

## COVID-19 PANDEMIC, LIVELIHOOD AND COPING STRATEGIES IN NIGERIA

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**ABSTRACT:** *In a few months of COVID-19 pandemic, millions of people were hit by the deadly virus which claimed a lot of lives worldwide, including Nigeria. The Federal Government declared total lockdown of outdoor economic activities, institutions, ceremonies, religious activities and gave a stay at home order to prevent the spread of the deadly virus in the country. This declaration made life difficult for the masses. The livelihood of Nigerians appeared to have been adversely affected by the pandemic. This seemed to make it very hard for people to improve their economic powers. The populace faced challenges in coping with the pandemic in the 36 States of the country. Hence, this paper looked at the concept of COVID-19 pandemic; household livelihoods; challenges from the pandemic; impact of COVID-19 on Girls and Women; coping strategies for the effects of the pandemic. The theory underpinning this study is the motivational instinct theory of survival. The researcher employed secondary data from existing literature from dailies, journals, libraries and text books to source information. The study discovered that the livelihood of people was adversely affected by the circumstances of the pandemic as a result of the hardship caused by government's restrictions. Several households relied heavily on government cash relief and food handouts for survival. It was recommended that there should be more intervention strategies for resilience against such shocks in future. Actions should be taken to limit more risk, struggling of households and their livelihoods in urban and rural areas of the country.*

**KEYWORDS:** COVID-19 pandemic, households, livelihood, coping, strategies

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## INTRODUCTION

The World Health Organisation (WHO) recognized COVID-19 as a global pandemic in March, 2020. This recognition removed any doubt that the virus posed a huge threat to countries of the world. The virus had affected people from 152 countries. As at that time more than 180,000 people had been affected while 7,000

had been killed (Coulibaly & Madden, 2020). In Nigeria, COVID-19 case was officially identified on 27th February 2020 and few more cases were identified after then (Effiong, Ime, Akpan, Mfreke, Edidiong, Abere, Abraham, Essien, & Ukpong, (2020). On vulnerability of COVID-19, report as at May 25<sup>th</sup> indicated that Nigeria had 7,839 confirmed cases and 226 related deaths (WHO, 2020). Cases of about 60% were reported in Lagos and Kano States, followed by the Federal Capital Territory (FCT), Abuja. Then 35 out of 37 states had reported COVID-19 cases, including conflict affected states such as Bornu, Adamawa and Yobe (NCDC 11/05/2020). The testing capacity in the country was increasing, but the health system was weak and many areas of the country were not easily accessible. However, the pandemic and its containment measures had a significant impact on the population's well-being, socio-economic and living conditions. Nigeria was among the first countries in Sub-Saharan Africa to identify COVID-19 cases and has since implemented measures to contain the spread of the virus. According to WHO (2020), as at September 22, the global confirmed coronavirus cases were 31,174,627, deaths were 966,613 in 235 countries. However, in Nigeria, cases of the pandemic were 57,437, number of deaths was 1,100 and the affected people who have recovered were 48,670 (Worldometer, 2020). As at September 23, Ekiti State had 317 cases, deaths 6 and 274 people recovered; Lagos 18,982 cases, 205 deaths and 15, 246 recovered; Federal Capital Territory 5, 451 cases, 74 deaths and 1,684 people recovered while Oyo State had 3, 254 cases, 39 deaths and 2, 404 patients recovered (ncdc.gov.ng & National Centre for Disease Control, 2020). It is worthy of note that these figures are very high and alarming. However, as at 21<sup>st</sup> February, 2021, available data indicated 152,000 cases, 128,000 recovered and 1,831 people died. Lagos 22,562; 21,119; 220, Federal Capital Territory, Abuja 6,385; 5934; 82, Plateau 3,724; 3,639; 33, Oyo 3,693; 3,242; 45, Rivers 2,916; 2,758; 59, Ekiti 346; 327; 06 to name a few States among others for number of cases, recovered and deaths respectively. Worldwide, coronavirus update was 111,809,490 cases; 87, 223, 044 recovered while 2,4777,373 died from the virus. Active cases as at 21st February, 2021 were 22,174,196, currently infected patients; 22,140,584 were in mild condition (99.6%) and 94,179, in serious or critical condition (0.4%) (w.worldometers.info). It is worthy of note that these were very challenging data.

Moreover, Africa recorded its first COVID-19 case in Egypt on 14th February, 2020. Since then, 52 countries have reported cases in the continent. Initially, confined to capital cities, cases were later reported in a significant number of countries and in multiple provinces and states. On 4<sup>th</sup> May 2020, the number of confirmed COVID-19 cases rose to 44, 873 and caused 1, 807 deaths. The African countries with the highest number of infections as at then were South Africa, Egypt, Morocco and Algeria. Moreover, the full scope of the pandemic remained uncertain as cases were underreported and accuracy of data collection varied considerably (OECD, 2020). Most African governments have implemented measures to encourage social distancing, focusing on border and travel restrictions, school closures and bans on large gatherings. South Africa implemented a 21-day period of full lockdown. Other countries, such as Nigeria, Senegal and Côte d'Ivoire, instituted curfews and partial lockdowns or full lockdowns (ibid). The lockdown was very effective.

There was no part of the world that was not touched by COVID-19 directly or indirectly. Social protection systems are crucial for safeguarding the poor and vulnerable when crisis hit. In many parts of the world, programmes coverage was limited in areas where it was needed most. All countries of the world rolled out measures to mitigate the impact of the pandemic (Rutkowski, 2020). Otache (2020) noted that the world has been shocked by the outbreak of COVID-19 pandemic which vary from one country to another. According to Chopra, Kumar & Kumar (2020), COVID-19 had a widespread, deep and prolonged impact on every sector and segment of the economy of countries globally. Farmers and cultivators started to bear the brunt of the pandemic, even though restrictions and lockdown largely spared agriculture and allied sector. The disruption affected the long value chains between cultivators and consumers. Prices shot-up, wholesale prices continued to fall and producers struggled to find buyers for their products and produce. Livelihoods of households worldwide, including Nigeria appeared to have been adversely affected by the unprecedented circumstances of COVID-19 pandemic.

