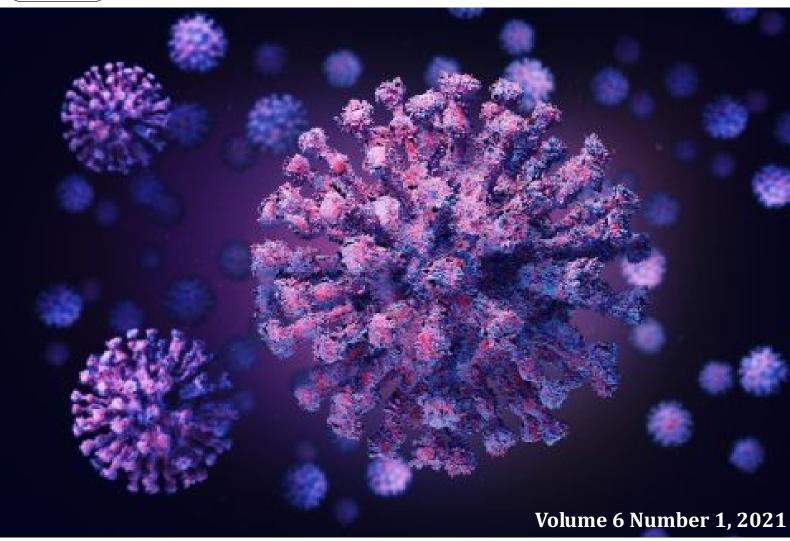


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COVID-19 and socio-economic wellbeing of Sub Saharan African district of southern Cross River State, Nigeria

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Abstract

The impact of COVID-19 on socio economic wellbeing of Sub Saharan African district of southern Cross River State Nigeria has been investigated. The pandemic adversely affected the literacy level due to closure of schools; also, people's livelihoods/food systems. The theoretical framework was the Sustainable Livelihood template. It adopted the methodology of survey research design and drew evidence from 600 respondents. Majority of them, 65.6 percent were males, 39.67 percent in the age bracket of 35-40 years, 63.33 percent were married; majority being 47.66 percent engaged in farming; almost all respondents 95.84 percent were Christians with 51.33 percent completing secondary education. Data were analyzed using Chi-square inferential statistical tools to test: whether an association exists between COVID-19 and socio economic wellbeing in terms of literacy; association between COVID-19 and socio economic wellbeing in terms of people's livelihoods/food systems; an association between COVID-19 and socio economic wellbeing in terms of people's health. Findings revealed that the people have experienced reduced income, decreased wellbeing due poor health status, reduced access to services such as -education and health. People have also experienced increased vulnerability and reduced food security. The paper recommended that different forms of support are key, including 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 are necessary.

Keyword: education, COVID-19, health, income, poor health, socio economic wellbeing.

Introduction

Academic interest about sustaining human wellbeing and quality of life has aroused enormous attention. Thus, a considerable body of research about socio-economic wellbeing has been promoted in recent times. Globally, wellbeing remains a significant issue despite the rapid shortfall in industrialization important (Nippierd, 2002; Akpan, 2015). The society has both the social and economic dimensions. The economic component gives prominence to improved income, production of goods, distribution and consumption thereby creating household wealth (Decancq &Lugo, 2013).

The social dimension includes literacy level, political awareness and participation, health status, self-employment, life expectancy etc. (Akpabio, 2006). Socio-economic wellbeing therefore, translates into indices such as improved literacy level, higher political awareness,



increased income level and improved food processing. However, the quality of life and improved material living conditions are the objects of comparison between developing and the developed economies. Thus, material living conditions include income and wealth, jobs, earnings and housing. Beyond this, "quality of life can also be expressed in health status, work and life balance; education and skills; civic engagement and governance; social connections; environmental quality; personal security and concern for others" (Fleurbacy, 2009). This implies that wellbeing guarantees improved standard of living and general development of the rural economy. The cumulative impact of these social and economic components is the broadening of peoples' opportunities to realize their full potentials through stimulating interest in the achievement of basic needs (Obinna, 2001).

