

**COVID-19: ECONOMIC IMPACT ON ESSENTIAL NEEDS OF RESIDENTS OF USELU
COMMUNITY**

BY

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**BEING A PROJECT PRESENTED TO THE DEPARTMENT OF URBAN AND REGIONAL
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NATIONAL DIPLOMA (HND) IN URBAN AND REGIONAL PLANNING**

NOVEMBER, 2022

DECLARATION

I hereby declare that this report entitled “**Covid-19: Economic Impact On Essential Needs of Residents of Uselu Community**” is the product of my personal research work carried out under the supervision of TPL. JIMOH B.A.

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CERTIFICATION

This project work titled “**Covid-19: Economic Impact On Essential Needs of Residents of Uselu Community**” has been assessed and approved to meet the requirement for the award of Higher National Diploma (HND) in the Department of Urban and Regional Planning, Auchi Polytechnic, Auchi.

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DEDICATION

This project is dedicated to Almighty God, my parents Mr. and Mrs. Olasupo for their continuous hard work leading to this moment and to Dodo Mariam Iyesomi of blessed memory.

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First and foremost, my profound gratitude goes to the Almighty God for His infinite mercy and love over me, who in his loving kindness brings this programme to a successful completion.

My sincere gratitude goes to my father and mother for their love, endless support and encouragement throughout the course of this programme.

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ABSTRACT

Measures implemented by government to contain the spread of COVID-19 have led to direct income and job losses and for household worldwide. This report analysis how the pandemic has influenced the ability of residents of Uselu Community in Edo State Nigeria to meet their food and essential need and how they were able to recover from the economic downturn. The report is mainly based on data collected through survey collected. The questionnaire has the total 23 questions focusing on the livelihood situation, essential needs, food security and safety. The objectives of this study include; to examine the effect the covid19 pandemic has on the residents, and to identify strategies and measures that will help the residents recover from hardship caused by the pandemic and to investigate and to offer solutions.

CHAPTER ONE

1.0 INTRODUCTION

1.1 Background to the Study

The coronavirus disease of 2019 (COVID-19) pandemic gripped the world with a shock, thereby overwhelming the health system of most nations. The World Health Organization (WHO) declared the novel human coronavirus disease (COVID-19) outbreak, which began in Wuhan, China on December 8, 2019, a Public Health Emergency of International Concern (PHEIC) on January 30, 2020 (WHO, 2020). With over seven million cases globally as of June 7 (2020): United States (over two million cases), Brazil (over 700,000 cases), Russia (over 500,000 cases), and in Africa, South Africa (over 54,000 cases) and Egypt (over 38,000 cases) bear the greater brunt. Following this WHO declaration, the Coronavirus Preparedness Group was constituted on January 31 in Nigeria (a country with 36 states and a Federal Capital Territory [FCT]).

WHO categorized Nigeria as one of the 13 high-risk African countries with respect to the spread of COVID-19. Nigeria is also among the vulnerable African nations, given the weak state of the healthcare system (Marbot, 2020). In Africa, there are still communities without healthcare facilities, apart from the scarcity of health workers (Amzat, 2011). The projection is that Africa could bear the final burden of the COVID-19 pandemic if the countries do not institute effective measures to combat the pandemic.

Sociologically, the pandemic has caused global social disruption by limiting global social relations. The idea of “social distancing” negates regular social interaction, which is the bedrock of human society (Amzat and Razum, 2014). A contagious disease of global health importance also disrupts the usual norms of close physical contacts since the disease transmits through contact with individuals who already contracted the disease. COVID-19 deglobalizes the world in terms of human migration with airports shut, and social events (sports, festivals and the like) postponed indefinitely. The "stay-at-home" campaign and proscription of (large) social gatherings mean that social interaction has been limited. Globalization, which signifies compression of time and space, aids the transmission of diseases on a global scale, facilitating the spread of COVID-19. The world has been witnessing global trade, movement of people, and the globalization of health (Youde, 2020). The global transmission of diseases is one of the dysfunctions or latent functions of globalization, which offers both opportunities and catastrophes.

The world is a global village; hence the health of individuals is intrinsically linked irrespective of distance. Beck, 1992, Beck, 1999 and Giddens (2002) introduced the idea of risk society theory. The theory is concerned with the unintended and unforeseen side effects of modern life, which backfire on modernity (itself) (Wimmer and Quandt, 2006). These side effects change human society: a health risk in Wuhan (China) becomes a pandemic, through human migration, affecting all countries of the world, with several thousands of deaths. As the world is being de-territorialized, facilitating trade, communication, and information, it is also prone to (health) risks. Beck (1992) noted that the world reflects the creation of health hazards, which jeopardize human living conditions at a global level.

This theoretical background about pandemic-induced disruption and risk explains the globalization of COVID-19. It is, therefore, not surprising that COVID-19 has engulfed the world with the resultant socio-medical impairments. Nigeria also faces the growing burden of COVID-19. In this context, this paper assesses the economic impacts of COVID-19 on residents of Uselu in Benin-City.

According to the Nigerian Centre for Disease Control (NCDC), the training of the rapid response teams across the 36 states in Nigeria was concluded in December 2019. On January 28, the NCDC further revealed that a Coronavirus Group had been set up to activate its incident system to respond to any emergency. Additionally, the NCDC worked with 22 states in Nigeria to activate their emergency operations centers to manage and link up with the national incidence coordination centers (Ihekweazu, 2020). Although the government had strengthened the surveillance at the airport since January 2020, Nigeria recorded its COVID-19 index case that was imported from Italy, on February 27. This raised concerns about the effectiveness of airport surveillance and, by extension, the country's general preparedness. The index case (an Italian) had visited some other states of the federation before testing positive for COVID-19. The pre-COVID-19 preparedness was grossly inadequate.

Nevertheless, the onset of COVID-19 sent waves of panic across Nigeria, like in every other country. Due to globalization, the health risk of communicable diseases could be pandemic (Martin, 2005, Tausch, 2015). Trade and travels facilitate the flow of people, who incidentally could move, carrying a health risk (in this case: the coronavirus). From one imported index case, many countries (including Nigeria) face tremendous health challenges with multiple cases and deaths. Since the first index case in Nigeria, the number of cases has been increasing since then.

Measures implemented by governments to contain the spread of COVID-19 have led to direct income and job losses for households, in particular urban households, worldwide.

Nigeria has been one of the first countries to detect COVID-19 cases in Sub-Saharan Africa. As a response, the Nigerian government implemented strict measures. While those restrictions caused many job losses particularly from March to June especially in urban areas, the country's economy was at the same time also highly impacted by drops in oil prices, leading Nigeria into a phase of recession.

The peak of the first wave of COVID- 19 was observed in summer, a second, even bigger wave hit 6 months later. The strongest containment measures were implemented during the first wave, in particular in Lagos, Ogun and Abuja and those measures were gradually weakened from June onwards. The government increased economic support from April onwards. This report analyses how the pandemic has influenced the ability of urban households in Nigeria to meet their food and essential needs, and if households were able to recover from the economic shock in the mid-term. It compares the situation of urban households of usele in benin city, and of urban slum dwellers from better-off areas in the same vicinity.

Almost half of households in Nigeria were highly impacted by strict lockdown measures during the first confinement in March 2020. The recession Nigeria's economy is facing put an additional strain on the economic recovery of households after the end of the lockdown. With the end of the strict lockdown measures in June 2020, a phase of recovery started, which has been quicker for the rural population, which reached pre-pandemic levels of employment in July. Urban workers were not able to recover back to these levels yet but reached good employment in October.

Urban households strongly depend on markets to fulfill their essential needs, including food needs and housing. High living costs in the city make them vulnerable to income shocks such as through COVID-19, forcing them to choose between meeting different essential needs. The Multidimensional Deprivation Index (MDDI) is a composite score of deprivation in different dimensions of essential needs that allows looking at deprivations in a more holistic manner and understanding where households face largest gaps. For the purpose of this report and based on the availability of data the index includes shelter crowding, health access, water availability, food security and safety. Households are considered as multi-dimensionally deprived, if they are

deprived in more than one third of dimensions. Internally displaced people, households with several children, households that live in urban slums are most often multi-dimensionally deprived.

Vulnerability of households also differs by region- households in the Northern part of Nigeria are more often deprived in several dimensions compared to the Southern part. Overall, the population in rural areas is more deprived than the urban population, a pattern that can also be observed in other countries. However, disaggregation into slum areas is important to understand the full picture, as urban slum dwellers are more often deprived than the rural population. Households residing in slums are the most deprived in all dimensions. Health is the dimension with the largest gaps for this group, most concerning in times of the pandemic, which might also lead to disruptions in treatment for other chronic diseases such as HIV. Food insecurity is a common problem in urban slums. Households residing in urban slums are moderately or severely food insecure compared to those in rural areas and those residing in non-slum urban areas. The most vulnerable group is displaced households, with most around being food insecure, including in severe food insecurity.

Food security levels are highly influenced by demographic factors. Households with more elderly members or children, female headed households as well as larger households tend to be more vulnerable to food insecurity.

Health systems are in general stronger in urban areas in comparison to rural areas in Nigeria, and better in the Southern regions than in the North of the country, as based on Africa COVID-19 Community Vulnerability Index (CCVI). Comparing urban areas have stronger health systems than rural areas. This is also reflected in the results from the web-survey, where households in rural areas and in the North more often reported to have limited access to needed health care. As already seen in the overview of other essential needs, the situation of the population living in rural areas, however, is worse than in other urban areas, and also than in many rural areas.

Safety is a concern for a considerable number of individuals. On average, one in every three persons submitted to feel unsafe in the country. Displaced individuals more often report to feel unsafe (one in two persons); followed by individuals residing in Uselu slums and female headed households. While the reasons for feeling unsafe vary between violence in the community, high crime rates, domestic violence etc. for all groups, the main reason for unsafely

stands out for Uselu residents living outside of slums with violence in the community. An increase in tensions or violence in their community since the beginning of the pandemic has been reported by almost half of the residents. Residents were mostly worried about widespread protests, early signs of civil unrest and increased crime rates. Also, secondary data show that widespread protests were at its peak during the time of the pandemic, an increase related to End SARS protests.