### **Theoretical Orientation**

This study is anchored on the instinct theory of motivation. According to the instinct theory, all organisms are born with innate biological tendencies that help them to survive. The theory suggests that instincts drive all behavior. Instincts are goal directed and innate patterns of behavior that are not as a result of learning or experience (Cherry & Swaim, 2020). Psychologist William McDougall was one of the first to write about the instinct theory of motivation. He outlined 18 different instincts included curiosity, maternal instinct, laughter, comfort, sex and food seeking among others. Three (3) of the instincts that underpin the operations of people for survival during the COVID-19 pandemic globally were curiosity, comfort and food seeking. McDougall further noted that instinctive behavior was comprised of three elements which are perception, behavior and emotion (Cherry & Swaim, 2020).

The instinct motivational theory is relevant to COVID-19 pandemic because people worldwide, had not experienced the pandemic before. The pandemic was a sudden shock for everybody. The behavior and actions of governments and the people were instinctive and spontaneous. Since people had not experienced the COVID-19 virus before, they had to survive it and they came up with various coping strategies against the pandemic in order to be free from infection by the deadly virus. The instinct theory of motivation for survival kept people going globally and in Nigeria throughout the pandemic period. People infected by the pandemic utilized their motivational instincts for survival to seek medication at the isolation centres, persevered in all strategies provided by health facilities globally and Nigeria in particular. People and governments were very curious about the virus initially. They wanted to know its source and what caused the sporadic spread of the virus; how it could be curtailed; what citizens could do to avoid the infection and survive the pandemic. The solutions for these were social distancing, regular hands washing and total avoidance of hand shake, wearing of face masks, staying at home and total lockdown of business activities. In the same vein, people enhanced their comfort by seeking for food for themselves and family members in order to survive during the lockdown. Moreover, governments

sought food as palliatives that were distributed to the citizenry. This is in line with the three of William McDougall's different instincts of motivation. People also had different perceptions of the pandemic. They therefore portrayed diverse behavior and emotions. In fact, during government imposed lockdown, many family members were able to discover the true perception, behavior and emotions of their children and other family members. The COVID-19 pandemic actually exposed peoples' instincts and what motivates them and their means of survival when faced with crisis and shocks.

Psychologist, William James also identified a number of instinct that he believed were essential for survival. These included fear, anger, love, shame and cleanliness (Ibid). The observations on instinct theory noted that people engage in certain behavior to enhance their survival. Also, according to Psychologist William James, the instinct theory is essential for survival and it is relevant to the COVID-19 pandemic. This is so because people were very afraid of the pandemic. The citizens were angry against the federal, state and local governments for not giving them enough relief materials or palliatives but hoarded some of the items. The youths exhibited their grievances during the 'End SARS' crisis by looting stores where the palliatives were kept in all the States in Nigeria, accusing governments of no distributing the food stuffs meant for the people. Furthermore, non-income earners in the country appealed to governments for food in order to be able to feed members of their immediate families during the lockdown sequel from the pandemic lockdown were not all negative as it also enabled spouses to exhibit their love for their children, partners and other family members because they stayed at home. In fact, it was discovered that more children were conceived during the lockdown due to COVID-19. The pandemic also demanded cleanliness of the populace for them to survive. They were expected to wash their hands and faces regularly after returning from necessary outings during the lockdown. Cleanliness helped the citizens to avoid being infected by the virus.

### **Concept of COVID-19 Pandemic**

Corona virus disease, popularly known as COVID-19 pandemic is an infectious disease (Moore, 2020; Ohia, Ohia, Bakarey, & Ahmad, 2020). The disease is caused by severe acute respiratory syndrome coronavirus otherwise known as SARS- CoV-2 (Adnan, Khan, Kazmi, Bashir, & Siddique, 2020; Harapan, Itoh, Yufika, Winardi, Keam, Te & Mudatsir, 2020; Ohia et al., 2020; Poudel, Poudel, Gautam, Phuyal, & Tiwari, 2020). Its symptoms include fever, cough, shortness of breath, sore throat, running nose, sneezing, among others (Harapan, Itoh, Yufika, Winardi, Keam, Te & Mudatsir, 2020; Ohia, Ohia, Bakarey, & Ahmad, 2020; Unhale, Ansar, Sanap, Thakhre, & Wadatkar, 2020). It is a highly communicable disease (Adnan, Khan, Kazmi, Bashir, & Siddique, 2020). The mode of transmission is from person-to-person (Unhale, Ansar, Sanap, Thakhre, & Wadatkar, 2020). Transmission of the disease occurs among close contacts mostly through respiratory droplets released when the infected person sneezes or coughs (Harapan, Itoh, Yufika, Winardi, Keam, Te, & Mudatsir, 2020). From the above, it could be deduced that the corona virus or COVID-19 is easily spread and highly contagious. People have to do all it takes to avoid its spread among households and populace.

### **Households' Livelihood During COVID-19 pandemic**

During the pandemic, many people found it difficult to feed their households. They were forced to consume their meager assets and income during government imposed lockdown. Peoples' livelihood was poor. Some had reduced consumption to only a meal per day. As a result of the lockdown, people in private employment were unable to do their usual business and could not even feed their families. Many of them had to rely on government's food relief to survive until the lockdown was lifted, which allowed them to embark on some economic and financial activities to enhance their families' livelihood. The pandemic was a strong health challenge for members of the affected households which also had serious effect on the livelihood of the people. However, people in states and federal governments' employment got their monthly salaries during the pandemic. This category of people was able to feed their family members, assist their relatives and

friends. These government workers were only affected by the total lockdown which made them bored and unhappy.