Socio-economic wellbeing, as observed by Millennium Ecosystem Assessment (MEA) (2005) considers fundamental necessities of functional living as guarantee and opportunity to claim the crucial ingredients for maintaining security of lives and property, and food security which may decrease the risk associated with community life. It also involves positive inter and intrapersonal relationship with excellent possibilities to understand ecosystem; also ability to demonstrate good tastes, religious beliefs, shared solidarity, community feelings, freedom of choice; action which suggest existence of possibility of accessing available societal services (Freitas, 2007). However, COVID-19 significantly disrupted the possibility of consistently obtaining socio economic wellbeing by subjecting individuals, families, communities and nations to challenges in all fronts. COVID -19 was declared a global pandemic by the World Health Organization.

Symptoms of Covid-19 infection include: fever, dry cough, shortness of breath or difficulty in breathing, muscle aches, headache, sore throat or diahorrea, running nose, tiredness (CDC, 2020) foundation for Medical Education and Research (MFMER), 2020). The incubation period last up to 14days (Gallagher 2020) and the symptoms may appear 2-14 days after exposure (Minnesota Department of Health 2020). Coronavirus infection and death is on the increase around the globe. Many events and activities around the globe have either been disrupted or postponed as a result of the covid-19 pandemic. For example, the Tokyo 2020 Olympic Games was postponed to 2021 as a results of the pandemic. Africa has had its own share of the covid-19 pandemic; there has been a rapid rise in the number of cases on the continent. As of May 27,2021, the number of confirmed covid-19 cases in Africa amounted to 4842467 which represented 2.9 percent of the infections around the world. By the same date,

coronavirus cases globally were over 196.6 million, causing nearly 3.52 million deaths. In the African continent, South Africa is the most drastically affected, with more than 1.64 million infections.

Nigeria has been negatively affected by the covid-19 pandemic. The index case of coronavirus started in Nigeria when an Italian national working in Lagos flew into the commercial city of Lagos from Milan, Italy on February 25, 2020 (Nigeria center for Disease Control (NCDC). The Nigeria government has been making a great effort to stop the further spread of coronavirus within the country. In the past, such effort include a ban on social gathering, shutdown of cities especially Lagos, Abuja and Ogun state which were regarded as epicenter for the coronavirus pandemic; other preventive measures included increase in screening at border entry points, self-isolation, social distance, use of hand sanitizer, washing of hands frequently and recently vaccination, all these have been emphasized and publicized through formal and informal media outlets (Obiezu, 2020). Based on this, the socio-economic dimensions of covid-19 has attracted the attention of government, NGOs and scholars. As a result of the covid-19 pandemic, the Nigeria economy and transportation or movement of people was shut down. The stay at home order and total/partial lockdown of cities brought about huge tension in families. Nigeria is a country where 40% live below poverty line with almost 70% being daily paid workers. This makes it even challenging in normal period to attain socio economic wellbeing. The shut down every activity made it very difficult for some sections of the Nigerian population to survive. The level of general socio economic wellbeing in terms of life expectancy, health, level of education and combined gross enrolment ratio in education as well as access to consumer goods which determine the enlargement of human abilities may have been significantly affected by the covid-9 pandemic.

Socio economic wellbeing has to do with improvement in indices such as literacy, income level, food processing skills, health status and awareness, nutritional status, increased awareness of female rights, use of improved farming methods, increased exposure to microcredits etc. socio-economic wellbeing is a resultant state of the development process; a process of societal and economic transformation. It admits positive changes occurring in the social sphere and mostly of the economic nature. Socio-economic development is evaluated with indices such as Gross Domestic Product (GDP) life expectancy literacy level, employment level; new technologies, changes in laws, changes in physical environment and ecosystems alteration (Obinna, 2001; Nyong, 2016). But these have seriously been undermined by covid-



19 pandemic. This pandemic affected people's personal dignity safety and participation in community life. Covid-19 severely has impacted the most vulnerable communities in Sub-Saharan region of Central Cross River State, of Nigeria. Its effects were also felt across unified nations, reversing many positive gains in sustainable development. The specific socio economic wellbeing variables considered included education, peoples' livelihoods/food systems, public health. It was against this background that this research was carried out to investigate the interaction between COVID-19 and socio -economic wellbeing of Sub Saharan African district of southern Cross River State, Nigeria.

