

Socioeconomic Status, Propaganda, Health-Related Factors And Covid-19 Pandemic-Related Psychological Distress Of Lagos Residents

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Abstract: Researchers are developing a keen interest in COVID-19. A significant number of studies have been conducted on the diagnosis and treatment of the disease while a few have focused on the psychological implications especially as regards lockdown policies by various authorities. This study investigated the influence of socioeconomic status, propaganda and health-related factors on COVID-19 pandemic-related psychological distress in Lagos.

The research adopted a descriptive research design. One Hundred and Twenty (120) participants were chosen among Lagos residents through Simple Randomization. Three research questions were raised for the study. A structured questionnaire consisting of demographic section and measures of socioeconomic status, propaganda, health-related factors and delinquent psychological distress was used to collect data. Data collected were analyzed through the use of Multiple Regression Analysis and Pearson Product Moment Correlation at 0.05 level of significance.

The findings revealed a significant relationship of socioeconomic status ($r = 0.511, p < 0.05$); propaganda ($r = 0.214, p < 0.05$) on psychological distress. The combination of the independent variables accounted for 84.2% (adjusted $R^2 = 0.869$) of the total variance in the prediction of COVID-19 pandemic-related psychological distress. The independent variables made relative contribution to COVID-19 pandemic-related psychological distress in the following order: socioeconomic status ($\beta = 0.312, t = 5.248, p < 0.05$), propaganda ($\beta = 0.298, t = 3.794, p < 0.05$) and health-related factors ($\beta = -0.072, t = -1.248; p > 0.05$).

Based on the results of the findings, it was recommended that individuals and information consumers should endeavor to fact check information. Media literacy should be promoted by the government and non-governmental agencies among the populace. The government should structure palliative programs commensurate to lockdown policies to citizens. Government organization(s) should be created to oversee and regulate media information. Policies should be enacted to address psychological imbalances amongst the populace.

Keywords: socioeconomic status, propaganda, health-related factors, COVID-19, COVID-19 pandemic-related psychological distress.

I. INTRODUCTION

Globally, there is a current outbreak of a novel Coronavirus disease acronym COVID-19 caused by the severe

acute respiratory syndrome Coronavirus 2 (SARS-CoV-2). The disease has been declared as a pandemic by the World Health Organisation. It is a worldwide health emergency and highly infectious disease that posed different measures of

psychological distress on the entire human race, probably arising from different domains. The probable underpinning factors of the psychological distress at this critical period ranges from the socioeconomic status of individuals, various propagandas, biased and non-evidenced based news as well as health-related factors such as age, presence of underlying medical condition; hypertension, diabetes mellitus and immune suppressant diseases.

The condition of psychological distress depicts mental uneasiness and psychological maladjustment, often accompanied by mental and physical deterioration. Psychological distress is a critical mental condition with health consequences. Psychological distress has been generally perceived in two categories i.e. anxiety and depression. Anxiety is a state of tension or eagerness triggered by an unwanted or sudden condition. It is also a disruptive pattern of thoughts and physiological responses or behaviour that follows a certain circumstance. Depression according to the World Health Organization (WHO) is a disorder that features sadness, loss of self-esteem or feelings of guilt, loss of appetite or disordered sleep, loss of interest in pleasure, poor concentration and deteriorated energy (WHO, 2011). Depression often leads to changes in mood, thought patterns, behavioural disposition and physical well-being. Depression is capable of ruining an individual right state of mind, life pleasure and capacity to perform day to day activities (Fekadu, Shibeshi, Engidawork. 2017).

