

# Appraisal of Community's Sense of Social Support and Social Distancing Measures in Combating COVID-19 Pandemic in Residential Neighbourhoods of Akure, Nigeria

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## Abstract

This study used the Sense of Community Index 2 (SCI-2) designed by McMillan & Chavis (1986). However, the SOC indices were slightly modified to account for issues relating to the current pandemic, which was not captured in the McMillan & Chavis study. This paper reports on the relationship between preventive measures to reduce the spread of the pandemic and residents' sense of community in poor neighbourhoods during the COVID-19 pandemic. Questionnaires were administered to household heads of selected poor residential neighbourhoods in Akure, Nigeria, and subjected to frequency distribution and the Pearson moment coefficient analysis to determine the relationship between social distancing and sense of community during the pandemic. The majority of the respondents (99.6%) were aware of the pandemic, and 92.3% adhered to one or more safety measures (personal hygiene, mask, curfew, isolation, and lockdown). The findings also revealed a significant ( $p=0.05$ ) correlation between a sense of belonging and adherence to pandemic prevention measures in the study area. Therefore, it is essential that decision-makers take into account not only the socioeconomic characteristics of people but also the social concept of their daily existence when determining social policy and service delivery.

**Keywords:** COVID-19, Nigeria, Sense of community, social distancing measures, social support, pandemic

## 1. Introduction

There is an outbreak of a coronavirus disease ravaging the entire world. It is an infectious disease brought about by a previously unknown coronavirus, according to the World Health Organization (WHO, 2020). The transmission of the virus occurs when a person is in close contact with an infected person; this COVID-19 virus is primarily transmitted between people through respiratory droplets and contact routes (WHO, 2020; Liu et al., 2020). The fear of contracting the virus through physical contact has forced different countries to put physical and social restrictions and varieties of other methods to check the spread. Preventive measures such as the closure of schools, workplaces, ban on religious gatherings and social activities, wearing of nose guards have all been utilized in different countries of the world (Aassve et al., 2020). In addition, other stringent measures have been put in place by the Nigerian government, such as social distancing, lockdown, and curfews to reduce the spread of the virus. However, this measure seems to have severe social and economic consequences on the people. It has further increased hunger and poverty in most developing nations of Africa, including Nigeria. This measure towards combating the spread of the coronavirus ravaging the world has cut off the poor from work as most of them survive from their daily earnings, majorly in the informal sector. Moreover, the Nigerian government has been unable to provide an adequate palliative for the urban poor who form a vast majority of its citizens. These control measures put in place by the government have affected the means of livelihood and ability to earn a living. Still, it has also further cut the urban poor from getting other help for their daily survival.

The COVID-19 pandemic has undoubtedly increased the level of hardship and poverty among the poor; especially, in third world nations of the world. Moreover, the widespread virus worldwide tends to have serious economic, social, and cultural consequences. In recent times, the community has emerged as a critical focus for addressing various social problems. Sense of community has become necessary in the measurement of social relationships in neighbourhoods. It gives feedbacks on social resources available in the neighbourhood. Also, it provides feed forwards into the future use of the sense of community in alleviating poverty and improving the urban poor's lives

during a future pandemic. The value of social networks supports the neighborhood sense of community (Ayoola, 2015). Community psychology studies have revealed a sense of community as an important predictor of well-being and a component of social capital, which explains the sense of being part of a readily supportive network of relationships in which one could depend (Sengupta, Luyten, Greaves, Osborne, Robertson, Armstrong & Sibley, 2013). It is the feeling of belonging and common interests among people in a community (Farahani & Lozanovska, 2014). Sense of community has also provided a buffer against physical and psychological symptoms of illness and facilitates adjustment (Pretty et al., 2006).

Recent studies have argued that a significant crisis can have a long-lasting effect on individuals and families, leading to a decline in social trust, which is an essential component of the sense of community (Aassve et al., 2020; Alfani & Murphy, 2017; Richardson & Mc Bride, 2009). However, the impacts of a specific pandemic or epidemic cannot be generalized because they vary on the basis of infection rate, mode of transmission, and chances of survival, and the social, economic, and cultural aspects of the location where it took place (Arnstein et al. 2020; Alfani & Percoco, 2019). Thus, the literature does not clarify how a pandemic or natural disaster may affect the sense of community. Furthermore, the result of past research cannot be generalized in all locations due to different social and cultural characteristics. Therefore, it is vital to assess the kind of social support available to residents of poor residential neighbourhoods in Nigeria during a pandemic and the impact of COVID-19 on their sense of community.