According to the European Commission (2020), the pandemic started as a health crisis but it however triggered very grave and unfolding economic crisis with certain concerns for poor and vulnerable people in the society (globally and in Nigeria). The impact of poverty during the lockdown was very dramatic and system-wide. There were indicators of vulnerability during the pandemic such as serious drop in income, extreme uncertainty of livelihoods and a contraction in consumption of citizens in urban and rural areas. The income drop was initially caused by livelihood disruption due to the economic standstill. Income shock also led to a contraction in consumption which led to reduction of expenditure for food by urban than rural people. Initially, the poverty impact of the pandemic crisis had been more severe for the urban poor. All indicators of vulnerability noted above indicated that the urban poor have been more severely impacted by the COVID-19 pandemic. There was the emergence of new class of poor that necessitated a rethinking of approaches to poverty. In order to enhance an efficient policy response to the poverty consequences of the pandemic, the importance of real-time evidence cannot be over-emphasized (European Commission, 2020). In Ekiti State, Nigeria, the government, in partnership with well-meaning citizens of the State and top government officials launched a rapid response of helping people out with cash, essential commodities like raw and packaged food items to meet their immediate needs during the total lockdown (Kayegbo International, 2020). Poverty that impacted on both rural and urban households emphasized the need for both food and cash support in nearly equal portion and distribution. UNDP (2020a) noted that in Nigeria that was overwhelmingly tied to the informal sector, the pandemic affected livelihood and spending patterns and this had a negative impact on the economy and wellbeing of the populace.

According to DFID (2020), the suppression strategy in Nigeria came with significant economic and financial implications. The informal sector made up to 65% of its GDP with a significant proportion of its population relying on the sector for day to day economic survival. Individuals



were confronted with a choice between survival and observance to social distancing measures that were put in place for the survival of the populace. Social distancing also assumed certain level of relaxation. However, in such densely populated country like Nigeria, this may not work. It was difficult to enforce social distancing in congested Internally Displaced Persons (IDPs) camps. There was also the risk of further fragmentation of the social values and the very safety nets required for healing and recovery. Restrictive suppression response interventions, including shut-downs, disproportionately had effect on the poor and their livelihoods. Compounded by governance deficiency in the country, abrupt cuts in means of livelihood resulted in social unrest, down-tooling by government workers, including, tertiary institutions workers all over the country. The Petroleum Economist (2020) observed that the depreciation of the Nigerian currency did not seem to have immediate impact on inflation in the country. However, prices of essential goods rose mainly by decreased trade as a result of movement restrictions and lockdowns globally. Increase in transaction costs for trade of essential goods caused by prolonged movement restrictions and continued currency devaluation that resulted from the worldwide decline in the price of crude oil made livelihood harder. This resulted in a continued increase in prices and decreased households' power of purchase (FEWS NET, 2020a& Petroleum Economist, 2020). The financing flows risked a reduction in government's ability to finance health and safety net programmes in response to COVID-19 pandemic (The New Humanitarian, 2020). The disruption of livelihood activities, increased food prices and reduced agricultural production due to the pandemic containment measures which worsened food insecurity in the country. Due to increased insecurity, limited humanitarian access and delay in raining season, there was famine in pockets of the population in the BAY states (FEWS NET, 2020b). There was also famine in other parts of the country.

Containment measures resulted in school closures and the obligation to stay at home because of lockdowns or compulsory self-isolation. The loss of livelihood and economic opportunities produced frustrations, stress and anxiety. Increased protection risks for the populace were part of the secondary effects of the pandemic containment measures. Economic stress that resulted from



loss of livelihoods led to the escalation of violence as a form of protest against containment measures. This led to clashes between the population and the law enforcement agents. An example of this was the End SARS and its aftermath in Nigeria which was looting of COVID-19 palliatives and private owned goods from various stores all over the country. Also, loss of income and increase in the level of food insecurity pushed poor households and individuals to resort to negative coping strategies such as criminal activities. This resulted to increased insecurity. Like in other countries, Nigerians infected or suspected to be infected by COVID-19 were subjected to stigmatization and discrimination. Social stigma associated with the virus was reported by authorities, victims and survivors (Business Day, 2020). Moreover, the informal workers were particularly vulnerable to the negative economic effects of movement restrictions and social distancing measures. The informal sector accounted for 80% of employment in Nigeria. There was often no record of informal workers, so, they were not protected by labour laws or fully included in social protection programmes. Informal workers often rely on daily work and payments were received in cash. The 72.3% of all the persons engaged in the informal sector in Nigeria were poor. The informal sector engaged about 58% of the total population of the country's 200 million people (ILO, 2018). These people were more adversely affected.

Human rights violations were reported as a result of the implementation of containment measures. Covid-19 and its containment measures led to severe aggravation of the nation's socio-economic and living conditions. Households living in slums were more affected by untreated health issues such as malnutrition due to limited means of accessing medical services and medicines (World Economic Forum, 2020). According to World Bank (2020), half of Nigeria's total urban population of about 42 million people lives in slums and overcrowded areas. Large cities such as Lagos, kano, Ibadan and other parts of the country have several slums and informal settlements. These settlements lack proper WASH (water tankers, water retailers, bore-hole drillers, well diggers, plumbers, evacuators of community waste products), electricity and other services. Overcrowding and poor WASH conditions were also common in IDPs camp across the country and garrison towns in Northeastern Nigeria where people fleeing conflict and insecurity

took refuge (The Conversation 05/03/2020). The pandemic has worsened the conditions of these slums and people's livelihoods have been more adversely affected. Moreover, co-morbidities in highly congested IDP camps and slums were common which resulted in high incidence of endemic, waterborne diseases and malnutrition. People living in congested and non-sanitary camps, slums and garrison towns were more vulnerable to the spread of COVID-19. In Borno, Adamawa and Yobe known as "BAY" states, vaccination campaigns and health services were often disrupted because of conflict and insecurity which did not help issues during the pandemic. Also, in densely populated and overcrowded areas, it was extremely challenging to respect physical distancing or strictly follow hygienic practices due to limited access to clean water. Thus, it posed quite a challenge in mitigating the effect of the disease among these set of people (UNDP, 2020b). Thus, these conditions made the livelihood of households more challenging in the country.

### **Challenges of COVID-19 pandemic in Nigeria**

During COVID-19 pandemic, peoples' economic, financial, health, social and family lives were adversely affected. Nigerians and people all over the world were faced with many challenges that they were not able to deal with. As a result of total lockdown everywhere, there were food shortages, hunger and insufficiency in all ramifications. Formal financial services were not of much immediate help because many Nigerians had low rate of financial inclusion. Many people in the rural areas were vulnerable and excluded from formal financial services (Demirguc-Kunt, Klapper, Singer, Ansar & Hess, 2018). Otache (2020) found out that the effects of COVID-19 pandemic in Nigeria included job loss, drop in income of the informal workers and the poor, food insecurity, business and school closures, decline in oil revenues and economic uncertainties. In the same vein, Brinto (2020), International Labour Organisation (ILO, 2020), NCDC (2020), Obiezu (2020) & Ozili, (2020) agreed that the effects of COVID-19 pandemic were social, religious, political and economic which included job loss; business closures, sharp drop in income of the informal workers and the poor; agriculture and food insecurity; steep decline in oil revenues; school closures and high death toll. Also, savings groups were severely strained and suspended.

