Journal of International Relations Security and Economic Studies (JIRSES), Vol. 1, No 1, April, 2021.
Available online at http://journals.rcmss.com/index.php/jirses
ISSN: 2756-522X

Attah Amana Philip, Alfa Patrick Innocent & Mamman Matthew Samuel, 2021, 1 (1):41-49

Demographic and Social Impact Of COVID-19 Pandemic in Nigeria

Attah Amana Philip
Department of Social Sciences and Humanities, The Federal Polytechnic,
Idah, Kogi State, Nigeria,

Alfa Patrick Innocent PhD
Department of Social Sciences and Humanities, The Federal Polytechnic,
Idah, Kogi State, Nigeria.

Mamman Matthew Samuel
Department of Sociology, Nasarawa State University Keffi, Nigeria

Abstract
The novel Coronavirus (Covid 19) as a global pandemic came with several negative consequences include demographic and social dimension. This research examines the Demographic and Social Impact of Coronavirus pandemic on the citizens of Nigeria and Kogi State in particular. The research adopted a descriptive research survey design and the populations of the study are the entire people living in Kogi State which is 3,314,043. The Taro Yamane statistical technique was used to determine a sample size of 400, which were structured questionnaire distributed with a retrieval rate of 91%. The data was analyzed using frequencies and percentages while hypotheses tested using chi-square statistical tool. The study revealed that Corona virus pandemic has affected the Demographic and Social lives of the citizens, there by recommends that the citizens adhere strictly to various guidelines stipulated by the regulatory Agencies and Health Institutions.

Key words: *Demographic, Social Impact, COVID-19, Pandemic, Nigeria*

DOI URL:https://doi.org/10.36758/jirses/v1n1.2021/5

Introduction

The China office of World Health Organization (WHO) in December, 2019 first receive the report of a virus which was widely acknowledged to be an unknown until there was a consensus on calling it a Coronavirus (Covid – 19). At the point of first report in China in December, 2019, it has already spread across other part of the globe. The World Health Organization reported that the novel virus is transmittable and the commonest mode of transmitting this infectious pandemic according to the laboratory report of the World Health Organization is the droplets from an infected person, sneezes, handshakes of persons suffering from the virus, coughs without nose or face masks, social clusters, sexual intercourse and so on.

According to WHO report, the virus started in Wuhan China and has affected the globe leading to several millions of deaths in Asia, America, Europe and Africa. Though, Rabiu et al, 2020 and Peter (2020) noted that the disease was first named 2019 – n cov acute respiratory disease by the World Health Organization, it was renamed Coronavirus (Covid – 19) in December, 2019. The World Health Organization (WHO) reported that as at today, the total number of Coronavirus cases stand at 34,474,651 with 1,027,597 deaths. More so, the total average new cases stands at +5,591 deaths at +471 and active cases at 7,782,206. The total number of recovered cases stands at 25,688,772. However, the index cases has declined in China where the pandemic started with an average of 10

new case, the pandemic is still ravaging other parts of the world especially Europe, America and Africa.

The Nigeria Centre for Disease Control (NCDC) as parts of carrying out its statutory responsibility of protecting the Nigeria citizens against pandemic in February 19th, 2020 took the centre stage in ensuring that the disease is not spread across the states and Federal Capital Territory after the first case was recorded in Lagos State South – West Nigeria. In doing this, the president and commander in Chief of the Federal Republic of Nigeria constituted a committee (the Presidential Task Force PTF) on Covid-19 headed by the Secretary to the Federal Government on Nigeria, Boss Mustapha. Subsequently, the Federal and State government gave adequate supports, and the task force to effectively carrying out its responsibility instituted shutdown of primary, secondary and tertiary institutions, worship centres, markets, airports, transport services with full restriction of movement except few critical and essential services. These situations characterizes social distancing, restriction of movements, integrated campaign on the need to avoid handshakes, weeping and face masks, discouraged in attending ceremonies as much as possible. Irina, (2020), Peterman et al (2020) and Rosstat (2020) noted that this situation has social and demographic impacts on the citizens. Furthermore, World Health Organization World Health Organization (2020), Olaseni and Olaseni (2020), UNESCO (2020) and Wu et al (2020) revealed that the effect of Coronavirus pandemic has Socio-Demographic dimensions which do not only limits interactions between and among people but the demographic variable of citizens have been widely subjected to thorough probing considering the disparities of its effects on individuals based on gender and age.

