Factors Responsible For Unmasked Persons In Crowded Places In Federal Capital Territory, Nigeria

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Abstract: Regardless of the World Health Organisation explanations on the rising cases of coronavirus and the private sector education on coronavirus via seminars and paper articles, the non adherence to social distancing and face mask still remains an enigma which necessitates this study. The broad objective of the study was to determine the factors responsible for unmasked persons in Federal Capital Territory, Nigeria. The study is qualitative in nature. The qualitative data relied on a well structured questionnaire that were physically administered by the researchers to the respondents who were mask less in the Federal Capital Territory, Nigeria. The Pearson's Correlation Moments test was adopted to determine the variables responsible for mask defiance. To further authenticate the findings of the correlation results, a Chi-Square test was adopted to sophisticate the findings. We administered 540 questionnaires to the respondents', of which 493 were completed and used for the study, which showed a 91.3% response rate. The questionnaire was divided into two parts; the demographic characteristics of the respondent and questions on the specific objectives of the study. Data collected were estimated using SPSS and findings from the survey results showed a positive correlation between over-familiarity, mask discomfort and defiance while the correlation test between defiance and other variables viz; constraint, ignorance, health and mistrust in NCDC revealed the existence of a weak relationship and were highly insignificant. Similarly, the Chi-square statistical result also shows that over-familiarity and mask discomfort were statistically significant while others were not.

Keywords: Coronavirus, masked, unmasked, crowded, places, factors, NCDC, FCT, Nigeria.

I. INTRODUCTION

A. BACKGROUND TO THE STUDY

The times of disbelief as to whether coronavirus is real or not have long past. Globally, the virus has killed many persons as often updated by the Nigerian center for disease control (NCDC) and international media houses like (BBC, CNN, Al Jazeera). Hence, it has a place in the annals of Nigeria and the world's history. Owing to the rising level of coronavirus cases in Nigeria and not to mention the increase in the death rate all over the world, there is no more questioning as to whether or not the virus is real. The WHO had earlier acknowledged the potential advantages of the use of masks by healthy people in the community setting to reduce potential exposure from infected persons during the presymptomatic period of infection (Ogoina, 2020). The introduction of face mask, government explanations of the intense reasons and causes of coronavirus and private sector education on coronavirus via seminars and paper articles has become popular. Far from the introduction of face mask, civil societies and government agencies had embarked on sensitization campaigns, emphatically on keeping good hygiene and social distancing. Temperature screening was adopted in Nigeria and further emphasis on regular hand washing and sanitizing, use of face mask amidst crowded places, respiratory etiquettes, social distancing and self-isolation when sick were measures adopted in Nigeria. Yet, the manner in which Nigerians mingles and

co-mingles in crowded places without the use of face masks is alarming and necessitates this study.

By auxiliary, President Buhari on the 26th of January, 2021 signed the COVID-19 Health Protection Regulations policy. In other to implement and enforce the law, the Federal Capital Territory Administration (FCTA) Mobile Court on Monday 1st February, 2021, passed an injunction to urgently close the Wuse market, the UTC markets and Murg shopping mall over flagrant disregard to COVID-19 Health Protection Regulation's Act, 2021. The court convicted about 100 persons who were arrested by the enforcement team for appearing mask less in public places (BBC, Nairametrics, TheGuardian, ThisDay, 2021). Though many persons have been convicted and some were free on bail. Despite all of these, the lackadaisical engagements of Nigerians in private and public places, the non-observance/compliance to social distancing, and the careless-usage of face mask still remains an enigma.

Pondering on the factors responsible for unmasked persons in crowded places in the FCT; the authors raised some questions and seek answers; could mask discomfort, financial constraints, ignorance, over familiarity or health issues be the reasons why people don't wear mask in crowded places in the Federal Capital Territory? So, on this note, the study seeks to unravel amongst many factors, the reasons why most persons do not wear face mask in crowded places in Federal Capital Territory.