Socio-economic wellbeing is the cardinal goal of all processes of development. The ability to attain the social and economic wellbeing facilitates the performance of the individual in the community, organizations and groups. Thirwall (1994) emphasized that wellbeing is ordinarily tied to the improvement in basic needs. It implies that social and economic progress must contribute significantly to a sense of self-esteem; the material advancement of community members must be capable of broadening the range of choices available for its members. Socio-economic wellbeing is the outcome of programmes, policies or strategies targeted at improvements in metrics such as life expectancy, literacy, level of employment; also, changes in less tangible factors such as personal dignity, freedom of association, personal safety, freedom from fear of physical harm and extent of participation in community life (Kumari & Kiwai, 2012). Socio-economic development is evaluated with indices such as Gross Domestic Product (GDP), life expectancy, literacy level, employment level; new technologies, changes in laws, changes in physical environment and ecosystem alterations (Obinna, 2001).

The COVID-19 pandemic has adversely ravaged the socio economic wellbeing of people across the globe. The worsening scenario is created by the new variants developing and also spreading rapidly. It has created panic around the globe. The containment measures of shuting the economy, transportation, and movement of people made things very hard for people. This exacerbated the impoverished condition of people because not everyone is a civil servant or public servant that receive their salary at the end of the month. Some people earn their daily living by going to the part and the market. The shutdown significantly crippled those in the informal economy who depend on daily work for survive (Ajibo 2020)

The social and religious lives of the people were disrupted adversely. At the height of the pandemic, societal life was affected. Traditional activities such as wedding and burial where

people cluster was restricted. This became a big problem for the environment. Churches were shut down because of social distancing policy. People such as Muslims, Christians, African traditional practitioners were not free to worship. This affected religious lives. Elaborating further, Jazira (2020), covid-19 has created immense economic and social challenges among communities affecting family and community dynamics. People have lost their jobs especially contract and casual industrial workers and have had to move back to their villages. There has also been rise in gender – based violence. Covid-19 has affected all levels of the education system, from pre-school to tertiary education. During the height of the pandemic, different countries introduce various policies ranging from complete closure of schools in Germany and Italy to targeted closure in the United Kingdom for all but the children of workers in key industries (UNESCO 2020). Additionally, over 100 countries imposed a nationwide closure of educational facilities. UNESCO (2020) estimated that close to 900 million learners suffered adversely from the closure of educational institutions. The intention of the closures was to prevent spread of the virus within institution and prevent carriage to vulnerable individuals, however, these educational institutions closures have had wide spread socio-economic implications especially through lowering the literacy level and stagnating educational endeavor of the youth (Loeb, 2020)

Covid-19 has had an impact on social mobility whereby schools are no longer able to provide free school meals for children from low-income families, social isolation and school dropout rates. It has also had a significant effects on childcare cost for families with young children. In addition, there exist a wide disparity amongst populations with higher income who are able to access technology that can ensure education continues digitally during social isolation. Although it has influenced undergraduate education, the most significant impact is on the postgraduate research community with research into many non – covid-19 related topics being placed on hold.

Schools closure due in covid-19 brought significant disruption to education. Emerging evidence from some of the highest – income countries indicate that the pandemic gave rise to learning losses and increase in inequality. At peak of the pandemic, 45 countries in Europe and Central Asia region closed their schools, affecting 185 million students. Given the abruptness of the situation, teachers and administrators were unprepared for the transition and were forced to build emergency remote learning systems. Despite the supportive remote learning experience, available evidence indicate that school closures resulted in actual learning losses



(Donnelly patririos & Greshman 2021). Research analyzing these outcome from religious, the Netherlands, Switzerland and the United Kingdom indicate both learning losses and increase in inequality. These losses are found to be higher among students whose parents have less education; a finding reinforced by a study that children from socio economic advantaged families received more parental support with their studies during the school closure period. This was particularly worsened in rural communities of developing societies (Donnelly et al., 2021).

Socio economic wellbeing in Sub-Saharan African rural district. The resilience of the food production sector has been tested by the covid-19 outbreak. A global crash in demand from hotel and restaurants has been seen prices of agricultural commodities drop by 20 percent (Alsafi, Abbas, Hassan & Ali, 2020). The food sector, including food distribution and retailing has been put under strain as a result of people panic-buying and stockpiling food (Jack, 2020). This led to increased concerns about shortages of food products. Panic – buying resulted in an increase worth of food in homes. The high demand on food products affected online food significantly. In the public covid-19 crisis, food security, public health, employment and labour issues in particular workers, health and safety converge. The pandemic has caused unprecedented challenge for healthcare system worldwide in particular, the risk to health care workers is one of the greatest vulnerabilities of healthcare system worldwide. The pandemic created additional barriers for patients accessing essential care through restriction on movement lack of service provision, stigma, impoverishment from loss of livelihood and avoidance of care due to concerns over contracting the virus (Regan & Chi, 2020)