To this end, the Corona virus pandemic has been bedeviled with social and demographic effects to the citizens across the globe and Nigeria in particular. Hence, this research will examine the extent to which Corona virus pandemic has affected the Social and Demographic lives of the citizens in Nigeria and Kogi State in particular.

Objectives of the Study

The research is set to achieve the following objectives:

i. To determine the Demographic Impact of Corona virus pandemic on the citizens.
ii. To examine the Social Impact of Corona virus pandemic on the citizens.

Statement of Hypotheses

This study is postulated using two hypothetical statements designed in their null forms:

H_1: Demographic lives of the citizens is not affected by Corona virus pandemic

H_2: Social lives of the citizens is not affected by Corona virus pandemic

Conceptual Framework

Corona viruses are seen to be an envelope, positive-sensed single – stranded RNA virus having a nucleocapsid of helical symmetry (Svliman et al 2020). The Corona virus pandemic has been widely acknowledged to be responsible for respiratory and intestinal infections in human beings as noted by the World Health Organization (WHO) in 2020 to be a severe acute respiratory syndrome (SARS). The virus is seen to be characterized with a pathogenic syndrome with adverse health hazards on the citizens.

The global indicators adopted for operational assessments of confirmed cases as noted by Irina (2020) include the number of confirmed cases, number of deaths, morbidity that is, the number deaths in every one thousand confirmed cases, the mortality rate which means the number of deaths

per 100,000 total populations in a given place. Though, Chinenyenwa et al (2020) argued that the virological attributes of Corona virus revealed lower surviving rates of these pathogens in tropical Africa. The Socio-economic link of Africa with other continents of Asia, America and Europe where this pathogens strives to survive higher makes Africa at high risks of the pandemic. More importantly to note is that, Nigeria is the most populous black nation of the world with above 200 million persons with an average population of the elderly put at 3.1% (6.4 million) person thus, making the Country prone to the pandemic since it has been revealed that the elderly are of higher risks of contacting the virus with their vulnerability to other health challenges like diabetes, high blood pressure, cancer and other cardiovascular diseases. The 2019 – n Cov genomics shows that it was as a result of a recombinant virus of SARS – Cov and Hiv origins making the duo species of viruses showing that their recombinant never had a natural setting thus widely attributed as a product of human generic engineering.

The symptoms of Corona virus infections show that the virus becomes active after an incubation period of approximately 5.2 day (Hussin et al, 2020 & Gvan et al, 2020). However, the average period from when the person is infected to when it becomes active through either being discharged or eventual death largely depends on factors like the age of the patient as well as the immune system. The most common symptoms of persons with Corona virus pandemic include dry cough, high fever, fatigue, spectrum production, headache, haemoptysis, drypnoea, lymphopenian and diarrhoea (Hussin et al, 2020 & Rabiu et al 2020, Ren et al, 2020 & Wang et al, 2020).

Global Perspective of the Covid – 19 Pandemic

The Corona virus started in Wuhan, the Hubei province in China. The persons living in Wuhan has been revealed to be largely involved in animal market thereby, making it to believe the livelihood that such virus most have been transmitted from animal to person. The first known patient of this novel pandemic was identified in Wuhan, China on 1st December, 2019. This pandemic has since then ravaged the entire globe with several adverse social and demographic impacts on the citizens leading to social distancing, avoidance of trans-national movements, restriction of inter-state movements, racial discrimination and so on. Table below shows the globe perspective of the pandemic.

