

# Perceived Psychosocial Impact of Lockdown and Life Satisfaction Assessment of Nigerian Working Adults during Coronavirus Pandemic



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**ABSTRACT.** The study assessed the perceived psychosocial impact of lockdown and life satisfaction of Nigerian working adults during the coronavirus pandemic. A cross-sectional research design was adopted, and 518 working adults participated in the study using the convenience sampling technique. Two sets of questionnaires served as the data collection instruments. Data generated from the study were analyzed using mean, standard deviation, and OLS regression analysis. Results revealed, amongst others, that relationships with family members and neighbors, interaction with office colleagues, social connectedness, the use of social media, and shopping are the major psychosocial domains highly affected by the impact of the lockdown. Also, it was revealed that working adults in Nigeria are slightly satisfied with life during the COVID-19 lockdown. Based on the results, suggestions were made to mitigate the effects of the psychosocial impact of the lockdown and low life satisfaction during and after the lockdown period of the COVID-19 pandemic.

## 1.0. Introduction

The outbreak of coronavirus disease 2019 (COVID-19) in Wuhan City, China, and its spread to several countries of the world, sparring no continent, has sparked a global health crisis and is also generating stress throughout the world. Over 207 million people have been infected, and more than 4 million deaths have been recorded globally as of August 16, 2021 (World Health Organization [WHO], 2021). This has brought great discomfort, fear, anxiety, and suffering to different categories of people across the world. For instance, while the virus has brought about the death of many, several others have been hospitalized, and many more locked down in their homes as part of measures to contain the spread of the virus. This virus, which is affecting all segments of society, has brought new challenges not only to healthcare systems but also to economic and social systems worldwide. This is more notable in developing countries. For instance, the rapid spread of the virus to African countries is overwhelming their fragile health systems and social protection systems (Fardin, 2020). Nigeria, Africa's most populous country with over 200 million people, recorded her first coronavirus case on the 27th of February, 2020, in Lagos State. The virus has spread to 36 states, including the Federal Capital Territory, as confirmed cases have risen to 183,087 with 2,223 deaths as of 17 August, 2021 (Nigeria Centre for Disease Control [NCDC], 2021).

To contain the spread of the virus, governments of different countries imposed a lockdown on their citizens. The Nigerian government thus announced a total lockdown in Lagos, Ogun, and Abuja on March 30 and movement and travel restrictions across states as part of measures aimed at containing the rapid spread of the disease. As a result of the lockdown, schools, businesses, and government establishments were shut down, and many people, including workers, were required to stay at home. This has brought about serious disruptions to human activities and continued to deprive people of free movement, thus presenting a situation most people are not used to. Such unprecedented disruptions to work and other human activities could seriously impact them, making them feel both stressed and worried, whether affected by the pandemic directly or indirectly. This, therefore, can lead to detrimental and long-lasting psychosocial consequences as a result of large-



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scale social isolation, fear, and anxiety occasioned by the pandemic, especially for working adults whose jobs and livelihood activities have been disrupted greatly (Fardin, 2020; Zhang et al., 2020; Interagency Standing Committee [IASC], 2020). Specifically, the declared lockdown in the country confined the majority of working adults to their homes, with some still able to operate remotely, some stopped working, and some other working adults, mostly those in the essential service sector, were allowed to continue working. However, several other working adults lost their jobs due to the COVID-19 lockdown. However, this varied impact of the lockdown on working adults in the country may engender different psychosocial effects and affect how each individual assesses his/her life satisfaction (Itasanmi et al., 2020).

In its most basic form, the term psychosocial, on the one hand, refers to the combination of psychological and social factors or the influence social factors have on the mind or behavior of individuals, as well as the interrelation of behavioral and social factors. Viewed broadly, it relates to the interrelation of the mind and society in human development. Central to the definition of psychosocial, therefore, is the interrelationship of social factors and thought and behavioral processes. In other words, psychosocial factors emphasize the influence that social factors have on human thoughts and behavior and, in turn, the influence of thoughts and behavior on people's social life (Loughry & Eyber, 2003; Martikainen et al., 2002). For example, stressful life events such as unemployment or job loss, which leads to loss of income and ability to meet basic life needs, may have psychosocial implications on working adults. Similarly, deprivation of social interactions with family and colleagues as a result of the lockdown could heighten workers' sense of fear, anxiety, and depression, and these can give rise to a negative effect on their health, families, productivity level, and general well-being with its attendant implication on life satisfaction. It has been observed that the general well-being of workers plays a significant role in job performance and commitment, and there is a connection between well-being and life satisfaction as people with greater well-being report a higher life satisfaction and vice versa (Martikainen et al., 2002; Johnson et al., 2008).