This long-standing local financial mechanism has been deeply affected by the pandemic and it was hard to keep savings group running. Moreover, social distancing measures made it difficult to have regular, in-person meetings to collect savings, disburse loans and repayments. People also struggled hard to save at the same level and frequency as they did before the pandemic. Some savings groups suspend activities during the lean period because members typically did not have income at that time. Because there were defaults in savings and loans, savings groups were unable to function, leaving women without even these informal financial services. Rural households borrowed money from local merchants to meet their needs and repay the loans. But these merchants were also affected by the pandemic and the total lockdown. Their ability to lend out money was adversely affected which resulted in suffering for the rural households (ibid). These challenges placed much burden on the populace.

According to the Food and Agriculture Organisation of the United Nations (2020), the impact of the pandemic on food security led vulnerable households to resort to negative coping mechanisms which had lasting effects on peoples' lives including reduced number of meals, reduced means of covering health expenditures, selling of productive assets and high rate of gender-based violence. Vulnerable households had few coping strategies and faced more risks during the pandemic. Poor harvest at the end of 2019 resulted in some vulnerable households not having their own seeds for planting when rain came in August, 2020. Farmers also lacked labour for agricultural production because borders remained closed and men who migrated were not able to return home on time. This resulted in severe inflation in food prices and food insecurity. Every day, people were losing jobs and income without knowing when normalcy would return. Many nations that heavily depended on tourism had empty hotels and deserted beaches. The International Labour Organisation (ILO) estimated that 195 million jobs would be lost due to the pandemic. The World Bank projected a US\$110 billion decline in remittance which could mean 800 million people would not be able to meet their basic needs (UNDP, 2020c). Moreover, governments' infrastructure was unable to support vulnerable households, as called for by the Global Partnership for Universal Social Protection (USP, 2020) & (ILO, 2020). Both in-kind and cash social transfer that could allow

families to prevent the onset of crises and invest part of the cash they got in generating activities, self or children education, children nutrition and health were insufficient. According to World Food Programme, (2020), deprivation of effective safety nets and social protection systems, poor food insecure people could neither invest in more sustainable practices or even protect such modest resources that they had. Standing national social transfer systems also required social registry that could be frequently updated and contained data that could be relevant to the assessment of household vulnerability to crises.

Household demand for staple and perishable food was very high as a result of the pandemic lockdown. This demand was reasonably inelastic, especially in urban and rural areas. The closure of restaurants and workplaces expanded demand more at the household level. New demands centre such as community and government-sponsored kitchens surfaced. Due to the upward movement of the value chains, wholesalers and aggregators faced a slowdown in demand from retailers and vendors as a result of a combination of issues related to logistics and the partial closure of retail markets. The overall wholesale prices were driven down while the agriculture value chain from farm to actual consumers faced many roadblocks (Chopra, Kumar & Kumar, 2020). According to Olajide (2020), during the distribution of food relief packages to relieve and enhance good livelihood of the suffering populace, the exercise was hampered by governance challenges such as middlemen hijacking the distribution, leading to a situation where the items did not get to the actual needy beneficiaries for whom they were meant for. Many of the relief packages ended up in the homes of the middlemen and their families and cronies. The situation reflected the opposite of good governance which is about relationships and interactions between citizens and government based on the principles of equity, efficient service delivery and sustainability. Most poor Nigerians had inadequate income with little or no savings. When income is not adequate, the urban and rural poor turn to social networks for social security in terms of food, finance and credit. These sources from friends and relatives have become more unreliable during the pandemic (Olajide, 2020). These made things very difficult for the populace.

The COVID-19 pandemic health challenges were wake-up calls to policy makers because the usual and unprecedented nature of the virus made it impossible for citizens to rely on foreign healthcare services and it was more difficult to solicit for international support in view of the competing demand for medical supplies and equipment (Onyekwena & Ekeruche, 2020). This was a pointer for the health systems in Nigeria to be adequately equipped to render needed help for health issues as they arise.

### **Impact of COVID-19 on Girls and Women**

Women and girls were disproportionately affected by the pandemic (Koning, Anderson & Bin-Human, 2020). Women in vulnerable households were under extra stress during the pandemic. They found themselves alone or separated from their standard institutions like schools and saving groups. Children were at home and these children needed to be cared for and feed by women. Moreover, caring for children and households was already burdensome before the pandemic. This became worse with no help from altruistic family members and neighbours who became handicapped by the pandemic. In the same vein, social supports were severely constrained, almost impossible to access because everybody faced the same restrictions, though; the impact on poor families was enormous. Before the pandemic, some women sold livestock and other items to buy foodstuff for their family consumption, however, the travel restrictions within the country made it difficult for these women to trade beneficially to enhance the income required for their livelihood (Koning, Anderson & Bin-Human, 2020). People who disregarded the lockdown order were challenged by security agents throughout the country. The economic impact of COVID-19 pandemic, pushed poor households to resort to negative strategies, such as child marriage, child labour and transactional sexual activities (Protection Cluster Nigeria (2020) & Save the Children (2020).

During the pandemic, women and girls who did the domestic reproductive work were highly burdened. Women had to do more household chores especially cooking and cleaning due to the lockdown. The whole family members were at home who were always hungry, especially the

young children and the house was always dirty which needed to be cleaned by women and girls. Mothers complained that they had to be at the kitchen all the time because their children rejected various food items cooked for them out of frustration and boredom, even if they were the food that they earlier requested for. There were also reports all over the media in Nigeria of increased sexual abuse and domestic violence against women and girls during the pandemic. Many of them were gang raped while some of the victims were killed by the perpetrators or the rapists. Some fathers even raped their daughters and wives during the pandemic lockdown. There were evidences that health related pandemics have potentials to increase the risk of domestic violence. There were also reports that domestic violence tripled during the pandemic such as violence against health workers due to stress levels that the pandemics placed on patients. There were abuse and exploitation of women and girls especially care givers (WHO,2020b).According to Protection Cluster Nigeria (2020) & Save the Children (2020), women and out of school children were more vulnerable to gender based violence, domestic violence and abuse as a result of movement restrictions and quarantine measures. Economic stress, anxiety and frustration caused by jobs loss and fear of the pandemic itself triggered more violent behaviours.