WHO situational report as of 12th of July 2020, confirmed cases were 12,552,765 and 561,617 deaths globally. In reference to Africa Arguments (2020), Coronavirus disease cases in Africa as of 13th July, 2020 hits 594, 955; 295,242, recovered and 13,246 deaths. More so, another fearful report on the potential state of the virus in Africa is that of the United Nations Economic Commission for Africa (UNECA) which warns that Africa could experience between 300,000 to 3.3 million deaths (UNECA, 2020). For Nigeria, Coronavirus disease confirmed cases reports from Nigeria Centre for Disease Control (NCDC) as of 13th July, 2020 increased to 32,588, 13,447 recovered and 740 deaths. According to the same report, Lagos state which is perceived as the centre of industrialization and hub of Nigeria's economy remains the most prevalent area with the virus, recording a total of 283 confirmed cases, 90 recovered and 7 deaths. The COVID-19 virus infects people of all ages. However, evidence to date suggests that two groups of people are at a higher risk of getting severe COVID-19 disease. These are older people; and those with underlying medical conditions such as cardiovascular disease; hypertension, coronary heart disease, diabetes, chronic respiratory disease, and cancer. Williams et al (2019) in a study in China titled "Estimating the Risks from COVID-19 Infection in Adult Chemotherapy Patients" observed a strong effect of age on COVID-19 based on the available data and probable increase in the risk of death in patients with comorbidities. However several research studies are still ongoing, towards investigating the enigma and pathophysiology of the disease although scientists are not oblivious of the potential risk factors. Yang et al (2020) found out that the most distinctive comorbidities of 32 non-survivors from a group of 52 intensive care unit patients with novel COVID-19 were cerebrovascular diseases 22% and diabetes

22%. The same pattern was also observed in another study which included 1099 patients with confirmed COVID-19 cases, of whom 173 had severe disease with comorbidities of hypertension (23.7%), diabetes mellitus 16.2%, coronary heart diseases 5.8%, and cerebrovascular disease 2.3% (Guan et al, 2020). Aside from the underlying medical conditions and comorbidities, age is also highly implicative in the risk for contraction, severity and prognosis of COVID-19. Suffice to say that COVID-19 is an illness that disproportionately impacts some age groups more than others; older people are most clearly at risk. Robert et al (2020) obtained the estimate of the case fatality ratio in China of 1.38% (1.23–1.53), with substantially higher ratios in older age groups i.e. 0.32% [0.27– 0.38] in those aged <60 years vs 6.4% [5.7–7.2] globally, the case fatality rate for those within aged ≥60 years, up to 13.4% (11.2–15.9) in those aged 80 years or older. Estimates of case fatality ratio from international cases stratified by age were also observed to be consistent with those from China (parametric estimate 1.4% [0.4–3.5] in those aged <60 years [n=360] and 4.5% [1.8–11.1] in those aged ≥60 years [n=151]). The overall estimated infection fatality ratio for China was 0.66% (0.39–1.33), with an increasing profile with age. Similarly, they also observed estimates of the proportion of infected individuals likely to be hospitalised to increase with age up to a maximum of 18.4% (11.0–37.6) in those aged 80 years or older. This observation is based on the belief that immune function declines with age, and older people have more of the underlying conditions that also appear to be risk factors for severe COVID-19. In addition, people living with immunosuppressant disease conditions may also experience psychological distress because of the assertion that some of the difference between mild COVID-19 and severe cases may have to do with how the person's immune system handles the virus.

Socioeconomic status according to the American Psychological Association (APA), is the social standing of people based on the combination of their education, income and occupational status has furthermore acted as a predictor of the Coronavirus disease psychological distress. In view of this, Fardin (2020) argues that COVID-19 has caused a number of psychological anomalies including anxiety to many people. The distress is however felt more by the less privileged, low-income earners and the poor. This assertion was buttressed by Buchanaan, Petel, Rosenthal and Singhvi (2020) when they intimate the world that in New York City, 'the virus hits hard at the low-income neighborhoods. Moreover, the lockdown of business activities, restaurants, and the stay home policy increases psychological malfunctioning especially among the low socioeconomic class as they could not afford the level of hygiene required and are also vulnerable to the spread of the virus due to greater proximity of the people in their location.

As the virus spreads around the world, another imminent threat; propaganda is also emerging. A lot of controversial reports range from the speculation that the emergence of the 5G network promoted the virus while some claimed that it is a bioweapon. Some also speculate treatments for the disease to be tea, zinc, amongst others (Santaro, 2020). Propaganda, rumors, surrounding the origin, symptoms, prevention, and treatment of the novel disease seem to have its share in the unhealthy psychological development of different populations

around the world. There are lots of misinformation and disinformation around the disease indirectly causing heightened emotionally among subjects (Taylor, 2020; Kassam, 2020). Some of this propaganda is spread through social media, texts and can as well be propagated by prominent and influential people like celebrities, politicians amongst other public figures. Incorrect information around the diagnosis, prevention, and management of the virus is evident through the social media (Shmerling, 2020), causing mental uproar among the less vulnerable people such that an "infodemic" of false information about the virus which poses risk to global health was declared by the World Health Organization (WHO, 2020). It is almost unbelievable how rumours are communicated much faster among subjects than facts. Sometimes the ambitions of the false information carriers become very oblivious, especially when such rumours public mental sanity.