This work is organized into five sections. The first part which includes this section gives a general introduction to the work. It covers the problem statement, objectives of the study, justification for the study, scope of the study and plan of study. Section two contains the review of literature and provides a theoretical framework for the subject; Section three will cover the research methodology used for the study. Section four deals with the presentation and analysis of result, while the last section concludes and suggests sound recommendations for this work based on the findings.

B. OBJECTIVE OF THE STUDY

The broad objective of the study is to determine the factors responsible for unmasked persons in FCT, Nigeria. Specifically, the study seeks to;
- ✓ Examine whether mask discomfort is the reason for mask defiance in FCT, Nigeria
- ✓ Examine whether financial constraint is the reason for mask defiance in FCT, Nigeria
- ✓ Examine whether ignorance is the reason for mask defiance in FCT, Nigeria
- ✓ Examine whether over familiarity is the reason for mask defiance in FCT, Nigeria
- ✓ Examine whether health issues are the reason for mask defiance in FCT, Nigeria.

C. RESEARCH HYPOTHESES

The work will seek to test the following hypotheses, which are expressed in their null forms:
- ✓ Ho: There is no significant relationship between mask discomfort and mask defiance in FCT, Nigeria.

- ✓ Ho: There is no significant relationship between financial constraint and mask defiance in FCT, Nigeria.
- ✓ Ho: There is no significant relationship between ignorance and mask defiance in FCT, Nigeria.
- ✓ Ho: There is no significant relationship between over familiarity and mask defiance in FCT, Nigeria.
- ✓ Ho: There is no significant relationship between health issues and mask defiance in FCT, Nigeria.

II. LITERATURE REVIEW AND THEORETICAL FRAMEWORK

A. LITERATURE REVIEW

Credit was given to some scholarly and study conceptions like 'COVID-19: The Need for Rational Use of Face Mask in Nigeria,' written by Ogoina (2020). The author opined that people regularly tap the front of their face masks in an attempt to change the mask, erase it, or during reflex rubbing of the face, according to the findings. Another disturbing result from the report was the inappropriate recycling of face masks and their continued usage without substitution. It was also discovered that medical masks intended for healthcare personnel, such as surgical masks and respirators, are regularly worn by the general public and government officials, despite concerns that adequate quantities of these masks are not available in Nigerian hospitals. Respirators with exhalation valves have been the favoured face mask of government officials and affluent Nigerians. The Nigerian COVID-19 Presidential Task Force, on the other hand, is concerned about an increase in the misuse and abuse of face masks, which has observed "unhygienic and ill-advised use and sharing of masks, particularly multiple fittings before buying from vendors."

Okoro (2020) investigates whether the 'Universal Use of Facemasks Against Coronavirus Disease-19 in Nigeria: A Need or an Overreaction' is necessary or not. The study discusses the existing Nigerian public's need to wear a facemask and the effects of this requirement. In spite of the absence of proof of decreased population transmission of COVID-19 through the use of a facemask by seemingly stable individuals in the community, it is correlated with inconsistencies and unimaginable effects. It can deprive surgical masks from those that actually need them, such as frontline health workers, people with respiratory tract infections, or those who have been diagnosed with COVID-19 and their caregivers. Again, it can build a false sense of confidence, placing people at greater risk of COVID-19. As a result, policymakers should educate the public about the proper use of masks as well as the value of adhering to all other layers of protective steps. The risks of coronavirus disease are apparent and obvious in Nigeria, prompting several countries to demand that their citizens wear facemasks in public areas to limit the transmission of this virus.

