



Perceived Threat of Covid-19 and Willingness to Vaccinate amongst Wage Earners in Minna Metropolis: A Qualitative Exposition

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Abstract

The outbreak of the Covid-19 pandemic threw Nigeria into a state of social disequilibrium. The imposition of lockdowns and new safety protocols did not receive a warm welcome from the people as there were gross violations of the safety protocols. The impetus for this study emanates from the violation of health safety protocols despite the danger of Covid-19 to human life. Therefore, the study assessed the perceived threat of the disease and the willingness to vaccinate among wage earners who, being the study respondents, are highly susceptible to infection. The health belief model was used to anchor the study. In-depth interview and focus group discussions were used to collect qualitative data from thirty six daily wage earners in Minna. Results from the study show a weak threat of covid-19 to the respondents as there is little or no fear for seriousness and susceptibility to the pandemic. Furthermore, the willingness of the respondents to take up the Covid-19 vaccine was poor and marred with suspicion and mistrust. Consequently, the study recommends adoption of more pragmatic approach in handling the Covid-19 cases by the NCDC for its danger to be appreciated; proper enforcement of the covid-19 safety protocols; and adequate incorporation of relevant bodies in the fight against the pandemic.

Keywords: Covid-19, Lockdown, Perceived Threat, Vaccination, Wage Earners

1. Introduction

The outbreak of Covid-19 pandemic shook the world to its spine. Consequently, the global paralysis of economic activities coupled with the banning of social and religious activities threw society into a state of social disequilibrium. This disequilibrium necessitated society's shift from the normal to a "new normal" (Herath & Herath, 2020). The outbreak of the pandemic came with fatal consequences which needed to be averted. Thus, in a bid to avert the fatal consequences, a common measure taken by most countries was the imposition of lockdowns (Kabir, 2020). In addition, other health regulatory measures were instituted and signed into law to curtail further rise in infections. These regulatory measures which are meant to guide people in their daily life activities include compulsory use of face masks, regular hand washing, observing social distancing, and avoidance of large gatherings, amongst others (Ahmad, 2021).



During the lockdown regimes, few days were designated for outing and restocking of basic necessities. On such window days, there were gross violations of the Covid-19 safety protocols. Ebonyi and Abok (2020) observe that people have little or no fear for the pandemic and have shelved all the safety measures put in place by government and the health authorities. The study observes that large crowd of people intermingle in the markets, banks and in worship centres. There was disregard or improper use of face mask, no hand washing equipment in many places and the few provided are not being utilised. No regard for social distancing amongst others. These actions defy the essence of the lockdown and reduce the chances of flattening the curve of Covid-19 in Nigeria. The gross violation of these safety protocols led to the establishment of mobile courts in many States of the country for the purpose of trying offenders (Achirga, 2021). Furthermore, on the 27th of January, 2021, the President of the Federal Republic of Nigeria signed into law the Covid-19 Health Protection Regulation as a way to ensure compliance to the safety protocols (Ahmad, 2021). Notwithstanding, most Nigerians remained adamant to attitudinal change and hardly accepted the reality of the pandemic's fatal consequences. Salami, Ayegboyin and Adedeji (2018) aver that during epidemics, there are challenges with compliance to safety protocols due to people's sociocultural backgrounds. The Ebola Virus Disease (EVD) faced challenges of containment in Nigeria owing to the sociocultural beliefs and practices of the people.

Consequently, the procurement of the AstraZeneca/Oxford vaccine which was to serve as a means of prevention and containment of the pandemic equally was marred with challenges. Generally, reception to vaccination has been poor in the country (Obasohan, Anosike, & Etsunyakpa, 2015). The case with polio vaccine is a good demonstration of this (Agbana, Kunle-Olowu, & Taiwo, 2018). With the prevailing attitude to the Covid-19 safety protocols coupled with the underlying attitude to vaccination in Nigeria, there are indications that the case of Covid-19 vaccine would not be different (Adebisi, Bolanriwa, Akande-Sholabi, & Lucero-Prisno, 2021). Located in the North-central geo-political zone of Nigeria, Niger State had its fair share of the Covid-19 burden. This is influenced by its proximity to Abuja, the nation's capital, which has been severely affected by the pandemic. While the State commenced its lockdown regime and subsequent enforcement of safety measures such as use of face mask, social distancing, hand washing, avoidance of crowd, banning of intra and interstate movements, etc., there were also gross violations of these safety protocols (Idris, 2021). Minna, State capital, was not left out in the unfortunate development and cases in the city surged. Consequently, the State established mobile courts which were authorised to try and prosecute the offenders (Yahaya, 2021). This study therefore seeks to investigate why people in Minna metropolis disregard Covid-19 health protocols and their attitude to vaccination. This sociological investigation would be guided by two carefully designed objectives, which is to assess the perceived threat of Covid-19 among wage earners in Minna metropolis; and to assess the willingness to vaccinate among wage earners in Minna metropolis. Wage earners who survive on daily earnings are at



