

Full Length Research Paper

Knowledge and adherence to social distancing guidelines in Nigeria during the COVID-19 pandemic

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Social distancing refers to actions or steps taken by an individual or groups of individuals with the main purpose of reducing physical and social interaction to curb the spread of infectious disease. This study sought to determine Nigerians' knowledge of social distancing and why most people do not adhere to the guidelines amid the COVID-19 pandemic. A non-probability sampling method was used for this study; data were generated from respondents who filled an online form distributed on all social media platforms. All respondents living in Nigeria were included in the study while those living outside at the time of the survey were excluded. Results from the survey revealed that most Nigerians are knowledgeable about social distancing guidelines but observed low or non-adherence to the rules. This non-compliance was partly attributed to poor knowledge of the guidelines due to inadequate information from the government, and majorly due to lack of basic amenities, poverty and hunger. Further research and policies on the best avenue of reaching this group of Nigerians with a substantial economic package, an improvement on information dissemination on social distancing guidelines will make a great difference. Finally, the authorities and policymakers can develop programmes to prepare citizens for the eventuality of a future pandemic.

Key words: Adherence, social distancing, knowledge, guidelines.

INTRODUCTION

Social distancing, according to Public Health England, can be defined as actions or steps taken by an individual or individuals to reduce social interaction amongst people. Such measures help to diminish the transmission of infectious disease during an outbreak of a disease. Infectious diseases are typically controlled by reducing contact between both infected and asymptomatic persons

from the non-infected populace. Social distancing, therefore, is a terminology used to describe these personal measures aimed at reducing the spread the infections (Glass et al., 2006). Social distancing interventions include the reduction of social contacts, school closure, workplace number reduction and home isolation.

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These guidelines were shown to be effective during the influenza pandemic in most countries (Horvath et al., 2006.).

Apart from the regular hand washing, the social distancing guidance by National Health Service (NHS) of the United Kingdom states a > 2-metre distance between individuals, social isolation which requires individuals to remain indoors except for essential purposes (National Health Services <https://www.gov.uk/government/publications/covid-19-guidance-on-social-distancing-and-for-vulnerable-people>). These non-pharmaceutical methods (NPM) aim at controlling infections and embrace the public involvement (individuals and community can implement) when healthy thus reducing exposure to the virus or affecting others if they are already infected. It involves remaining at home if the individual feels ill (self-isolation), the use of personal protective equipment (PPE) such as mask-wearing and hand hygiene. Others include respiratory hygiene (catching coughs and sneezing into tissues, personal distancing, social distancing (cancelling or deferring large gatherings) and changing workplace environments. Community views on social distancing are uncertain because of their perceived hostile economic and social effects (Teasdale et al., 2014).

Current research on social distancing has shown that distrust in government, apprehensions over the family source of income, misperceptions and misinformation contribute to low compliance with social distancing guidelines (Baum et al., 2009).

Also, with a novel strain of a virus that can be spread through respiratory droplets, social distancing appears to be the simple and easy means available to limit the spread. The major aim of social distancing interventions is to decrease the total disease rates, reduce the burden on the health service and death associated with the pandemic; reduce and delay peak rate while creating time for drug administration and if possible, vaccine development (Kelso et al., 2009).

Currently, there is no published data with supporting evidence on the knowledge and adherence of Nigerians to social distancing guidelines, especially concerning the COVID-19 pandemic. This qualitative study aims to address this gap in knowledge of the compliance of Nigerians to social distancing and help in policy formulation, create awareness on how issues should be communicated to the public on social distancing.

Objectives

Presently in Nigeria amidst the pandemic, it has been observed that there is low or non-adherence to these social distancing guidelines. This observation prompted this present study to determine how knowledgeable Nigerians were about social distancing guidelines. It also

sought to explore reasons for the deliberate disobedience of these guiding principles.