Table1: Covid - 19 Statistics as at 2nd October, 2020

Countries	Confirmed cases	Confirmed death	Recovery cases
Global	34,517,446	1,028,196	25,688,772
USA	7,494,671	212,660	4,736,621
India	6,394,896	99,833	5,352,078
Brazil	4,849,229	144,767	4,212,772
Iran	461,044	26,380	383,368
France	577,505	32,019	96,797
Italy	317,409	35,918	228,844
Germany	295,530	9,586	257,900
Egypt	103,317	5,946	96,855
China	85,424	4,634	80,601
Nigeria	59,001	1,112	50,452
Ghana	46,656	301	45,942
Cameroun	20,838	418	19,440
Zimbabwe	7,850	228	6,312
South Africa	676,084	16,866	609,584

Source: World meter, 2020

Covid – 19 pandemic: The Nigeria experience

The novel Corona virus pandemic came into Nigeria through an Italian citizen who was infected and came into the Country through Lagos State South – West, Nigeria. The Italian citizen subsequently had contact with other Nigeria citizens in Lagos and the disease spread across other parts of the Country. The total number of Covid – 19 cases stand at 59,001, total tests conducted stood 519,140; number of deaths stood at 1,112 and number of discharged persons is 50,452. According to the Nigeria Centre for Disease Control (NCDC), Lagos State has the highest number of confirmed cases with 19,542 followed by the Federal Capital Territory with 5,720, Plateau State 3,451, Edo 2,628, Rivers 2,453, Kaduna 2,426 and at the bottom line Zamfara has 78 active cases, Yobe 76, and Kogi State has 5 cases. The Nigeria Environmental Climate during this period of Covid- 19 pandemic has been characterized with several Demographic and Social challenges. These constraints no doubt have had adverse effect on the society.

Preventing the spread of Covid – 19 pandemic in Nigeria

The Corona virus (Covid – 19) pandemic has been faced with several challenges across the globe. Hence, it is pertinent to curtail its spread. The Nigeria Centre for Diseases Control (NCDC). Yosra et al (2020), Rabiu (2020), Meghendsa et al (2020) and Olaseni, Olaseni (2020) identified the following fundamental precautions in effectively curtailing the pandemic. The Precautions include the following:

Precautions

1. Maintain a minimum of five feet distance between yourself and any other person who is coughing or sneezing.
2. Any person experiencing persistent sneezing or coughing should avoid and maintain social distance.
3. Stay at home if you have symptoms of fever, dry cough or difficulty in breathing.
4. Avoid self medication if you are sick. You should consult your doctor or call the NCDC toll free number on 0800-970000-10.
5. Always wash your hands with soap and running water.
6. Always use an alcoholic based hand sanitizer.
7. Avoid all non-essential journeys both within and outside the Country.
8. The frequent use of vitamin C is capable of boosting your immune system, you are encouraged to take it
9. Keep yourself updated with the relevant agencies, media, Ministries of health to get yourself abreast on the recent development of the pandemic.
10. Observe hand and respiratory hygiene as much as possible.

Methodology

This research uses the descriptive survey design. This technique involves reaching respondents using a structured questionnaire. The population of the study is the entire people of Kogi State which is estimated as 3,314,043. The structured questionnaire comprised of both demographic information of respondents and the descriptive questions bordering on both decomposed variable. Moreso, considering the large number of the population the research reached a sampled size of 400 using the Taro Yamane statistical formular. The Yamane formular is adopted using the following technique.

$$n = \frac{N}{1 + N(e)^2}$$

Where n = sample size
N = Population
e = Error margin (5%)

Therefore:

$$n = \frac{3314{,}043}{1+3314043\ (0.05)^2}$$

$$n = \frac{3314043}{1 + 03314043(0.0025)}$$

$$n = \frac{3314043}{1 + 8285}$$

$$n = \frac{33144043}{8286} = 400$$

Therefore, the sample size is 400. However, out of the total of 400 questionnaires distributed only 364 respondents duly completed and returned their questionnaire given a retrieval rate of 91%. The demographic information of the respondents were analyzed using frequencies and percentages while the research hypotheses were tested using chi-square statistical tool.