Still on the need for face mask, the effect of 'Mask or no mask for COVID-19: A public health and business review' was investigated by Tom et al (2020). The research incorporates statistical modeling with current science data to determine the possible effects of using traditional surgical

masks in public to tackle the COVID-19 pandemic. The study also looked at three main factors that lead to the efficacy of wearing a quality mask in reducing transmission risk: mask aerosol reduction rate, mask population coverage, and mask availability. The study further modeled the effect of mask-wearing on the disease curve as mask visibility and availability increase using the interfered viral dissemination route while wearing a mask. According to our findings, wearing a face mask in conjunction with social distancing will effectively flatten the disease curve. Wearing a mask as an NPI to battle COVID-19 is a sensible strategy. The Authors acknowledged that the analysis makes projections based solely on publicly available evidence and calculates future probabilities. As a result, the model merits further validation research.

To know whether mask defiance and social distancing was as a result of ignorance, Agusi (2020) published studies on the COVID-19 pandemic and social distancing in Nigeria: Ignorance and defiance. Discoveries assume that if a group of people is seen and agreed to be a major factor in the spread of COVID-19, the need to maintain social distance is critical and can never be overstated for its management. The study indicates, among other things, that keeping healthy during this pandemic period should become a human responsibility and should be achieved internally, since the global effects of the Coronavirus pandemic, including the financial aftermath of the scourge, is larger than any people would imagine.

In the same light, Olapegba et al. (2020) used a cross-sectional sample as well as purposive and snowball sampling methods to measure the general public's awareness and views of COVID-19 in Nigeria within the first week of the pandemic lockout. 1357 people were chosen for the study. From March 28 to April 4, 2020, information for the work was gathered from an unknown online survey conducted throughout Nigeria, encompassing 180 cities and towns. Using spellbinding observations, the study discovered that Nigerians have a lot of awareness about Coronavirus, which they mainly get from traditional media. Their understanding of Coronavirus carries consequences for general well-being behaviors, compatible with cautious actions as well as mutual interactions with unfamiliar countries. In light of the above findings, a proof-based mission was proposed in order to eradicate misunderstandings and advance cautious measures.

Ekpe et al. (2020) examined 'COVID-19: Facts, Fallacies, and the Way Forward in Nigeria' using Chi-Square Analysis. The research looked at Nigeria's six geopolitical zones and included both quantitative and qualitative analysis. Variables and issues such as political dimension, drinking a lot of hot (alcohol) drinks, the installation of a 5G network, and chloroquine as a COVID-19 treatment were raised. The survey results indicate that coronavirus statistics (figures) in Nigeria have a political component. In Nigeria, medications such as chloroquine, alcoholic beverages, and humid, sunny weather have little effect on coronavirus. It was suggested, among other things, that no drink, hot or cold (alcohol or non-alcohol), would defend against or cure COVID-19. It was also stated explicitly that there is no evidence that chloroquine would heal the coronavirus, considering the fact that the report embraced and recognized the fact that the majority of people who had used Chloroquine during the infection era had healed.

Amzat et al. (2020) examine the early socio-medical response to COVID-19 in Nigeria within the first 100 days following the index case. The paper employs informative methods and compiles data from numerous newspaper outlets and official sources. New Discoveries: The prevalence of Coronavirus has steadily increased in Nigeria, shifting from an imported case and an elitist example to group transmission. The case casualty rate stood unchanged at 2.8 percent. Over the short period when the lockout was lifted, the country saw an increase (52 percent in total cases) in Coronavirus transmission. This paper provides a concise reaction framework that highlights several specific multi-sectoral responses to the pandemic. To a large extent, a combination of social and therapeutic responses aided Nigeria in containing the spread of the infection. Taking all into account, the risk of Coronavirus overpowering the nation is still inevitable in Nigeria, as the country endeavors to rapidly open the economy, which could compromise general health benefits for transitory monetary increases.