METHODOLOGY

Research design

An online survey was run between 28th April and 5th May, 2020 which was 3 weeks after the Nigerian government commenced the lockdown. A non-probability sampling or convenience method was used for this study, which has the advantage of recognising problems, defining varieties of substitutes and gathering other types of non-inferential data (Patton, 1990). The demographic characteristics for the study included age, sex and location, multiple choice and questions with pre-defined answers were added to record the opinion of participants on social distancing and COVID-19. The online survey was then generated and 675 responses were received.

The use of online survey forms was ideal for data collection during the pandemic due to the lockdown; it also has the advantage of obtaining information from a large and wider geographical distribution. Likewise, web-based surveys create a unique opportunity for the researcher to collect data through the internet (Lefever et al., 2007). The online survey was arranged to offer different age ranges, gender choice, geographical location, aimed to achieve the research objectives.

Data collection

Participants were requested to complete a very brief survey questionnaire with an average completion time of 3.11 min to provide the needed information. We used a combination of social media platforms such as Facebook, Instagram, WhatsApp and twitter handle to disseminate the web link. Respondents were also asked to share the web link on their timeline and pages and to social media groups. An inclusion and exclusion criteria were set for the study to include participants residing in Nigeria at the time of the survey and exclude any Nigerian not residing during the lockdown period.

The survey questions aim to determine the knowledge of social distancing and the reason for low or non-compliance with the guidelines during the pandemic. The sample size was calculated based on the formula $(\text{Sample Size } (n) = (Z\text{-score})^2 * \text{StdDev}^2 / (\text{margin of error})^2)$, with a confidence level of 95% and a 5% error margin (<https://www.qualtrics.com/experience-management/research/determine-sample-size>).

RESULTS

The survey was run between the 26th of April till the 10th of May 2020 and a total of 675 participants completed the online form and from the different geopolitical zones in Nigeria. Results from the survey were divided into three parts: demographics, knowledge of social distancing and response to social distancing.

Demographics of participants

The demographics summarised in this section are age,

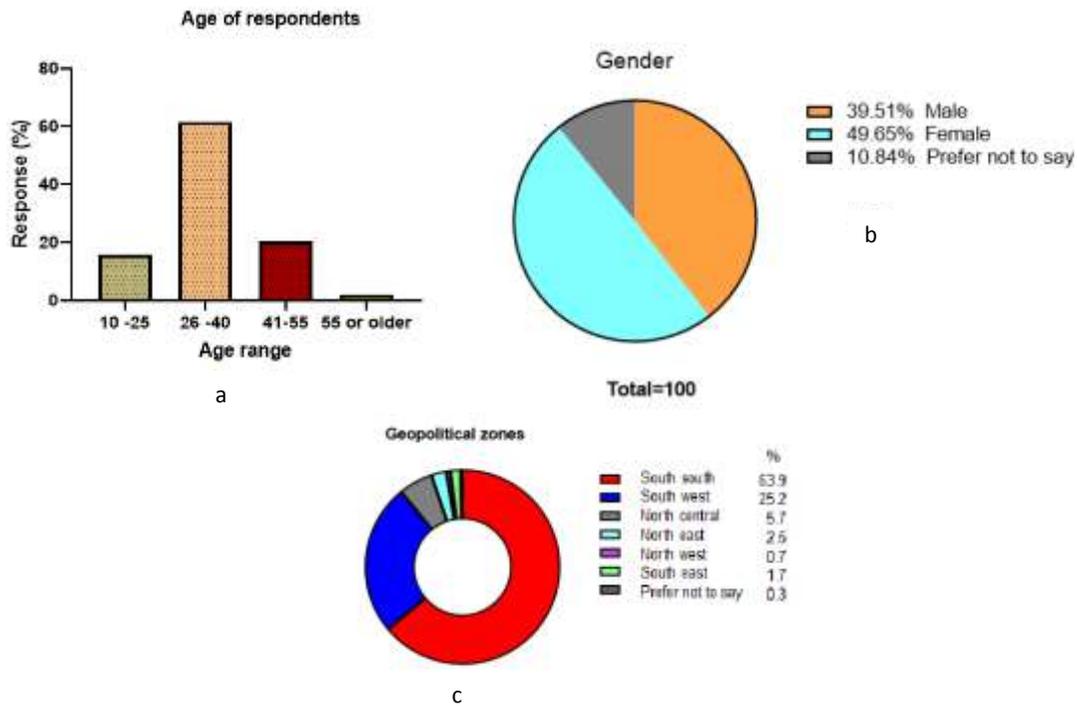


Figure 1. Respondents demographic.

gender and geographical location (Figure 1).