From the aforementioned above, this research is aimed at how COVID-19 affected the lives of residents of Uselu community economically and to put in measures that will impact/help the residents recover from the damage and hardship caused by the pandemic. It analyses how the pandemic influenced the ability of households in Uselu community to meet their food and essential needs and how they recovered from the economic shock.

1.2 Statement of the Problem

Uselu market is the major business center for the residents of Uselu community. It has a variety of shops where all you look for in foods and provisions are being sold. It boasts of over 700 retail outlets and wholesale stores. It is the main source of revenue for Egor local government because of the tax and revenue being paid by the sellers and marketers.

But in spite of this, the market is a hub of busy activities daily which during a pandemic is not advised. The Coronavirus disease could easily spread from one person to another and thereby contacting many other people. The closure of Uselu market, wholesale food markets and open-air retail food markets and bans on the informal food sector in Nigeria shut down the traditional marketing system. Market closures prevented transactions between producers, traders, wholesalers, retailers and consumers. With no place for transactions, supply is reduced, prices increase and livelihoods and incomes suffer, creating a major stress on food security. Insufficient and poor access to dry and cold-chain storage may compound marketing problems, leading to increased food loss and waste and lost profits. Without markets, modern agri-food businesses with integrated production, transport and market operations are often the only operators that continue to function. COVID-19's far-reaching impact on economic and social life affected other traditional market outlets as well as consumer demand for food.

As most residents in Uselu consume at least one meal per day outside the home, the closure of restaurants, canteens, and entertainment venues has dried up a huge food market. Food consumption patterns also change as the health crisis converges with an economic one, increasing uncertainty,

triggering coping strategies, increasing demand for certain products. For the residents of Uselu it was a problem of putting food on their table, accessibility to health care and security. The sudden emergence of the pandemic has put the community of Uselu and Nigeria at large under pressure of accessing their basic amenities. This research assess how the pandemic affected the residents of Uselu Community and show measures to be put in place incase another epidemic emerges.



Fig 1.0 Uselu Market

1.3 Research Questions

The research and study endeavors to provide answers to the following questions.

1. What are the effects of the COVID-19 pandemic on the market?
2. What is the effect of COVID-19 on the residents?
3. How can future pandemic on the lives of Uselu residents and the market in general be controlled?

1.4 Aim of the Study

The aim of this research is to analyze the impacts of COVID-19 on the market and its effect on the residents of Uselu Community.

1.5 Objective of the Study

Objectives of the Study include the following;

To examine the effects the COVID-19 pandemic had on the residents.

1. To investigate the effects of COVID-19 on Uselu community.
2. To identify strategies and measures so as future pandemic can be controlled.

1.6 Scope of The Study

This research is to give a clear insight as to how the economy impacted the essential needs of the residents of Uselu community in Benin City. And also the effect of the pandemic on the market will be investigated.

1.7 Significance of the study

This research will prove extremely valuable in explaining the real impact of COVID-19 on the residents of Uselu community. This study will demonstrate the effect and measures to be put in place for residents of Uselu. This study will be useful for government parastatals, health centres, NGOs and the residents at large. Particularly, the study will provide useful insight into the need to provide social security for residents.

1.8 Study Area

Edo state is a developing state with Benin as the state capital, Benin City house different local government namely; Egor, Oredo, ikpoba okha etc, uselu being our case study is located in Egor local government area. Uselu is densely-populated neighborhood of Benin City, Edo State, Nigeria. It is the headquarters of Egor local government area. It is a hub of business, education and a principal traditional home of Benin kingdom. Uselu is the site of the traditional grounds of the Edaiken N'Uselu (Duke of Uselu) palace as well as the palace of the Iyoba of Benin.

It contains a population of over 500,000 (est) people and the main language spoken is bini language. The dominant religion in the area is christainity and a little population of muslims

resides in the area, the ratio of churches to mosques is 4:1. Christian religious gatherings are more dominant in this area. Uselu area has different markets with Uselu Market being the biggest and most populous among all, it is also one of the most preferred Markets for trading in Benin City, it has up to 5,000 active shops and over 2000 people visit the market daily for business transaction. Uselu also has major car/motor packs with “Uselu park” being one of the most popular among others, an estimate of 500 people use this car park daily. There are also other parks where commuters use for intercity movement.

The economy of Egor local government majorly rely on Uselu, there are various tax collectors on the road (TOUTS) that work for the local government. It is also home for corporate firms such as banks, fast food chains and other business related activities.

During the COVID-19 pandemic restrictions and bans were placed in the Country which also extended to Benin City in Edo State. Uselu was shut down as there were bans on public gatherings like markets, churches, mosques, schools and other forms of gathering. Schools and Institutions, Private and Government Firms were not left out as a “STAY HOME” order was issued (Lockdown). People were told to detach themselves from crowded areas and this caused a major decline in the economy at large. Markets and Banks were closed; there was a travel restriction which also makes the flow of capital to the economy decline.

Edo state government has different government owned health centers around the state and Uselu is not left out on the health benefits. There are both private owned and government owned hospitals, though private hospitals are more dominant in the area. These hospitals are up and running, they are up to basic standard. Uselu house the access road to university of Benin teaching hospital (UBTH), the road has been kept in a good state to facilitate quick access to health care from the hospital.

Due to the Lockdown and restrictions many households experienced severe hunger and the economy was hanging on a thread. A month after the first case was recorded; the government lifted the bans on markets and banks but was limited to a certain amount of persons only. This was done to curb the spread of the coronavirus virus pandemic. And on it went, occasionally there would be news of palliative at this or that place and there people went, till finally, a broad relaxation of the rules. There was a cautious optimism about how people needed to go about their lives. For most of the people in Uselu, the experiences of this pandemic would be about how they

tried as much as they could to survive amidst the public health restrictions, speculation about which cure would be the best and conspiracy theories as to the origins of the virus and the vaccines that would render some ease to the world.

1.9 Delimitation And Limitations Of The Study

However, the study has some constrained and limitations which are:

- a. **Availability of research material:-** The research material available to the researcher is insufficient, thereby limiting the study
- b. **Time Constraint-** Time frame was such that most activities relating to the research work most especially in carrying our survey, needed and extra effort and resources for its completion. The extensive retrieval of statistical information or data was not possible because they were not available. It was also difficult to gather many facts on the limited available source due to time constrains. The respondent might decide not to give out some information that is relevant to the research thereby creating a vacuum of problems to the study.
- c. **Finance:** - The finance available for the research work does not allow for wider coverage as resources are very limited as the researcher has other academic bills to cover. Insufficient fund trends to impede the efficiency of the researcher in sourcing for the relevant materials, literature or information and in the process of data collection (internet, questionnaire and interview).

1.9 Study Area

1.9.1 Historical Background of the Study Area

When King Ozolua died in the fifteenth century, he left behind two sons to dispute the royal succession: Esigie controlled Benin City, the kingdom's metropolitan center, while his brother Arhuanran was based in Udo – an important provincial seat 20 miles away. Neither prince was prepared to yield to the other, partisans soon declared for one or the other, and Benin was plunged into a civil war shortly thereafter.

Seeing an opportunity to take advantage of the situation, the hitherto vassal Igala people declared their independence from Benin and seized a swath of territory to its north. In the span of a week, Esigie found himself confronted with what now seemed like the almost certain fragmentation of his father's kingdom. His mother, Idia, is reputed to have stood behind him at this time. By serving as everything from his 9ealized9 to his priestess, she rallied the Binis – including many

that had previously supported Arhuanran – to Esigie's standard. After dealing decisively with her stepson, the royal pair turned their attention to the Igala rebels. Following a hard fought campaign, Benin's supremacy was restored, and the victorious army – with Esigie and Idia at its head – returned to the capital in triumph.

In gratitude for his mother's efforts on his behalf, King Esigie created a new office – that of Iyoba – for her to occupy. Now ranking equal to the senior chiefs of the royal court, the Iyoba was also built her own palace in the town of Uselu, which was thereafter attached to her title as a perpetual fief. She was the first woman in the history of Benin to have such power. Oba Ewuare the Great sent his senior son, Kuoboyuwa, to hold brief for a man called Iken of Uselu, who was a strong powerful warrior who constantly challenged the authority of the Oba and he often prevented Uselu people from paying the annual tributes to the Oba in Benin City. As a result of this opposition constituted by Iken, Oba Ewuare wanted to eliminate him by sending him to the battle front during the war between Benin and Owo. Kuoboyuwa, the senior son of the Oba was to hold brief for him during the period. Iken won the war but he was killed on his way back.

When the Oba realized that Uselu people would react violently if Iken failed to return from the war front, he decided to make the position of his son a permanent one to enable him assume full responsibility of the ruler of Uselu. He therefore conferred on him the title of Edaiken (Edayi Ni Ken) that is the person holding brief for Iken. The Palace of Edaiken was established there. It has since that period become traditional that the first son of every Oba of Benin, is conferred with the title of Edaiken and on coming of age, leaves his residence in the centre of the town for the Palace of Edaiken (Eguae-Edaiken) at Uselu where he remains until when he is called upon to ascend the throne as Oba. The Edaiken of Uselu, like the Oba of Benin his father, also has various title Chiefs under him, apart from the central ones created by the Oba himself. Eguae-Iyoba (Palace of the Queen mother) is located at the lower part of Uselu. It was established by Oba Esigie for his mother Idia the Queen warrior who also exercised a lot of political influence in the administration of the kingdom.

Oba Esigie started this tradition probably to forestall the conflict that would have arisen between his mother and himself over the exercise of political power. An almost independent domain of the Queen mother was therefore carved out for her. Thus it has become strongly –established in Benin tradition that a year or two after the coronation of every Oba, he invests his mother with the title, Iyoba (Queen mother) and sends her to reside at lower Uselu in Eguae-Iyoba (Palace of the Queen mother). If

it happens that the mother dies before the coronation of the son, the body is preserved till a year or two after the coronation to enable the Oba confer the title lyoba on her and later bury her at Eguae-lyoba.

