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Article

Social Distancing, Mandatory Lockdown, and Response Satisfaction during the COVID-19 Pandemic: Perceptions of Nigerian Social Media Users

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Abstract: Background: Pandemics present major challenges for clinical and public health agencies as well as policymakers. The scientific and medical uncertainty surrounding emerging viruses such as COVID-19 contributes to increased morbidity and mortality rates. Consequently, it is important to evaluate public perceptions regarding social distancing, lockdown obligations, and satisfaction with government responses during the pandemic. **Methods:** This cross-sectional study employed an anonymous online questionnaire distributed through social media platforms. The survey was conducted among social media users between April 1 and April 30, 2020. A snowball sampling technique was used to recruit participants, yielding a total of 1,131 respondents. **Results:** Nine out of ten respondents believed that social distancing was an effective measure to reduce the spread of COVID-19. Additionally, eight out of ten agreed with lockdown measures. However, only 36.8% of respondents felt that their government was doing enough to contain the outbreak, and just 25% expressed satisfaction with the country's overall response. Age was found to be significantly associated with satisfaction regarding emergency response efforts. **Conclusion:** The findings suggest that the Nigerian public largely accepted social distancing as an effective method to curb the spread of COVID-19 and showed general acceptance of lockdown measures. Nevertheless, more than half of the respondents reported dissatisfaction with the responses of the government and related agencies during the pandemic.

Keywords: COVID-19; Nigeria; Perception; Lockdown; Social distancing

1. Introduction

On 30th January 2020, the World Health Organization (WHO) declared the novel coronavirus (2019-nCoV) outbreak a public health emergency of international concern [10]. The Coronavirus Disease of 2019, also known as COVID-19, is a rapidly spreading disease caused by the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) [2]. The virus possesses extraordinary transmission capabilities, leading to high rates of morbidity and mortality [3], and has affected countries across all inhabited continents [4,5].

Pandemics present considerable challenges for clinical and public health agencies as well as policymakers due to the scientific and medical uncertainty that accompanies emerging infectious diseases such as COVID-19 [6]. This uncertainty often contributes to increased morbidity and mortality rates. As of the time of writing this manuscript, over 3.5 million cases had been reported globally [7]. Although SARS-CoV-2 spreads more rapidly than its two predecessors—SARS-CoV and MERS-CoV—it exhibits a comparatively lower fatality rate of approximately 2–3% [8].

Older men with medical comorbidities are more likely to experience severe outcomes from COVID-19 infection, such as cardiac injury, respiratory failure, and acute distress syndrome [9]. The ongoing coronavirus disease is now spreading rapidly across Africa, with most cases reported as importations from other continents. Transmission also occurs among individuals without recent travel history [10]. Given the fragility of African health systems, early outbreaks raised major public health concerns.

The first case of COVID-19 in Nigeria was confirmed on 27 February 2020, following the arrival of an infected traveler from Italy [11]. The Nigerian government responded swiftly by implementing public health interventions and

emergency preparedness strategies. Markets were closed except for essential food items, and public gatherings were restricted [12]. By 27 March 2020, Nigeria had recorded 81 confirmed cases [13], which rose to over 2,500 cases across 35 states by 4 May 2020 [14].

The high transmissibility of the virus and the absence of vaccines or specific antiviral therapies posed significant challenges to containment efforts [15]. As a result, public health agencies emphasized non-pharmaceutical measures such as the promotion of personal hygiene, use of face masks, social distancing, and isolation of infected individuals [16–19]. The COVID-19 pandemic has underscored the importance of public trust, government accountability, and the effectiveness of health communication strategies [20].

Social distancing—maintaining a physical distance of at least 2 meters (6 feet) between individuals—was one of the key preventive measures adopted globally [21]. Evidence from earlier pandemics suggests that social distancing significantly reduces infection transmission and mortality [22,23]. Studies from other countries have shown that effective public messaging and government transparency are essential for improving public compliance [24,25].

As the pandemic spread, the Nigerian government launched awareness campaigns across social and traditional media platforms to encourage adherence to preventive measures [26]. However, compliance varied due to sociocultural and economic factors [27]. Consequently, this study aimed to evaluate Nigerian social media users' perception of social distancing, lockdown obligations, and satisfaction with the government's COVID-19 response.

2. Materials and Methods

2.1. Setting and Participants

This cross-sectional survey employed an anonymous online questionnaire distributed via popular social media platforms, including Facebook, WhatsApp, and Twitter. Data collection took place between April 1 and April 30, 2020. A snowball sampling technique was used to recruit participants, starting with three Nigerian contacts who were asked to share the survey link within their networks. A total of 1,131 respondents completed the survey from across the country.

