



## **Assessment of (Covid-19) Pandemic on Artisans Poverty Vulnerability in North Central of Nigeria**

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### ***Abstract***

*This study assesses the cynosure of Coronavirus Diseases Pandemic (Covid-19) on artisans poverty vulnerability in North Central States of Nigeria including the Federal Capital Territory Abuja. The main objectives of this research was to examine the concept and nature of the Coronavirus disease and how the lockdown affects the artisans in the study area. Multistage sampling techniques were employed. Taro Yamane Formula were used in sample size selections. Multiple Linear Regression Model of Augment Dickey Fuller and Philip-Perron were used for data analysis. The time frame for the study was March - October, 2020. The result revealed that DW 2. 794211 implies that the Covid-19 exert great negative impacts on the artisans as they remain poorer and poorer due to the pandemic.*

***Keyword:*** Assessment, Covid-19 Pandemic, Artisan Poverty Vulnerability, North Central, Nigeria

## ***Introduction***

According to Oxford Advanced Learners Dictionary 7<sup>th</sup> Edition (2006) diseases are described as an illness affecting human, animals or plants, often caused by infections. Diseases is used to talk about more severe physical medical problem especially those that affect the organs. While illness is severe that affects mental health. Infectious diseases are caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi, the diseases can be spread directly or indirectly from one person to another. Zoonotic diseases are infectious diseases of animals that can cause disease when transmitted to a human.

Diseases outbreak as describes by World Health Organisation (WHO, 2019) as when an illness happens in unexpected high numbers, and it may stay in one area or extend more widely. An outbreak can last days or years. Sometimes experts consider a single case of a contagious disease to be an outbreak. This may be true if it is an unknown disease to the community or entirely new. An epidemic is when an infectious disease spread quickly to more people than experts would expect.

Corona or coroneae was described by Philip (2019) cited Advanced Learners Dictionary 7<sup>th</sup> Edition (2006)

as a ring of light seen around the sun or moon especially during an eclipse. At the same time, virus was described as a living thing too small to be seen without a microscope, that causes infectious disease in people, animals and plants. A diseases caused by a virus release from the area of the sun or moon due to human activities. This disease was first noted in Wuhan area of China in 2019.

Song *et al* (2020) ascertain that coronaviruses are enveloped, positive single-stranded RNA viruses widely distributed in humans and animals worldwide. He reported that although most human coronaviruses infectious are mild, major outbreaks of two beta coronaviruses, severe acute respiratory syndrome (SARS -COU in 2002 -2003 and Middle East respiratory syndrome (MERS - COU) in 2012, have cause deadly pneumonia, with mortality rate of 1.0% for SARS-COU and 36% for MERS-COU.

In December 2019, clusters of pneumonia cases of unknown etiology emerged in Wuhan, Hube province, China, Deep Sequencing analysis from lower respiratory tract samples indicated a novel coronaviruses as the causative agent, which was named severe Acute Respiratory Syndrome-

coronaviruses 2 (SARS-COU-2) and the disease it causes call COVID19 (World Health Organization, 2020). The World Health Organization (WHO, 2020) observed that although SARS-COU-2 has shown phylogenetic and clinical similarities with SARS-COU, the novel coronaviruses appears to have a higher transmissibility and lower mortality rate. Ceccarelli *et. al*, (2020) opines that Covid-19 outbreak is a public health emergency of international concern, and on March 11, 2019 the epidemic was upgraded to pandemic. As at 5<sup>th</sup> September, 2020. Nigeria has 54, 588 confirmed cases with 1,048 deaths. Globally, 26,492, 489 cases are confirmed while 873, 589 deaths (Huange *etal*, 2020). As at present as reported by FM Radio 99.6 that the total number of people affected by the pandemic has risen to 59,738 and 113 death were also recorded. The world number of victims stood at 167,000 etc.