1.9.2 Climate

Climate refers to the characteristic conditions of the earth's lower surface atmosphere at a specific location; weather refers to the day-to-day fluctuations in these conditions at the same location. The commonly used variables that are by meteorologists to measure daily weather phenomena are air temperature, precipitation (for example, rain, sleet, snow and hail), atmospheric pressure and humidity, wind, and sunshine and cloud cover.[24][25] Benin City has a borderline tropical savanna climate (Köppen Aw) bordering upon a tropical monsoon climate (Am). The weather is uncomfortably hot and humid year-round, and generally very dull, especially between July and September. The city is already feeling the effects of climate change, with increases in temperature, humidity and precipitation trends between 1981 and 2015.

1.9.3 Vegetation

The riverine areas of Edo State have mainly mangrove swamp vegetation. The rainforest of the Benin Lowlands is gradually being displaced by rubber plantations. The soil types, here, are the low-productive sand in the south east and the fertile, clayey soil in the North West. The northern fringes of the Plateau have savannah vegetation while the southern part is mainly rain-forest with areas of secondary growth and elephant grass. This is largely due to deforestation. The soil types are clayey or porous red sand. Rubber and oil palm trees grow quite well here. The Northern Plateau has savannah vegetation with the oil palm growing wild. The soil is gravelly in the higher ranges while it is sandy towards the Valley.

1.9.4 Socio-Economic Characteristic Of the Study

The area Uselu is an overcrowded neighborhood of Benin City, Edo State, Nigeria. It is the headquarters of Egor local government area. It is the hub of economic activities in Egor local government.

The host a major market popularly known as "uselu market" with over 2000 shops in the market it largely contributes to the local and state revenue. Banks and other businesses are well positioned in uselu area and meet the needs of residents in the area. The growth of uselu area has doubled since the

outbreak of COVID 19 virus. The more businesses started and also there was increase in environmental health.

Uselu is one of the most popular areas in Edo state, it is well known for been notorious with various cult groups' clashes and also being the location of the Benin Psychiatric Hospital. Having such notorious prowess, parents and schools in the area make sure children are brought up rightly, though because of lack of government intervention in the schools in building good structures that will stand the test of time in uselu area these bad vise's had crept into the school.

1.9.5 Definition of Terms

Pandemic: an outbreak of a disease that occurs over a wide geographic area such as multiple countries and continents and typically affects a significant proportion of the population.

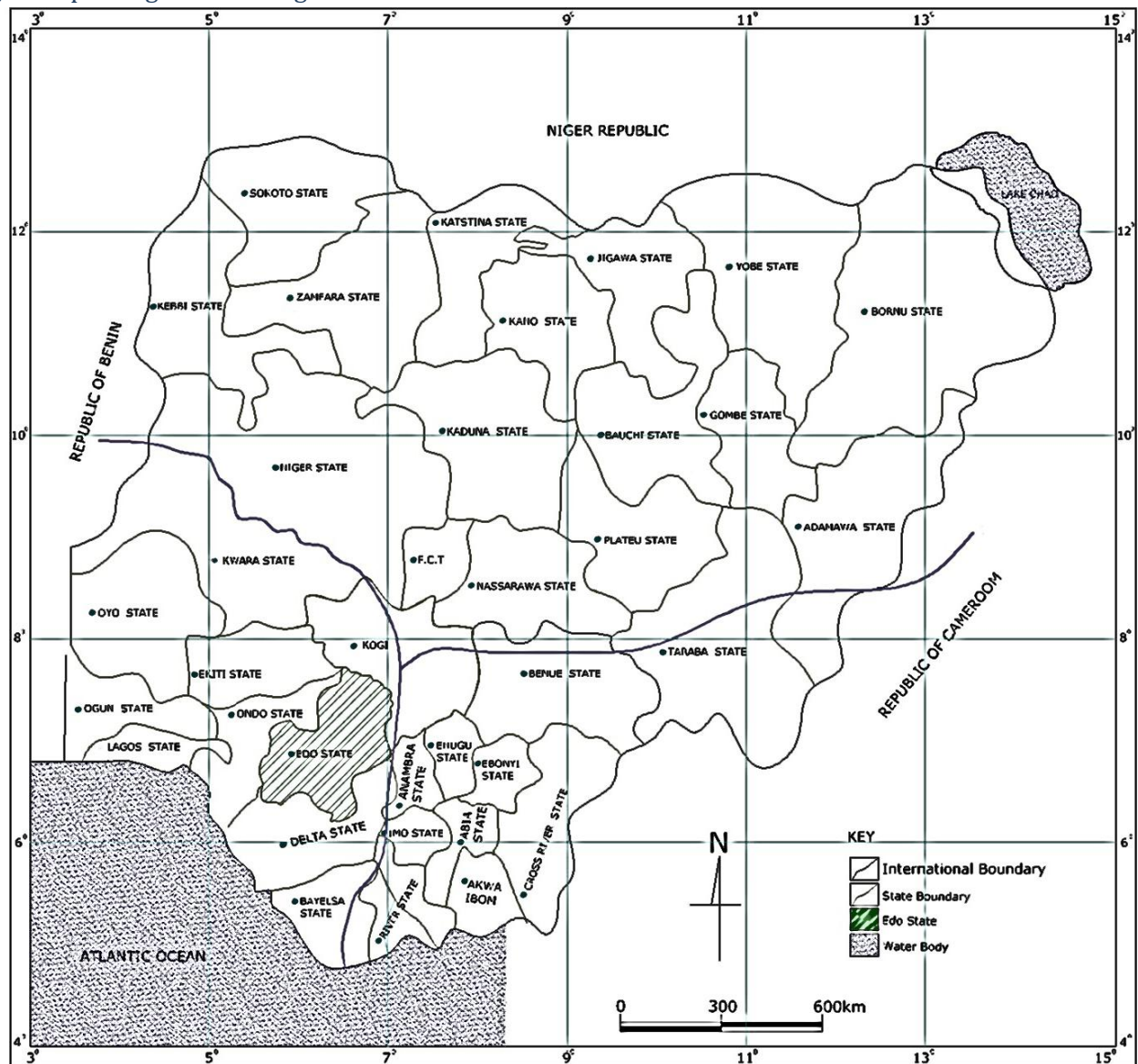
Globalization: the development of an increasingly integrated global economy marked especially by free trade, free flow of capital, and the tapping of cheaper labor markets.

Recession: a period of reduced economic activities.

Insecurity: a state of feeling of anxiety, fear, or self-doubt. Lack of dependability or certainty.

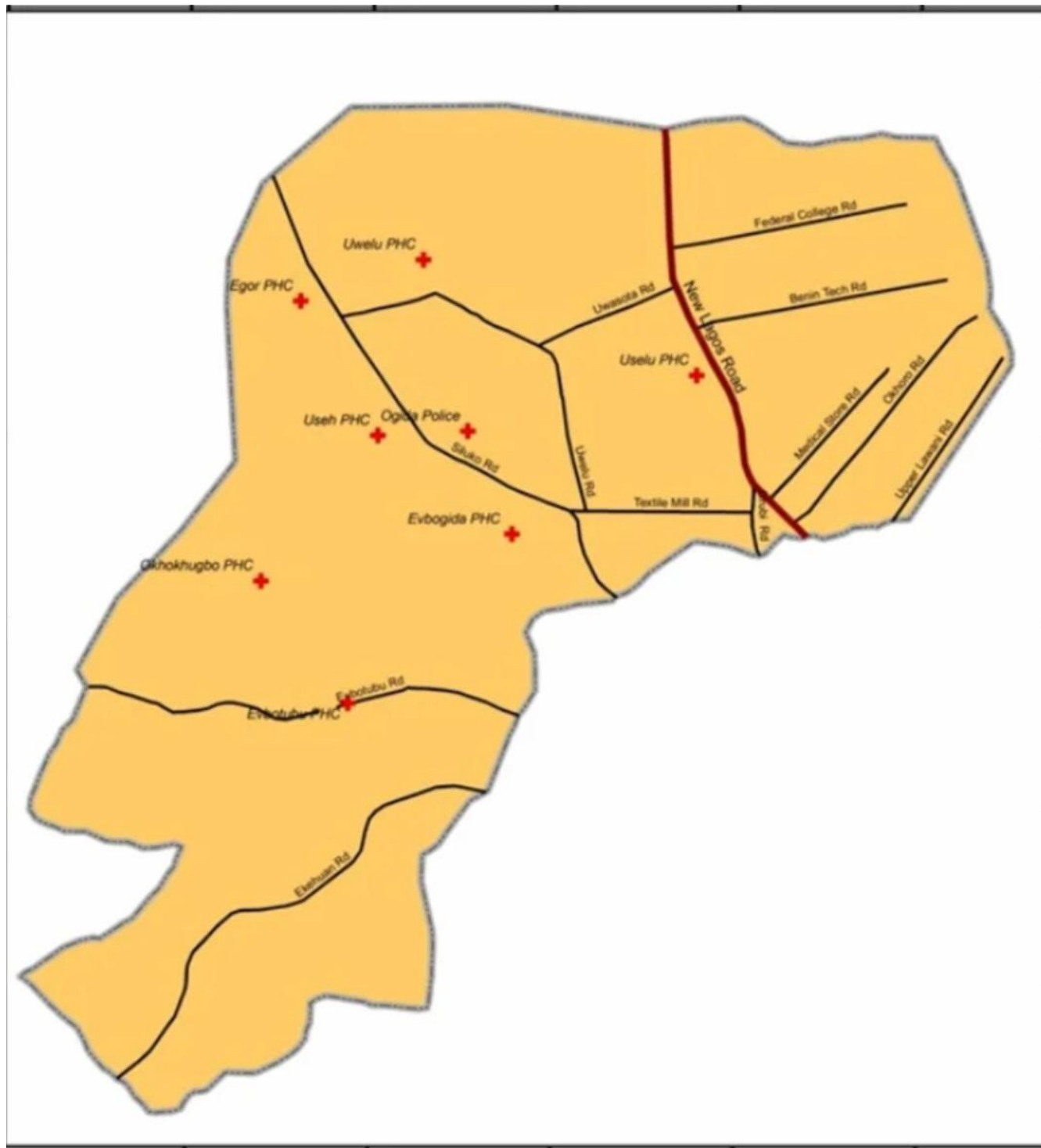
Fig 1.2 Map of Nigeria showing Edo State.