The news and updates on COVID-19 developments alongside rumors and propaganda, symptoms, and management of the virus unwanted emotions from the general population, especially the less informed. The pandemic has resulted to panic, emotional trauma, and automatic thought patterns around the world; people going through mild symptoms such as cold, cough, as well as other weather and allergy-related conditions of which are not necessarily related or confirmed cases of COVID-19, become psychologically ill, leading to maladaptive social and physical development such as hypertension, deteriorated immune system, reduced social bonding and self-inflicted isolation prior contact to the virus. Also, the belief that people with certain health conditions such as kidney problem, lung cancer amongst other underlying medical conditions find it difficult to recover from the virus prompts sudden anxiety among those concerned. A lot of people are traumatized due to the lockdown policy by governments towards curbing the life-threatening pandemic. Unfortunately, people who live on daily wages are basically affected. While some nations provide enough palliatives to citizens in order to help them adjust properly to the unwanted lockdown circumstance, such assistance is not yet evident among the Nigerian populace, especially in Lagos where the spread of the virus is most evident. In view of these aforementioned challenges, this study takes up the responsibility of investigating causes of COVID-19 psychological distress, emphasizing socioeconomic status, propaganda and health-related issues as its predictive factors.

PURPOSE OF THE STUDY

The main purpose of this study is to investigate socioeconomic status, propaganda and health-related factors as correlates of COVID-19 psychological distress in Lagos, Nigeria. Specific purposes of the study are to:

- ✓ Determine the significant correlation among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents.
- ✓ Examine the joint contribution among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents.

- ✓ Investigate the relative contributions among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents

RESEARCH QUESTIONS

The following research questions were raised for the study:

- ✓ Is there any significant correlation among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents?
- ✓ What is the joint contribution of socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents?
- ✓ What is the relative contribution of socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents?

II. METHODOLOGY

The study adopted the descriptive research design of correlational type from which selected sampled portion draws inference to its population. This also involves using statistical tools to analyze information and data collected from the field to explain events and circumstances as they occur. This design is perceived most suitable for the study for its potency in scrutinizing the accuracy of the study phenomenon as resident in the respondents and provisions of precise description of responses without any form of manipulation of the variables.

POPULATION OF THE STUDY

The population of the study comprises Lagos residents. The rationale for the chosen population is the relatively high prevalence of the COVID-19 confirmed cases and the total lockdown policy in the state.

SAMPLE AND SAMPLING TECHNIQUE

The sample for this study comprised one hundred and twenty (120) Lagos residents from the three senatorial districts in Lagos which are: Lagos Central, Lagos East, and Lagos West. The process of the selection was in two stages. The stages are explained below:

STAGE 1: The simple random sampling technique of hat method was used to select two local governments from each of the three senatorial districts in Lagos. Selected Local Government Areas are Yaba LCDA, Surulere LGA (Lagos Central), Igbogbo LCDA, Ikosi Ejirin LCDA (Lagos East) and Mushin LGA, Ayobo Ipaja LCDA (Lagos West).

STAGE 2: Simple randomization was also adopted in selecting twenty (20) participants from each of the selected local governments making a total of one hundred and twenty (120) participants for the study.

INSTRUMENTATION

The research instrument employed for data collection is questionnaire. The questionnaire contained three (3) sections (A-C). Section “A” comprises socio-demographic variables such as age, gender, education, occupation, income and health-related issues with multiple-choice options. Section “B” to “C” contains scales on other variables which are psychological distress, and propaganda.