The study, therefore, aimed to assess the impact of COVID-19 and the social control measures on the sense of community in a disadvantaged residential neighbourhoods with regard to alleviate urban poverty and harness the social resources available in poor neighbourhoods.

### **Research Questions**

What is the level of sense of community present in a poor residential neighbourhood during the COVID 19 pandemic?

How is social network utilized during the COVID-19 pandemic?

How do several social measures in combating COVID-19 spread affect the sense of community?

How can the sense of community be better utilized in alleviating poverty during a pandemic?

### **Literature Review**

This paper reviewed the literature on issues relating to the sense of community in neighbourhoods and the pandemic's impact on behaviours of the residents of a referent community. The paper also discusses social measures enforced in reducing the spread of the pandemic.

#### **Sense of community**

A sense of community is a sense of connectedness and shared interests among local residents (Farahani & Lozanovska, 2014, Rogers & Sukolratanamete, 2009). McMillan and Chavis (1986) analyze four important aspects: (1) membership, which includes a sense of identity and the emotional wellbeing it provides; (2) influence, which reflects the capacity to bring about change in one another; (3) reinforcement and needs accomplishment, which relates to the emotion or belief that needs are met through the collaborative decision - making of the community; and (4) shared emotional connection, which refers to an independent member's commitment and conviction that the members of the association share (or will share) life experiences or history of time and place. A sense of belonging to a readily available social network from which one can benefit is a critical determinant of well-being (Sengupta, Luyten Greaves, Osborne, Robertson, Armstrong & Sibley, 2013).

According to the literature, several variables such as duration of residency (Skjaeveland et al., 1996), homeownership (McMillan and Chavis, 1986), and affiliation or belonging to a group (Bradsky and Marx, 2001) have all been identified as influencing the sense of community. Even so, it is unclear whether the sense of community will increase during a pandemic. The majority of studies on the sense of community in neighborhoods have focused primarily on neighborhood social effects. In comparison, few studies have looked into the relationship between physical characteristics of a neighborhood and a sense of community (Farahani & Lozanovska, 2014).

Notwithstanding, the role of neighborhood social relationships in creating a sense of community during a pandemic has not been adequately emphasized in most social science research. However, several types of research have examined trust, which is an essential component of a sense of community during a pandemic (Tabellini, 2010; Skidmore & Toya, 2014). Furthermore, the literature suggests that a pandemic or a highly contagious disease would reduce social contact from fear of contracting the disease (Aassve et al., 2020). For example, in the Spanish

Flu pandemic, public health measures and advice to avoid inter-personal contacts destroyed social ties and trust (Cohn, 2018). However, in a similar study on the Ebola outbreak, public intervention measures to combat the transmission of the virus might likely increased trust as most survivors were majorly people with no available social capital or networks to provide support (Fluckiger et al., 2019).

### **Social distancing measures**

Numerous studies have tried to explain the concept of social distancing, which is used interchangeably as physical distancing, and how it relates to the COVID-19 pandemic. For instance, Musinguzi and Asamoah (2020) defined social distancing as a deliberate effort to reduce the transmission of contagious diseases by closing partly or wholly social activities. Again, Sen-Crowe, McKenney, and Elkbuli (2020) put social distancing simply as the practice of increasing the space between people, thereby lessening the chance of spreading illness. Similarly, social distancing is a method used to reduce physical contact between people who may be infectious (Wilder-Smith and Freedman, 2020; Rosman et al., 2020). Other social distancing measures adopted include; travel ban, epicenter lockdown (Zhang, Jiang, Yuan, Tao, 2020), the prohibition of gatherings, curfews (European Centre for Disease Prevention and control, 2020), and also; closure of schools, places of worship, markets and reduction in social interaction (Vrugt, Bickmann, and Wittkowski, 2020).

