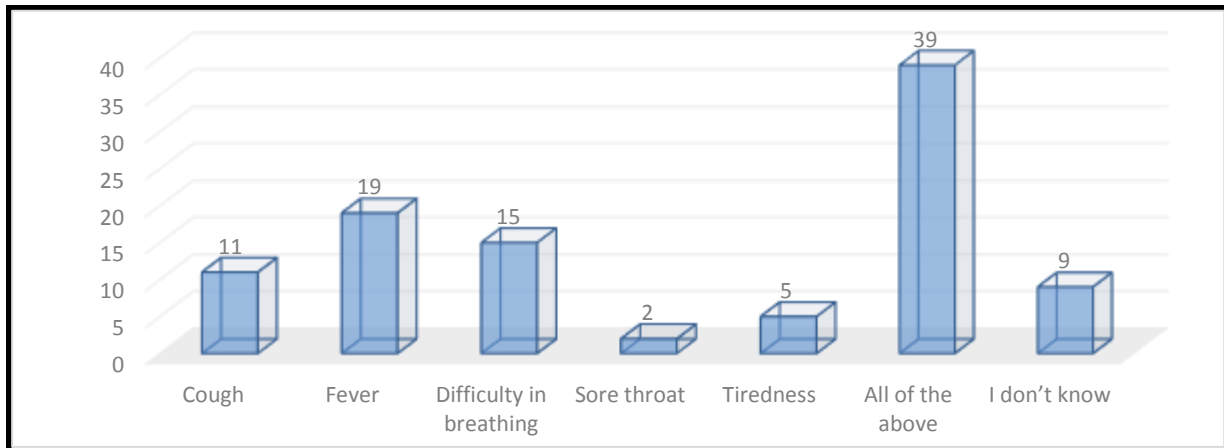

Figure 9: The symptoms of the COVID-19.

Source: Field survey, 2020

The results in Figure 9 shows that 19% representing 72 respondents indicated fever as a symptom of the COVID-19. 15% representing 57 respondents indicated difficulty in breathing as a symptom

of the COVID-19. 11% representing 42 respondents indicated cough as a symptom. Only 39% representing 147 respondents indicated that they knew all the symptoms of COVID-19 (cough, fever, tiredness, sore throat, and difficulty in breathing). This results implies that there is need to improve on the quality and consistency of information dissemination in the awareness campaigns against the novel virus pandemic

SOURCES OF INFORMATION

A follow up on the people perception on the symptoms of COVID-19 indicated that among those who were aware of the pandemic, the level of the awareness varies; 67% are highly aware of the pandemic, 19% had moderate awareness of the Pandemic, while 15% had low awareness of the pandemic and 5% was not certain on their level of awareness.
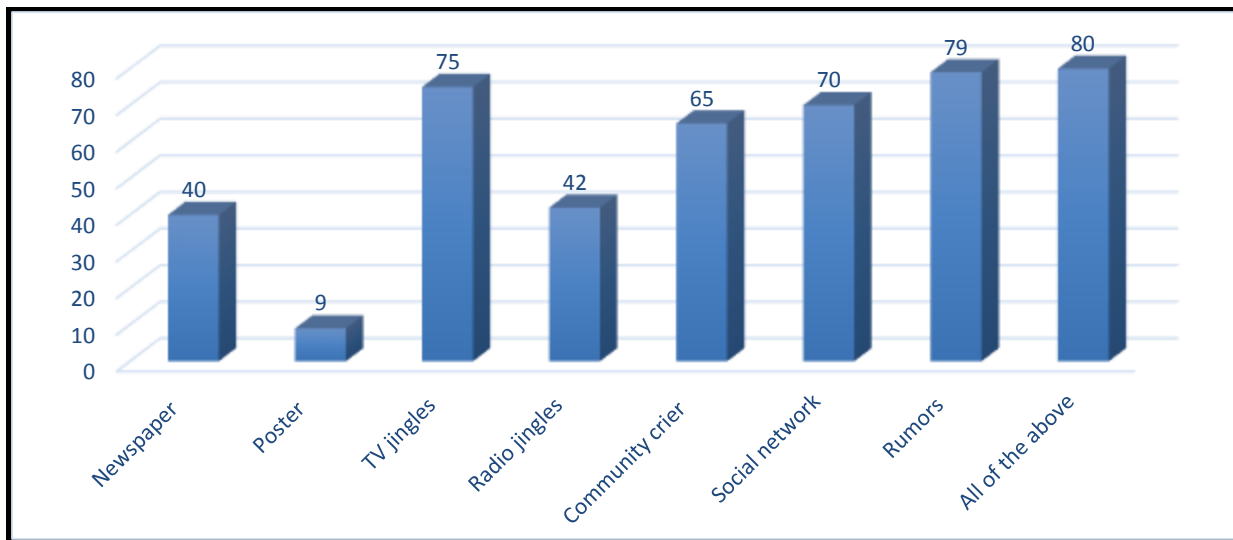