SECTION B: PSYCHOLOGICAL DISTRESS SCALE

Psychological distress is measured from the Kessler Psychological Distress Scale (K10). The 10 item scale which was adapted on a five-point Likert response format ranging from “All of the time” to “None of the time” was utilized for the data collection on psychological distress of participants experiencing total lockdown as a result of the COVID-19 pandemic. Sample items include “In the past 4 weeks, about how often did you feel tired out for no good reason” and “In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down”. Pereira et al (2019) reported Cronbach's alpha internal consistency of the instrument for .91. 20 copies of the scale were pilot tested on randomly selected participants outside the main study. The split-half internal consistency method was used to check the reliability and it yielded .82 making it suitable for use.

SECTION C: PROPAGANDA SCALE

Propaganda was measured by Gandi Rumor Scale (2019). The scale which consisted of 20 items adapted on a five-point Likert response format ranging from Strongly Disagree (SD) to Strongly Agree (SA) was used to collect information on participants’ exposure to propaganda. Sample item includes “uncertainties about COVID-19 pandemic leads to rumor transmission” and “information from a credible source about COVID-19 pandemic is more believable than those spread by non-credible sources”. The author reported internal consistency for the scale as measured by the Cronbach alpha reliability method to be .78. However, 20 copies of the instrument were pilot tested on randomly selected participants (which were not part of the main study) using the Cronbach alpha internal consistency method, the value yielded .90.

METHOD OF DATA ANALYSIS

The descriptive statistics of percentage were employed to calculate the demographic information while Pearson Product Moment Correlation (PPMC) and Multiple Linear Regression were used to analyze data collected at 0.05 level of significance.

III. RESULTS

This chapter presents the result of the findings. The study investigated the effects of socioeconomic status, propaganda and health-related factors on COVID-19 psychological distress in Lagos, Nigeria. Three research questions generated

were tested at 0.05 level of significance using Pearson Product Moment Correlation (PPMC) and Multiple Regression Analysis and. The summary of the findings are then presented in the following tables:

	Frequency	Percent
18-35	81	67.5
36-60	39	32.5
61 and above	0	0
Total	120	100

Table 1: The Age distribution of the respondents

Table 1 shows that 81 respondents 67.5% are between 18-35 years, 39 (37%) respondents are between 36-60 years, while 0% represented ages 61 and above which implies that the study recorded no respondents above 61 years old for the study. This translates that the majority of the respondents are between the ages of 18 and 35.

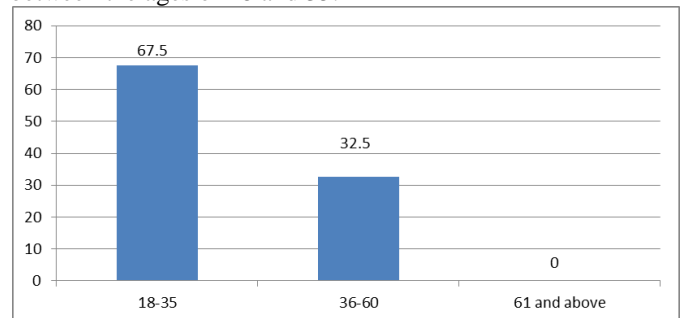


Figure 1: Bar Chart showing the percentage distribution of respondents by age

	Frequency	Percent
Male	86	71.67
Female	34	28.33
Total	120	100.0

Table 2: The distribution of the respondents by Gender

Table 2 reveals that 86 of the respondents representing 71.67% were male while 34 (28.33%) of the respondents were female. This implies that the majority of the respondents that participated in this study were males.

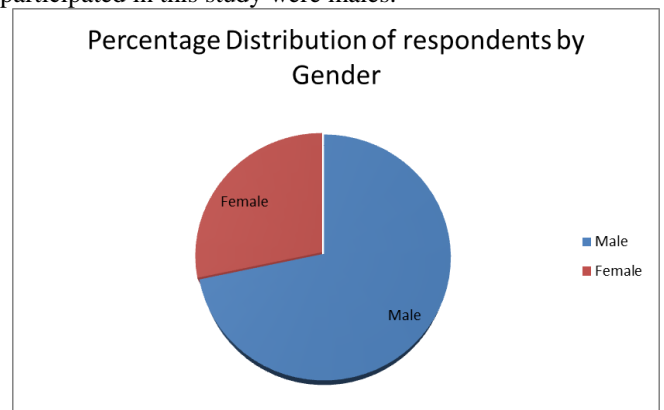


Figure 2: Pie Chart showing the percentage distribution of respondents by Gender

RESEARCH QUESTION ONE

Is there any significant correlation among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos resident?