The histogram (a) shows the age ranges of the respondents while the pie charts illustrate the demographics of the respondents in terms of gender and geopolitical zones in Nigeria.

The result in Figure 1a shows that 60% of respondents belonged to the age range of 26 to 40 years, 20% were in the 41-60 range, 17% in the 10-25 range and 3% in the 55 and above category. A total of 49.65% were females, 39.51 were males while 10.84% preferred not to disclose their gender status (Figure 1b). 63.7% of the respondents for the study was from the south-south geopolitical zone, 25.2% from the south-west and 0.7% from the North-west (Figure 1c).

The highest number of respondents were in the age range of 26- 40 and the reason can be attributed to this age range being proficient with the use of technology and operation of mobile devices. Respondents in this age range thus will find it easier to fill an online survey form compared to other age groups. This age range is also active on most social media platforms and could assess the form on these platforms than the other age groups with decreased social media time. There was a gender bias among the respondents in this study; almost 50% of the participants were females followed closely by the male category. The reason for this difference is not known but could also be linked to the use of social media platforms by different gender.

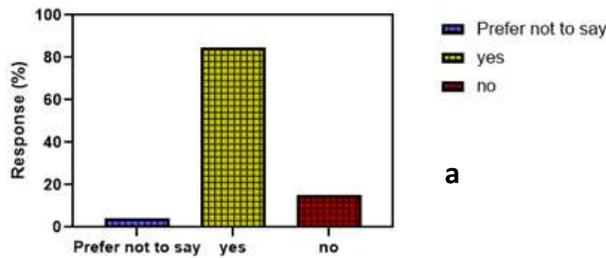
More than 60% of respondents were from the south-south geopolitical zone of Nigeria, so the result tends to promote the views of those residents in the south-south. However, the study still provides insight into why some Nigerians do not observe social distancing guidelines. It will also lay a foundation for other researchers to carry out such studies in the other geo-political zones.

Knowledge of social distancing

The results in this section demonstrate the knowledge of the respondents about social distancing guidelines. Most Nigerians denounce the COVID-19 pandemic in Nigeria and refer to it as a ‘western gimmick’. Such scepticism can create distrust amongst the citizens, the result in Figure 2a shows that majority are confident that the disease is in Nigeria.

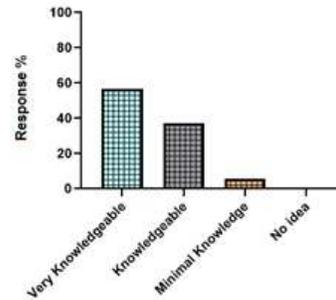
About 57% of the respondents were very knowledgeable about social distancing guidance, and 5,41% had minimal knowledge of what the term means. When asked where they heard about these guidelines, 50.97% learnt it from social media, 39.16% from the media, 5.53% from family and friends while the rest 4.5% got the information from other sources. Over 80% of respondents considered The information obtained from the different sources and a minimal 4% felt the information was not useful to them.

Do you believe there is corona virus (COVID-19) in your city?



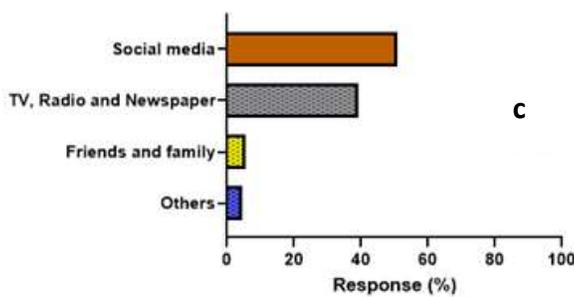
a

How will you rate your knowledge of social distancing?