Figure 10: The sources of information

Source: Field survey, 2020

The study further investigated their sources of information and the results showed that 79% representing 298 respondents received their information on the pandemic from rumors, 70% representing 264 respondents received theirs from social networks, 65% from town criers, and 75% and 40% got their information through TV jingles and Radio jingles respectively. Therefore, 80% of them indicated getting their sources from all the sources; Radio jingles, TV jingles, community crier, social networks and rumors.

ACCESS TO BASIC HEALTH FACILITIES AND SOCIAL SERVICES

On access to basic services, almost 84% of respondents confirmed that they pandemic impacted their access to a wide range of basic services. The situation cut across all locations. As part of the prevention and mitigation measures in response to the pandemic, there were wide ranging restrictions to movement and closure of socio-economic institutions and infrastructure across the country. This is reflective in the reduction of access to services during the COVID-19 pandemic response as reported by the respondents in Figure 11.

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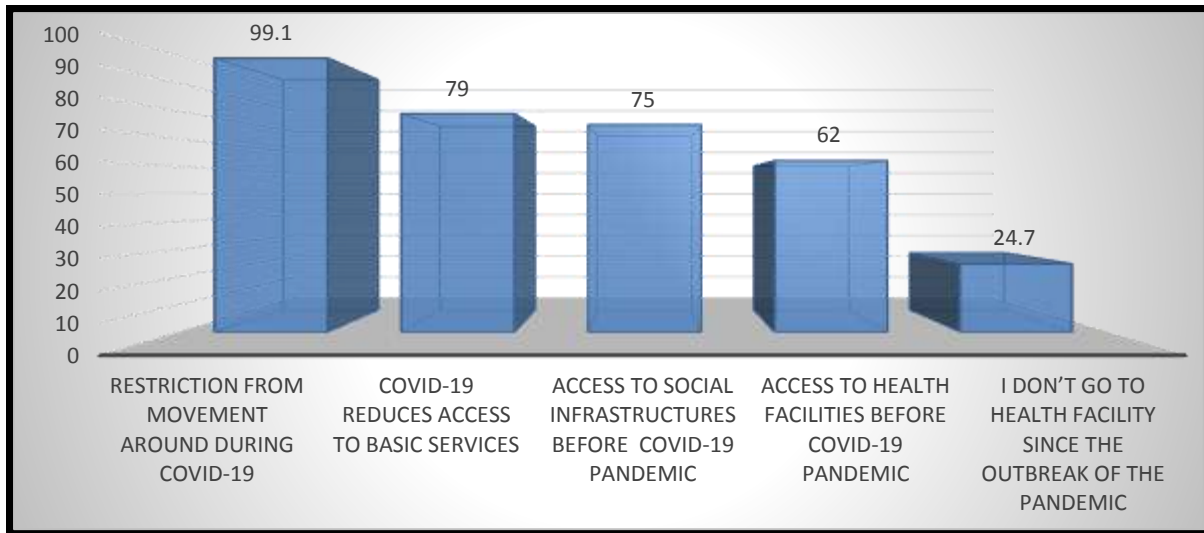
Figure 11: Access to basics health facilities and social services

Source: Field survey, 2020

Results on Figure 11 indicated that 99.1% representing 374 respondent were restricted from movement during COVID-19. 79% of them said it 19 reduces access to basic services. In comparing access to health facilities before and after COVID-19 pandemic 75% representing 283 respondents have access to health facilities, whereas only 62% of them had access to the facilities after the pandemic, but 24.7% indicated that, they don't go to health facility since the outbreak of the pandemic. This might be due to the fear of being contacted with the disease