Fig 1: Map of Nigeria Showing Edo State



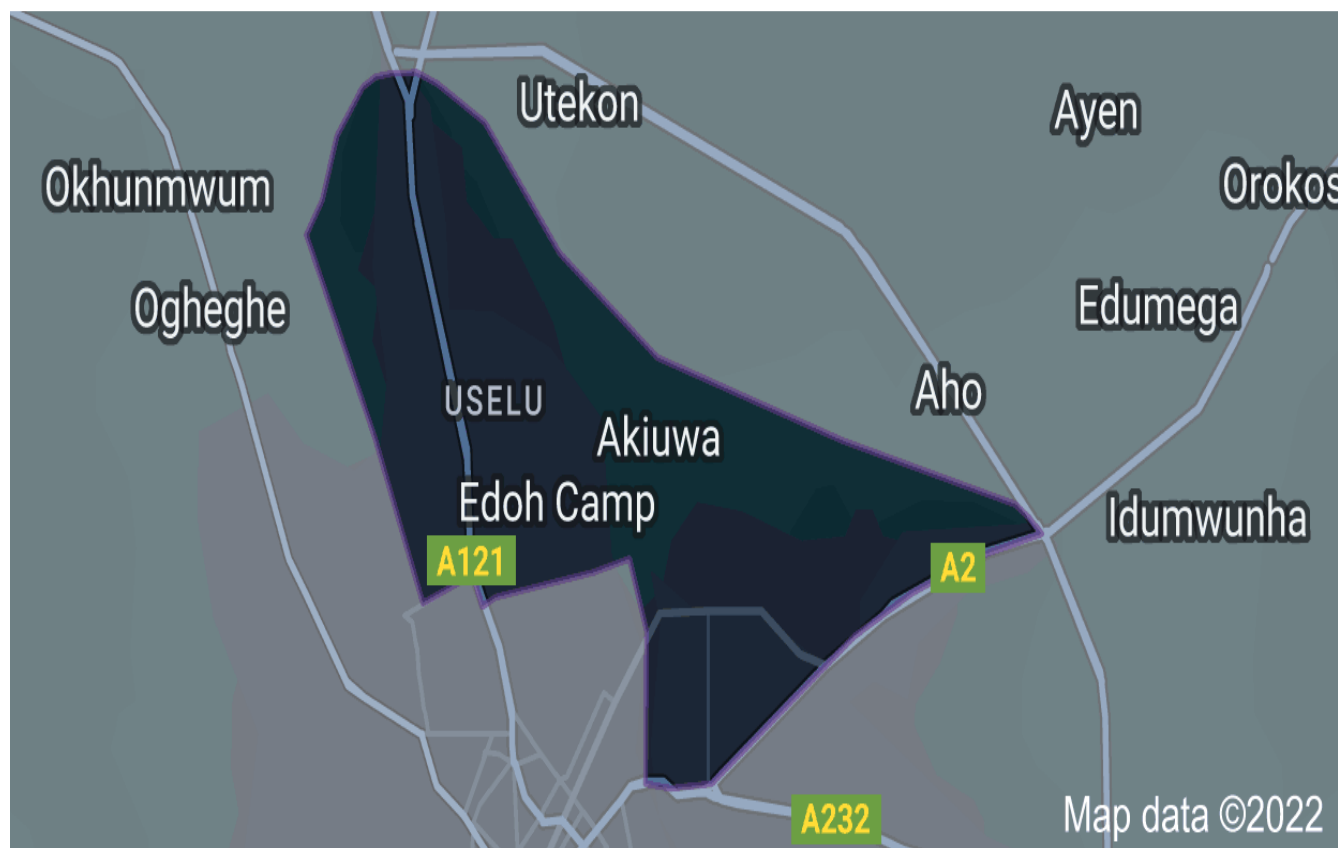
SOURCE: Ministry of Land and Survey, Benin City, Edo State. (2022)

Fig 1.3 Map of Egor Local Government Area



SOURCE: Google Earth Map

Fig 1.4 Map of Uselu Community.



SOURCE: Google Earth Map

CHAPTER TWO

2.0 Literature Review and Conceptual Framework

2.1 Literature Review

This is the second chapter of the study; the chapter comprises the review of past studies by various authors in issues relating to impact of COVID-19 on the essential needs of Uselu community. The essence of this review is to examine the opinions, inputs, contributions, conclusions as well as recommendations of other previous authors under the study. The idea would help the researcher to compare and contrast their findings with the emerging findings of this study.

2.1.1 Covid-19 Impacts on Business and Economy

There has been apprehension across the globe of the ravaging impact of COVID-19 on businesses. It appears that this apprehension is coming to fruition as no solution is in sight. A lot of businesses are crumbling. This is why Ng (2020) stated that impact of Covid-19 would be felt in the capital markets; tourist's industry may go into extinction as result of ban on flights and lockdowns. Ng further said that as a result of ban on flights, Chinese customers have suspended demanding new purchases. Given this scenario, Dubai flourishing economy may experience glut of goods where supply will be higher than demand. Ng (2020) further opined that with Covid-19, the United Arab Emirate cancelled its Expo 2020, and Saudi Arabia did not allow the annual haj pilgrimage to be performed which has been a source of revenue amounting to millions of dollars on a yearly basis. Oil prices summersaulted with the flooding of the market by Riyadh, causing great harm in oil prices. In the same vein, Bianco (2020) stated that Egypt will be losing a whopping sum of US\$1 billion revenue per month in tourism sub-sector. Ng (2020) concluded that the economic impact of Covid-19 will go a long way in having negative impact as the oil price may go down as demand will be to its low ebb. Riboua (2020) opined that as a result of the Covid-19 pandemic, Lebanon has defaulted in a US\$1.2 billion Eurobond payment.

This situation has prevented it from funding ailing health infrastructure as well as preventing it from importing medical supplies. Abioye (2020) stressed that COVID-19 pandemic that is ravaging the world especially in the health sub-sector has made the health workers immobile,

as well as many workers in the health sector losing their lives daily to this virus that has defied seemingly all solutions despite all efforts made by all and sundry. Abioye further stated that with battling with Covid-19 across the globe, emphasis may be shifted to funding the health sector depriving other sectors from receiving attention. This, in the long run may reduce food production, which will invariably make demand exceed supply making food price to increase. This will cause untold hardship to many inhabitants who cannot afford their daily meals. Abioye concluded that as a result of Covid-19, Nigeria is considering the reduction of its budgetary allocation in all sectors as a result of drop in oil prices to 20 dollars per barrel as against the budgeted provision of 57 dollars per barrel. This may in turn affect the monthly allocation to states and local governments in the country. This may also affect payment of salaries to workers. This may have a ripple effect as farmers may not be able to produce because of low patronage as a result of low purchasing power of the people. In another development, Ozili and Arun (2020) maintained that the Covid-19 is affecting the world's economy through social distancing which has invariably led to the shutdown of financial institutions, businesses and events, and moreover, shutdown of investment among stakeholders. The researchers argued that the pandemic may trigger the world into recession.

Akanni (2020) opined that with Covid-19, global economy has badly affected the Nigerian economy through reduction in oil exploration. This reduction in oil demand may plunge Nigerian economy into recession. As a result of the ban on global travel, spending by people may continue to decline. Hotels and hospitality are also hard up facing tremendous demand and patronage. Akanni further reported that in Hungary, about 40 to 50% of hotel reservations have been put on hold. Also, the Covid-19 pandemic is putting at risk a great loss of jobs in leisure and hospitality sub-sector. About 80 million people may lose their jobs in United States of America as a result of flights cancellations. The closure of private educational institutions and schools in Nigeria is having untold hardship on its owners. The researcher queried if this continues unabated many of these institutions may stop the salary of these workers on their payroll. This may have adverse effects on parents who have other needs to cater for. Onyekwena and Ekeruche (2020) stated that prior to Covid-19 pandemic; the Nigerian government had been battling with recession occasioned by drop in the price of oil in 2014. This drop in oil price reduced the country's GDP growth rate to 2.3 percent in 2019. The growth rate further dropped to 2 percent, as a result of drop in oil prices. As a result of this decline, the debt profile soared to a ratio of 60 percent. The researchers maintained that with Covid-19, the debt profile may likely worsen as a result of declining revenue occasioned by falling oil prices. The researchers further stressed

that there will be aggregate demand, while government expenditure will rise. This made government increased its budgetary allocation from 8.83 trillion naira in 2019 to 10.59 trillion naira in 2020. As a result of Covid-19, there is a fall in household consumption in Nigeria as a result of imposition of a lockdown in the entire country. The informal sector contributes a large proportion of its revenue to government coffer. As a result of the Covid-19 pandemic, investments by firms may be greatly affected. It has led to decline in stock prices. This has further increased government purchases to counteract the fall in consumer spending. It may also lead to a fall in global demand for goods and services. This is occasioned by the restrictions on movement of people and border closures. Chilufa (2020) maintained that the Coronavirus (COVID-19) has affected supply chain disruptions due to port closures in China. This has caused multiplier effects as most Africa businesses are in the informal sector which depends solely on goods manufactured in China and shipped to Africa. As a result of the pandemic there has been a resultant decrease in demand by Africans. Importers in China are putting on hold orders due to port closures. In Africa, the virus's global impact is in turn directly affecting local economies as small business depend on goods imported from China and resold to other users. Chilufa further said that no other country in Africa consumes more Chinese products than Nigeria. As a result of border closures many business people have cancelled overseas trips, thereby putting on hold goods manufactured in China. This has greatly affected the economy to close up.