On the other hand, life satisfaction refers to evaluating one's life. It is an individual's overall assessment of his/her feelings and attitude about life at a particular point in time, and these feelings and attitudes could be positive or negative. It serves as a measurement of people's conditions of life against their standards and expectations (Prasoon & Chaturvedi, 2016). Life satisfaction reflects an assessment of different aspects of peoples' lives, including social relationships, mental health, physical health, wealth, and sense of accomplishment at any given time or situation (Johnson et al., 2008). The emergence of COVID-19 has made human life more complex as the fear of survival encircles human thinking. This poses a great challenge to life satisfaction, especially the truncation of peoples' livelihood activities and its economic effects on individuals and the country at large. When people find it difficult to meet their daily needs, which is why they engage in income-generating activities, they become dissatisfied with life (Niharika, 2014).

Therefore, it is imperative to understand the psychosocial impact of a lockdown during the pandemic and how it affects workers' life satisfaction, particularly in Nigeria. This is done to provide information to policymakers towards understanding the state of working adults in the country and providing necessary support to cushion the effect of the pandemic for improved productivity of the workforce during and after the lockdown.

The study is guided by four (4) research questions. Firstly, what is the psychosocial impact of a lockdown on working adults during the COVID-19 pandemic? Secondly, what is the degree of general life satisfaction of working adults during the COVID-19 pandemic? Thirdly, what is the difference in psychosocial impact of lockdown among working adults during the COVID-19 pandemic based on demographic factors (sex, marital status, educational attainment, work sector, and job status)? Lastly, the study answers the question: what is the difference in life satisfaction among working adults during the COVID-19 pandemic based on demographic factors (sex, marital status, educational attainment, work sector, and job status)?

## **2.0. Methodology**

The study adopted a cross-sectional research design to assess the perceived psychosocial impact of a lockdown and life satisfaction of Nigerian working adults during the coronavirus pandemic. Working adults who are 18 years and above and engage in any activity with an expectant desire to either fulfill personal desires or family needs across Nigeria served as the participants for this study. A convenience sampling technique using snowballing sample method was used to select five hundred

and eighteen (518) working adults. This was done through an online survey link invitation generated from the web-based survey designed by the researchers on SurveyMonkey. The survey link invitation was sent to different workers' social media groups across the country. The justification for using these non-probability sampling techniques (convenience and snowballing sample methods) was based on the infeasibility of drawing a random probability-based sample for the study's population due to the lockdown declared to curtail human movement for infection control of COVID-19 in the country. The choice of the non-probability sampling techniques resonates with the submission of Saunders et al. (2019) that researchers choose non-probability sampling due to lack of time or easy access to the study's population and/or cost consideration to draw a random probability-based sample for the population.

The main instruments used for the study were two sets of questionnaires tagged 'Workers' Psychosocial Scale (WPS) and Satisfaction with Life Scale (SWLS)'. Section A of the instruments focused on the demographic characteristics of the respondents. The section consists of the age, gender, marital status, education attainment, work sector, and job status of the respondents during the coronavirus pandemic lockdown. The Workers' Psychosocial Scale (WPS) is a self-designed 5 Likert-type questionnaire validated by experts and consists of 19 items to measure variables associated with the psychological and social impact of lockdown caused by coronavirus on working adults. The Satisfaction with Life Scale (SWLS), on the other hand, was developed by Diener et al. (1985) and consisted of 5 items adapted to assess workers' cognitive judgments of their life satisfaction during coronavirus pandemic lockdown in the country. The reliability of the instruments was established through a pilot-testing procedure, and Cronbach coefficients of .82 and .81 were obtained for the Workers' Psychosocial Scale and Satisfaction with Life Scale, respectively.

Relevant approval for the conduct of the research and participants' informed consent were obtained before participation, and they were assured of the confidentiality of the information given. Data was collected through the SurveyMonkey platform that hosted the web-based survey designed for the study. This was done within two weeks, starting over a month after the initial declaration of lockdown in the country from May 2 to May 16, 2020.

Answering the first research question, mean and standard deviation were calculated for WPS, and the decision on each item was based on the mean score of < 2.5 (Low Impact). In contrast, any item with a mean score of 2.5 and above was considered to have a high impact. The decision criteria were based on less than average, low impact, and equal or above average, high impact. For research question 2, the scoring criteria for SWLS followed the benchmarks laid by Diener et al. (1985) as follows:

Score Range	Interpretation
31-35	Extremely Satisfied
26-30	Satisfied
21-25	Slightly Satisfied
20	Neutral
15-19	Slightly Dissatisfied
10-14	Dissatisfied
5-9	Extremely Dissatisfied

For research questions 3 and 4, bivariate and multivariate associations between the independent variable (demographic characteristics of working adults) and dependent variable (Psychosocial impact of lockdown and life satisfaction) were estimated using ordinary least squares (OLS) regression. Confidence intervals that include 0.0 suggest results that are not statistically significant.