Historically, particularly for the past 500 years or so the world have witness the provision of numerous examples of how the establishment and expansion of worldwide transportation modes had and still facilitating global pandemics of communicable diseases. According to (Eckert, 2000) more than 200 million people are thought to have been killed by bubonic plague in three major pandemics between 14<sup>th</sup> & 17<sup>th</sup> centuries. Bacillus, Yersinia Pestis was transmitted from infected rodents, often rats by flea bites (Lounibos, 2002). Many medical historians ascertain that "Black Death" killed a third of Europe's central and Northern populations in the mid 14<sup>th</sup> century brought about by bubonic plague. This disease arrived in siciky in 1347 and swept Northward to Scandinevia and other European nations (Twigg, 2003). India 1994 outbreak resulted in just 52 deaths but over 1 billion USD in economical cost, demonstrating how vulnerable the global economy can be. Vibrio cholerae. Like disease go back as far as the times of Hippocrates and Buddha (Reidi and Klose, 2002). In India, vibrio cholerae pandemic in 1817 spread to Britain, Japan, Indonesia and China. In 1918 the confluence of America, Europe and Africa, France were severely affected by influenza virus pandemic millions of people were also killed (Palese, 2004). The spread of HIV/AIDS pandemic worldwide spread from Guinea Bissau, West Africa and central Africa. This disease spread to all parts of the world killing millions of people across the globe through sexual contacts.

According to (UNAIDS, 2004) estimated that 29.4 million people were living with HIV and causing around 3 million deaths a year in sub-Saharan Africa. Severe Acute Respiratory Syndrome (SARS) is a coronavirus pandemic that

adapted from animal hosts to become readily transmissible between humans (Pelvis *et.al*, 2004) Southern China has produced one plague pandemic and two influenza pandemics over the last 150 years and severe acute respiratory syndrome (SARS) represent the 4<sup>th</sup> global pandemic originating from China area. This disease first originate from Guangdong province of China around November, 2002. This disease infected over 800 people in 26 countries across 5 continents. Negative economic impacts was US\$30,140 billion.

While bioterrorism has been at the forefront of public health planning since September 11, 2001 attacks on pentagon New York. One of the earliest documented uses of biological weaponry occurred in 1346 when wars and plague were decimating in the Middle East. The most threatening of infectious agents include botulism, influenza, plague, tularaemia, viral haemorrhagic fever e.g. Ebola, Marburg and Lassa Fevers), anthrax and smallpox. In the minds of most military and counter terrorism planners, anthrax and smallpox represents the greatest bioterror threats all over the world. (Lane, *et. al*, 2001).

In the first Quater of 2020 the coronavirus disease popularly known as COVID-19 has escalated to various parts of the world including Britain, France, United States of America, Finland, Asia and some other parts of the world killing million of people including the rich and the poor. Nigeria was not left out of this pandemic as the disease which originated from Wuhan China affected many populous nations in Africa were seriously affected. The economic lockdown witnessed in the first and second quarters was very devastating. Industrial facilities were shutdown, Aviation, Education, Economic activities, social activities, human movements were restricted, streets were deserted while coronavirus infects people regardless of Human status. The Artisans and the poor were more affected economically. The Artisans are the Road side Motor mechanics, motorcycle mechanics, tricycle mechanics, Iron Benders, Iron Welders, Vulganizers, Wrist Watch Repairers, Petty Traders, Taxi Drivers, Patient Medicine settlers, Television and Radio repairers, Barrow or Truck pushers, Tailors, Brick layers and painters well all negatively affected and pushed into abject poverty.

Studies abound on Coronavirus Disease Pandemic (COVID-19) and its effects on the spread and how it could be controlled such as Ozili and Arum, (2020), Idris, (2020), Giannakis *et.al*, (2017), Huange, *et.al*, (2020), Song 2 *et.al*, (2020), WHO COVID-19 (2020), Ceccarelli *et.al*, (2020), Aregbesola,

*et.al*, (2019) ascertained that the effects of coronavirus disease is devastating on the people and the global economy. Demography and social lives Samuel, (2020) reported that on 13<sup>th</sup> at October, 2020 could 19 update in Nigeria rose to 225 New confirmed cases and 1 death recorded in Nigeria. To date, a total of 60,655 cases have been confirmed, 52,006 cases discharged, 1,116 deaths recorded in 36, states and Federal Capital Territory Abuja, making a total of 558,313 test carried out as at October 13<sup>th</sup> 2020.

However, no systematic research has been carried out on the effects of coronaviruses pandemic on Artisans poverty vulnerability in the North Central States of Nigeria hence the essence of this research to fill the literature gap.

### **Objectives of the Study**

This research aimed to generate both qualitative and quantitative empirical data from both primary and secondary sources on the Covid-19 pandemic on poverty vulnerability in

North Central, Nigeria. The specific objectives is;

- i. To assess the level of poverty vulnerability on the Artisans as caused by COVID-19 pandemic.