2.1.2 Covid-19 Impacts on Agriculture

Prior to the COVID-19 pandemic, Nigeria's agriculture industry contributed approximately 26.95 percent (22.6 trillion) to the country's GDP of 104 trillion dollars at the end of the fourth quarter of 2020. Unfortunately, the pandemic prevented this contribution from having any effect on the economy, as hunger and inflation rates remained high. To address this, the government implemented feeding palliative measures, which were ineffective due to the length of time between pronouncement and execution. Subsequently, in October 2020, when the warehouses containing these palliatives were found, citizens scrambled for their share of the national cake, causing widespread panic, death, and damage to property. In March 2020, a small bulb of onion was selling for a thousand naira. While Nigerians found it humorous as skits and memes circulated on social media, the food inflation crisis was only getting started. Only time will tell what challenges will be faced in the long term. More demand than supply could push up prices further, and recovery could take more than a few years. The sector accounted for 22.35 percent of total GDP in Q1 2021, up from 21.96 percent in the first quarter of 2020 but down from 26.95 percent in the fourth quarter of 2020. In real

terms, the agricultural sector increased by 2.28 percent in the first quarter of 2021, a gain of 0.07 percent points over the same time in 2020, but a decline of -1.14 percent points over the previous quarter, when it grew by 3.42 percent. The agriculture industry increased at a rate of – 28.61 percent Quarter-on-quarter⁵. As a matter of national strategy, the federal government must encourage the use of technology and innovation to enhance agriculture as a means of accelerating the post-COVID-19 economic recovery. Relevant governments and governing bodies should issue advisories that will attempt to minimize the negative impact on food and food security during and after COVID-19 such as the relaxation of the land border protection policy.

2.1.3 Covid-19 Effects on Urban Planning

The impacts of the global COVID-19 pandemic are still being understood, but it does seem clear that this crisis will make a mark on cities, physically and socially, that will echo for generations. How we plan our cities has always been a reflection of prevailing cultural and technological trends and even major crises. The cholera epidemics in the 19th century sparked the introduction of modern urban sanitation systems. Housing regulations around light and air were introduced as a measure against respiratory diseases in overcrowded slums in Europe during industrialization. The introduction of railroads had an immense impact on national urban systems, and the mass production of the car has led to cities that bleed seamlessly into sprawling suburbs, creating vast city regions. In recent years, digitalization and data have changed the way we navigate cities and how communities mobilize and advocate for change. The COVID-19 pandemic has already significantly altered urban life. The number of people moving around has dropped to unprecedentedly low levels. Work from home is the new normal – for those who can afford it, and for whom it’s even a feasible option to begin with. The fate of millions of small businesses and workers that make urban centers work is up in the air. These changes have sparked a debate about how cities should be built and, perhaps more importantly, how they can better respond to current and future crises. We see five key ways urban planning will be affected in the years to come.

1. Focus on Access to Core Services

The spread of COVID-19 in the world’s most connected urban centers has raised questions about healthy density. Have we become too urban? Most pandemics are inherently “anti-urban,” as The New York Times’ Michael Kimmelman notes. But density is what makes cities work in the first place; it’s a major part of why they are economic, cultural and political powerhouses.

In fact, density is the precondition for effective urban service provision, and far too many people in cities today lack access to basic services, as our World Resources Report, *Towards a More Equal City*, has explored. It's the lack of access to essential services such as water, housing and health care, that has exacerbated the challenge of responding effectively to COVID-19 in many cities. Poor access makes lockdown orders impossible to comply with in some places. Closing this urban services divide must be a priority for cities going forward.

2. Affordable Housing and Public Spaces

How we plan our cities determines to a large extent how resilient they are. Population density without adequate public spaces or proper affordable housing provision will lead to problems. This was the reason many housing laws and regulations were implemented in Europe at the beginning of the 20th century, halting many diseases, for example. COVID-19 may prompt changes too, from temporary measures that make it feasible for people to follow social distancing guidelines to more lasting changes that should focus on improving access to affordable housing and public space like upgrading more informal settlements in place. Africa, India and South East Asia face the enormous task of shaping the next generation of cities. More than 2.5 billion urban dwellers will be added to the world by 2050, 90% of them in Africa and Asia. It's estimated 1.2 billion city dwellers lack access to affordable and secure housing today. As it turns, a large share of future growth is going to be unplanned, which could raise this number to as high as 1.6 billion people by just 2025. Change is needed and perhaps COVID-19 will be the wake-up call to get us there.

3. Integrated Green and Blue Open Spaces

One of the few places that have seen a surge in traffic during COVID-19 lockdowns (at least as long as they remain open) is urban parks. A new approach to city planning should bring open spaces, watersheds, forests and parks into the heart of how we think about and plan our cities. A more holistic approach to planning that combines gray, green and blue infrastructure supports better health, better water management (flooding contributes to many epidemics and diseases after natural disasters), and climate adaptation and mitigation strategies. Furthermore, larger open spaces within the urban fabric can help cities implement emergency services and evacuation protocols.

4. Increased City-Regional Planning

What happens in cities does not stay in cities. The cascading economic effect of this crisis will impact supply and production chains in surrounding regions and ripple out into global networks too, as we are already seeing. We should learn from this unprecedented disruption to better plan for the next crisis. We know that cities, often low-lying and flood-prone, will be at the frontlines of climate impacts, for example. How do we ensure city-region landscapes are more resilient the next time? We need more integrated city-regional planning around economies, energy provision, transport networks and food production so that these networks can become pillars of resilience rather than weak points. Such a planning approach will bring a broader and different set of stakeholders to the table, creating a stronger coalition for change.

5. More City-Level, Granular Data

Data is mainly now aggregated at the national level, while many decisions on containment of any epidemic or pandemic are made at the local level. To help cities harness the power of big data – in response to this crisis but also other long-term sustainability and equity challenges – we need to empower cities with more granular, regularly updated data streams that can provide better evidence for decision-making. Resilience is all about interdependencies. That means that if we keep the data in silos, we cannot track where the pivot points are, and we are not able to take the right measures. Cities should take a cue from South Korea’s data-heavy COVID-19 response, and reach out to community groups, universities, the private sector and concerned citizens to start building more comprehensive, community-based data sets to understand and better address the challenges ahead. As lockdowns stretch on in many places, we are only beginning to understand how COVID-19 will affect how we approach urban planning. Planned for properly, density is a good thing for cities, and it will be again. But will we do more to protect the most vulnerable? Will we make cities more resilient to future crises? Will we make green and blue spaces front and center of our infrastructure investments? And will we seriously address the fact that it’s not just physically, but economically, socially and environmentally that cities are connected to their surrounding regions? We will rebuild our crucial economic and social fabric. It’s our decision to rebuild better.

2.1.4 Impacts of Covid-19 On Livelihoods, Health and Food Systems Around The World.

The COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food systems and the world of work. The economic and social disruption caused by the pandemic is devastating: tens of millions of people are at risk of falling into extreme poverty, while the number of undernourished people, currently estimated at nearly 690 million, could increase by up to 132 million by the end of the year. Millions of enterprises face an existential threat. Nearly half of the world's 3.3 billion global workforce are at risk of losing their livelihoods. Informal economy workers are particularly vulnerable because the majority lacks social protection and access to quality health care and have lost access to productive assets. Without the means to earn an income during lockdowns, many are unable to feed themselves and their families. For most, no income means no food, or, at best, less food and less nutritious food. The pandemic has been affecting the entire food system and has laid bare its fragility. Border closures, trade restrictions and confinement measures have been preventing farmers from accessing markets, including for buying inputs and selling their produce, and agricultural workers from harvesting crops, thus disrupting domestic and international food supply chains and reducing access to healthy, safe and diverse diets. The pandemic has decimated jobs and placed millions of livelihoods at risk. As breadwinners lose jobs, fall ill and die, the food security and nutrition of millions of women and men are under threat, with those in low-income countries, particularly the most marginalized populations, which include small-scale farmers and indigenous peoples, being hardest hit. Millions of agricultural workers – waged and self-employed – while feeding the world, regularly face high levels of working poverty, malnutrition and poor health, and suffer from a lack of safety and labour protection as well as other types of abuse. With low and irregular incomes and a lack of social support, many of them are spurred to continue working, often in unsafe conditions, thus exposing themselves and their families to additional risks. Further, when experiencing income losses, they may resort to negative coping strategies, such as distress sale of assets, predatory loans or child labour. Migrant agricultural workers are particularly vulnerable, because they face risks in their transport, working and living conditions and struggle to access support measures put in place by governments. Guaranteeing the safety and health of all agri-food workers – from primary producers to those involved in food processing, transport and retail, including street food vendors – as well as better incomes and protection, will be critical to saving lives and protecting public health, people's livelihoods and food security.

In the COVID-19 crisis food security, public health, and employment and labour issues, in particular workers' health and safety converge. Adhering to workplace safety and health practices and ensuring access to decent work and the protection of labour rights in all industries will be crucial in addressing the human dimension of the crisis. Immediate and purposeful action to save lives and livelihoods should include extending social protection towards universal health coverage and income support for those most affected. These include workers in the informal economy and in poorly protected and low-paid jobs, including youth, older workers, and migrants. Particular attention must be paid to the situation of women, who are over-represented in low-paid jobs and care roles. Different forms of support are key, including cash transfers, child allowances and healthy school meals, shelter and food relief initiatives, support for employment retention and recovery, and financial relief for businesses, including micro, small and medium-sized enterprises. In designing and implementing such measures it is essential that governments work closely with employers and workers. Countries dealing with existing humanitarian crises or emergencies are particularly exposed to the effects of COVID-19. Responding swiftly to the pandemic, while ensuring that humanitarian and recovery assistance reaches those most in need, is critical. Now is the time for global solidarity and support, especially with the most vulnerable in our societies, particularly in the emerging and developing world. Only together can we overcome the intertwined health and social and economic impacts of the pandemic and prevent its escalation into a protracted humanitarian and food security catastrophe, with the potential loss of already achieved development gains. We must recognize this opportunity to build back better, as noted in the Policy Brief issued by the United Nations Secretary-General. We are committed to pooling our expertise and experience to support countries in their crisis response measures and efforts to achieve the Sustainable Development Goals. We need to develop long-term sustainable strategies to address the challenges facing the health and agri-food sectors. Priority should be given to addressing underlying food security and malnutrition challenges, tackling rural poverty, in particular through more and better jobs in the rural economy, extending social protection to all, facilitating safe migration pathways and promoting the formalization of the informal economy. We must rethink the future of our environment and tackle climate change and environmental degradation with ambition and urgency. Only then can we protect the health, livelihoods, food security and nutrition of all people, and ensure that our 'new normal' is a better one.