### 3.0. Results

Table 1 presents the descriptive characteristics of the respondents. The table reveals that the majority of the respondents (81.9%) are within the age bracket of 18-40 years, and the majority of them representing 53.9%, are male. It also reveals that the majority of the respondents are single, while the majority also reported having HND/Bachelor's degree as their highest educational attainment. The table further shows that the majority of the respondents' work falls under the private sector (53.7%). It also reveals that while 19.7% of the respondents worked at the office, 41.9% worked from home, 33.6% stopped working, and 3.3% of the respondents lost their job during the COVID-19 outbreak.

**Table 1.** Demographic Characteristics of Respondents

Demographics	f	%
Age		
18-40	424	81.85
41-60	86	16.60
61 & above	7	1.35
Missing Response	1	0.19
Gender		
Male	279	53.86
Female	238	45.94
Missing Response	1	0.19
Marital Status		
Single	262	50.58
Married	244	47.10
Divorced/Widowed	11	2.12
Missing Response	1	0.19
Educational Attainment		
Secondary School or below	12	2.31
Technical or Vocational School	3	0.58
Nigeria Certificate in Education/National Diploma	39	7.53
Higher National Diploma/ Bachelor Degree	259	50.00
Postgraduate Degree	204	39.38
Missing Response	1	0.19
Work Sector		
Public Sector	161	31.08
Private Sector	278	53.67
Informal Sector (hawkers, marketers, vendors, artisans etc.)	67	12.93
Missing Response	12	2.32
Job Status during COVID-19		
Worked at office	102	19.69
Worked at home	217	41.89
Stopped working	174	33.59
Lost job during the outbreak	17	3.28
Missing Response	8	1.54

**Degree of the psychosocial impact of a lockdown on working adults during the COVID-19 pandemic**

Table 2 reveals that the lockdown had a high impact on working adults’ relationships with family members and neighbors ( $\bar{x}$ =2.68), interaction with office colleagues ( $\bar{x}$ =3.40), social connectedness ( $\bar{x}$ =3.42), the use of social media ( $\bar{x}$ =2.51) and shopping ( $\bar{x}$ =3.34) during the COVID-19 pandemic. However, the lockdown had a low impact on workers’ anxiety ( $\bar{x}$ =2.21), sadness ( $\bar{x}$ =2.05), loneliness ( $\bar{x}$ =2.29), frustration ( $\bar{x}$ =2.13), fear and apprehension ( $\bar{x}$ =2.03) among other psychosocial variables measured in the study.

**Table 2.** Psychosocial Impacts of COVID-19 Lockdown on Working Adults in Nigeria

Items	N	$\bar{x}$	SD	Interpretation
Relationship with family members and neighbours	517	2.68	1.19	High impact
Interaction with office colleagues	502	3.40	1.47	High impact
Social connectedness	514	3.42	1.39	High impact
Use of social media	514	2.51	.82	High impact
Internet gaming	507	1.91	1.22	Low impact
Shopping	514	3.34	1.58	High impact
Anxiety	509	2.21	1.18	Low impact
Sadness	505	2.05	1.28	Low impact
Loneliness	514	2.29	1.33	Low impact
Frustration	510	2.13	1.29	Low impact
Fear and apprehension	511	2.03	1.16	Low impact
Fear of death	507	1.80	1.28	Low impact
Substance use, including alcohol	491	1.69	1.32	Low impact
Pain	500	1.74	1.27	Low impact
Appetite	507	2.27	1.15	Low impact
Sexual activity	500	1.94	1.37	Low impact
Fatigue	504	2.12	1.34	Low impact
Sleep	510	2.32	1.01	Low impact
Irritability	503	1.84	1.13	Low impact
Valid N (listwise)	442			

**General life satisfaction of working adults during the COVID-19 pandemic**

Table 3 indicates that working adults in Nigeria are slightly satisfied with life during the COVID-19 lockdown, as the weighted average score of their overall life satisfaction is  $\approx 2.1$ . It was revealed in the table that despite the COVID-19, working adults still expressed confidence that if they could live their life over, they desire to change almost nothing ( $\bar{x}=4.81$ ). The table further shows that working adults believed that so far, they have gotten the important things they want in life ( $\bar{x}=4.75$ ) and that they are satisfied with life during COVID-19 ( $\bar{x}=4.29$ ).