Globally, the coronavirus pandemic is steadily transforming human relationships. Psychologically, there are substantial shreds of evidence that social distancing has a significant effect on mental well-being, as people, over time, have had to deal with depression and anxiety (Hawryluck, Gold, Robinson, Pogorski, Galea, and Styra, 2020; Jeong, Yim and Song, 2020; Faris 2020; Rubin and Wessely 2020). Particularly in children and the elderly, the feeling of abandonment and ostracism can be a difficult challenge that necessitates the need for emotional support through informal networks (families) and health professionals (Jiloha, 2020). There is strong evidence that social isolation increases older people's risk of cognitive dysfunction, boredom, depression, anxiety, and mortality (Cohen-Mansfield et al., 2016; Santini et al., 2020)

From a social perspective, both individuals, as well as community-wide actions, have been taken. Individual actions refer to; working remotely, avoiding public transportation, and staying at home, while community-wide activities, on the other hand, relate to the closure of restaurants, transition to online teaching (Sen-Crowe et al., 2020), avoiding places of worship. Also, studies reveal that during social distancing, people are confined, separated from loved ones, deprived of personal liberties, and have routine altered (Bai et al., 2004).

In as much as social distancing has recorded appreciable success in recent times, particularly in developed countries, the same cannot be said about poor and middle-income countries as it has, however, brought about expected economic threats. Studies reveal that many low- and middle-income neighbourhoods are self-employed and sometimes work in the informal sector (Barnet-Howell and Mobarak, 2020). As a result, the difference in a social distancing between income classes is that the rich can meet basic daily needs while the poor are left to rank things according to the order of importance in meeting everyday needs.

## **2. Methodology**

### *2.1 Sampling and Sample Size*

Four residential communities in the core of Akure Nigeria were purposively selected based on their perceived high level of poverty as documented in previous studies of urban poverty (Ayoola, 2015). The four chosen purposively communities are, Araromi, Oja Oshodi, Odo-Ikoyi, and Isolo (Figure 3). The sample size was calculated based on the number of existing buildings in the area, and questionnaires were distributed to one person per household and one household per building. The household head is the unit of analysis in the housing units. The technique of stratified systematic sampling was used. Out of a total population of approximately 784 residential structures, the sample size for the study is 261, which was generated using the sample size calculator with a confidence level of 95%. A systematic random technique was used to select the studied houses, and heads of households in each house were the primary focus of questionnaire administration. Since the study area is majorly a poor residential neighbourhood and homogenous by nature, the first house was randomly selected in each neighbourhood and subsequent selection of every third building along the line of movement. A total of 241 questionnaires was returned and found helpful for this study.

### *2.2 Instruments and Measurements*

The primary data for this study was retrieved through a structured questionnaire to obtain information on the sense of community in four disadvantaged residential neighbourhoods in Nigeria during the spread of COVID-19. The questionnaire was adopted to test the hypothesis establishing a relationship between social measure (social/physical distancing) of preventing the spread of the pandemic and the residents' sense of community in the

study area. The questionnaire was best suited because other approaches such as interviews or focus group discussions are not possible due to the social distancing directive during this pandemic. The questionnaire was designed to conform to the study's themes, and the sequence of questions is easy to comprehend by the respondents. The first section deals with the respondents' socio-economic characteristics such as Age, Gender, Income, marital status, level of education, and forms of contact. The second part deals with questions on COVID-19 and the social measures to curb the spread of the pandemic. The third section deals with questions on the sense of community in the study area. The measurement of sense of community adopted the Mc Millan & Chavis 1986; Chavis et al., 2008, sense of community index two theory. The sense of community index (SCI-2) was used to measure 24 items based on four elements, reinforcement of needs, membership, influence, and shared emotional connection in measuring the sense of community. Only 17 items suggested a good fit of all the four elements meant to measure SOC in this neighborhood during a pandemic. In contrast, seven items of SCI-2 were removed from this instrument based on the difference in community size, community type, and member motivation. The sense of community revised version comes with a 5 points Likert scale response format (1-Strongly disagree to 5- Strongly agree) with the following Questions (see Table 4)