Statement of the problem

Socio -economic wellbeing of Sub Saharan African district of southern Cross River State has become a key challenge. These communities have not been able to achieve transformational economic, social and environmental changes required for improved standard of living. Thus, the continual poor living condition and quality of livelihood of has negatively affected the wellbeing of individuals, families and communities. The experiences of poor sanitation, disease, hunger, food insecurity, poor literacy status, deprivations are indicators of socio-economic crisis in Sub Sahara African communities.

In Cross River State, the southern senatorial district is affected by low incomes and living standards. Their earning capacity from the informal sector or non-wage employment is also significantly poor (Nkpoyen, Usoroh, Eteng, Cobham, Umo & Anam, 2021). Additionally, very few assets are owned by households, prevalence of families eating not more than one meal per day; a high proportion of malnourished children, lack of vocational skill acquisition centres to promote self-employment, long distances to nearest produce markets especially during rainy season and all along the year for riverine areas; a huge proportion of children walking long distances to fetch water and to attend school etc. The southern senatorial district has endured serious socio-economic disadvantages despite the long tradition of Federal, State and local government interventions. These conditions have collectively affected socio-economic wellbeing in terms of reduction in life expectancy, literacy, level of employment, health status; also changes in less tangible factors such as personal dignity, freedom of association, personal safety and extent of participation in community governance and civil society. The overall quality of life is poor. This has been exacerbated by corona virus pandemic. The coronavirus that has spread across the world just over a year ago has attracted enormous attention from scholars and other concerned citizens. The pandemic has not spared any community or society. The effect of COVID – 19 had been turmoil on the economy. Covid-19 rapdily caused devastating socio-economic impacts such as income loss, business impacts and health concern. Basic awareness among communities in the wake of an unfamiliar crisis further exacerbated the situation.

The COVID-19 pandemic is having unprecedented social, political and economic effects and economics of sub-saharan African societies. Global recession is even projected the longer the pandemic persist, the impact is also disproportionately distributed across communities. The sub-saharan societies because of their small and low-income are facing severe consequences given their relatively weak health system, limited fiscal and monetary options and a relatively strong reliance on external trade. The COVID-19 crisis causes profound consequences in Sub-Saharan African rural communities. The efforts to curb the spread of the virus are driving societies and economies in a turmoil. There are aggravated impact of covid-19 crisis particularly for those living on the economic margins. The pandemic is deepening pre-existing inequalities and discrimination, exposing vulnerabilities in social, political and economic systems which are in turn amplifying the impacts. Therefore, its potential socio-economic impact in Sub Saharan Africa district of southern Cross River Sate is becoming a major concern.



Theoretical Framework

Sustainable Livelihood Approach

Livelihood think dates back to the work of Robert Chambers in the mid-1980s. According to Chambers and Conway (1992) a livelihood comprises the capabilities assets and activities required for a means of living. A livelihood is sustainable when it can cope with and recover from stresses and shocks and maintains or enhance its capabilities and assets both now and in the future, while not undermining the natural resource base. The sustainable livelihoods framework (SLF) forms the core of the sustainable livelihood approach and serves as an instrument for the investigation of people's livelihood while visualizing the main factors of influence. In its simplest form, the framework depicts stakeholders as operating in a context vulnerability within which they have access to certain assets. These gain their meaning and valve through the prevailing social, institutional and organizational environment. This context decisively influences the livelihood strategies that are open to people in pursuit of their self-defined beneficial livelihood outcomes.

According to the template, the vulnerability context forms the external environment in which people exist and gain importance through direct impacts upon people's assets status (Devereux, 2002). It comprises trends (i.e demographic trends; resource trends; trends in governance0, shocks (i.e, human, livestock or crop health shocks, natural hazards, like floods or earthquakes, economic shocks, conflict in form of national or international wars) and seasonality (i.e seasonality of prices, products or employment opportunities) and represents the part of the framework that lies furthest outside stakeholder's control. This framework views this pandemic as a phenomenon that exist beyond the control of people adversely affecting their socioeconomic wellbeing. COVID-19 has affected livelihood outcomes such as reduced income, decreased well-being due to lack of self-esteem, poor health status, reduced access to services (such as education, health etc), increased vulnerability by reduced resilience through increase in asset status reduced food security (such as reducing financial capital in order to buy food)

Objectives of the Study

The study generally investigated COVID-19 pandemic and socio economic wellbeing of Sub Saharan district of Southern Cross River State.