higher risk of infection due to their daily encounter with large numbers of people in the course of their daily routine. Thus, they form the main focus of this study.

2. Literature

This study is anchored on the health belief model (HBM) of Hochbaum, Rosenstock and Kegels. The Health Belief Model (HBM) was introduced in the 1950s in United States when a group of researchers set out to search for reasons why tuberculosis treatment failed in some of the communities. The researchers, Hochbaum, Rosenstock and Kegels in the 1950s argue that an individual's knowledge of disease symptoms, severity and threat combine to influence an individual's response to a disease condition. Thus, the HBM makes use of a set of six constructs to buttress how the model works. Two of the constructs are utilised to establish the threat of covid-19 to the respondents in this study.

Perceived seriousness: this refers to a person's feelings about the seriousness or severity of a disease. Certain diseases (such as flu) are believed by people to be common and not life-threatening. As such, people are not startled by its occurrence and such diseases could be left untreated. The decision to take action usually depends on a person's assessment of the medical consequences (e.g. permanent disability or death) and social consequences (e.g. disruption of family and social life). Thus, when the consequences are perceived to be severe, actions would be taken to avoid getting infected.

Perceived susceptibility: this construct refers to the subjective perception an individual has towards contracting a disease. If an individual perceives a greater risk of contracting a disease, they would take measures to avert the danger of infection especially when such disease is perceived as a serious one. In this case, vaccinations against flu could be embarked upon in order to prevent its occurrence. Perceived seriousness of a disease combined with the perceived susceptibility to the disease forms what the proponents of the model call "perceived threat".

This model suits the study given its potency to assess the feeling of being threatened by the Covid-19 pandemic. An assessment of the respondents' perceived severity and susceptibility would reveal the real threat of Covid-19 to the respondents.

3. Methodology

The study covers Minna metropolis. Minna, the Niger State Capital, is made up of two local government areas namely, Bosso and Chanchaga Local Government Areas. The study area is a typical urban settlement and it hosts the Central Business District (CBD) where commercial activities are the major preoccupation of the settlers. The study population consist of individuals who earn their livelihoods on paid wages. Thus, all respondents were purposively drawn from a pool of daily wage earners who are believed to be highly susceptible to infection of the Covid-19. Respondents were drawn from daily wage earner who had spent at least one year working in the location of the study. For convenience, Minna metropolis was divided into two clusters, Chanchaga cluster and Bosso cluster, and respondents were assigned proportional to the size of each cluster. Respondents cut across



the following artisans: vulcanizers, building construction labourers, tea joint operators, Okada riders (commercial motorcyclists), barbers, petty traders, fruit sellers, car washers, and car accessories sellers. Each category of artisans had four respondents who were sampled randomly from the two clusters. A total of thirty six respondents were used for the study. Twenty one of the respondents were selected from the Chanchaga cluster while fifteen were selected from the Bosso cluster.

The study adopted in-depth interview as means of data collection. In addition, two focus group discussion sessions were held with the respondents. The interviews were used to achieve the first objective of the study while the focus group discussions were used to achieve the second objective of the study. Thematic analysis was used to analyse the data. Transcription and coding of the notes and recordings from the field was done by the researcher with careful attention being paid to emerging categories and themes. Every relevant detail from the interview and group discussions were carefully extracted and adequately represented. Results and discussions are presented in the next section.

4. Result

Findings from the data collected are presented in subheadings of emerging themes as follows: Perceived threat of Covid-19; perception of government's response to the pandemic and willingness to vaccinate.