**Table 3.** General Life Satisfaction during the COVID-19 Lockdown

Items	N	$\bar{x}$	SD
In most ways, my life is close to my ideal during COVID-19	506	3.52	1.85
The conditions of my life are excellent during COVID-19	512	3.81	1.94
I am satisfied with my life during COVID-19	511	4.29	2.05
So far, I have gotten the important things I want in life	512	4.75	1.90
If I could live my life over, I would change almost nothing	509	4.81	1.89
Overall Life Satisfaction Score	515	20.9767	
Valid N (listwise)	501		

**Difference in the psychosocial impact of lockdown among working adults during the COVID-19 pandemic**

Table 4 results indicate that working adults who are within the age group of 41-60 (-1.01, CI= -1.23, -0.80) and 61 years and above (-0.73, CI= -1.18, -0.28) are more negatively affected by the psychosocial impact of the lockdown during COVID-19 pandemic compared to those who are in the age group 18-40 years old. This implies that older adults from 41 years and above are more impacted by the lockdown than younger working adults in the country.

**Table 4.** Bivariate and full multivariate linear regression of the psychosocial impact of Lockdown based on demographic characteristics of the respondents

Variables	n(%)	Bivariate OLS		Multivariate OLS	
		Beta	95% C.I	Beta	95% C.I
<b>Age</b>					
18-40	424 (82.0)	Ref	-	Ref	-
41-60	86 (16.6)	-1.01*	(-1.23, -0.80)	0.48	(-1.01, 1.09)
61+	7 (1.4)	-0.73*	(-1.18, -0.28)	1.12	(-0.57, 2.82)
<b>Gender</b>					
Male	279 (54.0)	Ref	-	Ref	-
Female	238 (46.0)	-0.88*	(-1.16, -0.60)	0.09	(-0.31, 0.50)
<b>Marital Status</b>					
Single	262 (50.7)	Ref	-	Ref	-
Married	238 (47.2)	-0.87*	(-1.15, -0.60)	0.06	(-0.39, 0.53)
Divorced/Widowed	11 (2.1)	-1.50	(-3.04, 0.03)	-0.95	(-2.67, 0.76)
<b>Education</b>					
Secondary below	12 (2.3)	Ref	-	Ref	-
Technical School	3 (0.6)	-0.69	(-3.10, 1.71)	-1.12	(-3.73, 1.48)
NCE/ND	39 (7.5)	-0.47	(-1.11, 0.17)	-0.57	(-1.51, 0.38)
HND/BSc	259 (50.1)	-0.86*	(-1.13, -0.59)	-0.83*	(-1.56, -0.11)
Post-graduate	204 (39.5)	-1.18*	(-1.50, -0.86)	-1.19*	(-2.00, -0.39)
<b>Work Sector</b>					
Non-Formal	67 (13.2)	Ref	-	Ref	-
Public	161 (31.8)	-0.79*	(-1.13, -0.46)	0.05	(-0.60, 0.71)
Private	278 (54.9)	-1.07*	(-1.34, -0.80)	-0.20	(-0.80, 0.39)
<b>Job Status</b>					
Worked at office	102 (20.0)	Ref	-	Ref	-
Worked at home	217 (42.5)	-0.97*	(-1.41, -0.54)	-0.35	(-0.89, 0.18)
Stopped working	174 (34.1)	-1.26*	(-1.58, -0.94)	0.15	(-0.38, 0.68)
Lost Job	17 (3.3)	-0.69*	(-1.01, -0.38)	1.17*	(0.09, 2.25)

Note: \*Significant at 0.05

The table also revealed that female working adults felt the negative psychosocial impact of the lockdown more than their male counterparts (-0.73, CI= -1.18, -0.28). This is just as the working adults who are married reported a higher negative psychosocial impact than single working adults in the country. Similarly, it was revealed that working adults who possess HND/B.Sc. (-0.86, CI= -1.13, -0.59), and Postgraduate (-1.18, CI= -1.50, -0.86) educational degrees reported a significant negative psychosocial impact of the lockdown compared to working adults who possess secondary education and below. Also, working adults working in the public sector (-0.79, CI= -1.13, -0.46) and private sector (-1.07, CI= -1.34, -0.80) felt the negative psychosocial impact of the lockdown more compared to working adults working in the non-formal sector. The table further revealed that working adults who worked at home (-0.97, CI= -1.41, -0.54), stopped working (-1.26, CI= -1.58, -0.94), and those who lost their jobs (-0.69, CI= -1.01, -0.38) reported a negative psychosocial impact of the lockdown compared to working adults who worked from the office during the COVID-19 pandemic.

**Difference in life satisfaction among working adults during the COVID-19**

Table 5 indicates that working adults who fall within the age group of 41-60 years had a positive life satisfaction (0.84, CI= 0.38, 1.30) compared to working adults aged 18-40. Also, females reported a positive life satisfaction during the COVID-19 pandemic compared to their male counterparts.