### **Hypothesis Formulation**

Based on the following presentations, the basic hypothesis to be tested are;

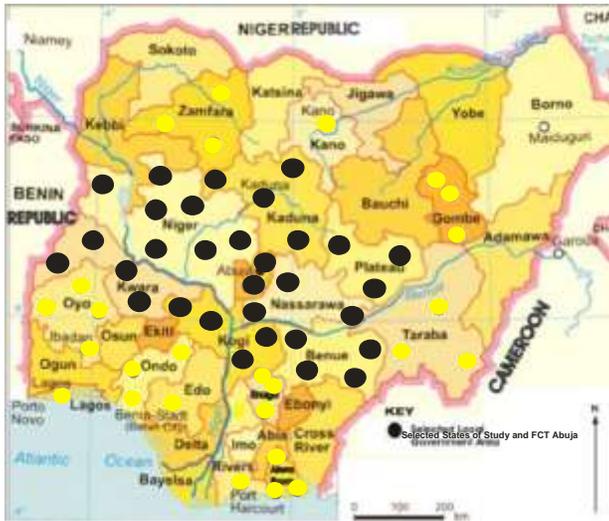
**H<sub>01</sub>:** There is significant relationship between Coronavirus Diseases Pandemic COVID-19 and Artisans poverty vulnerability in North Central, Nigeria.

**H<sub>02</sub>:** There is no significant relationship between Coronavirus Diseases Pandemic and Artisans poverty vulnerability in North Central, Nigeria.

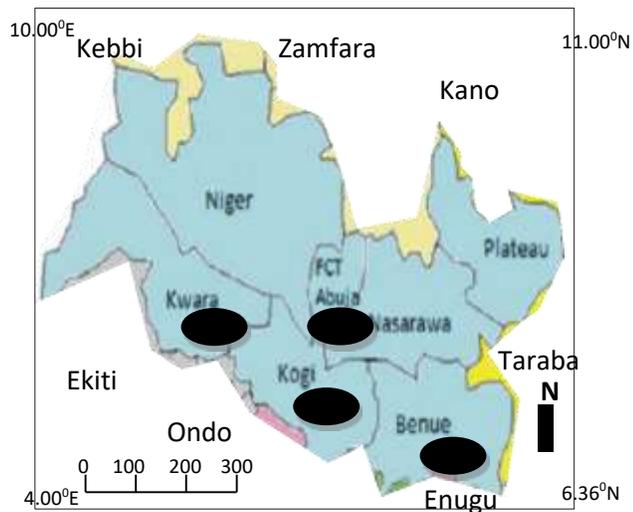
### **Material and Methods**

#### **The Study Area**

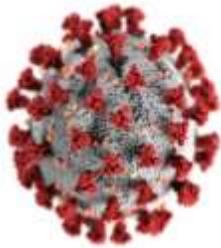
The scope of this research is on the Artisans poverty vulnerability in North Central stated of Nigeria. The states under study are Benue, Niger, Kogi, Kwara, Plateau, Nassarawa and Federal Capital Territory Abuja, Nigeria respectively. The focus was on the capital towns of this states. They are Makurdi, Minna, Lokoja, Ilorin, Jos, Lafia and Abuja. A total number of 172 interview schedules were used for this research. Time frame for this study was MarchOctober, 2020. ie 8 month.



**Fig 1: Map of Nigeria Showing the study area**  
**Source: Macmillan Map, 2020**



**Fig 2: Map of North Central States and FCT**  
**Source: Macmillan Map, 2020.**



**Fig 3: Covid-19 Cells**  
**Source: Field Survey, 2020**



**Fig 4: Covid-19 Victims**  
**Source: Field Survey, 2020**



**Fig 5: Total Lockdown all over the world**  
**Source: Field Survey, 2020**

The bulk of the material and data needed for the research were obtained from three sets of population namely six states carefully selected from North central Nigeria. They are Benue, Niger, Kogi, Kwara, Nasarawa, Plateau state and the Federal Capital Territory Abuja. The North central Geo-political zone was considered for this study as it occupies the North central zone of Nigeria. The location of North Central of Nigeria falls within Latitude  $6.36^{\circ}\text{N}$  and  $11.00^{\circ}\text{N}$  and Longitude  $4.00^{\circ}\text{E}$  and  $10.00^{\circ}\text{E}$ . It falls within the Guinea savannah Region of Nigeria. With mean annual rain fall of 2000mm in wet years and as low as 500mm in drought years between May and October (Folorunsho, 2012). Dry season are November to April. Hot dry season falls between March and April with a temperature high as  $32.0^{\circ}\text{C}$ . The 172

respondents were all selected based on clusters in each of the state capitals namely, Abuja, Makurdi, Minna, Ilorin, Lafia and Jos respectively.