### **Copping strategies for the effect of COVID-19 pandemic**

The measures of preventing the spread and containing the spread of COVID-19 pandemic among people included lockdown, social distancing, self-isolation or self-quarantine and observation of simple hygiene habits such as regular hand washing, wearing of facemask and covering the mouth with an handkerchief or elbow when coughing or sneezing (Bunza, 2020 & Ohia et al., 2020).It is worthy of note that there was no known cure or vaccine for the Covid-19 pandemic as at 2020 (Adnan et al., 2020). Nevertheless, different countries and international organizations like WHO made efforts to develop vaccines or drugs for the Covid-19 disease. On the impact of non-pharmaceutical interventions to reduce COVID-19 mortality and healthcare needs, a push to flatten the curve also serve as a tool to reduce fear and panic and buy time until a vaccine was developed. However, because of weak healthcare system, as confirmed cases became rampant, flattening the

curve, in the case of Nigeria, was much more complex and required more time. Though, a viable strategy in other countries of the globe, it was not so in Nigeria as a result of the healthcare infrastructure (DFID, 2020). This made things very difficult for Nigerians.

A special crisis such as the pandemic needed specific interventions to respond to its exceptional amplitude. However, no specific preventive measures or treatment were found for the eradication of the virus and cure of the disease respectively. Lessons were learnt quickly, evaluated and the ones that were useful were scaled up. Stakeholders, governments, private players, investors and start-ups recognized solutions that had high potentials and invested in them. The time of the pandemic was a trying one. However, it also offered various opportunities for unprecedented innovation, learning and evolution of collaboration models (Chopra, Kumar & Kumar, 2020). For example, there was the innovation of various styles of face masks which became useful and served as a form of income generation for both the urban and rural populace in Nigeria and the globe.

On finding vaccine for the cure of the COVID-19 or corona virus, WHO (2020a) indicated that as at 2020 more than 150 countries engaged in COVID-19 vaccine global access facility. Seventy-five countries submitted expression to Gavi/COVAX facility, joining up to 90 further countries which could be supported by COVAX Advance Market Commitment (AMC). The countries included Argentina, Brazil, Canada, Finland, Israel, Ireland, Japan, Kuwait, Mexico, Norway, Portugal, Qatar and Republic of Korea, Saudi Arabia, Switzerland, United Arab Emirates and United Kingdom among others. Also, interest from governments representing more than 60% of the world's population offers tremendous vote of confidence in the effort to ensure truly global access to COVID-19 vaccines, once produced ([www.who.int/news/item](http://www.who.int/news/item)).

The Nigerian government adopted a range of strategies to manage the spread of COVID-19. The urban poor in Lagos, Abuja and other cities in the country were negatively affected disproportionately. Lagos state and other state governments in the country introduced food relief packages in order to cushion the effects of the lockdown (Kayegbo International, 2020 & Olajide, 2020).



Rural households relied on other resilience strategies and mechanisms too. During the lean periods between harvests, livelihood coping strategies like remittances from livestock and money lenders allowed people to cope with their needs, including access to food. The most common coping strategies that households used were personal savings, reduced food consumption and other sales (Gash & Gray, 2016). However, the scope of the COVID-19 pandemic placed these strategies under severe strain. The harsh effect of COVID-19 pandemic called for immediate actions in order to limit more risks and struggling of households and their livelihoods either in rural and urban areas in Nigeria. People had to depend on targeted food distribution, cash transfer and other social supports, seedlings and farming extension services from federal, state governments and philanthropists countrywide. This was what sustained the populace during the total lockdown until the gradual relaxation of the lockdown. The crisis of the pandemic affected the livelihoods of various households than climate shock. During severe drought, people would not necessarily lose their income from non-agricultural sources. People who have not already been identified as regular beneficiaries of food distribution or cash transfer needed help and inclusion. As a result, a good understanding of how households were affected by the pandemic was utilised to identify then and reach them. Relevant stakeholders were engaged to serve as convenient and accessible delivery channels (*ibid*). Government tried to reach as many people as possible.

Certain financial services were constraint in the emergency response to the pandemic crisis, especially in the rural areas. However, financial institutions played important role in accelerating and expanding the distribution of safety net payments. Many commercial banks especially, the First Bank and other banks deployed ad hoc payment points, called Payment and Outdoor Services (POS) in every nook and cranny of the country. This made it easier for people to withdraw needed cash and bills payments very close to their places of residence. Microfinance Banks also played critical roles in meeting the banking services of the rural dwellers during the pandemic which enabled people to survive the trying period (CGAP, 2020). Philanthropists and funders played vital role in giving additional support to national and international Non-Governmental Organisations (NGOs) and United Nations Organisations working in collaboration with state and federal

governments to strategise in lessening the harsh effect of the pandemic on the populace in Nigeria. In order to build long term resilience during COVID-19 pandemic, a holistic and coordinated approach among stakeholders was made and diversified stakeholders related to both financial and non-financial services played a critical role in alleviating the suffering of the masses. Vulnerable households in the country were then able to cope more with unavoidable crisis with more robust traditional and contemporary strategies in place.

The impact of the pandemic has highlighted disconnect between the urban development policies, housing, slums and the livelihood realities of the majority. Therefore, governments saw the pandemic incidence as an opportunity to address this disconnect to develop inclusive action plans aimed at building the capacity of poor people to accumulate livelihood assets. These involved urban development policies supporting the initiatives of urban and rural poor to accumulate assets and further reduce their need or dependence on palliative measures. They drew on these to cope with future shocks (Olajide, 2020). It was a whole society approach to limit the spread of the coronavirus and to cushion the potentially devastating impact it had on people and the economy. So, enhancing trust and cooperation among communities, between people and the government became crucial in sustaining the fight against the pandemic (WHO, 2020b). Financial assets like earnings, savings, investment returns and credit facilities were used for daily living and accessing adequate housing, sanitation facilities and food. The incomes of poor masses were limited in capacity for saving for future necessities (Olajide, 2020). According to UNDP (2020b), when the pandemic intensified in Nigeria, the country was already dealing with enormous social and economic impacts exacerbating existing inequalities and creating further inequalities which were affecting the most vulnerable people harder.