Specifically, the study sought to:

- Examine the relationship between COVID-19 and socio economic wellbeing in terms
 of
 impact on literacy in Sub Saharan district of Southern Cross River State.
- Determine the association between COVID-19 and socio economic wellbeing in terms
 of people's livelihoods/food systems in Sub Saharan district of southern Cross River
 State.
- **3.** Investigate the association between COVID-19 impact on public health and socio economic wellbeing of Sub Saharan district of southern Cross River State.

Hypotheses

- 1. COVID-19 has no significant association with socio economic wellbeing in terms of impact on literacy in Sub Saharan district of southern Cross River State.
- COVID-19 has no significant association with socio economic wellbeing in terms
 of people's livelihoods/food systems in Sub Saharan district of southern Cross River
 State.
- 3. COVID-19 has no significant association with socio economic wellbeing in terms of people's health in Sub Saharan district of Southern Cross River State.

Research Method

Design

The research design that was used for the study is survey. It adopted the quantitative approach. Thus, the survey research design enabled the researcher explore the relationship between COVID-19 and socio-economic wellbeing of Sub Saharan African district of Southern Nigeria.



Study Area

Southern Senatorial District is one of the three Senatorial Districts in Cross River State. It lies between longitude 9°5' and 10°20' East of the Greenwich meridian and latitudes 5° 16' and 4° 5' south of the equator. It is commonly referred to as greater Calabar district. It is made up of seven (7) local government areas: Biase, Akamkpa, Odukpani, Calabar South, Calabar Municipality, Akpabuyo and Bakassi. It has a population of 1,590, 200 (NPC, 2016 Population Projection).

Population of the Study

The population of the study comprised all the inhabitants of the seven (7) local government areas that constitute the southern senatorial district of Cross River State. Thus, the population according to NPC (2006) of are: Akamkpa 200,100; Akpabuyo 363,900; Bakassi 42,300; Biase 224,700; Calabar South 255,999; Calabar Municipality 245,500; Odukpani 275,800 this gives a total population of 1,590,200 (NPC, 2016 Population Projection). All adult citizens of all works of life residing in these communities and comprising those actually involved in various productive activities in these communities constituted the population of the study.

Sample size

The sample for the study was made up of 654 respondents selected from six (6) local government areas (Calabar Municipality was excluded due to its urban status) and eighteen (18) villages. In determining the sample size, the simplified procedure recommended by Taro Yamene(1967) was adopted. The sample of the study was made up of 654 respondents that were selected from clusters (villages or communities). The sample size for the study based on Taro Yamene's computation was 400 respondents. Therefore, considering the accrual/enrollment (response rate from questionnaire), drop-outs (lost and inappropriately filled) and the missing data, the geographical coverage being entirely Southern District in Cross River State, the researcher decided to increase the sample size of 400 by 50 percent. This then gave an overall sample size of 600. Additionally, by adding the 48 people who participated in the Focus Group Discussions (FGDs) and the 6 persons who were involved in the Key Informant Interviews (KIIs). Thus, a total of six hundred and fifty-four respondents constituted the sample size of the study.

Sampling technique

The multi-stage sampling procedure (purposive, stratified and systematic) was adopted for the study. Firstly, all the seven (7) local government areas that make up the southern Senatorial districts were studied except Calabar Municipality. Thus, 6 LGAs participated in the study. These 6 LGAs constituted the 6 strata of the study. Thus, Akamkpa represented stratum 1, Bakassi represented stratum 2, Biase represented stratum 3, Akpabuyo represented stratum 4, Calabar South represented stratum 5 while Odukpani represented stratum 6. From each stratum, three (3) communities were selected through the hat and draw method of simple random sampling procedure. These 3 communities constituted the 3 sub-stratum in each stratum. There were 6 strata in all. The same procedure of simple random sampling was adopted throughout the 6 strata. To draw the actual respondents for the study, a systematic random sampling procedure was used. Given the fact that the population of each sub-stratum is not homogenous, the proportionate sampling was thus adopted. This yielded a total of 600 respondents (see Table1).Overall, 48 people participated in the Focus Group Discussion and 6 people participated in the Key Informant Interview (drawn from each stratum).