2.2 Conceptual Framework

2.2.1 Covid-19 in Uselu, Benin City

The troubling reality of the Covid-19 crisis for many families in Uselu Community has been hunger and deprivation with people still battling every day for survival; the pandemic has highlighted the critical need for a functioning social security system that will allow all Nigerians to achieve an adequate standard of living. Mrs Blessing Osawaru lives with her seven children in Uselu, Benin City, Edo State. Prior to the pandemic, Mrs Blessing worked for 13 years cleaning dormitories at the nearby University of Benin Teaching Hospital, earning 25,000 Naira a month. But the Hospital was temporarily shut down in March 2020 to prevent the spread of the virus, and Mrs Blessing, as a casual worker, lost her income. Nigeria's social security system does not guarantee benefits to people who lose their jobs. Within a few months, Mrs Blessing had exhausted her meagre savings and was unable to put enough food on the table for her children. "We don't eat like we used to. People who used to eat three meals are now eating one," she said during the interview. "We [have] our fill in the morning, and sometimes at night we just soak two handfuls of garri [a staple made from cassava] and sleep." During the first year of the pandemic, the rates of confirmed Covid-19 cases and related deaths in Lagos, and Nigeria as a whole, did not come close to what many feared when the virus first emerged in February 2020. But the Covid-19 crisis has had a devastating economic impact, with the World Bank forecasting in January 2021 that the pandemic will result in an additional 10.9 million Nigerians entering poverty by 2022. Mrs Blessing finally found a new job sweeping the roads of Benin City in November 2020, but the price of food, water, and other essentials which have risen sharply during the pandemic forced her to take a second job. Even by March 2021, she was still struggling to pay back 12,000 Naira she had borrowed to buy food for her family while she was unemployed.

Nigeria was particularly vulnerable to the economic impacts of Covid-19 due to the absence of a functioning social security system capable of providing support to households that lost jobs and income during the crisis. Although the pandemic has brought into sharp focus the importance of the right to social security, Michelle Bachelet, the United Nations High Commissioner for Human Rights, noted in January 2021 that over 70 percent people worldwide have no or only partial social security coverage. Nigeria's constitution does not provide a legal right to social security and, as Mrs Blessing discovered, Nigerian laws create no entitlement to unemployment or child benefits. Nigeria does have a pension scheme open to employees in the formal and informal sectors, but enrolment is only about 40

percent nationally, according to the World Bank. Long-term underinvestment in social protection meant that, prior to the pandemic, only 4 percent of the poorest 40 percent of households had access to any form of social safety net program, according to the World Bank. The Covid-19 pandemic has had a devastating impact on the livelihoods and access to food of slums communities like Uselu as over a month lockdown, an economic downturn, and rising food prices have left many households struggling to feed their families.

2.2.2 Building a Social Security System in Nigeria

The Covid-19 crisis, by demonstrating the huge gaps in Nigeria's social security system and the difficulties of rapidly expanding coverage during a crisis, has created a window of opportunity to expand social protection and fulfill the right to social security in Nigeria. As a first step, the federal government should draft and support legislation that recognizes Nigerians' right to social security and sets the legal foundations of an effective social security system, for example, by creating entitlements to financial support for unemployed workers, including in the informal sector, and an entitlement to child benefits. To implement the legislation, the Federal and State governments should formulate national and state-level strategies to develop an effective social security system. These strategies should build on existing national and state-level social protection policies and programs, but also create new initiatives, such as a form of income support, unemployment insurance, or benefit for informal workers, or maternity and child benefits, to build out the key elements of an effective social security system. To meet immediate needs while a more complete system is created, the federal and State governments should extend and expand the social assistance programs used to respond to Covid-19, including cash transfers and food assistance. In Edo State, the state government should not only push for an expansion of federally-backed cash transfers, but also mobilize its own resources to expand social assistance in the state, including through funding for cash transfers, grants or low-interest credit for informal workers and businesses, and investments in public infrastructure in urban poor communities, including water, sanitation, and electricity. Federal and state agencies should work with community-based organizations to establish rights-based eligibility criteria for social assistance measures, including an assessment of households' access to food, water, basic shelter and housing, sanitation, and essential education. The federal and state government should also break down any potential barriers to access to social assistance for urban poor communities, such as a requirement that beneficiaries have access to a bank account, telephone credit, or proof of residency. The amount paid as cash transfers should be determined according to the amount needed for the recipient household to achieve an adequate standard of living, with adjustments made for

the cost of living in some states like lagos and rivers and other high-cost areas. The development of a social security system at the federal and state levels will require financial resources at a time when government revenues are already constrained. The federal and state governments should increase the budget allocated to social protection while also developing proposals in for mobilizing more revenue for social protection through progressive tax measures that do not make it more difficult for urban poor communities to achieve an adequate standard of living.

International donors should also provide financial support and technical assistance to help the federal and state government construct a functioning social security system. Increased domestic and international spending on social security should come with measures to hold government institutions accountable for how that money is spent. Mrs Blessing the Urelu resident, said that her struggle to feed her seven children during the pandemic, and the lack of government support she received, underscored the need for the federal and state governments to provide families like hers with the resources they need to survive

CHAPTER THREE

3.0 Research Methodology

3.1 Introduction

This chapter is concerned with the way and manner various data for the study were extracted and analyzed in order to ensure objectivity in the level of work done. The data collection and analysis were based on the aim and objectives of the study.

In achieving qualitative research, a research methodology is adopted. This assisted in achieving best and consistency in the trend of events and fact to be analyzed. Also, the methodology to employ for any research work depends on the nature of work to be carried out. For the purpose of this research work, various techniques and procedures were used to gather relevant data that shows the impacts of covid-19 in the area under study.

Research methodology reveals the research design specific methods or strategies of collecting information on the subjects of study; this involves personal observation, field survey, content analysis etc. In this chapter, the researcher hopes to highlight the method adopted for the study, identify the various sources of data and the instrument for collecting these data

3.2 Study Area

The study was conducted at the Uselu area in Benin city Edo state. The rationale for selecting this area is due to the availability of collecting the required data that allow intensive observation, easy to access information and to minimize cost. In addition to that, based on the 2006 Nigeria Population and Housing Census shows that Uselu had a total population of 525,000 (Est.) inhabitants and up to 5000 business located in the area (Nigeria census, 2006).

3.3 Study Population

Population refers to all members, groups, or elements that the researcher wants to gain information from, represent and draw conclusion for the study (Vans 1990). Due to the nature of this study, the study population includes IT officers, market women and men, shop owners, bankers, school teachers, students, restaurant owners, civil servants and managers in financial institutions because they are the key informants.

3.4 Research Design

This case study employs both qualitative and quantitative forms with 141 respondents. The choice of the two-research design is based on the fact that these two approaches vary in strength and weakness. Therefore, the study uses both of them for complementary purposes. The explanatory research design, for instance uses open ended and probing questions which gives participants the opportunity to respond in their own words rather than forcing them to choose from fixed responses. Creswell (2009) defines, mixed method research as “an approach to inquiry that combines or associates both qualitative and quantitative forms”. This study adopts qualitative design to a large extent and quantitative design to a lesser extent. This is especially because the study is exploratory by nature. This method is used to capture frequencies of respondents and the average level of responses.

3.5 Study Sample.

According to Webster (1985), a sample is defined as a finite part of a statistical population whose properties are studied for the purpose of gaining information about the whole. It can also be defined as a set of respondents or people selected from a larger population for the purpose of a survey. When it is possible, the researcher would prefer to study the whole population in which he/she is interested. However, it is difficult to do so in this study because the population of interest is large, diverse, and scattered over a large geographic area as well as time consuming and expensive. A sample size is the unit of inquiry selected from the target population. The researcher used the proportionate stratification approach in which the sample size of stratum is proportionate to the population size of the stratum.

3.6 Sampling Procedure

The researcher used purposive sampling to select 141 respondents who were obtained from the studied in Uselu Area of Benin city Edo state. Purposive sampling technique is selected due to the fact that it is less expensive and quick for selecting a sample. Through this sampling technique, the researcher got the respondents who were able to deliver the required data. However, the major weakness of this method is bias, because the researcher selected only the sample, he believed enriched with the needed information.

3.7 Sources of Data

The task of data collection begins after a research problem has been defined and research design/plan chalked out. The method of data collection used for this study, was both primary and secondary data

3.7.1 Primary Data

The primary data are those which are collected afresh and for the first time and thus happen to be original in character. Primary data was collected during the course of study. It was obtained through:

Observation is one of the major instruments for primary data collection in research generally. It is one of the earliest instruments used for scientific research. In the process of carrying out reconnaissance survey on the study area, Observation which beneficial to this work was employed on the available infrastructural and level of development in the area.

The researcher asks a standard set of question and nothing more. The personal interview, as an instrument for data collection represent personal contact (face to face) between researcher and a respondent with the aim of getting reliable and valid information from the respondent and the management of the institution under study and the use of questionnaire.

3.7.2 Secondary Data

These are data obtained second hand from published or recorded sources and used for a purpose different from that of the agency that initially collected from the field. It could be gotten quickly and cheap compared with data collected specially for the problem at hand. The secondary data are those which have already been collected by someone else. The secondary source of data collection includes books such as journals, write-ups, research reports, maps, and publications of various scholars in related field relating to the subject matter of the study. Also, dissertations, seminar papers, and internet materials were sourced for the study.

3.8 The Sampling Procedure, and Size.

The multi-stage sampling technique was used for sample selection. An advantage of this design is that it allows for different selection procedures in each selection as long as the final sample is drawn randomly. Based on this method, respondents were selected from zones in Uselu community.

The data used consist of information from households in sampled buildings, which constitutes the research population. Adults and some selected community-based organizations and people who lived long enough in sampled buildings were interviewed.

Uselu community has an estimated population of 525,000(est.) (Nigerian census 2006) as of the 2006 population then projected to 2022 the population is 705,556 using the growth rate of 2.5% percent using the formula in Eq. (1) projection:

$$P_t = P_o (1 + r/100)^n \quad (1)$$

Where: P_o = Projected Population,

P_t = Population of the base year,

r = Rate of population growth (2.5%)

n = 16 years

The 1991 figure is adopted for this research because the 2006 population and housing census was released on state and local government areas, not on a township basis. Hence, 2.5% is an assumed average growth rate between 2006 and 2022 population census figures for Egor Local Government. Likewise, since Uselu is one of the Local Government community subject to such a growth rate, it is appropriate to base the current population on such projection.