EFFECTS OF COVID-19 ON THE SOCIO-ECONOMIC ACTIVITIES OF THE RESIDENTS OF GWAGWALADA

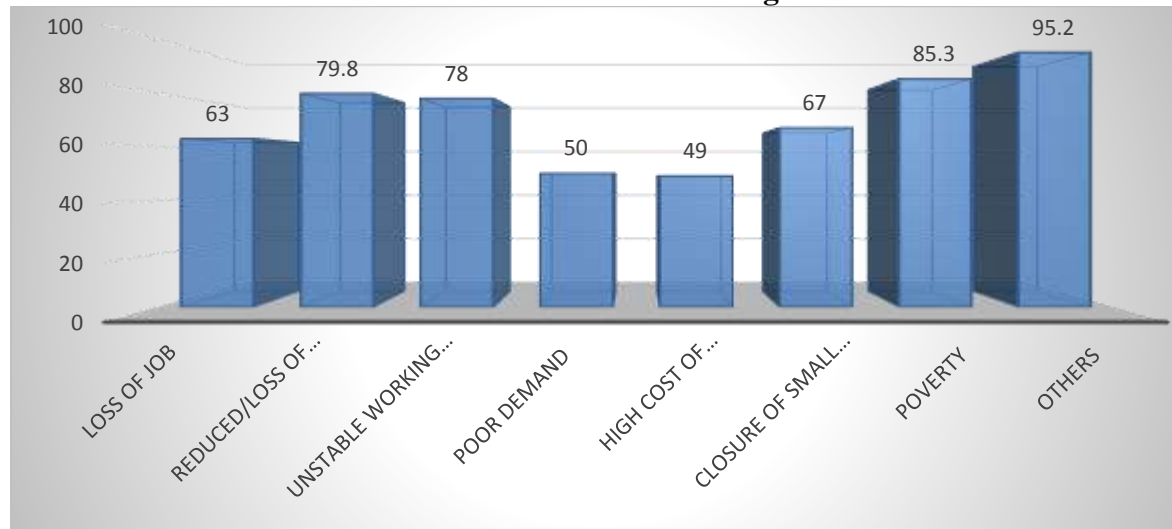**Social Effects of COVID-19 on the Residents**
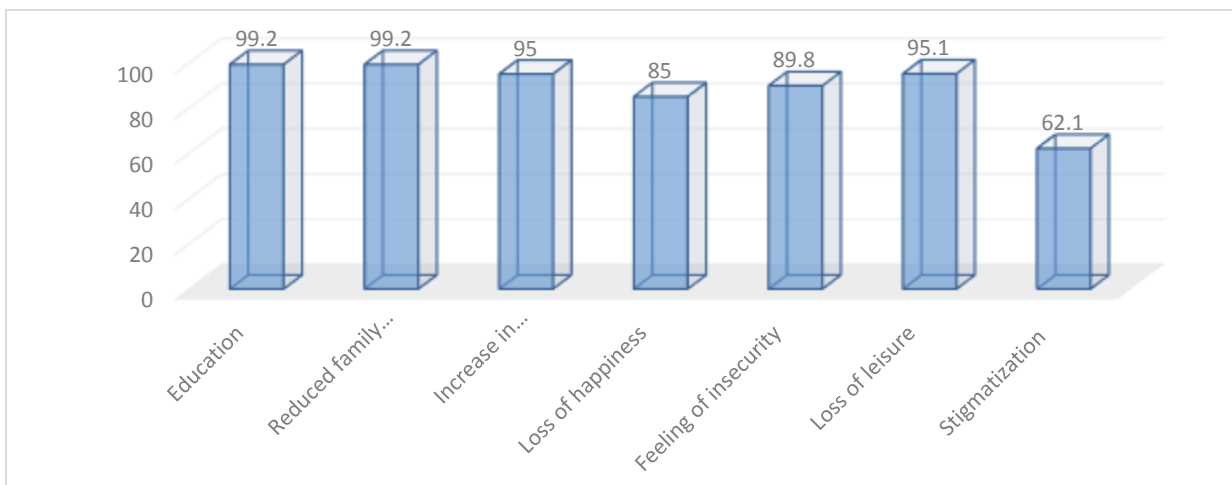
Figure 12: Respondents responses on the social effects of COVID-19 on the Residents

Source: Field survey, 2020

The people were asked on how the lockdown affected their social wellbeing and their responses were presented on Figure 12. Results showed that 99.2% of the respondents indicated that the lockdown has affected the education of their children and reduced family interaction. 95% said due to the lockdown, there was increase in domestic violent. Loss of happiness, (85%). Feeling of insecurity was indicated by (79.8%); Loss of leisure (75.1%); Stigmatization (62.1%); Power supply (65.8%) and Water supply (35.3%). Looking at their responses water supply was not affected, some said they have never enjoy steady light like during the peak of the lockdown, especially Passo community.