On the nexus between COVID-19 and its impact on the Nigerian economy, Emmanuel Mogaji (2020) looks at the 'Impact of COVID-19 on Transportation in Lagos, Nigeria.' The report used a one-way analysis of variance (One-Way ANOVA) to quantify COVID-19's concomitant effect on transportation in Lagos. According to the report, 94.5 percent of participants have seen a rise in transportation costs. Participants agreed that the interruption of transportation systems caused by the pandemic had an effect on their social practices. Findings suggest that there have been major consequences for satisfying regular tasks such as shopping and visiting friends and families, and due to the social nature of the residents of Lagos, many would like to socialise in the evenings and weekends, frequent the bars, and attend parties; however, transportation constraints have impacted these social activities.

Other scholarly works like Fernandes, 2020; Atkeson, 2020; Peterson, 2020; McKibbin and Fernando, 2020; Dauda et al, 2020; Abulude et al, 2020; Altig et al, 2020; Ozili and Arun, 2020; Mohammed, 2020; Christos and Robert, 2020; Badiea and Huaping, 2020; Peterson Ozili, 2020; so agree that coronavirus have exert a negative impact on the Nigerian economy.

However, none of these literatures reviewed have highlighted the determinant of mask defiance in Nigeria. Based on this, the study is the first of its kind to highlight and investigated the determinants of mask defiance in Nigeria.

B. THEORETICAL FRAMEWORK

A conspiracy theory is an explanation for an event or situation that invokes a conspiracy by sinister and powerful groups, often political in motivation, (Goertzel, 1994) when other explanations are more probable (Brotherton et al, 2013; Aaronovitch and David 2009). The term has a negative connotation, implying that the appeal to a conspiracy is based on prejudice or insufficient evidence (Byford and Jovan 2011). The unanimous, bold resistance and disrespect for authority as regards wearing a face mask in the Federal Capital Territory could be seen as a conspiracy. No matter the public enlightenment and international organization clarification of

the deadly disease (coronavirus), 70% of Nigerians still move about public places without putting on a face mask. The non adherence to social distancing and face mask still remains a problem in Nigeria.

C. FACTORS RESPONSIBLE FOR UNMASKED PERSON IN FCT

The journey as to why people could move freely in crowded places without wearing face mask is far as the authors mull over and make a short reference to the following factors:

DEFIANCE: It is believed that Nigerians like challenging authority and this could be the reason why they refuse to put on their face mask in public places. The bold resistance and disregard for authority could also be as a result of the fact that, most Nigerians populace lack confidence in Nigerian Centre for Disease Control (NCDC).

MASK DISCOMFORT: The nature of the face mask lack or doesn't show relief or satisfaction but instead it is seen as something that disturbs one's comfort and can be annoying.

FINANCIAL CONSTRAINTS: Could it be financial constraint? Owing to the current rise in the prices of goods and services and the downturn of the Nigerian economy as a result of coronavirus outbreak, there is hunger and starvation in the country which could be the reason why most Nigerian couldn't afford to purchase a face mask.

IGNORANCE: The condition of being uniformed or uneducated could also be the cause why Nigerians don't wear face mask. Lack of knowledge or information as to how truly dangerous is coronavirus is also considered as a factor.

OVER FAMILIARITY: Understanding or recognition acquired from experiencing the first outbreak could be responsible for non compliance with coronavirus guidelines in Nigeria. It is no longer news that coronavirus has infected and kill most persons in the world. People are beginning to show undue intimacy and inappropriate impertinence.

HEALTH ISSUES: Could it be that those who don't use face mask have health issues like; asthma and high blood pressure? Some Nigerians has been victims of anaphylaxis, asthma, Carbon monoxide poisoning, cardiac tapenade, COPD, heart attack and heart arrhythmia illness and can't risk using face mark in other not to trigger sicknesses.

MISTRUST IN NCDC: Could it be lack of confidence in Nigerian Centre for Disease Control (NCDC)? The level of corruption in Nigeria is too much that NCDC is seen as a corrupt institution too. The discrepancy between the number of admitted and discharged cases in Nigeria is worrisome.

DISBELIEF: Most Nigerians don't want to accept that the virus is true mainly because they think that there is no absolute certainty that coronavirus is dangerous as prescribed.