Data Analysis and Results

Table 2: Demographic Information of Respondents

S/No.	Demography	Options	Frequencies	Percentages (%)
1	Gender	Male	156	43
		Female	208	57
		Total	**364**	**100**
2	Religion	Islam	133	37
		Christianity	199	55
		Traditional	32	8
		Total	**364**	**100**
3	Marital Status	Single	100	27
		Married	236	65
		Divorced	24	7
		Widows	4	1
		Total	**364**	**100**
4	Age (in years)	18 – 30	79	22
		31 – 45	178	49
		46 – 60	88	24
		61 and above	19	5
		Total	**364**	**100**
5	Highest Academic Qualification	Illiterate	58	16
		Primary	49	13
		Secondary	165	45
		Tertiary	92	25
		Total	**100**	**100**
6	State of Origin	Kogi	252	69

		Other States	112	31
		Foreigner	0	0
		Total	**100**	**100**
7	Occupation	Trading	91	25
		Civil Servant	162	45
		Farming	78	21
		Others	33	9
		Total	**365**	**100**

Source: Research Survey, (2020).

Table 2 shows the demographic information of respondents. The gender shows that 156 (43%) age female. More so, 133 (37%) age Muslims, 199 (55%) age Christians while 32 (8%) are of traditional religion. In addition, the marital status of respondents shows that 100 (27%) age single, 236 (65%) are married and 4 (1%) are widowed. More so, 79 (22%) fall between the ages of 18 – 30 years, 178 (49%) 31 – 45 years, 88 (24%) 46 – 60 years, 19 (5%) 61 years and above.

Again academic qualification of respondents shoes that 58 (16%) are illiterates, 49 (13%) have primary education, 165 (45%) secondary education while 92 (25%) attended tertiary institutions. The State of origin of respondents shows that 252 (69%) respondent are from Kogi State, 11 (37%) are from other States of Nigeria and there is no respondent that is a foreigner. Finally, the occupation of respondents indicated that 91 (25%) involve in trading, 162 (45%) are Civil Servants, 78 (21%) are Farmers while 33 (9%) involved in other kinds of occupation.

Table 3: Does Corona Virus Pandemic have any Demographic Impact?

Options	Frequencies	Percentages (%)
Yes	212	58
No	152	42
Total	**362**	**100**

Source: Research Survey, 2020.

Table 3 shows that 212 respondents representing (58%) agreed that Corona virus pandemic has Demographic Impact on the citizens while 152 respondents representing (42%) said that Corona virus pandemic does not have any Demographic Impact on the citizens.

Table 4: Does Corona virus Pandemic has any Social Impact on the Citizens

Options	Frequencies	Percentage
Yes	226	62
No	138	38
Total	**364**	**100**

Source: Research survey, 2020.

Table 4 revealed that 226 respondents representing (62%) agreed that the Corona virus pandemic has Social Impacts on the citizens while 138 respondents representing (38%) said that the Corona virus pandemic does not have any Social Impact on the citizens.

Journal of International Relations Security and Economic Studies (JIRSES), Vol. 1, No 1, April, 2021.
Available online at http://journals.rcmss.com/index.php/jirses
ISSN: 2756-522X

Test of Hypotheses

This research tests the two hypotheses using chi-square statistical test;

Formula; $X^2 = \frac{\Sigma (fo - fe)^2}{Fe}$

Where = Fo = Observed frequency
Fe = expected frequency
The degree of freedom is = (r – 1)

(c – 1) = (2 – 1) (2 – 1) = 1

While the level of significance is 5%, the decision is to reject the null hypotheses if F cal > X^2 otherwise the (Ho) will be rejected.

Hypothesis 1

Table 5: Demographical lives of the Citizens are not affected by Corona virus pandemic.

Option	**(Fo)**	**(Fe)**	**(Fo – Fe)**	**Fo – Fe)^2**	**$\frac{(Fo - fe)^2}{Fe}$**
Yes	212	182	20	900	4.95
No	152	182	- 30	900	4.95
Total	**364**	**364**	**0**		**9.9**

Source: **Research survey, 2020**

$X^2 = \Sigma (Fo - Fe)^2$
Fe = 9.9

The calculated value of 9.9 is greater than the critical value of 3.84 at 5% level of significance. Therefore, the null hypothesis that Demographic lives of the citizens are not affected by corona virus is rejected.

Hypothesis 2

Table 6: H_2: The Social life of the Citizens is not affected by Corona virus pandemic.