### Methods of Data Collections

One hundred and seventy-two respondents were carefully selected for this study. In each of the state capital Artisans clusters in the Central Business Districts (CBD) i.e central motor parks and central market squares and area surrounding them were the places where the Artisans were clustered according to their businesses. Random sampling selection techniques was employed in the selection of the samples. Taro Yamane formula was used for the selection of sample size i.e. 306 respondents as sample frame and 172 as sample size respectively.  $n = \frac{N}{1 + N(e)^2}$

$C = \text{Limit of tolerable error}$   
 $I = \text{Constant}$

Where

$N = \text{Population size}$

$n = \text{Sample size}$

e.g 360

$1 + \frac{306}{(0.05)^2} n = \frac{306}{1.77}$   
 $= 172 \text{ sample size}$

$nh = \frac{n \times Nh}{N}$

$nh = \text{Sample size} \Rightarrow 172$   
 $\text{respondents } n = \text{Targeted number of respondents } 172$

$Nh = \text{Sample frame } 360$

$N = \text{Total Population } 360$

State Capital	Sample Frame	Sample Size	
<b>Abuja</b>	65	36.5	e.g $nh = \frac{65}{1.77}$
<b>Makurdi</b>	40	22.4	$\times 172$
<b>Minna</b>	61	34.2	306
<b>Ilorin</b>	50		

<b>Lafia</b>	46	28.1	= 36.5359477
<b>Jos</b>	44	25.8	
		24.7	
<b>Total</b>	<b>306</b>	<b>172.0</b>	

**Source: Field Survey, 2020**

Memory recall technique was used to gather information concerning the Artisan experiences during the total lockdown of the coronavirus disease pandemic in various state capitals. Specifically, data were collected from the various artisans such as Panel Beaters, Road side Mechanics, Petty Traders, Taxi and Truck drivers, Food Vendors, Refrigerator and Air Condition Repairers, Wrist Watch Repairers, Fruit Vendors, Plumbers, Shoe Makers, Electricians, Brick Layers, Wheel Allienmenters, Earth, Capennters, Fashion Designers, Radio and Television Repairers, Barbers, Iron Benders, Hair Stylists and the host of others.

Data were obtained on their experiences after the two weeks of compulsory lockdown and other week of the coronavirus disease pandemic partial lockdowns and how it affected them on severe poverty vulnerability. and its effects on socio-economic activities of the artisans, for example on extreme hunger, Health conditions, Total restriction of movements, water shortage, malnutrition's and poverty, sanitation, poor environment, poor hygiene, poor welfare service, inadequate flow of cash, easy spread of Diseases, Forceful use of face mask, constant washing of hands with Alcohol based sanitisers, maintaining of social distance, travel restrictions, restriction of local movements, lock of Banks, offices, industries, post officess, court were used to elicit information from the Artisan after reconnaissance pilot visits to the area.

Mobile phone messages, Whatsup messages, Instagram message, Facebook messages, Twitter messages and the host of other sources of information were used to obtain a firsthand information concerning the artisans socio-economic status at the time and after the total lockdown. Multiple Linear Regression Model of Augment Dickey-Fuller and Phillip-Perron

Analysis methods were used to analyse the data. Pairwise Granger casualty Tests were also employed via SPSS programme to ascertain the interrelationship between cynosure of Covid19 pandemic on artisans poverty vulnerability in North Central States of Nigeria.

## Results and Discussions

After one month of the compulsory Covid-19 Lockdown visits were made to some state capitals of North Central Zone of Nigeria, central motor parks and central market squares were visited including the major street of each town of study as reconnaissance and pilot visits. Mobile phone numbers were collected from the sampled Artisans, Whatsap numbers were also exchanged to obtain first hand information on Covid-19 pandemic. Parameters for measuring the effects were listed in table below.