Stratified simple random sampling was use with a certain percentage to determine the number of questionnaires to distribute. 141 constitutes the sample size suitable to obtain a representative sample and administration of questionnaire to the respondents, due to the culture, religion homogeneity of the population in the area, special perception, peculiarity and probability of getting similar result and information. The questionnaire was administered within the area under study.

3.9 Sampling Techniques

For the purpose of this research some variables were put into consideration such includes; population of the household of the area under study, socio-economic characteristics of the people as well as time and resource used to obtain information from entire populace in the area. The sampling technique adopted for this study is that of stratified random sampling. Uselu community was divided into zones. So in respect of this, the respondents will be selected in the zones at random. In order to facilitate this purpose, stratified random sampling techniques were used to collect data from each zone and the information gotten will be used to generalize each household in that zone.

3.10 Research Instrument

Reconnaissance survey was carried out in the area under study. The essence of this step is to have a brief history or knowledge of the problem. Based on the first-hand information, a structured multiple-choice questionnaire was designed to elicit information from the respondent, documentary analysis from the various leaders of the community including government and private individuals in the area. Questionnaires were designed to gather information from respondents. A questionnaire consists of number of questions printed in a definite order on a form. Questionnaires save the researcher time and money. People are more truthful while responding to the questionnaire regarding controversial issues in particular, due to the fact that their responses are anonymous.

. The questionnaire was validated by the researcher supervisor who is a research expert's knowledgably in research methods quantitative analysis and educational management. Each item as contained in the questionnaire was adequately scrutinized for clarity, adequacy, convenience, and comprehensiveness. He passed the instrument as adequate for data collection.

Respondents were given the chance to fill questionnaire and they were guided in filling in their questionnaire. In this case, respondents are limited to set alternatives provided in the questionnaire. The researcher also conducted oral interviews immediately responses were given by the respondents to questions asked and this was equally be complemented by direct observation of the study area by the researcher.

3.10.1 Method of Data Analysis

For the purpose of this study both the descriptive statistics explorative and rigorous analytical approaches were used for the analysis of data collected from the field. The descriptive statistics include the use of figures, tables, charts, maps, graphs, percentage, and photographs. Simple analytical technique like use of the mean and other descriptive measure were employed. All these measures will be presented in the pictures of the issue relating to the impacts of covid-19 in Uselu community.

CHAPTER FOUR

4.0 Data Analysis

This chapter presents the data obtained on the impact of COVID-19 on the essential needs of residents of Uselu community. This chapter is divided into three (3) parts which includes: (1) Presentation and interpretation of the information gathered through research instruments on socio-economic/bio data of respondents, impacts and effect of COVID-19 on the residents. (2) Explanation of findings. (3) discussion of implications of COVID-19 on the residents of Uselu community. The results from the findings form the basis for the recommendations and conclusion presented in the next chapter.

4.1 Data Presentation and Interpretation/Analysis

The data are analyzed were coded, tabulated and presented in graphs and charts while the result were interpreted based on individual variables in descriptive manners as follows: -

Table 4.1: Sex of Respondents

Sex	Responses	Percentage(%)
Males	112	79.5
Females	29	20.5
Total	141	100

Source: Field Survey, 2022

Of the 141 respondents, male's respondents are 112 and females are 29. These respondents are household heads, house owners, bankers, and civil servants whose records form the basis for analysis. The table above shows that males scored the highest percentage 79.5% over females 20.5%, this indicates that there are more number of male than the female in the study area.

Table 4.2: Age Distribution of Respondents

Age	Responses	Percentage(%)
20-24	28	19.8
25-29	17	12.1
30-35	30	21.3
36-40	10	7.1
41-45	56	39.7
Total	141	100

Source: Field Survey, 2022

The table above indicates that age distribution ranging from 41- 45 years has 39.7% the highest out of the total percentage of respondents, this is followed by age between 30 – 35 years has 21.3%, 20 – 24 years has 19.8%, 25-29 years has 12.1% and 36-40 above has 7.1%. These means that the study area comprise of active, capable and working class age of people who are capable of fending for themselves.

Table 4.3: Marital Status of Respondents.

Marital Status	Respondents	Percentage %
Married	55	39.1
Single	49	34.7
Divorced	22	15.6
Widow/Widower	15	10.6
Total	141	100

Source: Field survey, 2022

The table above indicates that marital status respondents married has 39.1% the highest out of the total percentage of respondents, this is followed by single has 34.7%.

Table 4.4: Tribe Distribution of Respondents

Tribe	Respondents	Percentage %
Bini	109	77.3
Esan	15	10.7
Yoruba	10	7.1
Igbo	7	4.9
Others	0	0
Total	141	100

Source: Field survey, 2022

The table above indicates the tribe of the respondents Bini has 77.3% the highest out of the total percentage of respondents because Uselu is one of the oldest community in Benin City, this is followed by Esan 10.7%, Yoruba 7.1%, Igbo 4.9% and Other specify has 0%.

Table 4.5: Religion Distribution of the Respondents

Religion	Respondents	Percentage %
Christianity	125	88.7
Islam	12	8.5
African tradition	4	2.8
Others	0	0
Total	141	100

Source: Field survey, 2022

The table above indicates the tribe of the respondents Christianity has 88.7% the highest out of the total percentage of respondents, this is followed by Islam has 8.5%.

Table 4.6: Educational Background of the Respondents

Educational background	Respondents	Percentage %
Primary Education	12	8.5
Secondary School	70	49.6
HND/BSC	41	29.1
Others	18	12.8
Total	141	100

Source: Field survey, 2022

The table above indicates the educational background of the respondent's Secondary school has 49.6% the highest out of the total percentage of respondents, this is followed by HND/BSC 29.1%, others specify 12.8% and primary education has 8.5%.

Table 4.7: Occupation of The Respondents

Occupation	Respondents	Percentage %
Farming	11	7.9
Trading	88	62.5
Artisan	12	8.4
Civil Servant	30	21.2
Others	0	0
Total	141	100

Source: Field survey, 2022

The figure above indicates the occupation of the respondents trading has 62.5% the highest out of the total percentage of respondents, this is followed by civil servant has 21.2%, farming has 7.9% and Other specify has 0%.

Table 4.8: Monthly Income of the Respondents

Income	Respondents	Percentage %
10,000-50,000	91	64.6
51,000-100,000	9	6.39
101,000-150,000	24	17.1
151,000-200,000	8	5.6
201,000-above	5	3.6
Total	141	100

Source: Field survey, 2022

The figure above indicates the monthly income of the respondents 10,000-50,000 has 64.6% the highest out of the total percentage of respondents, this is followed by civic 101,000-150,000 has 17.1%, 51,000-100,000 has 6.39%, 151,000-200,000 has 5.6% and 201,000-Above has 3.6%.

Table 4.9: Number of Market in The Study Area

Number of markets	Respondents	Percentage %
1-2	139	98.5
3-4	2	1.5
5-6	0	0
Total	141	100

Source: Field survey, 2022

The above figure indicates that 1-2 has the highest percentage 98.5% followed by 3-4 1.5%, which signifies that the number of market in Uselu is just one.

Table 4.10: Time or Period of These Market in The Study Area

Period	Respondents	Percentage %
Daily	141	100
2-3 Interval	0	0
4-5 Interval	0	0
Total	141	100

Source: Field survey, 2022

The above figure indicates that daily market has the highest percentage 100%. which signifies that the market in Uselu operate on a daily basis.

Table 4.11: Were you affected by the COVID-19 Pandemic.

Options	Respondents	Percentage %
Yes	135	95.74
No	6	4.26
Total	141	100

Source: Field survey, 2022

The figure above indicates that a total number of 135 persons reported to have being affected by the pandemic bearing a percentage of 95.74% and 4.26% of respondents responded to not being affected by the pandemic.

Table 4.12: Impact On Respondents.

Impact	Respondents	Percentage %
Closure of markets	25	17.7
No access to food	105	74.5
no access to transportation	11	7.8
Total	141	100

Source: Field survey, 2022

The figure above indicates that 74.5% of the respondents claimed the pandemic mainly affected their access to food and 17.7% of respondents claimed the closure of markets affected them more and 7.8% picked no access to transportation.

Table 4.13: Job Loss and Drop in Income.

Options	Respondents	Percentage %
Yes	98	69.5
No	43	30.5
Total	141	100

Source: Field survey, 2022

The above figure indicates 69.5% of respondents experienced a job loss or drop in income, while 30.5% claimed their income did not drop.

Table 4.14: Health Services

Options	Respondents	Percentage %
Very concerned	112	69.5
Not concerned	29	30.5
Total	141	100

Source: Field survey, 2022

The figure above indicates 69.5% of the respondents were very concerned of not being able to get health services for themselves and their family while 30.5% of respondents were not entirely concerned.

Table 4.15: Impact on Finance

Finance	Respondents	Percentage %
Major Negative	35	24.9
Moderate Negative	39	27.6
Minor Negative	15	10.7
No Impact	12	8.5
Positive Impact	40	28.3
Total	141	100

Source: Field survey, 2022

The figure above indicates 27.6% of the respondents claimed a Positive Impact, 27.6% of respondents claimed a moderate negative, 24.9% claimed a Major Negative, 10.7% claimed a Minor Negative while 8.5% claimed it had no impact on them.

Table 4.16: Security during the Pandemic.

Options	Respondents	Percentage %
Yes	129	91.4
No	12	8.6
Total	141	100

Source: Field survey, 2022

The figure above indicates 91.4% of the respondents claimed that security was a major issue during the pandemic and fear for the safety of themselves and their family while 8.6% of respondents were not entirely concerned.

Table 4.17: Stipends from Government

Options	Respondents	Percentage %
Yes	8	5.7
No	133	94.3
Total	141	100

Source: Field survey, 2022

The figure above indicates that a total number of 133 persons reported to have not received assistance or stipends from the government during the pandemic bearing a percentage of 94.3% and 5.7% of respondents responded to have received assistance from the government.