Option	**(Fo)**	**(Fe)**	**(Fo – Fe)**	**Fo – Fe)^2**	**$\frac{(Fo - fe)^2}{Fe}$**
Yes	226	182	114	1936	10.6
No	138	182	44	1936	10.6
Total	**364**		**0**		

Source: **Research survey, 2020**

$X^2 = \Sigma (Fo - Fe)^2$

$\overline{Fe = 21.2}$

The calculated value of 21.2 is greater than the critical value of 3.841 at 5% level of significance. Therefore, the null hypothesis that the social life of the citizen is not affected by Corona virus is rejected.

Conclusion

From empirical evidences emanating from this study, it revealed that the novel Corona virus pandemic has affected by the demographic and social lives of citizens of Kogi State. Therefore, this has pose serious constraint to demographic and social interactions in Kogi State.

Recommendations

This study, having explored the empirical and theoretical dimensions showing the demographic and social effects of the Corona virus pandemic on the citizens, it recommends that demographic and social constraints are stack realities of the novel Corona virus across the globe, hence, all preventive measures recommended by several agencies such as World Health Organization, State and Federal Ministries of Health and the Nigeria Centre for Disease Control (NCDC) should be strictly adhered to.

References

Chinenyenwa, O; Adeleye, S.B. Tauseef, A. (2020). Covid – 19 and Nigeria. Putting the realities in conent. International Journal of infectious diseases. 95.

Gvan, Q.L.X, Wv, P; Wang, L. Zhou,Y; (2020).Early Transmission Dynamics in Wuhan, China of novel Corona virus – infected pneumonia. Journal of medical.

Hussin, A.R. Siddappa, N.B. (2020). The Epidemiology and pathogenesis (Covid 19) outbreak. Journal of Auto-immunity.

Irina, E.K. (2020). Demographic and Social issues of the pandemic. Population and economic 4 (2).

Meghendra, S; Prasenjit, S; Kang, G.J. Achia, M; Kevin B; Murray, P; Kaja, M.A; Samarth.S. (2020). Impact of demographic disparities in social distancing and vaccination on influenza epidemics in urban and rural area regions of the United States. BM infectious disease.

Olaseni, V.M; Plaseni, A. (2020). Covid – 19 pandemic; Impact of socio – demographic factors and parents life orientation on enforced learning in Nigeria. An International Multi disciplinary double blind peer renewed research Journal. 11.

Peter, K.L. (2020) Covid – 19 pandemic: Its origin, implications and treatments. Open journal regenerative medicine. (9).

Peterman,A. Potts, A;O. Donnel, M: Thompson K; Shan, N; Oertelt, S; Van, G.N. (2020) pandemic and violence against women and children. CGD working paper. Centre for global development. Washington, D.C.

Rabiu, M; Kabiru S.A; Ahmad, A.I. Samaila, A. (2020). Analysis of the impact of Corona virus outbreak on the Nigeria Economy. American Journal of Environmental and Resources Economics. 5 (2)

Ren, I.L. Wang, Y.M; Wu, Z.Q, Xiang, L; Gvo, T; XuGa) (2020). Identification of a novel Corona virus causing severe pneumonia in human. A descriptive study. Chinese Med. Journal.

Rosstut, (2020). Operational data on natural movement of population March, 30th 2020.

Suliman, K; Siddique, R; Muhammed A.S. Ashaq, A. Jianbo L; Qian, B; Nadia, B; Mengshou, Z. (2020). The Emergence of a novel Corona virus (SARS – Covid – 19). Their Biology and therapeutic options. American society for microbiology.

WESCO (2020). https://. En.unesco.org/covid19/educational response.

Wang, W; Tang, J; wei, F. (2020). Updated understanding of the outbreak of 2019 novel Corona virus (2019 - n Cov) in Wuhan, China Journal of Medical virol. 92 (4).

World Health Organization (2020).Press Conference on Novel Corona virus outbreak.

Wu, Y.C; Chen, C.S. Chan, Y.J. (2020). Overview of the 2019 novel Corona virus (2019 – N-Cov): The pathogen of severe specific contagious pneumonia (SSCP). Journal of China Medical Association.

Yosra, A.H; Mohammed, F; Ahmed, E; Ahmed S. Scott, P.K; Awad, A.S. (2020). The Covid – 19 pandemic. A comprehensive review of taxconomy, genetics. Epidemiology, diagnosis, treatment and control. Jounral of clinical medicine. 9, 1225.