**Table 1.**  
**Matrix for Measurements n - 172**

Coronavirus Diseases Pandemic (Covid - 19)		Artisan Poverty, Vulnerability	
<b>TLD - Total Lockdown</b>		<b>HUP - Hunger and Poverty</b>	
<b>DES - Deserted Streets</b>		<b>LCF - Low Cash Flow</b>	
<b>SEI - Self Isolation</b>		<b>STE - Stagnant Economy</b>	
<b>HDR - High Death Rate</b>		<b>NSC - No School for Children</b>	
<b>FMU - Face Mask Usage</b>		<b>TLD - Treck Long Distance</b>	
<b>COR - Confinement &amp; Restriction</b>		<b>NRE - No Regular Electricity</b>	
<b>SAE - Security Agents Embarrassment</b>		<b>NRW - No Regular Water Supply</b>	
<b>ABHW - Alcoholic Based Hand Washing</b>		<b>DIE - Dirty Environment /Poor Hygiene</b>	
<b>WOH - Workers to Work from Home</b>		<b>MRT - Mass Retrenchment/ Suffering</b>	
<b>ECS - Economic Shutdown</b>		<b>MAL- Malnutrition/Hunger</b>	
<b>ASS - Aviation Sector Shot up</b>		<b>SINU - Swelling Unemployment</b>	
<b>SRD - School and Religion Places Lock Down</b>		<b>STW - Stagnant Wages</b>	
<b>PAB - Panic Buying and Hoardings</b>		<b>FGP - Fall in G.D.P</b>	
<b>HMR - High Mortality/Retrenchments</b>		<b>HIR - High Inflation Rates</b>	
<b>FSH - Forceful Stay at Home</b>		<b>HFP - High Fuel Prices</b>	
<b>FCO - Fall in Crude Oil Prices</b>		<b>PSA - Poor Social Amenities</b>	
<b>SDP - Social Distances Policies</b>		<b>ACL - Acrimonious Legislations</b>	

### **Socio – demographic characteristics of the respondents.**

The Artisans age is between 45 – 50yrs. In terms of Gender 87% of them are Male while Women take the remaining 13%, All the Artisans are Married 100% About 86% of them have primary Education. In terms of Occupation they are all artisans. Their income very according to the type of trade they engage in. They reported that, before the Covid-19 pandemic they earn up to ₦ 128, 000.0.0 per annum ₦110, 000.00, ₦ 56, 000.00, ₦ 72, 125,00, ₦94, 000.0.0 e.t.c. But during the Covid – 19 period they were all returned to Zero Naira. They hardly feed their family and life was very difficult for the Artisans. The Federal Government of Nigeria distributed Covid – 19 palliatives to the 36 state of the federation including FCT Abuja, but it was very inadequately distributed and on 28<sup>th</sup> October 2020 some stores were broken into and the hoodlums removed teams like Rice, Maize, Spaghetti, indium and other foods from those stores. Gwagwalada Ilorin, Jos ,Lafia, and Markurdi experienced the story breakages. This is a clear indication that the Artisans are poor and highly vulnerable to poverty.

**Table 2: Stationary Test of Variables  
Augmented Dickey –Fuller and Philip-Perron Test**

Variable	ADF Statistic	Order	Philip Perron	Order
TLD	- 13.59344	(0)4	- 5.65207	
DES	- 11.93567	(0)4	- 5.992176	
SEI	- 12. 81119	(0)4	- 5.85215	
HDR	- 9.74532	(0)4	- 11.65873	
FMU	- 9.66118	(0)4	- 7.95477	
COR	- 9.73564	(0)5	- 7.92143	
SAE	- 9.64214	(0)5	- 8.93567	
ABSW	- 9.89214	(0)5	- 6.75645	
WOH	- 9.78852	(0)5	- 6.74778	
ECS	- 9.75226	(0)5	- 7.75564	
ASS	- 9.76623	(0)5	- 6.666111	
PAB	- 9.77642	(0)4	-5.965981	
HMR	- 9.75647	(0)4	-6.974119	