III. RESEARCH METHODOLOGY

A. RESEARCH DESIGN

The survey template was used in this analysis. A survey, according to Ndiyo (2005), is a scientific experiment performed on a wide scale of a given population to ascertain certain desirable characteristics of a desired population. The sample survey used for this analysis is aimed at gathering a sample from the population in order to ascertain the factors responsible for unmasked individuals in FCT, Nigeria.

B. AREA OF STUDY

The Federal Capital Territory, also known as FCT-Abuja, is a federal territory in central Nigeria. Abuja, Nigeria's capital city, is situated in this territory. The Federal Capital Territory (FCT) was created in 1976 from parts of the states of old Kwara, Niger, Kaduna, and Plateau, with the majority of landmass carved out of Niger Province. It is located in the country's Middle Belt. Unlike Nigeria's states, which are led by elected governors, it is controlled by the Federal Capital Territory Government, which is led by a minister appointed by the President.

The territory is situated just north of the Niger-Benue River confluence. It is bounded on the west and north by Niger, on the northeast by Kaduna, on the east and south by Nasarawa, and on the southwest by Kogi. The island is situated between latitude 8.25 and 9.20 north of the equator and longitude 6.45 and 7.39 east of the Greenwich Meridian, Abuja is strategically situated in the country's south. The Federal Capital Territory occupies an area of approximately 7,315 km2 and is located in the Savannah country, which has mild climatic conditions. Abaji, Abuja Urban Area Council, Bwari, Gwagwalada, Kuje, and Kwali are all members of the Abuja Metropolitan Area Council. In the Federal Capital Territory, Hausa is commonly spoken.

C. POPULATION OF THE STUDY

According to the 2006 population census, the population of Abuja was 1,406,239. It was projected in 2016 to be 3,564,100. The population for this analysis is drawn from a sample of six LGAs in the FCT, namely Abaji, Abuja Municipal Area Council, Bwari, Gwagwalada, Kuje, and Kwali.

D. SAMPLE OF THE STUDY

The researcher used a stratified random sampling approach to select 540 respondents, 90 from each of Abuja's six local government areas (LGAs). The sample population was drawn from different district-areas within the LGAs chosen by the researcher. 493 of the 540 questionnaires provided to respondents were completed and included in the analysis. The above sample is a representation of the entire population of Federal Capital Territory whose opinions are used as a representation of a wider view.

E. INSTRUMENTATION

The researcher used a four-point Likert scale style questionnaire as the measurement instrument for this research analysis. There will be two parts of the questionnaire. Section one includes information concerning the respondents' personal information. Section two provides information about our research issue focused on the hypotheses to be evaluated.

Every answer will be awarded a score ranging from one to four, as seen below:

|			
Strongly agree	- SA	-	4 Points
Agree	- A	-	3 Points
Disagree	- D	-	2 Points
Strong disagree	- SD	-	1 Points

F. TECHNIQUES OF DATA ANALYSIS

The obtained data was analyzed using descriptive statistics. The aim was to reveal patterns and compare responses from respondents. The rest of the study started with methods such as basic frequencies and percentages.

The data gathered will be calculated using Pearson's Correlation Moments and Chi-Square Analysis.

IV. RESULTS AND ANALYSIS

Respondents response on their defiance status in the F.C.T.
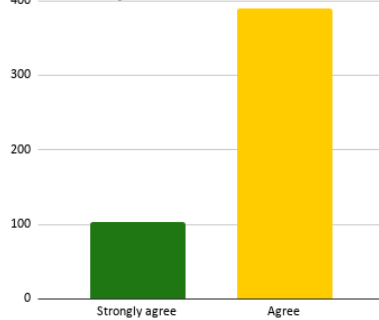
Source: Authors Computation
Figure 4.1

The respondents' response on their defiance status shows a unanimous acceptance. The first question on the questionnaire tries to ask and know if the respondents acknowledge the fact that they were mask less. More than half of the respondents ticked agree (labeled yellow) while others respondents ticked strongly agree (labeled green). The questionnaire was strictly for those respondents in the Federal Capital Territory who were not putting on their face mask as at the time when filling in the questionnaire. The bold resistance and disregard for authority was as a result of the some factors which are revealed below.