Table 4.18: Closure of Markets and other Public Places.

Options	Respondents	Percentage %
Yes	117	82.9
No	24	17.1
Total	141	100

Source: Field survey, 2022

The figure above indicates that a total number of 117 persons reported to have being affected by the closing of markets and other public places during the pandemic bearing a percentage of 82.9% and 17.1% of respondents responded to not being affected by the closing of markets and other public places during the pandemic.

Table 4.19: Government Schemes Providing Emergency Funds.

Options	Respondents	Percentage %
Yes	17	12.1
No	124	87.9
Total	141	100

Source: Field survey, 2022

The above figure indicates that 87.9% of the respondents claimed the government did not provide any emergency funds during the pandemic while 12.1% of the respondents said the government provided.

Table 4.20: Respondents Who Benefitted from The Scheme.

Options	Respondents	Percentage %
Yes	8	47.1
No	9	52.9
Total	17	100

Source: Field survey, 2022

The figure above indicates that out of the 17 respondents who claimed the government provided emergency funds during the pandemic 47.1% said they benefitted from it while 52.9% claimed they didn't receive any emergency funds.

CHAPTER FIVE

5.0 Discussion of Findings, Conclusion and Recommendations

5.1 Introduction

The chapter comprise of the summary of the research based on the results of the data collected, analyzed and interpreted. The chapter covers summary of findings, conclusion and suggested recommendations to reduce the impact of COVID-19 on Uselu community.

5.2 Summary of Findings

Having conducted a field survey and harnessed some relevant past literatures under the topic, the study has provided more understanding on the impacts of COVID-19 on the essential needs of Uselu community. The study revealed that the pandemic has greatly impacted on its host community. The pandemic severely affected the residents due to the lockdown inflicted by the government. With 65.9% of respondents reported to have lost income and others experiencing a reduction in their income.

Based on the survey, the lockdown on markets and other public places resulted in hunger, poverty, low income recorded, loss of revenue, and high rate of crime.

The highest rate of deprivation was reported to be health where respondents claimed they struggled to access pharmacies, health clinics and hospitals followed by safety and food. Most respondents claimed that government and other NGOs did not provide for them during the pandemic and that there was no government scheme to provide funding for them and their household.

However, due to absence of a social security in Edo state and Nigeria aa a whole, the people of Uselu community were left to fend for themselves because the impact the pandemic had on their essential needs is large.

5.3 Conclusion

Effective social protection systems are crucial to safeguarding the poor and vulnerable when crisis hits. Yet, in Nigeria, such systems remain limited in coverage and will need significant upgrading to respond to a pandemic like COVID-19 (Coronavirus) Prior to the pandemic, the Nigerian government had expressed a renewed commitment to pursue a course towards Providing for citizens

during the case of emergencies. This is evidenced in the inclusion of social protection in regional and national development strategies, improved investment in non-contributory social protection programs and the expansion of contributory social security schemes to cover typically excluded population groups such as the self-employed and informal workers.

Amidst this reality, the COVID-19 pandemic has heightened demand for benefits and services and challenged the adequacy, capability and stability of social protection and health-care systems in responding to the pandemic and its negative socioeconomic spillovers.

Nevertheless, the COVID-19 global pandemic may have been seen to represent an opportunity and a challenge for social security in Nigeria. On the downside, the COVID-19 pandemic has exacerbated the existing strains under which social protection systems operate and showed how unprepared the country is against any future pandemic. On the upside, it has given new momentum to social security developments. In practical terms, there has been unprecedented political commitment to social protection culminating in the introduction or expansion of social assistance programs, as well as to emergency policy measures in response to the pandemic's negative socioeconomic impacts. The COVID-19 pandemic leaves social protection at a crossroads in Africa. On the one hand, the pandemic brought about an escalation in demand for social protection benefits and services in the public finance context of shrinking fiscal space for social protection due to economic downturns. On the other hand, it has led to an unprecedented political commitment to social protection, culminating with the introduction or expansion of social assistance programs, triggering situational adjustments of contributory social security schemes as well as the adoption of new financing approaches for social protection in Africa.

On the administrative front, measures imposed to curb the spread of the virus, notably lockdowns, social distancing and remote work, prompted the adoption and adaptation of advanced digital and online solutions and the adjustment of work arrangements to ensure business continuity amidst lockdowns. However, these developments come with a higher exposure to the risks of error, evasion and fraud, which social security institutions will have to contend with. Notwithstanding the uncertainty concerning the future trajectory of the COVID-19 pandemic as well as of its possible negative socioeconomic consequences, the importance of the stabilizing role to be played by social security systems cannot be overstated. Promoting decent work and addressing exclusion from social security coverage, as well as enhancing the effectiveness of voluntary insurance and the collection of

contributions, will be crucial in developing adequate, responsive and sustainable social protection and health-care systems with improved and sustained access to benefits and services.

Assistance should be provided to vulnerable households who suffered from food insecurity and deprivation, poverty and loss of income.

5.4 Recommendations

5.4.1 Developing and Implementing Social Protection Floors

Some countries have made significant progress in developing social protection systems, particularly with regard to pensions and access to essential health care. This has been achieved through a combination of contributory and non-contributory financing; the coordination of private and public, national and community-based interventions; international cooperation; and exchange of knowledge and experiences. If this is adopted in Nigeria we can be prepared for future pandemic.

5.4.2 Combination of Contributory and Non-Contributory Financing

The combination of contributory and non-contributory mechanisms is the major driver of improved social security coverage rates, especially among the older population. While coverage rates for old age pensions are still low in Nigeria, some countries, including Botswana, Cabo Verde, Eswatini, Lesotho, Mauritius, Namibia, the Seychelles and South Africa, have attained universal coverage in old-age pensions through a combination of tax and contribution-based financing. This underlines the need for sound economic policies that will generate the tax revenues required to fund the benefits and services required to achieve universal access to social security protection.

5.4.3 Community Self Help

The idea of community self-help is a great developmental strategy that involve the society peer groups, community leaders, youths, religious groups amongst others with no or little effort of government at any level aiming at developing the community. This strategy will help to provide some basic amenities such as food, electricity, health care and reduced crime rate.

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APPENDIX I
QUESTIONNAIRE
AUCHI POLYTECHNIC AUCHI
SCHOOL OF ENVIRONMENTAL STUDIES
DEPARTMENT OF URBAN AND REGIONAL PLANNING

Sir/Madam,

This is an academic research aimed to examine the impact of COVID-19 on the essential needs of the residents of Uselu community, Edo state.

I need your co-operation to respond to the research questions below which would assist me to accomplish the aim of my study as required by the above department. Your response would be treated confidentially and it will not have any implication as it's an academic research.

Thanks for your co-operation.

Yours faithful,

Olasupo Joseph Olakunle

SECTION A: BIODATA:

1. Sex? (a) Male [] (b) female []
2. Age? (a) 20-24 [] (b) 25-29 [] (c) 30-35 [] (d) 36-40 [] (e) 41-45 above []
3. Marital status? (a) Married [] (b) Single [] (c) divorced [] (d) widow-widower []
4. Tribe (a) Bini [] (b) Esan [] (c) Yoruba [] (d) Igbo [] (d) Others specify []
5. Religion (a) Christianity [] (b) Islam [] (c) Africa tradition [] (d) Others specify []
6. Educational background (a) Primary education [] (b) Secondary education [] (c) HND/BSC [] (d) Others specify []
7. Occupation (a) Farming [] (b) Trading [] (c) Artisan [] (d) Civil servant [] (e) Others specify []

SECTION B: SOCIO-ECONOMIC

8. Occupation of the respondent? (a) Government employee [] (b) private employee [] (c) Self-employed [] (d) Unemployed [] (e) Students []
9. Monthly Income? (a) 10,000-50,000 [] (b) 51,000-100,000 [] (c) 101,000-150,000 [] (d) 151,000-200,000 [] (e) 201,000 and above []
10. Number of market in the study area (a) 1-2 [] (b) 3-4 [] (c) 5-6 []
11. Name of market in the study area
12. Time or periods of these market in the study area (a) Daily [] (b) 2-3 interval [] (c) 4-5 interval []

SECTION C: IMPACT OF COVID-19

13. Were you affected by the COVID-19 pandemic? Yes [] No []
14. In what way did the pandemic impact you? (please tick the one that applies to you)
15. Closure of markets []
16. No access to food []
17. No access to transportation []
18. No access to transport services []
19. In the past 6 months has anyone in your household lost their job or experienced a drop in income? Yes [] No [].
20. How concerned are you about not being able to get health services for you or your family due to COVID-19? Very concerned [] Not Concerned []
21. Which of the following best describes the impact of Covid-19 on your household's ability to meet financial obligations (loan repayments, household bills etc.)? [] Major negative [] Moderate negative [] Minor negative [] No impact [] Positive impact []
22. Was security a major issue during the COVID-19 pandemic? Yes [] No []
23. Did the government provide for you and your household during the pandemic? Yes [] No []
24. Did the closure of the market and other places affect you and your household? Yes [] No []
25. Is there a governmental scheme providing emergency/special funding for households in the context of the COVID-19 pandemic? Yes [] No []
26. If yes, Have you benefited from this scheme? Yes [] No []
27. What are the measures to be taken to combat future pandemic in the area?.....

APPENDIX II

Population Projection

The researcher adopts the population figure as released by National Population Commission (2006). The figure is therefore projected to 2022 using 2.5% growth rate so as to determine the approximate population of the area at present (2022). The working is as follows: -

Population projection of the study area 2006 - 2022

The formula $P = P_o \left(1 + \frac{r}{100}\right)^n$

Where: -

P_n = *projectiion population (2022)*

P_o = *present populatiion (2006)*

R = *Growth rate (2.5%)*

N = *Number of projected 2006 – 2022(16yrs)*

$$P_n = \left(1 + \frac{2.5}{100}\right)^{16}$$

$$P_n = 525,000 (1 + 0.03)^{16}$$

$$P_n = 525,000 (1.4)^{16}$$

$$P_n = 525,000 (2.5001)$$

$$P_n = 705,525 \text{ Persons}$$

This means that the present study population is 705,525 persons as projected to 2022 using 2.5% growth rate.