	Mean	SD	1	2	3	4	5
Psychological distress	42.14	7.12	1.000				
Socioeconomic status	86.22	7.14	.511**	1.000			
Propaganda	316	7.08	0.214**	-.041	1.000		
health-related factors	38.10	7.31	0.140*	.082	-.146	1.000	

** Correlation significant at 0.05 level

Table 3: Descriptive Statistics and Inter-correlations among socioeconomic status, propaganda, health-related factors to COVID-19 pandemic-related psychological distress among participants

Table 3 above reveals there was significant relationship between two of the dependent variables i.e. socioeconomic status, propaganda and psychological distress. While the study revealed that there was no significant relationship between health-related factors and psychological distress of respondents. Socioeconomic factor ($r = 0.511$, $p < 0.05$); propaganda ($r = 0.214$, $p < 0.05$); health-related factors ($r = 0.140$, $p < 0.05$); and psychological distress among the participants.

RESEARCH QUESTION TWO

What is the joint contribution of socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents?

Multiple R	=	0.916			
Multiple R ²	=	0.827			
Multiple R ² (Adjusted)	=	0.869			
Standard Error of Estimate	=	3.73216			
Source of Variation	Sum of Squares	df	Mean of Squares	F-Ratio	P
Regression	22861.046	4	5258.244	420.571	.000
Residual	4962.714	284	13.642		
Total	27310.764	286			

Table 4: Multiple Regression Analysis on the joint contribution of the variables

Table 4 above shows that there was a joint effect of the independent variables socioeconomic status, propaganda and health-related factors on COVID-19 pandemic-related psychological distress of Lagos residents ($R = 0.916$, $p < 0.05$). The combination of the independent variables accounted for 84.2% (adjusted $R^2 = 0.869$) of the total variance in the prediction of COVID-19 pandemic-related psychological distress of Lagos residents. The analysis of variance of the multiple regression data yielded an F-ratio value which was found to be significant at 0.05 Alpha level ($F = 420.571$, $p < 0.05$). This shows that the independent variables jointly contributed to COVID-19 pandemic-related psychological distress.

RESEARCH QUESTION THREE

What is the relative contribution of each of the independent variables on COVID-19 pandemic-related psychological distress among Lagos residents?

Variables	B	Std. Error	Beta	T	Sig	P
(Constant)	76.083	7.496		11.121	.000	<.05
Socioeconomic status	.522	.098	.312	5.248	.000	<.05
Propaganda	.827	.236	.298	3.794	.000	<.05
Health-related factors	-.212	.151	-.072	-1.248	.166	>.05

Dependent variable: psychological distress

Table 5: The relative contribution of each of the independent variables in the prediction of COVID-19 pandemic-related psychological distress of Lagos residents

Table 5 indicates the contributions of each of the independent variables to the prediction of COVID-19 pandemic-related psychological distress. In terms of magnitude of the contribution: socioeconomic status contributed most to the prediction of psychological distress of Lagos residents ($\beta = 0.312$, $t = 5.248$, $p < 0.05$) followed by propaganda ($\beta = 0.298$, $t = 3.794$, $p < 0.05$), and lastly health related factors ($\beta = -0.072$, $t = -1.248$; $p > 0.05$).

IV. DISCUSSIONS

The first research question seeks to investigate the significant correlation among socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents. The finding shows that there was a significant relationship between socioeconomic status and COVID-19 pandemic (pandemic-related) psychological distress. By implication, socioeconomic status as a predictive factor precipitated COVID-19 pandemic-related psychological distress. The finding of the research question corroborates the study of Buchanaan (2020) which asserted a relationship between the COVID-19 socioeconomic lockdown and the psychological health of people in New York City. The author asserted that lockdown on socioeconomic affairs affected the psychological wellness of individuals, especially low-income neighborhoods. Likewise, Fardin (2020) in a study demonstrated the effect of the lockdown on the emergence and aggravation of psychological anomalies among people, especially low-income earners. The economy remains the drive to human existence and social well-being. The inability to sustain self economically can lead to an abysmal and unstable psychological state. The need to eat, drink and pay bills, are not negotiable. The pandemic situation restricted or limited the study population economic transactions, with little or no assistance from the authority. The decision to lock down all socioeconomic activities remains vital for any government to make especially at a continuous spread of the disease, nevertheless, it is unreasonable for governments to lockdown economic activities without making adequate provisions especially basic needs, more explicitly, food and other daily consumables. Also, many are used to social life; characterized by nightlife, partying clubbing, and recreation amongst others. For this category of people, sustaining mental health in socioeconomic lockdown may be extremely difficult. Another rationale that is tenable for this finding is the fact that the majority of the study respondents are average and low-income earners who depend on day-day economic transactions before