Perceived Threat of Covid-19

Covid-19 pandemic is believed to be a serious health emergency and its fatality rate is shrouded in gross uncertainty. However, the perception of the respondents contradicts the scientific knowledge of the disease. The submissions by the respondents on the threat of covid-19 are given below. A 36 year old building construction labourer states:

"We heard that the disease (Covid-19) has killed many people in the western countries. But, African countries have not recorded such deaths because it is not their kind of disease. If the disease was a serious problem in Africa, Nigeria alone would have recorded several deaths and not this small number. In fact, there are more serious diseases worse than coronavirus in Nigeria."

Furthermore, there exists the belief that the pandemic is a divine sanction for the sacrileges committed by people. This is corroborated in the submissions of a 27 years old car washer:

"This disease is worse in countries that offend God most. You see it is the white people that say there is no God, and they are the ones doing same sex marriage which is something God does not like. So, we here don't have the problem because we don't sin like them."

While perceptions about the seriousness of the disease remain shaky, some of the respondents attribute the seriousness to climatic conditions as observed by the 28 years old barber:



“They said the disease is similar to catarrh, and it is when there is cold that we experience issues of catarrh. Nigeria has more heat than the white man’s country which is always cold. So, it is normal to have more cases of the disease there than here in Nigeria.”

Also, Covid-19 is believed to be a mere illusion and not a reality. This is the submissions of a 32 years fruit seller thus:

“Covid-19 is a foreign illness... we have hardly seen or heard of anybody that has contracted the illness let alone mention dying from it. Also, Ebola came and we saw the consequences but Corona is invisible since we can’t even see patients suffering from the disease. So, we cannot believe the disease is real let alone being dangerous.”

A further probe on the seriousness of covid-19 reveals that the disease is perceived to be a conspiracy of the western countries towards colonising the unsuspecting African countries. This is contained in the following submission by a 56 years old tea joint operator:

“Covid-19 is not a disease rather it is fabricated to gain control of African countries by the western world. That is why they are able to absorb the (economic) shock of the pandemic while African countries are struggling to recover. Every day on BBC news, I hear how they are always giving help or loans to African countries. They are simply planning to make us poorer.”

The above submissions show the respondents as perceiving gross mischief in the whole scenario of Covid-19. Thus, they are more likely to consider it as an unserious disease. Furthermore, the perceived susceptibility of the respondents to covid-19 shows they are inclined towards believing that a racial genetic dichotomy puts the Negro race at an advantageous position. This is summarised in the responses given below. A 33 years old car accessories seller states:

“The disease does not exist here in Africa. It is a western pandemic and has nothing to do with the black race. Black people are immune to the disease...”

In corroboration, a 58 years old Vulcaniser made a similar submission thus:

“Well, the disease may be real. But, surely it does not exist here in Minna and Niger State at large. In fact black men are not affected by it. The government is only trying to force the pandemic on the people since the death of the President’s Chief of Staff which may not even be as a result of Covid-19.”

Similarly, the perception on the seriousness and susceptibility of the disease is what has translated to poor compliance to the Covid-19 health protocols. This was the submission of a 34 years old Okada rider:



“This disease is not a problem here, if not all of us would have died. We did not use face mask and we are still alive and healthy. So, we cannot be suffering ourselves doing what is not necessary. In fact, it is those ‘Big men’ who use face mask that die often”

On a general note, the submissions above show that the wage earners do not perceive Covid-19 as a serious disease and do not also see themselves as susceptible to infection. This may be the reason why there is flagrant disregard for the safety protocols dished out by the Presidential Task Force (PTF) on Covid-19.

Willingness to Vaccinate

The respondents’ willingness to take the Covid-19 vaccine was also assessed. Vaccination was considered irrelevant given that death was avoidable during the peak days of the pandemic. This is expressed by a 38 years building construction labourer:

“...government has caused us hardships and life has become very difficult. Since that lock down period till this moment, we are just struggling to survive. After suffering us, they are now telling us to take vaccine. I won’t take it because I can’t die from the disease since it did no kill me when it was killing many people in the world.”

Suspicion of ulterior motives also clouded the respondents’ belief about the efficacy of the vaccine as stated by the 33 years old car accessories seller:

“In the past, we had cholera outbreak and the government did not lockdown any place. There are other disease like lassa fever and even Ebola, which all did not cause lockdown and vaccination. But now, because they want to reduce our population, they are forcing the wicked vaccine on us.”