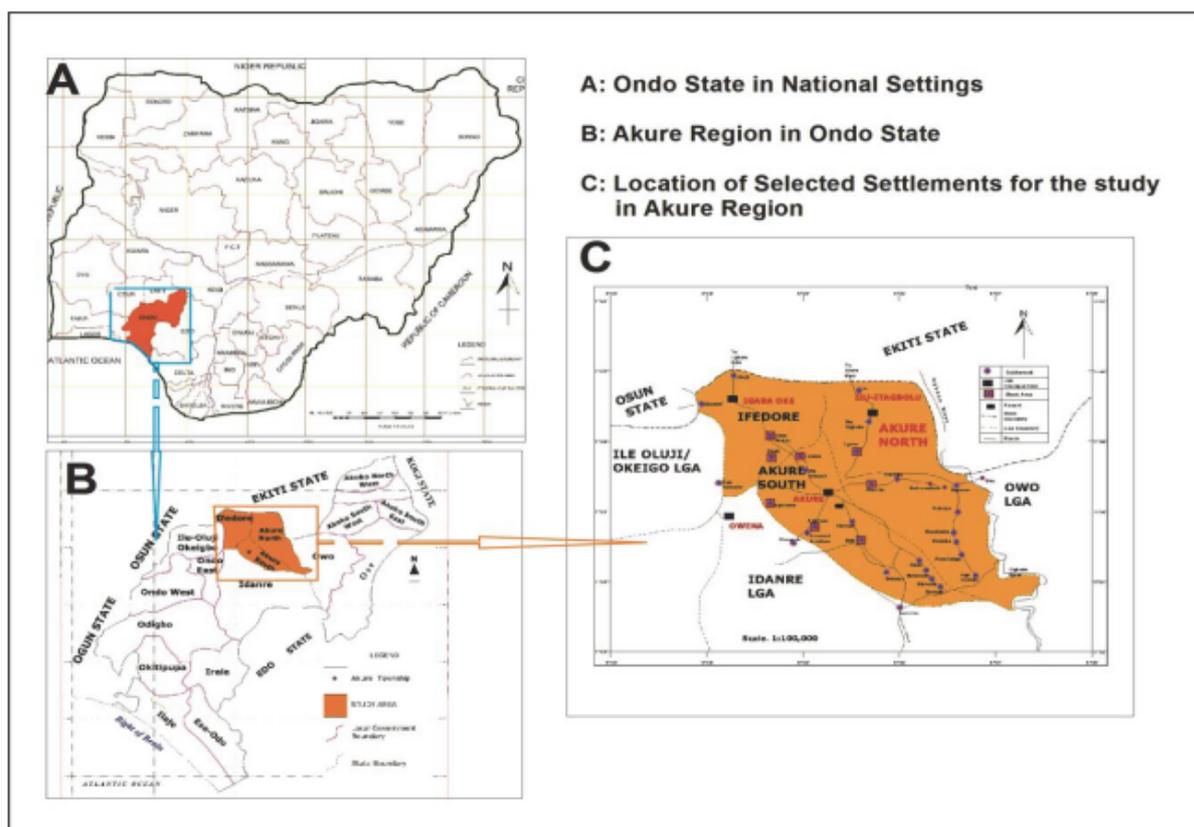


Figure 1. Locational Maps of the Study Area (Akure Region)

Source: Owoeye (2019)

Akure, the study area which is a city in south-western Nigeria is the capital of Ondo State. It is a traditional Nigerian city that existed long before the colonial rule in Nigeria. Akure is seen as a medium-sized urban centre. The total area is approximately 41.2km<sup>2</sup> and it lies on a relative plain of about 250m above the sea level. Akure lies about 7°15' north of the equator and 50°15' east of the Meridian. The town is situated in the tropic rainforest zone in Nigeria. The last census conducted in 2006 put the city's population at 484,798 i.e. Four hundred and eighty-four thousand, seven hundred and ninety-eight (NPC, 2006). The increased political influence in Akure as a state capital since 1976 has increased both growth and socio-economic activities.

### 3. Results and Discussion of Findings

#### 3.1 Socio-Demographic Characteristics of Respondents

Table 1 presents descriptive statistics of the respondents. The majority of the respondents (60.2%) were females, while the remaining (39.8%) were males. The highest percentage of the respondents (73.9%) had either primary or secondary education, 32.4% are artisans, while 32% and 28.4% of the respondents are into informal business or self-employed. The highest category of the respondents (24.9%) earns below 30,000 naira monthly, which is the approved minimum wage in Nigeria. This income level of the respondents indicates a high level of poverty among the respondents. Additionally, about half of the respondents (57.3%) are married, and 41.8% of the respondents are within the age bracket of 31-40. More than half of the respondents (64.3%) lived in a rented apartment.