Instruments

Three instruments were used for data collection: the questionnaire, the Focus Group Discussion guide and Key Informant Interview guide. For example, participants in the study were required to respond to the questionnaire items such as: "the need to check the spread in the number of COVID-19 cases led to the lockdown of schools in my area". Again, "COVID-19 made most of what we do for a living to close down because of the lock down"

Analysis and Discussion of Finding

Table 1: Sample distribution by strata and sub-stratum in the study area

	Strata				T	otal	
	A	В	С	D	E	F	GT RES %
Sub- stratum	1 2 3	4 5 6	7 8 9	10 11 12	13 14 15	16 17 18	
	35 31 34	25 40 35	33 29 38	43 26 31	26 39 35	34 30 36	600 600 100
Total	100	100	100	100	100	100	600 600 100

Source: Field Data (2021)



Hypothesis One

COVID-19 impact on education (literacy) has no significant association with socio economic wellbeing in Southern district of Cross River State. The result is presented in Table 2

Table 2: Pearson product-moment correlation analysis of the relationship between COVID-19 and socio economic wellbeing in terms of education/literacy in Southern Cross River State (N=600)

Variables	$\sum \mathbf{x}$	$\sum x^2$	$\sum xy$	r-cal
	$\sum \! {f y}$	$\sum y^2$		
COVID-19 pandemic				
a. Closure of schools (X_1)	1050	1950	1775	0.878
b. Stagnating educational endeavor (X_2)	1055	1970	1750	0.614
c. No free school meals (X ₃)	1040	1945	1780	0.925
d. Digital learning (X ₄)	1046	1952	1774	0.860
Socio economic wellbeing (y)	950	1650		

Significant at 0.05, critical- r= 0.195, df= 598

Source: Field Data (2021).

Results of analysis in Table 4.7 show that the calculated r-values of 0.878, 0.614, 0.925, 0.860 are greater than the critical r-value of 0.195 at 0.05 level of significance, with 598 degrees of freedom. This means that COVID-19 impact on education significantly related to socio economic wellbeing in Sub Saharan district of southern Cross River State.

Hypothesis Two

COVID-19 and socio economic wellbeing in terms of people's livelihoods in Southern Cross River State.

Table 3: Chi-square (x^2) contingency analysis of the association between COVID-19 and socio economic wellbeing in terms of people's livelihoods in southern Cross River State (N=600)

Variables	Househol	Total	
	High	Low	
COVID-19 pandemic			_
Shortage of food products	55	25	80
Food insecurity	50	45	95
Small retail business threatened	120	30	150
Loss of jobs	60	40	100
Disrupted food supply	32	53	85
Loss productive assets	48	42	90
Total	365	235	600

Source: Field Data (2021).

Table 4: Contingency table showing the association between COVID-19and socio economic wellbeing in terms of people's livelihoods in Southern Cross River State (N=600)

Cell	0	E	0 - E	$(0 - E)^2$	$(0 - E)^2 / E$
1	55	48.67	6.33	40.0689	0.82
2	25	31.33	-6.33	40.0689	1.28
3	50	57.79	-7.79	60.6841	1.05
4	45	37.21	7.79	60.6841	1.63
5	120	91.25	28.75	826.5625	9.06
6	30	58.75	-28.75	826.5625	14.07
7	60	60.83	-0.83	0.6889	0.01
8	40	39.17	0.83	0.6889	0.02
9	32	51.71	-19.71	388.4841	7.51
10	53	33.29	19.71	388.4841	11.67
11	48	54.75	16.75	45.5625	0.83
12	42	35.25	6.75	45.5625	1.29
Total	600				49.24

Source: Field Data (2021).

Calculated (X^2) value = 49. 24

Critical (X^2) value = 11.1

Level of significance = 0.05

Degree of freedom = 5

Result of analysis in Table 4.8 show that the calculated (X^2) value of 49.24 is greater than the critical (X^2) of 11.1 at 0.05 level of significance, with 5 degrees of freedom. This means that COVID-19 is significantly associated with socio economic wellbeing in terms of impact on people's livelihoods.