**Table 5.** Bivariate and full multivariate linear regression of life satisfaction based on demographic characteristics of the respondents

Variables	n(%)	Bivariate OLS		Multivariate OLS	
		Beta	95% C.I	Beta	95% C.I
<b>Age</b>					
18-40	424 (82.0)	Ref	-	Ref	-
41-60	86 (16.6)	0.84*	(0.38, 1.30)	-0.08	(-0.71, 0.55)
61+	7 (1.4)	21.20		20.44	
<b>Gender</b>					
Male	279 (54.0)	Ref	-	Ref	-
Female	238 (46.0)	0.94*	(0.66, 1.22)	-0.93	(-0.51, 0.32)
<b>Marital Status</b>					
Single	262 (50.7)				
Married	238 (47.2)	1.03*	(0.75, 1.32)	0.199	(-0.26, 0.66)
Divorced/Widowed	11 (2.1)	0.98	(-0.35, 2.31)	0.108	(-1.40, 1.62)
<b>Education</b>					
Secondary below	12 (2.3)	Ref	-	Ref	-
Technical School	3 (0.6)	0.69	(-1.71, 3.09)	0.029	(-2.85, 2.91)
NCE/ND	39 (7.5)	1.71*	(0.84, 2.57)	1.55*	(0.43, 2.67)
HND/BSc	259 (50.1)	1.09*	(0.81, 1.37)	1.05*	(0.30, 1.80)
Post-graduate	204 (39.5)	0.85*	(0.55, 1.52)	0.85*	(0.03, 1.68)
<b>Work Sector</b>					
Non-Formal	67 (13.2)	Ref	-	Ref	-
Public	161 (31.8)	0.92*	(0.57, 1.26)	-0.227	(-0.93, 0.48)
Private	278 (54.9)	1.01*	(0.75, 1.28)	-0.168	(-0.81, 0.48)
<b>Job Status</b>					
Worked at office	102 (20.0)	Ref	-	Ref	-
Worked at home	217 (42.5)	0.83*	(0.54, 1.12)	-0.038	(-0.55, 0.48)
Stopped working	174 (34.1)	1.21*	(0.86, 1.56)	0.361	(-0.18, 0.91)
Lost Job	17 (3.3)	2.77*	(0.75, 4.79)	1.778	(-0.30, 3.85)

Note: \*Significant at 0.05

Equally, married working adults (1.03, CI= 0.75, 1.32) show a positive life satisfaction compared to single working adults. Also, based on the educational level of the working adults, the table revealed that working adults with NCE/ND (1.71, CI= 0.84, 2.57), HND/B.Sc. (1.09, CI= 0.81, 1.37), and Postgraduate (0.85, CI= 0.55, 1.52) reported a positive life satisfaction compared with working adults who had secondary school certificates. This implies that educational level statistically influenced the life satisfaction of working adults during the coronavirus pandemic in the country.

The table further revealed that working adults in the public sectors (0.92, CI= 0.57, 1.26) and private sectors (1.01, CI= 0.75, 1.28) have positive life satisfaction during the COVID-19 pandemic compared with working adults who work in the non-formal sector. Similarly, working adults who worked from home (0.83, CI= 0.54, 1.12) stopped working (1.21, CI= 0.86, 1.56), and those that lost their jobs (2.77, CI= 0.75, 4.79) during coronavirus reported a positive life satisfaction more compared to working adults who worked at the office during coronavirus pandemic in Nigeria.

#### **4.0. Discussion**

This study identified relationships with family members and neighbors, interaction with office colleagues, social connectedness, the use of social media, and shopping as major psychosocial domains highly impacted by the lockdown occasioned by the COVID-19 pandemic among working adults in Nigeria. Other areas identified by the study but had low impact include anxiety, sadness, loneliness, frustration, fear, and apprehension. This result is in consonance with previous studies (Mogaji, 2020; Philpot et al., 2021; Rodríguez-Rey et al., 2020; Valladolid, 2021). The pandemic interrupted the everyday life of working adults, and this created a discrepancy between understanding and predicting situations and goal attainment. The discrepancy frustrates the psychosocial resilience of the working adults and elicits a sense of anxiety and arousal driven by the causative factor (COVID-19 lockdown) (Reiss et al., 2020). The result also lends credence to the assertion made by Alradhawi et al. (2020) that the anticipated costs of isolation experienced as a result of the COVID-19 pandemic are themselves major risk factors for mental health issues such as suicide, self-harm, and substance misuse amongst others. This is because human beings are wired to exist in social groups. Thus, strict isolation from family, friends, and colleagues can disturb most people, which can result in short or long-term health challenges.

The study further revealed that working adults in Nigeria are slightly satisfied with life during COVID-19 lockdown. This result confirms the earlier study by Zhang et al. (2020), who found out that COVID-19 lockdown made people have lower life satisfaction. Similarly, the result is consistent with Ahrendt et al. (2020) and Cheong et al. (2020), who observed a significant drop in average life satisfaction among people across European countries and Singaporeans, respectively, during the pandemic lockdown period. In the same vein, Mogaji (2020) found that Lagos residents were dissatisfied with life, especially due to the adverse effect the lockdown associated with the COVID-19 pandemic had on them. The lockdown brought about serious alterations in the normal lives of residents; even the energy consumption behavior of people changed (Edomah & Ndulue, 2020).