From the above submissions, it is clear that the respondents do not see uptake of the Covid-19 vaccination as a reasonable decision. This is hinging on the fact that they had not perceived the pandemic as a threat. In fact, the response of government to the pandemic is what is considered a threat. In a similar submission, a 35 years old petty trader in Minna central market states:

“Gaskiya! I can’t believe this thing (Covid-19) is real. It is not even in Nigeria rather the government is just using it to steal money. You ask me whether I will take vaccination, I can’t vaccinate because I can’t be infected with what does not exist...”

To substantiate the perception on government’s response to the pandemic, a 26 years old car washer expresses the hardship faced:

“During the lockdown, life was difficult because we hardly could do anything. In fact, the restriction of movement stopped our business



because there were no cars to wash again and we didn't even see any palliative... and they are busy worrying us about corona vaccine.

Furthermore, there was high suspicion on the vaccine itself. The respondents shared the belief that the vaccine could change people's DNA and cause death in no distant time. This was expressed by a 58 years old Vulcaniser:

"We heard that anybody who takes the vaccine falls ill and hardly recovers. I have decided never to even try it because I don't want to die now."

The above submission illustrates a typical resistance to the Covid-19 vaccine as reported in the study of Adebisi, Bolanriwa, Akande-Sholabi, and Lucero-Prisno (2021).

Discussion

The study sets out to achieve two major objectives. The first is to establish the perceived threat of covid-19 among the respondents. This objective is germane to understanding people's compliance or noncompliance to health safety protocols put in place by government and health authorities. The higher the perceived threat of a disease, the higher the chances of compliance to health measures instituted to curtail the escalation of such diseases and vice versa. From the results presented in the preceding section, it is glaring that the respondents are not threatened by Covid-19 as expressed by majority of the respondents. This is partly because the respondents find little or no evidence to suggest the disruption of social life with no easily identifiable patient seen to be knocked down by the disease. This is in conformity with the findings of Ebonyi and Abok (2020). The subjective belief of the respondents which negates scientifically proven evidence poses a serious threat to the fight against Covid-19. This portends great danger especially given the fact that the opinion is held by residents of a major urban settlement. The implication is that there are chances of enormous community transmission of the virus. Consequently, it is worthy of mention that Covid-19 in Minna metropolis is being misconstrued by a significant number of residents who remain ignorantly susceptible to the virus. Thus, this finding is a pointer to a worrisome situation in Minna.

Secondly, the willingness of the respondents to vaccinate is low given the reservations they have for the vaccine. The respondents expressed fear of the Covid-19 vaccine even more than the disease itself. This is because they have heard scary tales of the consequences of the vaccine which they perceive as more fatal than even the disease itself. This prevailing mistrust and suspicion has culminated in unwillingness of the people to take the vaccine. This attitude to the vaccination substantiates the findings of Adebisi, Bolanriwa, Akande-Sholabi, and Lucero-Prisno (2021) in a study of willingness to vaccinate among health workers in Nigeria.

5. Conclusion and Recommendations

In conclusion, every disease perceived as a threat to social life elicits conformity to the health safety protocols instituted to curb the spread of such disease and vice versa.



Consequently, this paper concludes that there is low perceived threat of Covid-19 amongst wage earners in Minna, Niger State. In turn, this has negatively affected the willingness of the wage earners to vaccinate against Covid-19. Given the foregoing conclusion, the study recommends that the Federal Ministry of Health through the Nigeria Centre for Disease Control (NCDC) should take more practical steps towards enlightening the people on the pandemic rather than shrouding details of the infections, treatments and fatalities in secrecy. Specifically, the NCDC should match the data on infections with the number of patients put in isolation. This would reduce the fictitiousness of the data published daily and provide the necessary evidence in convincing the people on the reality of the pandemic. This can help improve compliance to the established safety protocols.

Concerned authorities such as the ministries of health, education, youths and sports development, and religious affairs should ensure adequate monitoring of activities in the city-centres in order to enforce the safety protocols. This includes use of facemask, hand washing or use of hand sanitizers, avoidance of large gatherings, and observing social distance. It is not enough to make the laws but their implementation must be taken seriously in order to avert subsequent waves of the pandemic. While procurement of the Covid-19 vaccine is a right step in the right direction, its uptake must be taken seriously and citizens must be adequately sensitised to avail themselves for administration of the vaccine. In this regard, religion has proven to be a veritable tool. Thus, religious leaders of various religions should be drafted as ambassadors of the campaign for Covid-19 vaccine to be taken by the people. In addition, traditional rulers also have a key role to play in supporting these efforts as their authority in the grassroots is significant in achieving success.

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