Economic effects of COVID-19 on the residents of Gwagwalada

Figure 13: Economic effects of COVID-19 on the residents of Gwagwalada

Source: Field survey, 2020

Results show that 63% of the respondents loss their jobs as a result of the lockdown. 79.8% of them indicated that the lockdown also affected the education of their children and reduced family interaction. 95% said due to the lockdown, there was reduction and loss of income and unstable working hours. It also leads to poor demand (50%); high cost of production (49%). Closure of some small scale businesses (67%); increase poverty 85.3%) among others (95.2%). This results implies that the lockdown has affected the economic activities of the people which in turn will affect their living standard, development and likely increase in the spread of diseases. Therefore, the study conclude that the current economic recession in Nigeria is attributed the Covid-19 lockdowns.

## THE LEVEL OF SUPPORT RECEIVED BY THE RESIDENTS OF GWAGWALADA

Table 2: The Support and type received by the Residents of Gwagwalada

Assistance	Frequency	Percent
Received assistance from the government	76	20.2
Never received any assistance from the government	301	79.8
Total	377	100
Nature of assistance		
Food assistance	51	67.1
Money	6	7.9
Others	19	25
Total	76	100

Source: Field survey, 2020

Table 2 shows that 20.2% of the respondents indicated that they received assistance from the government, whereas 79.8% said that the never received any assistance from the government. A follow up question on the type of support they received shows that 67.1% representing 51 respondents indicated that they received food assistance, while 7.9% representing 6 respondents indicated that they received money assistance and 25% representing 19 respondents indicated that they received assistance other than food and money.

COPING STRATEGIES ADOPTED BY AFFECTED PEOPLE IN THE STUDY AREA
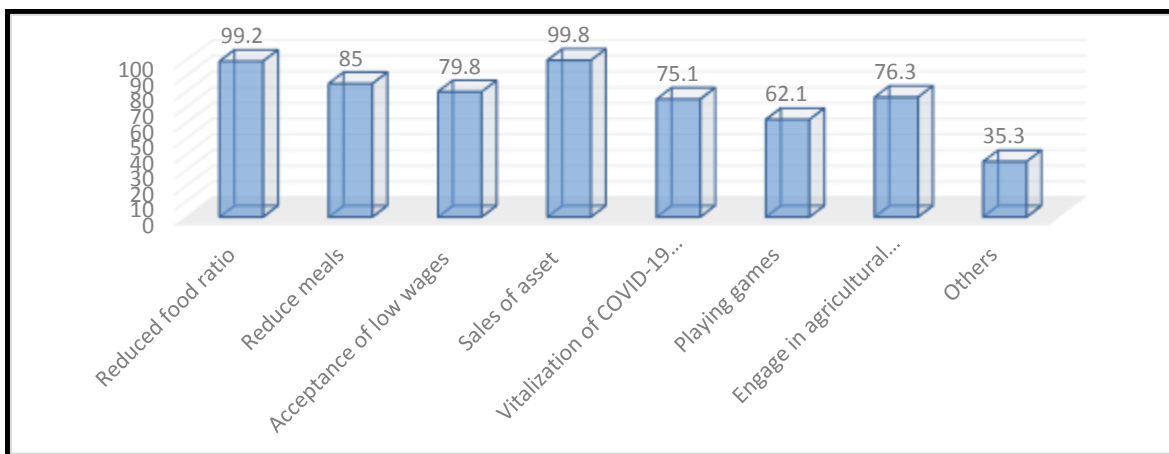
Figure 14: Coping strategies adopted by affected people in the study area

Source: Field survey, 2020

Figure 14 illustrates the different coping strategies adopted by the respondents in the study area, and their responses shows that 99.2% resort to reducing food ratio, and 85% reduced their meals. 79.8% had to accept lower wage in order to sustain their families. 99.8% sold their assets and 75.1% indulged in looting palliatives from warehouses. 62.1% engaged themselves on playing of games such as Ludo, draft, chess among others. 76.3% engaged in agricultural activities while 35.3% employed other measures not mentioned.