Hypothesis Three

COVID-19 impact on public health has no significant association with socio economic wellbeing in terms of people's health. The result of the analysis is presented in Table 4

Table 5. Chi-square (X2) contingency analysis of the association between COVID-19 impact on public health and socio-economic wellbeing in terms of people's health in southern Cross River State (N=600)

Variables	Socio econon	Total	
	Increased	Decreased	
COVID-19			
Health impact			
Accessibility/utilization of health care	220	100	320
Non accessibility/utilization	125	155	280
Total	345	255	600

Source: Field Data (2021).



Table 6: Contingency table showing the association between COVID-19 impact on public health and socio economic wellbeing in terms of people's health in southern Cross River State(N=600)

Cell	0	E	0 - E	$(0 - E)^2$	$(0-E)^2/E$
1	220	184	36	1296	7.04
2	100	136	-36	1296	9.53
3	125	161	-36	1296	8.05
4	155	119	36	1296	10.89
Total	600				35.51

Source: Field Data (2021).

Calculated (X^2) value = 35.51

Critical (X^2) value = 3.84

Level of significance =0.05

Degree of freedom = 1

Results of analysis in table 4.10 show that the calculated (X^2) value of 35.51 is greater than the critical (X^2) value of 3.84, at 0.05 level of significance with 1 degree of freedom. This means that there is a significant association between COVID-19 and socio economic wellbeing in terms of people's health.

Discussion of findings

The findings support (Goring 2021) who observes that food security faces several challenges across both production and consumption. Many countries are facing the double burden of hunger and under nutrition with one in three people across the globe currently suffering from some form of malnutrition. The pandemic increased the proportion of people unable to access food. The emergence of the novel coronavirus brought to the doorsteps of millions globally scores of persons, particularly entrepreneurs with many suffering from loss of incomes (Goring 2021). Niles, Bertmann, Morgan, Wentworth, Biehl and Nesf (2021) commented that secure and safe food system implying a continual supply of food is not available in a reliable, steady, safe and affordable has not been possible because of COVID-19. Bhat (2020) observed a one percent slowdown in the global agricultural productivity due to the adverse impact of the pandemic. The COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food system and the world of work.

The findings confirmed (WHO 2020) that economic and social disruptions caused by the pandemic is devastating: tens of millions of people have fallen into extreme poverty, with the

number of people currently estimated at nearly 690 million. Millions of enterprise face an existential threat. Nearly half of the world's global work force are at risk of losing their livelihoods (WHO 2020). Informal economy workers are particularly vulnerable because the majority lack social protection and access to quality healthcare and have lost access to productive assets. Without the means to earn an income many are unable to feed themselves and their families. For the most, no income means no food or less food and less nutrition food. The pandemic has affected the entire food system exposing its fragility. The containment measures of border closured, trade restriction and confinement measure prevented farmers from accessing markets, including buying inputs and selling their produce and agricultural workers from harvesting crops. This disrupted domestic and international food supply chains and reduced access to healthy, safe and diverse diets. The pandemic decimated jobs and placed millions of livelihood at risk. As breadwinners lose jobs, fall ill and die, the food security and nutrition of millions of women and men are under threat. Those in Sub-Saharan Africa and other low income countries particularly the most marginalized population such as small scale farmers and indigenous people are hardest hit.

Agricultural workers both waged and self-employed while feeding the world are facing high level of working poverty, malnutrition and poor health. With low and irregular incomes and a lack of social support, many of them are spurred to continue working in unsafe condition. Also, when experiencing income losses, they resort to negative coping strategies such as distress, sale of assets, predatory loans or child labor. (WHO, 2020). Covid-19 pandemic has had a devastating collateral effect on health services utilization. Although utilization of health services are improving since control of the pandemic was achieved utilization rates have not yet returned to their pre-pandemic levels. The risk of patients deferring or foregoing health service is increasingly high. (Delamou, AyadiSidibe, Delvaux, Camara & Sandouno, 2020). The COVID-19 has affected access and utilization of health care for the poorest and most vulnerable. This has affected people's socio economic wellbeing and exacerbated existing inequities in the health system (Donnelly, Patrinos & Gresham, 2021).

Conclusion and Recommendation.

COVID-19 has adversely affected the socio-economic wellbeing of Sub Saharan African district. 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. School closures due to COVID-19 brought significant disruptions to education. The pandemic is gave rise to learning losses and increases in inequality. To reduce and reverse the long-term negative effect, it is necessary to implement learning recovery programs, protect educational budgets, and prepare for future shocks.

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