Responses from the questionnaire on factors responsible for unmasked persons in the F.C.T.
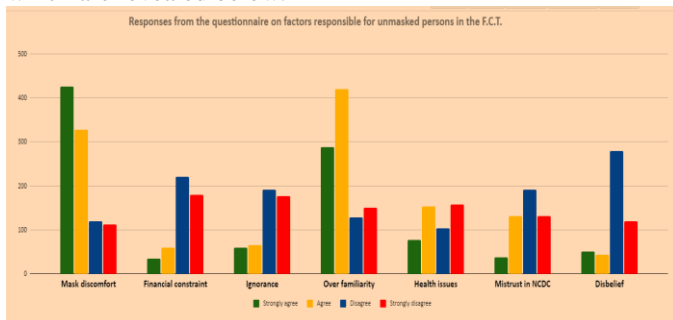
Source: Authors Computation
Figure 4.2

In other to know the reasons for mask defiance in the Federal Capital Territory, questions on mask discomfort, financial constraint, ignorance, over familiarity, health issues,

mistrust in NCDC and disbelief were raised. On mask discomfort, majority of the respondents ticked strongly agree and agree which is coloured green and yellow. Disagree was third in ranking followed by strongly disagree labeled blue and red respectively. The question on financial constraint shows that most respondents disagree and strongly disagree that their reasons for mask defiance is not due to financial constraint while very few of them accepted that financial constraint was their reasons for mask defiance. To ascertain whether ignorance was the reason for mask defiance, the respondents were asked if they know and believe that coronavirus exists. As depicted in figure 4.2, the respondents massively disagree and strongly disagree that ignorance was not their reasons for the bold resistance and disregard for government guideline for coronavirus as shown by the colour blue and red. Though majority accepted, some respondents still lack confident in the existence of the virus and the institution administering COVID-19 cases in Nigeria. In the same light, respondents were asked whether forgetfulness and less fear of coronavirus as a deadly disease was their reasons for mask defiance. The colour labeled green and yellow show that a higher percent of the respondent accepted that over familiarity of the said scenario were their reasons for mask defiance while the blue and red label denotes the number of respondent who disagree and strongly disagree with the said scenario.

Investigating if health issues like; asthma, anaphylaxis, Carbon monoxide poisoning, cardiac tapenade, chronic obstructive pulmonary disease (COPD), chronic bronchitis were the determinants of mask defiance, the agree and strongly disagree (labeled yellow and red) response were almost a tie while other respondents disagree and a few agree that health issues were their reasons for mask discomfort (labeled blue and green). Looking at the respondent's response on mistrust in NCDC, those who responded to disagree were higher seconded by strongly disagree and agree while agree came last. Finally, responses on skepticism (disbelief) show that most respondents disagree (blue) and strongly disagree (red) that the doubt as to the truth of whether coronavirus is real was not their reason for mask defiance. Other respondents responded strongly agree and agree respectively (green and yellow)

TEST OF HYPOTHESES

DECISION RULE: SPSS decision rule for correlation states that if the Pearson's correlation coefficient is greater than 0.5, we accept the alternative hypothesis and reject the null and vice-versa.