their daily needs can be met, a lockdown without alternative sources of income would have been a bad idea for such people, thus justifying this finding.

The finding also reveals a significant negative relationship between propaganda and COVID-19 pandemic-related psychological distress. By implication, propaganda as a predictive factor motivated COVID-19 pandemic-related psychological distress. This finding goes in line with the study of Santaro (2020) who reported propaganda as a correlate of COVID-19 pandemic-related psychological distress. Another study by Taylor (2020) asserted the influence of propaganda on COVID-19 pandemic-related psychological distress, emphasizing that misinformation and disinformation around the disease has led to increased emotionality among study subjects. In the same manner, the study of Shmerling (2020) also attested that incorrect information regarding the disease diagnosis, prevention and management is evident on media platforms, affecting the mental well-being of people. It is often assumed that fake information spreads faster than genuine ones. The accessibility to media information remains a factor or drive for misinformation. Most users of social media platforms find it very convenient to forward messages to others without fact-checking such information. Some people simply believe a rumor as a result of its source i.e. implying that the source of information to some people means information integrity, hence, this situation calls for media literacy. A lot of disinformation leads to panic; most times when it comes to a pandemic or epidemic situation, a significant number of absurd information often circulate the media space, where innocent audience/users of such media platforms access such information and consciously disseminate it to significant others. One significant information concerning the spread of the virus which is yet to be generally accepted or scientifically proven is that the virus is airborne, such information may prompt a state of psychological uneasiness, worry and deterred mental focus. It is capable of emerging a pathological fear, excessive distancing and self-isolation. Social interaction remains vital to psychological well-being, and when such is threatened, there will be a psychological problem.

The finding shows that there was no significant relationship between health-related factors and COVID-19 pandemic-related psychological distress. By implication, health-related factors as a variable had no influence or contribution to COVID-19 pandemic-related psychological distress. However, it is not scientific to assume that the study respondents have underlying health issues that are confirmed risk factors for COVID-19 or not, as the majority of the respondents fall in-between young adulthood age (18-35). It can be assured that they were relatively in a good state of health physiologically at the point of responding to the questionnaires. In addition, the issue of confidentiality might have also come to play; the respondents might have been sentimental about giving vital information concerning their health status because of stigmatization or other possible reasons. Therefore, no contribution from health-related risk factors such as diabetes, hypertension, cancer to COVID-19 pandemic-related psychological distress experienced by the respondents. However, it cannot be concluded that the

respondents are in a good physiological state of health without any underlying health risk factors to COVID-19.

The second research question was directed at investigating the joint contribution of socioeconomic status, propaganda and health-related factors to COVID-19 pandemic-related psychological distress of Lagos residents. The finding revealed that there was a joint effect of the independent variables (socioeconomic status, propaganda and health-related factors) on COVID-19 pandemic-related psychological distress of Lagos residents. In other words, the finding confidently shows that the independent variables jointly contributed to COVID-19 pandemic-related psychological distress. In evaluating the possible reasons for the joint effect of the independent variables on the COVID-19 pandemic-related psychological distress of respondents, the relationship between the independent variables will be put into consideration. It can be opined that there is a degree of connection between socioeconomic status and health-related factors. The financial capacity or resources at the disposal of an individual will determine the affordability and accessibility of their healthcare. The low-income earners might not have been eating adequately, couple with the kind of environment they live and work thereby negatively affecting their immunity and causing them to be more susceptible to different kinds of diseases, COVID-19 inclusive thus manifesting the fear of contacting COVID-19.