DISCUSSIONS OF RESULTS

Results of the study revealed that the respondents were mostly within the ages of (30-40) yrs. This age group was helpful in providing vital and reliable information that improved this study. Most of them were married people with children and dependents. This is also an index that showed how severe the lockdown had affected the people, where a household of ten members without any source of income, feeding for more than a month without free movement, no open market and also maintaining social distances.

Most heads of households were not capable of buying the goods and services needed for their families, this situation led to ill treatment by their spouses. The survey also revealed that social factors that put people at risk more was that violence reduced access to resources, increased stress due to job loss or strained finances, and disconnection from social and material supports.

The impact of the lockdown reduced family interactions whereby keeping the core family members only with no possibility of visiting relatives. This stressful situations caused by the restriction had stimulated mental and emotional disorder, particularly among households with poor income. It was obvious that the restrictive measures, particularly those that limit social interaction, such as lockdowns and social distancing severely affect social events, communal meetings, entertainment events and other social activities that promote economic activities, social development and coexistence, above all congregational worships.

The lockdown did not only affects the social and economic wellbeing, but also the cultural aspects, congregational worships and prayers were banned. Apart from being a means of communing with our creator, most clergy men depend on their followers for livelihood. All these put together limited the standard of living thereby leading to poor practice of childcare and hygiene, consequently leads to the origin of diseases in the environment.

Epidemics and pandemics can have significant social consequences causing mobility restrictions, travel bans, closure of borders, and, in extreme cases, area quarantines [10]. The findings of this study supported the evidence that the current crisis has changed the way people managed their lives by restricting mobility and social distancing. The consequences of the pandemic are not only limited to the health of the people but also affect social life, and economic constraints of the household.

Review revealed that the global health impact of the COVID-19 pandemic has affected workforces, transportation systems, and supply chains around the world. But this kind of emergency has threatened geographically isolated communities at another level by creating a food crisis even before the virus causes severe health problems in the community. This is mainly due to the fact that it is hard to get food supplies locally, and economic activities are disrupted as a result of lockdown. It has also affected the cultural values spatially the religion values and respect for elders and personalities.

The findings of this study revealed that most private workers lost their jobs. This was also reported by [11] that among the sectors that lost the most jobs in March are the leisure and hospitality with health and educational services. This is also in line with the results of [12] that reveal job insecurity as a real consideration for many working adults in the United States during the influenza outbreak. In the absence of well-implemented social safety nets and unemployment benefits, financial

problems may weigh heavily on the minds of workers during a pandemic, and these problems may results to compliance consideration.

The people expressed deep concern on how the lockdown paralyzed the education system. The school children lost a session especially those in tertiary institutions. Their long stay at home did not only drained their acquired knowledge, but also led some of the youths into indulging on social vices. Education is the life wire of a country's development. Closing down of schools did not only affects the children but also the country at large.

COVID-19 does not carry only the negative aspects alone. In attempt to content the pandemic, demand for preventive equipment created a source of income to some contractors as well as the producers. Provision of palliatives created market to the producers as well as the contractors. Health officers, though at risk, but those that survived it were enriched.

CONCLUSION

From the foregone discussions it can be concluded that COVID-19 has negatively impacted the socio-economic status of Residents of Gwagwalada Area Council irrespective of their status. It has also enriched some individuals. The restrictions imposed by government at all levels in order to curtail the spread of the virus had affected the income and livelihood of the People and consequently their wellbeing. Apart from the hardship imposed by the restrictions, the rise in food prices also contributed a significant difficulty in the socioeconomic wellbeing. The situation is expected to be largely felt among the low income earners, the aged and students, those without work or lose their jobs. This situation has indirectly affected the health of the environment, consequently lead to the origination and spread of diseases.

RECOMMENDATIONS

Given that, collapsed businesses implies reduced employment and output, the economy situation requires a recovery plan that would not only boost the economy but also reduce the need for social support or human suffering and provide social security safety and stimulus for the residents and SMEs that would shorten the economic recovery period. The economic effects and shrinking economy requires a recovery plan that would shorten the economic recovery period. There is therefore, an urgent need for the government and stakeholders to jointly plan and execute recovery programmes that will stabilized the living standard of her citizens.

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