Nigeria also put in place increased monetary measures, fiscal policy measures, diversification of the economy through agriculture, revamping the manufacturing sector, adoption of E-Learning and E-Business methods, acquisition of ICT Skills and multiple sources of income (BudgI, 2020; Ozidi, 2020 & PKF, 2020). The Central Bank of Nigeria (CBN) put in place increased

monetary measures to mitigate the effect of the pandemic on Nigerian economy and the populace. There were also fiscal policy measures like cash transfer to people who had lost their jobs/income and improvement in the health sector which enabled the country to counter the pandemic (Otache, 2017). According to DFID (2020), governments across the globe employed two fundamental Non Profit Interventions (NPIs) to respond to the pandemic outbreak, suppression and mitigation of the disease. The objective of suppression was to reduce the transmission rate or R-naught ( $R_0$ ), to less than 1, whereas the objective of mitigation was to get the numbers of infection to decline and slow its speed. This was done through populace social distancing, home isolation of cases and closure of markets, public places, ceremonies/celebrations, churches, schools and universities to enhance effective suppression.

Government and national leaders' big question during the pandemic was how affected people and communities would bounce back and recover from the crisis. The economic distress associated with the pandemic and health implications for those affected, especially, most vulnerable in the community, strain on service delivery, infrastructure and the societal cost in terms of well-being were enormous. Government went to great length in ensuring that the people affected were well catered for during and after the pandemic through several support measures.

## CONCLUSION

The study concluded that COVID-19 pandemic is an infectious disease that is caused by acute respiratory syndrome corona virus. It is a highly communicable disease. Its transmission is from person to person through respiratory droplets released when the infected person sneezes or coughs. The pandemic had adversely affected households' livelihood in Nigeria and the globe which called for the need to develop new interventions and appropriate strategies to provide resilience presently and in the future. Social protection system was crucial for safeguarding the poor and the vulnerable as the crisis hit the world. Throughout the pandemic, many households found it difficult to feed themselves after exhausting their meager assets and income. The pandemic started as a health crisis but it later triggered a very grave and unfolding economic crisis for the poor and the vulnerable

people in the society and all the states in Nigeria. People were compulsorily locked down at home and could not access more income for their livelihood, especially, people in the informal sectors of the economy in Nigeria and the globe. Savings were strained and suspended during the pandemic lockdown. The COVID-19 pandemic had various social, religious, political and economic effects. These effects were job loss; drop in income of the formal workers and the poor; food insecurity; business and school closures; inflation; high death toll; decline in oil revenues and economic uncertainties in Nigeria. Household demand for staple and perishable food was very high as a result of subsequent lockdown. However, people in government employment got their salaries regularly during the pandemic lockdown.

However, the pandemic disproportionately affected women and men. Women in vulnerable households were more stressed during the pandemic. Women and girls did more reproductive and household chores of cooking and cleaning during the compulsory lockdown and stay at home due to persistent demands on them. Furthermore, there was increased sexual abuse and domestic violence of women and girls during the pandemic in Nigeria.

Several coping strategies were put in place to contain the spread of the pandemic. These included lockdown, social distancing, and self-isolation or self-quarantine and observation of simple hygiene habits such as regular hand washing, wearing of face masks and covering mouths with handkerchiefs when coughing or sneezing. Many countries have made consistent efforts to develop vaccines or drugs to cure the COVID-19 pandemic disease. The harsh effect of the pandemic on the struggling households and their livelihoods as in the rural and urban areas in the country made them to depend on targeted food distribution, cash transfer and other social supports, seedlings and farming extension services from federal, state governments and philanthropists. These were what sustained the populace during the total lockdown until the gradual relaxation of the lockdown. Nigeria also put in place increased monetary measures, fiscal policy measures, diversification of the economy through agriculture and adoption of e-learning, e-business methods, acquisition of ICT skills and communication through zooming and multiple sources of income generation to

survive the hardship brought on the populace by the pandemic. Also, post-COVID-19 recovery strategy re-establish the conditions for quick return to a part of economic growth, improved social contract and overall human development that would foster more inclusive societies in the future. Survivors of the disease were assisted to regain their dignity and the affected communities were supported to recover their livelihoods.

### **Recommendations**

Efforts should be intensified to help the populace to get through the pandemic as quarantines, shutdown of businesses, higher prices for food and basic goods with more limited access to them, as well as higher medical costs had adversely affected millions of people.

There should be interventions strategies for resilience against such shocks in future. Actions should be taken to limit more risk, struggling of households and their livelihoods in urban and rural areas of the country.

More palliatives should be provided by governments to enhance the livelihood of households in the country, especially at the local rural grassroots, villages and farm settlements to enable the poor masses survive. Also, where the pandemic was already prevalent, it is crucial to expand social safety nets to them so that large cash transfers could be disbursed more quickly to new and existing beneficiaries. Nigeria needed to extend social safety nets to sustain at risk groups, especially those in affected employment sectors like the private sector, tourism among others, with payment to compensate for the loss of their income. There should be COVID-19 sensitive public works; utilities waive fees for basic services; waivers for loans and other financial obligations from governments, local, state and federal. There should be support for homeless populations and internally disposed persons (IDPs) in the country.

Nigeria in particular and the globe in general should be ever prepared for sudden emergencies like virus pandemic and any shock either in business, health, education and other sectors of the economy in order to lessen the suffering of the masses at all times.

Government should quickly mobilize procurement of adequate essential health equipment needed for testing, quarantine and medical care. There should be coordinated action on health emergency preparedness. Temporary hospitals/quarantine centres should also be equipped and designated as emergency centres. These should be complemented by the enforcement of directives issued by government at all levels. Government should further ensure pro-poor shut down strategies because the most important actions in containing the spread of the virus is the control of borders, since the virus was an imported one, detection of cases, isolation and social distancing. The spread of the virus follows an exponential distribution, which also means that avoiding one case in one day has serious positive implications on the number of cases in the future.