Table 1. Socio-demographic characteristics of the respondents

<b>Sex</b>	<b>Frequency</b>	<b>Percent</b>
Male	96	39.8
Female	145	60.2
Total	241	100.0
<b>Education</b>	<b>Frequency</b>	<b>Percent</b>
No formal education	52	21.6
Primary/Secondary	178	73.9
Tertiary	11	4.5
Total	241	100.0
<b>Age</b>	<b>Frequency</b>	<b>Percent</b>
18-30 years	68	28.2
31-40 years	116	48.1
41-50 years	24	10.0
51-60 years	28	11.6
Above 60 years	5	2.1
Total	241	100.0
<b>Marital Status</b>	<b>Frequency</b>	<b>Percent</b>
Single	97	40.2
Married	138	57.3
Divorced	2	.8
Widow/Widower	4	1.7
Total	241	100.0
<b>Tenure status</b>	<b>Frequency</b>	<b>Percent</b>
Tenant	155	64.3
Landlord/house owner	86	35.7
Total	241	100.0
<b>Occupation</b>	<b>Frequency</b>	<b>Percent</b>
Unemployed	14	5.8
Informal trader	77	32.0
Artisans	78	32.4
Self Employed	69	28.6
Civil servant	3	1.2
Total	241	100.0
<b>Monthly Income</b>	<b>Frequency</b>	<b>Percent</b>
Below #30,000	60	24.9
#30,000- #40,000	46	19.1
#41,00-#50,000	53	22.0
#51,001-#60,000	59	24.5
Above #60,000	23	9.5
Total	241	100.0

Authors' field work 2020

### Level of awareness and preventive measures against the spread of COVID-19

Table 2 reveals the respondents' awareness about the coronavirus, measures taken to stop community transmission, and the effectiveness of the measures adopted at the community level. The majority of the respondents (99.6%) were aware that there is a current coronavirus (COVID-19) disease spreading all across the globe. Additionally, the respondents were asked which of the government's control measures they adhered wholly to. For example, about half of the respondents (53.1%) indicated that they had practiced personal hygienic practices like frequent hand washing and extra house cleaning during this pandemic and 13.3% of the respondents adhered only to the use of masks. In comparison, a few respondents (8.7%) indicated that they did not follow any of the government's control measures to flatten the curve in the spread of the virus. Nevertheless, more than half of the respondents (60.6%) think that the government's control measures have indeed been effective in curtailing the spread of the virus.

Table 2. COVID- 19 Awareness and preventive measures

<b>COVID-19 Awareness</b>	<b>Frequency</b>	<b>Percent</b>
very aware	219	90.9
Aware	21	8.7
not really aware	1	.4
Total	241	100.0
<b>Control measures in place</b>	<b>Frequency</b>	<b>Percent</b>
social distancing only	12	5.0
Isolation only	3	1.2
Lockdown only	10	4.1
Curfew only	16	6.6
Personal hygiene only	128	53.1
Masks only	32	13.3
All of the above	19	7.9
None of the above	21	8.7
Total	241	100.0
<b>The control measures have been effective?</b>	<b>Frequency</b>	<b>Percent</b>
strongly disagree	16	6.6
Disagree	49	20.3
Neutral	54	22.4
Agree	92	38.2
strongly agree	30	12.4
Total	241	100.0

Authors' field work 2020

### Household survival mechanism and social support available during the pandemic

Table 3 reveals how households coped with life amidst the pandemic and the several approaches to stop the spread of the virus. The majority of the respondents (71.4%) have had reasons to visit the neighbourhood market to get their daily needs; in comparison (25.7%) of the respondents who have already stocked up food items and other essentials. Also, 38.6% of respondents go out once a week, while 19.9% and 17.4% go out at least every day and every other day respectively. Findings reveal that half (53.9%) of the respondents went to the market during the incidence, 22.8% went to work, and 6.2% visited friends. Thus, most respondents (97%) have received support from friends, relatives, social groups, government, and religious institutions. The highest category (38.2%) is respondents who claimed they had received support from a social group or community organization.

In comparison, 1.3% of the respondents have received support from the government, and 19.5% and 12.5% of the respondents received one form of help from families and friends, respectively. In addition, about one-third of the respondents (30.3%) received support in terms of cash, while (28.2%) of the respondents received food items. Findings also established that most respondents had offered one form of support to people during the pandemic. For example, about half of the respondents (47.7%) supported friends, and 25.5% claimed they offered support to their family members only. In comparison, 32% of the respondents provided one kind of support to the poor and vulnerable people around them.