2.2. Procedure

Due to the Nigerian government's enforcement of social distancing rules and lockdown measures, physical interaction was not possible. Therefore, promotion of the survey was conducted exclusively online. Existing study participants were asked to send the survey link to other potential respondents. The online questionnaire was hosted on Google Forms. Participation was voluntary, anonymous, and completely confidential. Informed consent was obtained from all respondents by asking if they were willing to proceed with completing the questionnaire. Those who consented advanced to the next section, while those who declined were exited automatically.

2.3. Instruments

Socio-demographic data were collected from respondents, including gender, age, educational qualification, and professional background. In addition, outcome variables included respondents' perceptions of social distancing, lockdown obligations, and satisfaction with the Nigerian government's response to the COVID-19 pandemic.

2.4. Operationalization of Variables

This section outlines the variables used in the study. The explanatory variables included gender, age, education, and background. The outcome variables were: (1) perception of social distancing/self-isolation, (2) perception of lockdown obligation, and (3) satisfaction with the government's response to the COVID-19 pandemic.

Respondents were asked whether they believed social distancing or self-isolation was effective in reducing the spread of COVID-19. Responses were categorized as "Yes" or "No." Agreement with lockdown obligation was also measured dichotomously ("Yes"/"No").

Satisfaction with the government's response was rated on a 5-point Likert scale ranging from 1 (very dissatisfied) to 5 (very satisfied). A median score of 3 was used to categorize responses: scores between 1–3 indicated dissatisfaction, while scores between 4–5 indicated satisfaction.

2.5. Statistical Analysis

Data were analyzed using Stata version 14. Descriptive statistics were presented in the form of tables and text, summarizing the frequency distributions and percentages for all relevant variables. Associations between socio-demographic factors and outcome variables were assessed using chi-square tests, with statistical significance determined at $p < 0.05$.

3. Results

3.1. Socio-demographic Characteristics of Respondents

Table 1 presents the socio-demographic characteristics of the respondents. Over 77% of participants were aged 18–39 years, while the remaining respondents were above 40 years of age. Gender distribution showed that 41.9% were male, 57.7% were female, and 0.4% preferred not to specify their gender. Regarding education, more than half of respondents (52.6%) held a bachelor's degree, approximately 47% had post-graduate qualifications, and only 0.3% reported no formal education.

4. Discussion

The purpose of this study was to evaluate Nigerian social media users' perceptions of social distancing, lockdown obligations, and satisfaction with government responses to the COVID-19 pandemic. According to the World Health Organization (WHO), the COVID-19 virus primarily spreads through respiratory droplets expelled when an infected person coughs, sneezes, or speaks. Because of this transmission route, the WHO and the Nigerian Ministry of Health have emphasized the importance of social distancing and self-isolation as preventive measures.

Self-isolation is a measure taken by individuals who have tested positive for COVID-19 or have been exposed to the virus to avoid infecting others in their community, including family members. Social distancing, on the other hand, involves maintaining a physical distance between individuals to prevent person-to-person transmission. Findings from this study confirm that most respondents understand that social distancing and self-isolation are effective strategies to prevent infection. Moreover, WHO guidelines recommend maintaining a distance of at least 1–2 meters between individuals, which participants recognized as necessary even in the absence of known exposure.

Lockdown, a government-mandated restriction on movement and access to public spaces, was also evaluated in this study. The findings show that a large proportion of respondents agreed with the necessity of lockdown measures as a means of controlling viral transmission. However, only about 75% of respondents were not satisfied with the Nigerian government's response to the COVID-19 pandemic, and this dissatisfaction was significantly associated with age group. Younger, more active social media users appeared to be better informed and more critical of governmental actions, possibly due to their access to diverse information sources.

Under lockdown conditions, challenges such as misinformation, noncompliance, and limited public awareness persisted. Disseminating accurate, timely, and accessible information through social media is therefore essential to increase compliance and improve public health outcomes. Overall, these findings underscore the importance of clear government communication and proactive engagement with citizens during health crises.

5. Conclusion

This study concludes that Nigerian social media users generally understood and supported social distancing measures during the COVID-19 pandemic. The majority of respondents agreed with the principles of lockdown as a necessary control measure. Nonetheless, a substantial proportion expressed dissatisfaction with the government's overall response to the crisis, particularly regarding testing capacity and public communication.

Age was found to be significantly associated with satisfaction levels, suggesting that younger, more socially active Nigerians were more engaged and critical of the government's handling of the pandemic. Overall, the study highlights the crucial role of social media as a platform for both promoting preventive behaviors and evaluating public perceptions during health emergencies.

Conflicts of Interest: "The authors declare no conflict of interest."

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