Correlation Table

		Defiance	Over familiarity	Discomforts	Constraint.	Ignorance.	Health.	Mistrust.
Defiance	Pearson Correlation	1	.874**	.686**	.034	.303**	.447**	.388**
	Sig. (2-tailed)		.000	.000	.452	.060	.053	.066
	N	493	493	493	493	493	493	493
Over familiarity	Pearson Correlation	.874**	1	.551**	.114*	.805**	.386**	-.794**
	Sig. (2-tailed)	.000		.000	.011	.000	.000	.000
	N	493	493	493	493	493	493	493

Discomfort	Pearson Correlation	-.386**	.551**	1	.275**	.106*	.540**	-.690**
	Sig. (2-tailed)	.000	.000		.000	.018	.000	.000
	N	493	493	493	493	493	493	493
Constraint.	Pearson Correlation	.034	.114*	.275**	1	-.301**	.563**	-.500**
	Sig. (2-tailed)	.452	.011	.000		.000	.000	.000
	N	493	493	493	493	493	493	493
Ignorance.	Pearson Correlation	-.703**	.805**	.106*	-.301**	1	-.130**	-.357**
	Sig. (2-tailed)	.000	.000	.018	.000		.004	.000
	N	493	493	493	493	493	493	493
Health	Pearson Correlation	-.447**	.386**	.540**	.563**	-.130**	1	-.668**
	Sig. (2-tailed)	.000	.000	.000	.000	.004		.000
	N	493	493	493	493	493	493	493
MISTRUST.	Pearson Correlation	.688**	-.794**	-.690**	-.500**	-.357**	-.668**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	
	N	493	493	493	493	493	493	493

**. Correlation is significant at the 0.01 level (2-tailed).
*. Correlation is significant at the 0.05 level (2-tailed).
Table 4.1

DISCUSSION OF FINDINGS

This study is poised at determining the factors that is responsible for unmasked persons in crowded places, figuring out Abuja as the case study. To achieve this objective, the Pearson's correlation moments test is adopted to determine the variables responsible for mask defiance. However, the results showed a positive correlation coefficient of (0.874), between over familiarity and defiance with a high significance rate of (0.00) indicating a significant the existence of a significant relationship between both variables. Similarly, the results revealed a positive correlation between mask discomfort and mask defiance given the high correlation value of (0.686) which is higher than (.05) and being significant at (0.00) levels. The correlation test between mask defiance and other variables viz; constraint, ignorance, health and mistrust revealed the existence of a weak relationship given their correlation coefficients of (.034, .303, .447, .388) respectively which were highly insignificant.

To further authenticate the findings of the correlation results, a chi-square test was adopted to sophisticate the findings.

DECISION RULE: SPSS decision rule for chi-square states that if the (p-value) is less than .05, we accept the alternative hypothesis and reject the null and vice-versa.

Test Statistics

	Over familiarity	Discomfort	Defiance	Constraint.	Health.	Ignorance.
Chi-Square	394.576b	446.335c	15.795c	11.866c	37.832c	97.467c
Df	4	3	3	3	3	3
Asymp. Sig.	.000	.000	.073	.081	.053	.051

Table 4.2

DISCUSSION OF FINDINGS

The chi-square statistical result above shows that over-familiarity and discomfort are statistically significant given that their P-Values of (.000),(.000) are all less than (.05) at the 1% and 5% levels of significance. Other variables viz; constraint, ignorance, health and mistrust were all statistically insignificant given that their P-Values or Asymp Sig. of (.073), (.081), (.053), and (.051) were all higher than the critical value of (.05) at the 5% level of significance.

HYPOTHESIS ONE

H_0: There is no significant relationship between mask discomfort and mask defiance in FCT, Nigeria.

The correlation results above showed a strong positive relationship of (0.686) and a significant-Value of (.000) between mask discomfort and mask defiance. To further sophisticate this finding, the Chi-square statistical test was conducted and it further proved a significant relationship between mask discomfort and defiance, given the P-value of (.000) being less than (.05) critical values. Hence, we accept the alternative hypothesis and reject the null and further conclude that mask discomfort has a positive and significant relationship with mask defiance in Abuja.

HYPOTHESIS TWO

H_0: There is no significant relationship between financial constraint and mask defiance in FCT, Nigeria.