In response to the third research question which tends to investigate the relative effect of each of the independent variables to COVID-19 pandemic-related psychological distress, the result of the relative effects of each of the independent variables on the dependent variable is also significant. That is, each of the independent variables was found to have a relative contribution to COVID-19 pandemic-related psychological distress of respondents, whereby socioeconomic status had the highest and significant contribution, followed by propaganda, while health-related factors had the lowest and (but) significant contribution to COVID-19 pandemic-related psychological distress. The finding of this study is corroborated by the study of Buchanaan, Petel, Rosenthal and Singhvi (2020); Kassam (2020); Santaro (2020) who in their independent studies found the predicting factors of this study to have independent contribution to COVID-19 pandemic-related psychological distress.

Socioeconomic status might have attained the most significant relative contribution to COVID-19 pandemic-related psychological distress because of its importance/significance among the independent variables. As stated earlier, human basic needs are critical to their well-being, people who lack, or have difficulty in actualizing or meeting their daily physiological needs are prone to psychological distress and maladjustment. According to Abraham Maslow's (1943) Motivation theory, the most significant in the order of human needs is the physiological need, characterized by food, shelter, clothing and other necessities for daily survival. The socioeconomic status of people will determine the level of attainment of physiological needs. A threat to stable income attributed to the actualization of basic needs, is automatically a big challenge to individuals with attended ripple effects, thus pointing to a critical

problem. This might have been the reason why socioeconomic status took the lead in relative contribution to COVID-19 pandemic-related psychological distress. Propaganda took the next order in the relative contribution to COVID-19 pandemic-related psychological distress. This underscores the havoc attached to the wild and wide circulation of fake news and rumor, as well as misinformation on the media space. Fake information remains a major threat to COVID-19 pandemic-related psychological distress.

According to the finding of this study, health-related factors were discovered to have the lowest contribution to COVID-19 pandemic-related psychological distress. This finding reveals the characteristics of research where sometimes, the unexpected reveals itself in a scientific finding. However, it can also explain the hierarchical levels of values and worth of people in the developing world. However, the main reason for this finding cannot be confidently asserted, more in-depth studies should be conducted on these variables to further investigate these findings. The finding of this study is corroborated by the study of Buchanaan, Petel, Rosenthal and Singhvi (2020); Kassam (2020); Santaro (2020) who in their independent studies found the predicting factors of this study to have an independent contribution to COVID-19 pandemic-related psychological distress.

V. CONCLUSION

Based on the findings of this study, the followings were concluded:

- ✓ Socioeconomic status contributed to COVID-19 pandemic-related psychological distress. Poverty is a major threat to sanity and adherence to healthy instructions. The push to survive daily prompts conscious disregard to social distancing policies directed by the government to curb the spread of COVID-19 without alternate measures or adequate palliatives. However, the enforcement of strict policies against socioeconomic transactions remains a threat to daily survival and psychological well-being.
- ✓ Propaganda was also a contributing factor to COVID-19 pandemic-related psychological distress. The spread of rumors, fake news, misinformation and disinformation promoted psychological ill-health.
- ✓ Health-related factors did not contribute to COVID-19 pandemic-related psychological distress. The study respondents were mainly young adults, considered to be physically healthy, though there might have been interference of information confidentiality. A further in-depth investigation is suggested.

VI. RECOMMENDATIONS

In light of the findings, the following recommendations are made:

- ✓ Individuals and information consumers should endeavor to fact check information, evaluate its source, integrity and genuineness before absorption and dissemination.

- ✓ The government should engage media organizations and the citizenry on media literacy to fight against the spread of inappropriate and infectious information.
- ✓ The government should endeavor to structure special and comprehensive palliative programs for citizens as alternatives to the irregular, uncoordinated and inadequate palliative measures that are being benefited by few.
- ✓ An organizations added with the responsibility of overseeing the media space should be put in place by the government in order to monitor and regulate information reaching a large audience against panic or any form of psychological distress. Psychological well-being is significant to the prevention and management of COVID-19, as it will limitedly keep the immune system strong and defensive against the virus.
- ✓ The nation, especially Lagos state which is the hub of the pandemic should enact policies that will promote psychological services to the entire citizenry against all forms of psychological imbalances. Counseling centres should be created in all local government councils, equipped with adequate professionals, structural and material resources towards the promotion of psychological wellness at the local level.

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