**5% Critical Value**  
**(0) 4 (2.9558) (0) 5 (2.9591)**

**Pairwise Granger Causality Test**  
**Table 3: Rejection of Null Hypothesis**  
**Null Hypothesis**

					Obs	F-Statistic	Prob.
TLD	Does not Granger	Causal	<b>HUP</b>	172	3.72531	0.0368	
	Artisans poverty						
DES	Does not Granger	Causal	<b>LCF</b>	172	12.82921	0.0111	
	Artisans poverty						
SEI	Does not Granger	Causal	<b>STE</b>	172	4.75644	0.0422	
	Artisans poverty						
HDR	Does not Granger	Causal	<b>NSC</b>	172	5.62654	0.0144	
	Artisans poverty						
FMU	Does not Granger	Causal	<b>TLD</b>	172	10.91002	0.0153	
	Artisans poverty						
COR	Does not Granger	Causal	<b>NRE</b>	172	7.82334	0.0065	
	Artisans poverty						
SAE	Does not Granger	Causal	<b>NRW</b>	172	8.752116	0.0071	
	Artisans poverty						
ABSW	Does not Granger	Causal	<b>DIE</b>	172	7.51002	0.00071	
	Artisans poverty						
WOH	Does not Granger	Causal	<b>MRT</b>	172	10.91574	0.0081	
	Artisans poverty						
ECS	Does not Granger	Causal	<b>MAL</b>	172	10.81962	0.0074	
	Artisans poverty						
ASS	Does not Granger	Causal	<b>SINU</b>	172	12.71111	0.0064	
	Artisans poverty						
SRD	Does not Granger	Causal	<b>STW</b>	172	5.69812	0.0057	
	Artisans poverty						
PAB	Does not Granger	Causal	<b>FGP</b>	172	7.533817	0.0091	
	Artisans poverty						
HMR	Does not Granger	Causal	<b>HIR</b>	172	8.46542	0.0085	
	Artisans poverty						
FSH	Does not Granger	Causal	<b>HFP</b>	172	8.77664	0.0002	
	Artisans poverty						

FCO	Does not Granger Causal	PSA	172	9.47781	0.0057
Artisans poverty					
SDP	Does not Granger Causal	ACL	172	9.56332	0.0081
Artisans poverty					

Source: Authors E view 7.0 Computation (2020)

**Table 4: Long Run Regression Results**

Variables	Coefficient	Std. Err	T. Statistic	Prob.
<b>Log (TLD)</b>	84.89142	10.41103	8.153987	0.000
<b>Log (DES)</b>	83.66112	9.5333	2.944514	0.000
<b>Log (SEI)</b>	0.46648	0.133810	-3.474098	0.0017
<b>Log (HDR)</b>	- 0.53914	1.88632	12.52984	0.0000
<b>Log (FMU)</b>	23.63592	1.78999	1.609921	0.0211
<b>Log (COR)</b>	- 7.018891	1.76853	1.71853	0.3211
<b>Log (SAE)</b>	- 7.011111	0.27149	-2.92956	0.0731
<b>Log (ABSW)</b>	-7.02231	0.56611	-1.85533	0.0833
<b>Log (WOH)</b>	-0.74521	0.69214	-2.76532	0.0296
<b>Log (ECS)</b>	-0.76752	0.79311	-2.29251	0.0247
<b>Log (ASS)</b>	-0.77921	0.78521	-2.76511	0.0259
<b>Log (SRD)</b>	-0.79541	0.77711	-1.80003	0.0277
<b>Log (PAD)</b>	-0.87321	0.79842	1.98114	0.0392
<b>Log (HMR)</b>	-0.94551	0.78755	1.89221	0.0734
<b>Log (FSH)</b>	-0.87764	0.79222	1.93561	0.0734
<b>Log (FCO)</b>	-0.85937	0.74468	-2.292556	0.0751
<b>Log (SDP)</b>	-0.75461	0.8100	-1.60748	0.0277

**R – Squared**            **0.299586**

**Adjusted R<sup>2</sup>**            **0.914568**

**F – Statistic**            **81.58999**

**D.W**                      **2.794211**

Source: E view 7.0 Computation (2020)

Table 1 of stationary Test of Variable as explained by the Augmented Dickey-Fuller and Philip-Perron Test at 5% critical value indicated (0) 4 (-2.9558 and (0) 5 (-2.9591) respectively. Indicating that coronavirus disease pandemic has a negative impact on the artisans at the time of total lockdown in the study area.

The Table 3 which revealed the result of Pairwise Granger Causality Test of all the variables as Cross tabulations has indicated in the null Hypothesis rejection shows that 3.72531 been the lowest and 12.82921 been the highest of the F. statistic at 0.0111 and 0.0085 all shows that coronavirus disease pandemic had push many artisans into extreme poverty, malnutrition, hunger and serious wants. Similar finding by Ozili (2020), Idris (2020), Huang (2020) and Samuel (2020) ascertained that COVID-19 pandemic which originated from China has spread to several countries and has negatively affected their economy and reduced economic activities in the first quarter of the year 2020. The findings could explain the report of World Health Organization (WHO, 2020) reported which stated that Nigeria surpassed India in terms of the number of people living in abject poverty. There TLD of 3.72531 and ESD Granger Causal Hup at 12.82921 respectively. WHO also reported that if proper actions were not taken with the looming economic crisis as a result of COVID-19 pandemic, the number of poor Artisan will keep on increasing if proper measures were not enacted. A motor mechanic that can earn up to ₦5,000 daily could not make a profit of ₦200 the same condition apply to other Artisan.