Whenever, the tested and trusted vaccines for immunity against, prevention or cure of COVID-19 virus infections are finally produced, everybody should get themselves vaccinated in order to be free from the pandemic. This will be the best thing to do at that time.

There is the need for government to mobilize more resources and funds in partnership with the UN, donors, private sector, World Bank (WB), International Monetary Fund (IMF) for more supports for development of health sector in the country. Nigeria should sustain COVID-19 Response Trust Fund which would help to accelerate the coordination and implementation of the preparedness, mitigation and response measures in the NCDC's Incident Action Plan and also act as a buffer to other social and economic shocks. Governments are obligated to ensure access to food, water and other basic needs for everyone at all times, and in particular, those subjected to lockdown, quarantine facilities and other severe restrictions due to the pandemic.

The federal government should urgently develop a plan to deliver social and economic assistance to the tens of millions of people who lost income due to COVID-19; particularly informal workers who lack adequate social safety net. This plan should be developed in consultation with community-based organizations with experience of serving people living in poverty. Government should also clearly communicate its economic relief plans to the public and clarify eligibility, timelines and procedures.

Tougher decisions should be made to diversify the country's revenue base away from oil exports and there should be improved investments in the health care sector. Government should also put in place measures, such as growing foreign reserves to ensure that the economy of the nation would be able to recover quickly from difficult conditions in the future and by this avoid putting the economy into recession.

## References

- Adnan, M., Khan, S., Kazmi, A., Bashir, N., & Siddique, R. (2020). COVID-19 infection: Origin, transmission, and characteristics of human coronaviruses. *Journal of Advanced Research*, 24, 91–98. Available at: <https://doi.org/10.1016/j.jare.2020.03.005>.
- Bank of Industry(2017).*Economic development through the Nigerian Informal Sector: A BOI Perspective*.[https://www.boi.ng/wp-content/uploads/2018/05/BOI-Work-ing Paper-Series No2\\_Economic-Development-through-the-Nigerian-Informal-Sector-A-BOI-Perspective](https://www.boi.ng/wp-content/uploads/2018/05/BOI-Work-ing-Paper-Series-No2_Economic-Development-through-the-Nigerian-Informal-Sector-A-BOI-Perspective).
- Brito, C. (2020).*Coronavirus may never go away: World Health Organization Warns CBC News*. Retrieved from <https://www.bbc.com/news/world-52643682>.
- BudgI, T. (2020). *2020 budget analysis and opportunities*. <https://yourbudgit.com/wp-content/uploads/2020/03/2020-Budget-Analysis>. 1-42. Retrieved March 27 2021.
- Bunza, M. M. (2020). *A handbook on precautionary measures and protocols to contain COVID-19 in Nigerian army command schools: A publication of the Institute of Army Education*. Lagos: Institute of Army Education Printing Press.
- Cherry, K. &Swaim, E. (2020). How the instinct theory explains motivation. <https://www.vertwellmind.com/kendra-cherry-2794702/emily-swaim-4798013>. Retrieved April 20 2021.
- CGAP (2020). COVID-19 and disruptions to vulnerable rural livelihoods in the Sahel: COVID-19 Briefing by Riquet Corinne and Anderson Jamie on insights for inclusive finance. Retrieved, August 30, 2021.
- Chopra, P. Kumar, TVS R. and Kumar, R. (2020). *Innovations and coping strategies for food security at the time of COVID-19*. <https://www.microsave.net>. Retrieved April 29.
- Congressional Research Service (2020). *Global economic effects of COVID-19*. <https://fas.org/sgp/crs/row/R46270>.



- Coulibaly, B. and P. Madden (2020), *Strategies for coping with the health and economic effects of the COVID-19 pandemic in Africa*. Available online at <http://www.brookings.edu/blog/africa-in-focus/2020/03/18/strategies-for-coping-with-the-health-and-economic-effects-of-the-covid-19-pandemic-in-africa/>
- Davis, B. (2020). Social protection and COVID-19 response in rural areas. *Food and Agriculture Organisation of the United Nations*. Retrieved July 22.
- DFID (2020). *Impact of COVID-19 Pandemic on Violence against Women and Girls: Nigeria*. [www.sportlightinitiative.org](http://www.sportlightinitiative.org).
- Demirguc-Kunt, A., Klapper, L., Singer, D., Ansar, S. & Hess, J. (2018). *The Global Findex Database 2017: Measuring financial inclusion and the Fintech Revolution*. Doi:10.1596/97-1-4648-1259-0. <http://www.openknowledge.worldbank.org>. Retrieved April 19, 2021.
- Effiong, A. I., Ime, R. N., Akpan, E. J., Mfreke, U. J., Edidiong, I. F., Abere, O. J., Abraham, U. P., Essien, M. O. & Ukpog, E. S. (2020). Assessment of Nigerian Television Authority (NTA) ongoing programme awareness on coronavirus in Nigeria. *Electronic Research Journal of Social Sciences & Humanity*. 2(1): 130-141.
- European Commission (2020). *Livelihoods, coping and support during COVID-19 crisis*. UK: Power and Participation Research Centre (PPRC). Retrieved June 5.
- FEWS NET (2020a). *Nigeria--Key message update: Insurgency and banditry continue to impact on livelihoods activities*. <https://www.fews.net/march>. Retrieved March 31.
- FEWS NET (2020b). *Nigeria-food security outlook update: COVID-19 pandemic and conflict impacts livelihoods increasing food assistance needs*. <https://www.fews.net/nigeria>. Retrieved April 6.
- Food and Nutrition Crisis (2020)*Food Crisis Prevention Network*. <http://www.food-security.net/en/topic/food-and-nutrition-crisis-2020/>.
- Gash, M. & Gray, B. (2016). *The of financial services in building household resilience in Burkina Faso CGAP*. [www.findevgateway.org](http://www.findevgateway.org). Retrieved November, 11<sup>th</sup>.
- Harapan, H., Itoh, N., Yufika, A., Winardi, W., Keam, S., Te, H., & Mudatsir, M. (2020). Coronavirus disease 2019 (COVID-19): A literature review. *Journal of Infection and Public Health*. 13(5), 667–673. <https://doi.org/10.1016/j.jiph.2020.03.019>.
- International Labour Organization. (ILO, 2020). *COVID-19 crisis and the informal economy Immediate responses and policy challenges*. Available online at

[https://www.ilo.org/global/topics/employment/promotion/informal.economy/publications / WCMS\\_743623/lang--en/index.htm](https://www.ilo.org/global/topics/employment/promotion/informal.economy/publications/WCMS_743623/lang--en/index.htm). 1-8.