On the demographic difference in psychosocial impact of the lockdown among working adults in Nigeria, results showed that working adults in the age range of 41-60 and 61 years and above are significantly negatively affected compared with working adults who fall within the age range 18-40. This implies that younger working adults are less affected by the psychosocial impact of the COVID-19 lockdown compared to older working adults in the country. This result is consistent with previous research findings (Dubey et al., 2020; Parlapani et al., 2021) but inconsistent with López et al. (2020) and Rossi et al. (2021) research findings. A gender difference was also discovered in the psychosocial impact of the COVID-19 lockdown, as female working adults were negatively affected more than their male counterparts. This result agrees with previous research findings (Xue & McMunn, 2021; Jacques-Aviñó et al., 2020). Higher education attainment among working adults significantly contributes to the level of psychosocial impact during the COVID-19 lockdown. It was revealed that working adults who possess Higher National Diploma/ Bachelor and postgraduate degrees reported a high psychosocial impact during the lockdown compared to others with lower educational certificates. It is believed that possession of higher qualifications increases expectations. Most working adults with high educational qualifications are in the service sector, which is one of the worst-hit sectors by the pandemic lockdown (Adewole & Ajala, 2020). This affected their economic security as the fear of losing jobs fuels anxiety among them.

Similarly, working adults who worked from home stopped working and lost jobs reported a significant negative psychosocial impact of COVID-19 lockdown compared to working adults working from the office. Workers working from home, workers who stopped working, and those who lost their jobs may be contending with isolation and loneliness the restrictive measure placed on them as they are cut off from their social networks aside from the economic burden compared to working adults who still work from the office and have the usual opportunity of social connectedness and income unaffected. Specifically, working adults who operated from home may contend with balancing work



with home affairs and probably lack the required tools to effectively work from home, resulting in their psychosocial well-being. Likewise, working adults who stopped working may have issues with the unknown fate of the work after the lockdown. Working adults who lost jobs may be dealing with issues related to survival than working adults who work from the office, having fewer of these issues to deal with.

The result equally revealed that older working adults reported significantly more positive life satisfaction than younger working adults in Nigeria. This result corroborates the research findings of Bidzan-Bluma et al. (2020). They found out that the older Polish and German populations have higher life satisfaction than young adults during the pandemic period. The result also revealed that married working adults reported significantly more positive life satisfaction than single working adults. This result resonates with the research findings of Lawal (2021), who observed that married people in Nigeria adjusted well, were less worried, and had more positive views of themselves than single people. Also, working adults who possess post-secondary education have more positive life satisfaction than those with secondary education. This implies that the higher education attainment of working adults plays a significant role in their assessment of satisfaction with life. It is a considered opinion that the higher the educational level of people, the more they can evaluate the impact of events on their lives vis-a-vis social, psychological, and mental wellbeing. This result lends credence to the importance of education as an essential surviving skill as it equips its beneficiary with accurate health beliefs and knowledge that inform better lifestyle choices (Itasanni et al., 2019).

Furthermore, it was revealed that working adults who worked from home, stopped working and lost jobs reported a significant positive life satisfaction than working adults that worked from the office during the COVID-19 lockdown. This result is attributed to the fact that workers who continued working during the COVID-19 lockdown may fear contracting the disease in the course of their work which may prompt a sense of fear and anxiety that may lower their satisfaction with life.

## **5.0. Conclusion**

The findings from this study indicate that relationships with family members and neighbors, interaction with office colleagues, social connectedness, the use of social media, and shopping are major psychosocial domains that are highly affected by the impact of the lockdown. This implies that working adults in Nigeria had their relationships with family, friends, and colleagues severed by the lockdown. This possibly negatively affected their psychological and social well-being due to the pandemic outbreak. Hence, to mitigate the impact of this severed relationship with friends and colleagues, there is a need for working adults in Nigeria to engage in remote positive social interactions with family and friends, and colleagues. This will help to reduce some sense of loneliness and associated health challenges emanating from the long period of social isolation necessitated by measures put in place by the government to curtail the spread of the COVID-19 virus.

Also, the study established that working adults were slightly satisfied with life during the COVID-19 lockdown in Nigeria, probably due to disruption in livelihood activities caused by the outbreak and subsequent lockdown to prevent its rapid spread. This, therefore, point to the need for concerted efforts by policymakers to make the right policy frameworks that provide enabling environments for working adults in the country to recover what might have been lost, particularly concerning livelihood and income-generating activities, which were crippled during the pandemic. This could at least make life changes easier and improve the life satisfaction of working adults.