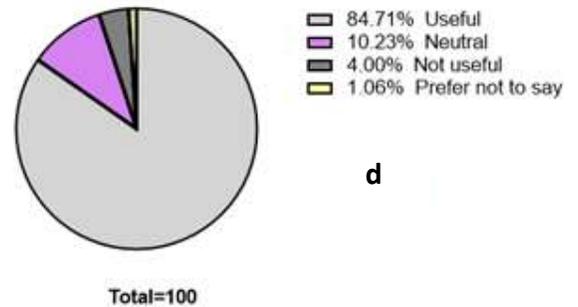
b

Where did you hear of social distancing



c

How useful has the information on social distancing been?



d

Figure 2. Knowledge and information on social distancing.

The histogram (3a) shows the percentages of Nigerians that believe the pandemic is in Nigeria. The larger majority, 85.65%, responded yes to the question, 15.35% response was no while the rest 4.35% preferred not to say. Figure 2b rates the knowledge of respondents about social distancing. Figure 2c summarises the source the respondents got the information on social distancing, and the pie chart (Figure 2d) illustrates the usefulness of the information.

Response to social distancing

After the World Health Organization declared COVID-19 a pandemic, government all over the world made efforts in educating their citizens about the disease and social distancing guidelines. Respondents had divergent opinions about the effort of the government in educating the citizens about social distancing guidelines. About 36.747% were satisfied with the effort the government has put in place to inform the citizens while 30.36% were dissatisfied. 26.51% of the respondents were neutral about governments’ effort while a minuscule 0.45% preferred not to say. A large percentage of respondents believe that adhering to social distancing guidelines

during the pandemic is important and people should comply with it.

Though the respondents support social distancing, most citizens were seen not adhering to the guidelines. The reason for the low or non-compliance was hunger, poverty and lack of basic amenities.

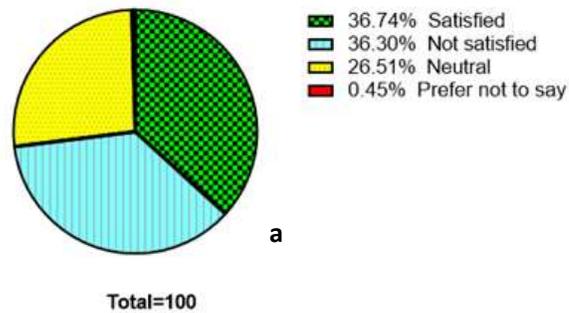
The satisfaction of respondents on social distancing information is illustrated in a pie chart in Figure 3a, while the histogram in Figure 3b depicts that it is important to adhere to social distancing during the pandemic. The histogram in Figure 3c illustrates the reason why citizens have not complied with social distancing.

DISCUSSION

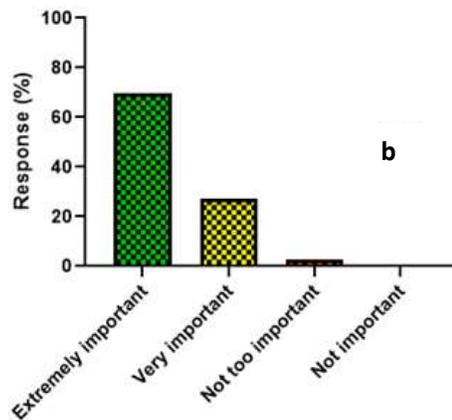
The declaration of COVID-19 as a pandemic in March 2020 changed social relations and physical interactions amongst humans. Social distancing guidelines were introduced to help curb the spread of the virus. The knowledge and complying with social distancing guidelines are therefore very important since there is no known cure or vaccine for the disease.