The correlation results above showed a weak relationship of (0.34) and a significance value of (.452) between financial constraint and mask defiance. To further authenticate this finding, the Chi-square statistical test was conducted and it further proved an insignificant relationship between financial constraint and defiance, given the P-value of (.081) being higher than (.05) critical value therefore, we reject the alternative hypothesis and accept the null. Hence, we conclude that financial constraint has a negative and insignificant relationship with mask defiance in Abuja.

HYPOTHESIS THREE

H_0: there is no significant relationship between ignorance and mask defiance in FCT, Nigeria.

The correlation results above showed a weak relationship of (0.303) and a significant coefficient of (.060) between ignorance and mask defiance. To further authenticate this finding, the Chi-square statistical test was conducted and it further proved an insignificant relationship between ignorance and defiance, given the P-value of (.051) being higher than (.05) critical value, therefore, we reject the alternative hypothesis and accept the null. Hence, we conclude that ignorance has a negative and insignificant relationship with mask defiance in Abuja.

HYPOTHESIS FOUR

H_0: There is no significant relationship between over familiarity and mask defiance in FCT, Nigeria.

The correlation results above showed a strong positive relationship of (0.874) and a P-Value of (.000) between over familiarity and mask defiance. To further sophisticate this finding, the Chi-square statistical test was conducted and it further proved a significant relationship between over familiarity and defiance, given the P-value of (.000) being less than (.05) critical values., therefore, we accept the alternative hypothesis and reject the null. Hence, we conclude that over familiarity has a positive and significant relationship with mask defiance in Abuja.

HYPOTHESIS FIVE

H_0: There is no significant relationship between health issues and mask defiance in FCT, Nigeria.

The correlation results above showed a weak relationship of (0.447) and at a significant level of (.053) between health issues and mask defiance. To further authenticate this finding, the Chi-square statistical test between health issues and defiance revealed an insignificant relationship between both variables; therefore, we reject the alternative hypothesis and accept the null. Hence, we conclude that health issues have a negative and insignificant relationship with mask defiance in Abuja.

V. CONCLUSION AND RECOMMENDATION

A. CONCLUSION

After examining the determinants of mask defiance in the Federal Capital Territory, it is concluded that mask discomfort and over familiarity of face mask are the main reasons why people were mask less in crowded place. Other factors like financial constraint, mistrust in NCDC, skepticism and ignorance were statistically insignificant.

Nigerians are aware and knowledgeable about the coronavirus and its presence in Nigeria (Olapegba et al 2020). Face mask according to respondents doesn't show relief or satisfaction and it's most times discomforting, annoying and adjusting the mask while putting it on is tiresome. Apart from the stress of adjusting and forgetting to put on the mask, the fear of coronavirus as a deadly disease is fast reducing as most people carry their face mask from home while going to work or crowded places but still don't remember to put in on. Self isolation, combined with proper respiratory hygiene and hand washing, is thought to be the most feasible way to reduce or postpone a pandemic that is still underway. (Agusi et al 2020).

B. RECOMMENDATION

The following recommendations are made based on the study's findings:
- ✓ Given that people are unduly discomfort and overly familiar with mask wearing, the government should accelerate efforts like our sister country Ghana to making an acceptable vaccine accessible to the average citizen on the streets of Nigeria.
- ✓ Since the study reveal that the masses are fully aware and are knowledgeable about the virus, emphasizes should be

shift from the knowledge and existence of the virus to the repercussion of being mask less in public places
- ✓ The COVID-19 Health Protection Regulations policy signed by President Buhari on the 26th of January, 2021 should commence it implementation fully
- ✓ The presidential task force and other security agencies should frequently visit crowded work places in Nigeria to ensure that workers, caregivers and visitors wear a mask at all times during work as finding revealed that most workers wear a face mask as a yardstick of entering work premises and later remove it during work. Masks should be worn throughout work apart from when eating and drinking.

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