Equally, it was revealed that the chances of working adults who are older, being female, and attaining a higher degree of education be more susceptible to the higher psychosocial impact of the lockdown. This points to the need to factor this demographic information in policy decisions aimed at cushioning the effect of the lockdown on working adults in the country for effectiveness.

In all, psychosocial support services could be made available to working adults in the country to cater to the needs of those significantly affected by the lockdown. This will help to boost their well-being and level of productivity.

## **6.0. Declaration of Conflicting Interest**

The authors have no potential conflicts of interest regarding the research, authorship, and/or publication of this article.

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## REFERENCES

- Adewole, A. A., & Ajala, E. M. (2020). Psychological impact of COVID-19 pandemic on medical and allied health care workers in Ibadan, Oyo State, Nigeria. *African Journal for the Psychological Studies of Social Issues*, 23(2), 108–118. <http://ajpssi.org/index.php/ajpssi/article/view/438>
- Ahrendt, D., Cabrera, J., Clerici, E., Hurlay, J., Leončikas, T., Mascherini, M., Riso, S., & Sándor, E. (2020 November 6). Living, working, and COVID-19. *Eurofound* <https://www.eurofound.europa.eu/publications/report/2020/living-working-and-covid-19>
- Alradhawi, M., Shubber, N., Sheppard, J., & Ali, Y. (2020). Effects of the COVID-19 pandemic on mental well-being amongst individuals in society: A letter to the editor on "The socio-economic implications of the coronavirus and COVID-19 pandemic: A review." *International Journal of Surgery*, 78. <https://doi.org/10.1016/j.ijssu.2020.04.070>
- Bidzan-Bluma, I., Bidzan, M., Jurek, P., Bidzan, L., Knietzsch, J., Stueck, M., & Bidzan, M. (2020). A Polish and German population study of quality of life, well-being, and life satisfaction in older adults during the COVID-19 pandemic. *Frontiers in Psychiatry*, 11. <https://doi.org/10.3389/fpsy.2020.585813>
- Cheong, T. C., Kim, S., & Koh, K. (2020, November 9). *The impact of a Covid-19 lockdown on happiness*. <https://wol.iza.org/opinions/the-impact-of-a-covid-19-lockdown-on-happiness>
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment*, 49(1), 71–75. [https://doi.org/10.1207/s15327752jpa4901\\_13](https://doi.org/10.1207/s15327752jpa4901_13)
- Dubey, S., Biswas, P., Ghosh, R., Chatterjee, S., Dubey, M. J., Chatterjee, S., Lahiri, D., & Lavie, C. J. (2020). Psychosocial impact of COVID-19. *Diabetes & Metabolic Syndrome: Clinical Research & Reviews*, 14(5), 779–788. <https://doi.org/10.1016/j.dsx.2020.05.035>
- Edomah, N., & Ndulue, G. (2020). Energy transition in a lockdown: An analysis of the impact of COVID-19 on changes in electricity demand in Lagos, Nigeria. *Global Transitions*, 2, 127–137. <https://doi.org/10.1016/j.glt.2020.07.002>
- Fardin, M. A. (2020). COVID-19 and anxiety: A review of psychological impacts of infectious disease outbreaks. *Archives of Clinical Infectious Diseases*, 15(COVID-19). <https://doi.org/10.5812/archcid.102779>
- Interagency Standing Committee (IASC). (2020 March 17). Interim briefing note addressing mental health and psychosocial aspects of COVID-19 outbreak. <https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/interim-briefing-note-addressing-mental-health-and-psychosocial-aspects-covid-19-outbreak>
- Itasanmi, S. A., Akintolu, M., & O. Ojedeji, S. (2019). Effects of age and education on market women's environmental knowledge, attitude, and behaviour. *Journal of Gender, Information, and Development in Africa*, 8(2), 77–90. <https://doi.org/10.31920/2050-4284/2019/8n2a5>
- Itasanmi, S., Ekpenyong, V., & Ojedeji, S. (2020). Differences in psychosocial impact of lockdown and life satisfaction among Nigerian working adults during COVID-19. *Simulacra*, 3(2), 237–249. <https://doi.org/10.21107/sml.v3i2.7912>
- Jacques-Aviñó, C., López-Jiménez, T., Medina-Perucha, L., de Bont, J., Gonçalves, A. Q., Duarte-Salles, T., & Berenguera, A. (2020). Gender-based approach on the social impact and mental health in Spain during COVID-19 lockdown: A cross-sectional study. *BMJ Open*, 10(11), e044617. <https://doi.org/10.1136/bmjopen-2020-044617>
- Johnson, J. K., Pitt-Catsoupes, M., Besen, E., Smyer, M., & Matz-Costa, C. (2008). Quality of employment and life satisfaction: A relationship that matters for older workers. [https://www.bc.edu/content/dam/files/research\\_sites/agingandwork/pdf/publications/lb13\\_LifeSatisfaction.pdf](https://www.bc.edu/content/dam/files/research_sites/agingandwork/pdf/publications/lb13_LifeSatisfaction.pdf)
- Lawal, D. A. M. (2021 March 14). Whose mental health suffered the most during the COVID-19 lockdown in Nigeria? *The Conversation*. <https://theconversation.com/whose-mental-health-suffered-the-most-during-covid-19-lockdown-in-nigeria-155890>
- López, J., Perez-Rojo, G., Noriega, C., Carretero, I., Velasco, C., Martínez-Huertas, J. A., López-Frutos, P., & Galarraga, L. (2020). Psychological well-being among older adults during the COVID-19 outbreak: A comparative study of the young-old and the old-old adults. *International Psychogeriatrics*, 1–6. <https://doi.org/10.1017/s1041610220000964>
- Loughry, M., & Eyber, C. (2003). Psychosocial concepts in humanitarian work with children: A review of the concepts and related literature. *National Library of Medicine*. <https://www.ncbi.nlm.nih.gov/books/NBK221604/>
- Martikainen, P., Bartley, M., & Lahelma, E. (2002). Psychosocial determinants of health in social epidemiology. *International Journal of Epidemiology*, 31(6), 1091–1093. <https://doi.org/10.1093/ije/31.6.1091>
- Mogaji, E. (2020). Impact of COVID-19 on transportation in Lagos, Nigeria. *Transportation Research Interdisciplinary Perspectives*, 6, 100154. <https://doi.org/10.1016/j.trip.2020.100154>
- Nigeria Centre for Disease Control. (2021). *NCDC coronavirus COVID-19 microsite*. <https://covid19.ncdc.gov.ng/>
- Niharika, K. U. (2014). Life satisfaction among bank employees. *International Journal of Science and Research (IJSR)*, 3(6), 1665–1667.
- Parlapani, E., Holeva, V., Nikopoulou, V. A., Kaprinis, S., Nouskas, I., & Diakogiannis, I. (2021). A review on the COVID-19-related psychological impact on older adults: Vulnerable or not? *Aging Clinical and Experimental Research*, 33(6), 1729–1743. <https://doi.org/10.1007/s40520-021-01873-4>