Kayegbo International (2020). June 11 is Her Excellency Erelu Bisi Adeleye Fayemi's Day: List of contributors to Ekiti State COVID-19 accounts. *Special Edition*, March 27 – May 15.

Moore, N. (2020). Chloroquine for COVID -19 infections. *Drug Safety*. 43(5), 393–394.<https://doi.org/10.1007/s40264-020-00933-4>.

Nigeria Centre for Disease Control. (2020). *Covid-19 situation Report: Situation Report 85*. Available online at <https://reliefweb.int/report/world/coronavirus-disease-2019-covid-19-situation-report-85>. Retrieved May 23.

Obiezu, T. (2020). *Nigeria's jobless pessimistics about finding work as businesses reopen after Covid-19 lockdown*, *Voice of Africa*. <https://www.voanews.com/africa/nigerias-jobless-pessimistic-about-finding-work-businesses-reopen-after-covid-lockdown>.

OECD (2020). *Tackling corona virus (COVID-19) policy responses: Policy implications of corona virus crisis for rural development*. OECD.org. Retrieved June 16.

Ohia, C., Bakarey, A. S., & Ahmad, T. (2020). COVID-19 and Nigeria: Putting the realities in context. *International Journal of Infectious Diseases*, 95, 279–281. <https://doi.org/10.1016/j.ijid.2020.04.062>.

Olajide, O. (2020). *Lagos state makes it hard for people living in slums to cope with shocks like COVID-19*. <https://theconversation.com/profiles/1067901>. Retrieved May 19<sup>th</sup>.

Onyekwena, C.& Ekeruche, M. A. (2020). Understanding the impact of the COVID-19 outbreak on the Nigerian economy, *Africa in Focus*. [www.bookings.edu/africainfocus/](http://www.bookings.edu/africainfocus/). Retrieved April 8.

Otache, I. (2017). Agripreneurship development: A strategy for revamping Nigeria's economy from recession. *African Journal of Economic and Management Studies*. 8(4), 474-483.<https://doi.org/10.1108/AJEMS-05-2017-0091>.

Otache, I. (2020). The Effects of the Covid-19 Pandemic on the Nigeria's Economy and Possible Coping Strategies. *Asian Journal of Social Sciences and Management Studies*. 7 (3), 173-179. DOI: 10.20448/journal.500.2020.73.173.179

Ozili, P. K. (2020). *Covid-19 pandemic and economic crisis: The Nigerian experience and structural causes*. <https://ideas.repec.org/p/pramprapa/99424.html>. Petroleum Economist (2020). Nigeria dangerously exposed to oil crash. [www.petroleum-economist.com](http://www.petroleum-economist.com) . Retrieved March 24.

- PKF (2020). *Covid-19 PKF Nigeria update*. <http://pkf-ng.com/media/10046217/pkf-nigeria-covid-19-bulletin-final-ed.1-5>.
- Poudel, P. B., Poudel, M. R., Gautam, A., Phuyal, S., & Tiwari, C. K. (2020). COVID-19 and its global impact on food and agriculture. *Journal of Biology and Today's World*. 9(5), 7–10.
- Rutkowski. M. (2020). How social protection can help countries cope with COVID-19. *Voices*. Available online at <https://worldbank.org/team/>. Retrieved April 15.
- Save the Children (2020). *Save our education-Save the children*. [www.savethechildren.org](http://www.savethechildren.org). Retrieved April 3.
- The New Humanitarian (2020). *Coronavirus in the Rohingya Camps: Five keys issues to watch*. Available online at [www.thenewhumanitarian.org](http://www.thenewhumanitarian.org). Retrieved May 15.
- Unhale, S. S., Ansar, Q. B., Sanap, S., Thakhre, S., & Wadatkar, S. (2020). A review on corona virus COVID-19. *World Journal of Pharmaceutical and Life Sciences*. 6(4), 109–115. Available online at <https://doi.org/10.14744/ejmo.2020.51418>.
- United Nations Development Programme (UNDP, 2020a). *Humanity needs leadership and solidarity to defeat COVID-19*. Available online at <https://www.undp.org/content/en/home/covid-19-pandemic-response>.
- UNDP (2020b). *Nigeria one United Nations COVID-19 response*. Available online at [www.ng.undp.org/content/nigeria/covid-19-pandemic-response/](http://www.ng.undp.org/content/nigeria/covid-19-pandemic-response/). Retrieved September 10.
- UNDP (2020c). The impact of COVID-19 pandemic in Nigeria: A socio-economic analysis. *Brief #*. Retrieved March 24.
- World Bank (2020). *World Bank communities price data*. <https://worldbank.org/opendata>. Retrieved February.
- World Economic Forum (2020). *What you need to know about the COVID-19 pandemic*. Available online at [www.weforum.org](http://www.weforum.org). Retrieved May 11.
- World Food Programme (2020). *Sustainable Livelihoods and Ecosystems*. Available online at <https://www.wfp.org/sustainablelivelihoods-and-ecosystems>.
- World Health Organisation (WHO, 2020a). Number at a glance corona virus disease (COVID-19) pandemic. Available online at <https://www.who.int/emergencies/diseases>.
- WHO (2020b). Nigeria: Implication on peace and social cohesion. Available online at [https://www.who.int/nmh/countries/nga\\_en.pdf](https://www.who.int/nmh/countries/nga_en.pdf).

WHO (2020c). Coronavirus disease (COVID-19) pandemic: Number at a glance. <https://www.who.int/emergencies/diseases/> . Retrieved September 22<sup>nd</sup>.

Worldometer (2020). Coronavirus in Nigeria. Available online at <https://www.worldometers.info/coronavirus/country/Nigeria>. Retrieved September 22.