Table 4 which is the Long Run Regression indicated that R-squared: 0.299586. Adjusted R2 was 0.914568, F statistic stood at 81.58999 and D.W at 2.794211 which revealed that all the pair variables have causal relationships among themselves. For example the more the total lockdown of economic activities the more the street deserted and industrial shutdown and other business which invariably affect all the Artisan negatively. Meaning that the shutdown of industries, Banks, ports of Air and seas, whole sales and retails, transportations, schools, colleges and universities, market both local and internationals shall resulted into harsh economic conditions in the study area which also negatively affect the Artisans income earnings thereby push them into extreme poverty during the lockdown.

Ceccarelik, (2020) observed that COVID-19 pandemic in Nigeria has affected borrowers capacity to service loans which gave rise to NPLS that

depressed banks earnings and eventually impaired bank soundness and stability. Subsequently, banks were reluctant to lend as more and more borrowers struggled to repay the loans granted to them before COVID-19 pandemic outbreak. Sharp decline in oil prices, people were no longer travelling, many importers shutdown, affected Nigeria, foreign reserve, Nigeria witnessed shortage of crucial supplies like pharmaceutical equipments, spare parts and finished goods from China, Nigeria budget affected fall in oil price from US\$57 per barrel to US\$30 per barrel. Nigeria budget became obsolete. Nigeria stock market became plunged. Movements were restricted and all resulted into extreme poverty. Economic agents blatantly refused to engage in economic activities for fear of contracting coronavirus disease COVID-19 pandemic that was believed to be spreading like wild fire then. This all resulted into Nigeria's weaknesses in financial capability and decay in infrastructure all over the study area.

### **Conclusion and Recommendations**

The coronavirus disease pandemic which is popularly known as COVID-19 pandemic started from a province in China known as Wuhan. This disease so spread fast that it affected some people in Lagos and Port Harcourt, which later spread to all parts of Nigeria including the Federal Capital Territory Abuja. Since then the disease or virus had infected people regardless of wealth or social status. The poor were however more affected because of their poor state of environment and status. Cases reported rose from about 4,151 to 128 and as at 13<sup>th</sup> October, 2020 it has risen to 63,508 confirmed, 59,748 recovered and 1,155 death cases of coronavirus disease pandemic. Other past pandemic diseases include Ebola, Marburg virus disease, Lassa Fever, Nipah, Zika, Crimean-Congo haemorrhagic fever, rift valley fever and monkey pox. The average size of the stimulus package as a percentage of GDP in advanced economic was 12%. The United States was 11% while that of South Africa was 0.4% in Nigeria GDP dropped to 0.34% which is totally insignificant and unlikely to boost the already fragile economy. To reduce poverty among the artisans in the study area, policy makers provided relief packages to the vulnerable citizens to cushion the effects of the pandemic on the artisans. To prevent the spread of COVID-19 pandemic the public health sector in Nigeria should improve on poor infrastructural facilities such as emergency services, more ambulance services, effective National Health Insurance scheme,

provision of more primary health care facilities, more welfare packages to the medical workers e.g. Doctors, nurses, laboratory scientist and the other supporting staff. Federal and states government should provide loan for the Artisan.

Intensify efforts on Family Planning, awareness campaign to rural communities on the general health habits that will promote health of the communities. Nigeria should change their sources of pharmaceutical ingredients from China to other country. Prevent the importation of illegal drugs from China or other sources. Informal drug sellers should be banned.

A weak and underdeveloped digital economy should be enhanced and improved upon. Social welfare program in Nigeria should be promoted e.g. housing, energy utilities, health care assistance, food stamps, unemployment compensation, disaster relief and educational assistance to the Nigeria Artisans should be enhanced. The provision of social welfare services to COVID10 pandemic vulnerable artisans in the population is the most proven way to protect the citizen from economic hardship in bad times such as the time of COVID-19 pandemic spread in Nigeria.

Banks should also grant soft loan to the Artisans to promote their business.

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