It is evident from the respondents that they understand the term ‘social distancing’ and the importance of

How satisfied are you with the government effort on enlightening the citizens?



How important do you think people should comply with social distancing



Why do you think people do not observe social distancing?

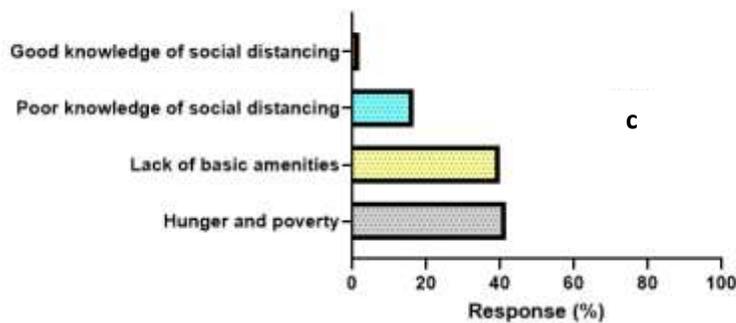


Figure 3. Response to social distancing.

adhering but observed that most Nigerians do not adhere to these guidelines. Various factors have been linked to the outright disregard for the non-pharmaceutical means of curbing the spread of the virus.

Though over 80% of respondents are convinced the pandemic has spread to Nigeria, some respondents were sceptical of COVID-19 cases in Nigeria. Such a view, therefore, makes them to conclude that the virus is not in Nigeria. Such conflicting views which have been

expressed on social media platforms, WhatsApp broadcast messages provide confusing information and distrust for the government. With such contradictory messages disseminated to the citizens, there is bound to be a disregard for policies that are meant to protect such as social distancing.

Despite expressing their knowledge and adherence to social distancing, respondents felt the non-adherence displayed by others is mainly due to the lack of basic

amenities, poverty, hunger and not poor knowledge of social distancing guidelines. Most Nigerians grapple with poor electricity, lack of good drinking water and roads which should be citizens' right. So the affluent ones provide these basic needs for themselves leaving the poor and underprivileged to depend solely on the government. These groups of Nigerians cannot afford a power generating set to provide electricity and provide water at home like others. Therefore, they are forced to get drinking and domestic water in public places or from water vendors. Also, the lack of constant electricity propels residents to hang out at places where such facilities can be assessed, consequently observing social distancing rules becomes difficult.

Poverty has been a major problem in the underdeveloped countries and Nigeria is not an exception. Poverty is defined as a condition where a community or an individual do not have the finances for the necessities of life considered and accepted by society (James, 2019). Most Nigerians live in abject poverty, without access to basic amenities and lack the finance to survive for a day without daily paid jobs. Such groups of people will disregard any social distancing guidelines with the singular aim of staying alive.

The Federal Government of Nigeria announced palliatives to help families during the pandemic, but this process has been politicized and shrouded in mystery. The distrust citizens have towards the government has not helped the situation, because they are confident that the government does not care about their welfare.

Conclusions

The study has also shown that the pandemic has negatively affected the poorer Nigerians and they were willing to sacrifice their wellbeing than keep social distancing guidelines. Despite the limitations of this study, a couple of strong points were expressed by the respondents which can assist the authorities to formulate transparent policies.

Regaining the confidence of the citizens will help Nigerians abide by policies from the government and also, strategies should be put in place to reach poorer Nigerians with substantive economic packages.

Finally, the development of programmes to prepare citizens for the eventuality of a future pandemic would be a welcomed idea.

Study limitations

A key limitation of the survey was that participation was restricted to the possession of an internet enabled phone or a laptop, and there was also challenge related to poor network. Also, it is worth acknowledging that the use of

of a web-based survey prevented those that did not know how to use internet-enabled phones to participate in the study. Likewise, people without an email address or social media platform could not participate in the study. Furthermore, a larger sample size would have generated more accurate outcomes and results.

CONFLICT OF INTERESTS

The authors have not declared any conflict of interests.

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