Table 3. Household survival and social support

<b>How do you get your daily needs</b>	<b>Frequency</b>	<b>Percent</b>
go to neighbourhood market	172	71.4
online delivery with aid of app	6	2.5
have already stocked up food items and other essentials	62	25.7
Others	1	.4
Total	241	100.0
<b>How often do you go out of your apartment</b>		
	<b>Frequency</b>	<b>Percent</b>
once daily	48	19.9
more than once a week	27	11.2
every other day	42	17.4
Weekly	93	38.6
Others	30	12.4
Missing value	1	.4
Total	241	100
<b>Where do you normally go</b>		
	<b>Frequency</b>	<b>Percent</b>
visit a friend	15	6.2
Work	55	22.8
religious institution	6	2.5
Market	130	53.9
physical exercise	30	12.4
Other	5	2.1
Total	241	100.0
<b>Have you received support from anyone ?</b>		
	<b>Frequency</b>	<b>Percent</b>
Friends	31	12.9
religious institutions	32	13.3
Government	3	1.2
Relatives	47	19.5
NGO	3	1.2
Community association and social groups	92	38.2
friends and relatives	11	4.6
religious institutions and relatives	5	2.1
friends and religious institutions	10	4.1
None	6	2.5
Missing	1	.4
Total	241	100.0
<b>What kind of assistance did you receive?</b>		
	<b>Frequency</b>	<b>Percent</b>
Money	73	30.3

food items	68	28.2
call cards/internet access	8	3.3
drugs/medical care	2	.8
Other	90	37.3
Total	241	100.0
<b>Have you given any form of support to anyone during this pandemic</b>		
	<b>Frequency</b>	<b>Percent</b>
no one	15	6.2
Friends	115	47.7
Relatives	62	25.7
NGO	1	.4
community association	30	12.4
Other	8	3.3
friend and family	10	4.1
Total	241	100.0
<b>What category of people did you give support to</b>		
	<b>Frequency</b>	<b>Percent</b>
children within the neighbourhood	7	2.9
parents/elderly	28	11.6
poor and vulnerable	77	32.0
friends and family	110	45.6
no one	17	7.1
Other	2	.8
Total	241	100.0

Authors' field work 2020

#### Perception of sense of community

Respondents were asked if they agreed or disagreed with a series of statements about the sense of community in their neighbourhood (Table 3). More than half of the respondents (64.7%) believe that neighbours get together to deal with problems in their neighbourhood (64.7%), and 43.6% of respondents agreed that there are great leaders in their neighbourhood. However, more than half of the respondents (65.6%) disagreed that they met essential needs because they felt part of their neighborhood. The majority (66.4%) disagreed that they cared about their community before the pandemic. The highest percentage of respondents (70.1%) countered that the community has successfully gotten the needs of its residents met during this pandemic. Only a few of the respondents (29.8%) agreed that their community makes them feel good at this time.

Less than half of the respondents (30.4%) agreed to be part of the neighbourhood for long. However, the neighbourhood has adults that children can look up to (63.6%), and people are willing to help their neighbours (65.4%).

Concerning trust and safety, more than half of respondents (54.1%) believe their neighborhood is safe, 44.9% trust the people in their neighborhood, 42.8% feel safe in open spaces during the day, and 34% feel safe at night. The sense of belonging to a neighborhood was also positive, with 71.6% of parents relating to one another and 62.2% feeling at home in their neighborhood. In comparison, just under half (43.3%) of respondents grew up in the neighborhood, and 48.5% percent were proud to live there. This further confirmed that length of residency influenced sense of community in the study area.

The respondents' responses on all the sense of community combined indicated a low level of sense of community in the neighbourhoods. More than one-third (39.7%) of the respondents disagreed that sense of community is strong in their neighbourhood while 28.65% rated sense of community high during the pandemic. The result

validates the findings of Aassve et al. (2020) that a pandemic or a highly infectious disease might reduce social contact from fear of contracting the disease, which might lead to a low sense of community.