- Philpot, L. M., Ramar, P., Roellinger, D. L., Barry, B. A., Sharma, P., & Ebbert, J. O. (2021). Changes in social relationships during an initial "stay-at-home" phase of the COVID-19 pandemic: A longitudinal survey study in the U.S. *Social Science & Medicine*, 274, 113779. <https://doi.org/10.1016/j.socscimed.2021.113779>
- Prasoon, R., & Chaturvedi, K. (2016). Life satisfaction: A literature review. *The Researcher: International Journal of Management Humanities and Social Sciences*, 1(2), 25. <https://theresearcherjournal.org/pdfs/01021220163.pdf>
- Reiss, S., Franchina, V., Jutzi, C., Willardt, R., & Jonas, E. (2020). From anxiety to action: Experience of threat, emotional states, reactance, and action preferences in the early days of COVID-19 self-isolation in Germany and Austria. *PLOS ONE*, 15(12), e0243193. <https://doi.org/10.1371/journal.pone.0243193>
- Rodríguez-Rey, R., Garrido-Hernansaiz, H., & Collado, S. (2020). Psychological impact and associated factors during the initial stage of the coronavirus (COVID-19) pandemic among the general population in Spain. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.01540>
- Rossi, R., Jannini, T. B., Socci, V., Pacitti, F., & Lorenzo, G. D. (2021). Stressful life events and resilience during the COVID-19 lockdown measures in Italy: association with mental health outcomes and age. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsyg.2021.635832>
- Saunders, M., Lewis, P., & Thornhill, A. (2019). *Research methods for business students* (8th ed.). Pearson.
- Valladolid, V. C. (2021). The role of coping strategies in the resilience and well-being of college students during the COVID-19 pandemic. *Philippine Social Science Journal*, 4(2), 30–42. <https://doi.org/10.52006/main.v4i2.342>
- World Health Organization (WHO). (2021). WHO COVID-19 dashboard. <https://covid19.who.int/>
- Xue, B., & McMunn, A. (2021). Gender differences in unpaid care work and psychological distress in the UK Covid-19 lockdown. *PLOS ONE*, 16(3), e0247959. <https://doi.org/10.1371/journal.pone.0247959>
- Zhang, S. X., Wang, Y., Rauch, A., & Wei, F. (2020). Unprecedented disruptions of lives and work – a survey of the health, distress, and life satisfaction of working adults in China one month into the COVID-19 outbreak. <https://doi.org/10.1101/2020.03.13.20034496>

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