Table 4. Distribution of responses on sense of community

Sense of community variables	Strongly disagree	Disagree	Neutral	Agree	Strongly Agree
<b>I got important needs met because i belong</b>	87 (36.1)	71 (29.5)	59 (24.5)	18 (7.5)	6 (2.5)
<b>Before COVID, I have cared for my community members and I value the same things</b>	93 (38.6)	67 (27.8)	52 (21.6)	25 (10.4)	4 (1.7)
<b>My community has been successful in getting the needs of its residents met during this period</b>	47 (19.5)	76 (31.5)	78 (32.4)	36 (14.9)	4 (1.7)
<b>Being a member of my community makes me feel good at this time</b>	87 (36.1)	82 (34.0)	45 (18.7)	26 (10.8)	1 (0.4)
<b>If I have a problem, I can discuss it with members of my community</b>	37 (15.4)	44 (18.3)	91 (37.8)	67 (27.8)	2 (0.8)
<b>I can trust people in my community</b>	58 (24.1)	79 (32.8)	61 (25.3)	40 (16.6)	3 (1.2)
<b>I can recognize most of the members of my community</b>	34(14.1)	56 (23.2)	97 (40.2)	52 (21.6)	2 (0.8)
<b>Fitting into my community is important to me</b>	19 (7.9)	50 (20.7)	66 (27.4)	91 (37.8)	15 (6.2)
<b>My community can influence other communities</b>	11 (4.6)	30 (12.4)	77 (32.0)	108 (44.8)	15 (6.2)
<b>I have influence over what happens in my community</b>	17 (7.1)	40 (16.6)	80 (33.2)	93 (38.6)	11 (4.6)
<b>If there is a problem in my community, members can get it solved</b>	43 (17.8)	73 (30.3)	86 (35.7)	36 (14.9)	3 (1.2)
<b>My community have good leaders</b>	9 (3.7)	29 (12.0)	64 (26.6)	127 (52.7)	12 (5.0)
<b>I expect to be part of this community for a long time</b>	23 (9.5)	32 (13.3)	81 (33.6)	94 (39.0)	11 (4.6)
<b>Members of this community care about one another</b>	28 (11.6)	54 (22.4)	90 (37.3)	66 (27.4)	3 (1.2)
	13 (5.4)	44 (18.3)	106 (44.0)	74 (30.7)	4 (1.7)

Authors' field work 2020

### 3.2 Relationship Between Sense of Community and Pandemic Control Measures

The study used the Pearson correlation to test for a significant relation between residents' adherence to safety control measures and sense of community. Table 5 indicates that there is a significant relationship between the two variables. The association is significant at a 5% level in the study area with p value = 0.05 and a correlation coefficient value of 0.147. It implies a meaningful relationship between the effectiveness of control measures to

curtail the spread of the pandemic and the sense of community in the study area. It shows likelihood that an increase in the sense of community in the neighbourhood will lead to the effectiveness of preventive measures during the COVID-19 pandemic. An increase in adherence to safety measures will likely increase the sense of community in the study area. The result agrees with Tabellini (2010), Skidimore & Toya (2014) that sense of community and trust is vital during a pandemic.

Table 5. Correlations between sense of community and safety measures

			Control measures are effective	
				SOC
Control effective	measures are	Pearson Correlation	1	.147*
		Sig. (2-tailed)		.022
		N	241	241
SOC		Pearson Correlation	.147*	1
		Sig. (2-tailed)	.022	
		N	241	241

\*. Correlation is significant at the 0.05 level (2-tailed).

#### 4. Summary and Conclusion

Findings show that the majority of the respondents (99.6%) are aware of the COVID-19 pandemic. In addition, most of the respondents (92.3%) adhered to one or more of the government's preventive measures. However, personal hygiene ranked highest at 53.1% and wearing a mask (13.3%), while 8.7% did not practice any of the safety measures imposed to curtail the spread of the virus. The majority of the respondents (60.6%) agreed that the control measures adopted by the government have been effective in stopping the spread of the pandemic.

The findings on the strength of sense of community in the study show that more than a third (39.7%) of the respondents rated sense of community low. In comparison, 31% are indecisive and 28.65% of the respondents ranked sense of community high during the pandemic. Thus, the neighbourhoods in the study can be described weak concerning sense of community.

The study showed a positive relationship ( $p= 0.005$ ) between sense of community and the level of adherence to safety measures put in place by the government to reduce the pandemic spread across communities.

Nevertheless, a significant limitation of this present study is that sense of community-level was not known before the pandemic to allow for an in-depth comparison. This makes it difficult to determine if the low level of sense of community in the study area results from the pandemic. However, there is an indication that strong sense of community in the neighbourhood is essential in reducing the spread of a pandemic. It is therefore crucial that policymakers should consider not only socio-economic characteristics of people for social policy and service delivery but also the social concept of their everyday lives.

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