THE SOCIO-ECONOMIC IMPACT OF CORONAVIRUS PANDEMIC ON THE WORKING POPULATION IN HARARE, ZIMBABWE

By Frank Chikhata and Precious Chikhata

Abstract

The research aimed to assess the socio-economic impact of the coronavirus pandemic on the working populace in Harare, Zimbabwe. The study followed a descriptive cross-sectional research design. A simple random sampling technique was used to select the study respondents who were adult formally employed people. Simple random sampling technique was deemed appropriate for the research as it ensured that there was representativeness of the target population. Data was collected from randomly selected respondents through a self-administered structured questionnaire which was designed using google form. The questionnaire link was sent to the respondents using either emails or WhatsApp. Data was analysed using a Statistical Package for Social Scientists (SPSS). Data analysis revealed that there was socio-economic impact of the coronavirus pandemic on the working populace such as increase in household expenses, and negative impact on the mental wellbeing of the respondents. Additionally, the findings showed that working from home during the lockdowns was difficult due to disruptions. Fear of losing jobs was cited as one of the other effects of the pandemic and in the event of one losing their jobs most respondents did not have a sustainable income to take care of their families. These findings showed that there is need for the fiscal resources to be used to offer direct support to affected individuals and businesses in order to protect the productive capacity that will be needed to revive the economy when the coronavirus crisis ends. There is also a need to consider providing a sustained social safety nets for everyone during the pandemic using appropriate social and economic policies.

Keywords: *coronavirus pandemic, socio-economic impact, working populace*

1. Introduction and Background of the Study

In December 2019, a novel β-coronavirus, designated SARS-CoV2 (severe acute respiratory syndrome coronavirus was identified as the cause of an outbreak of acute respiratory illness in Wuhan City, China (Guan, et al. 2020). The disease caused by this coronavirus was termed coronavirus disease 2019 (COVID-19). COVID-19 was declared a pandemic by the World Health Organization (WHO) on 11 March 2020 (WHO, 2020). The first case in Zimbabwe was confirmed in March 2020. While the number of confirmed cases is still relatively low compared to the rest of the world, figures continue to increase daily. On 30 March 2020, a national lockdown was declared by the government in an attempt to mitigate the impacts of the pandemic and to thwart it from spreading. Apart from declaring a lockdown, the government adopted other far-reaching measures to limit the spread of the disease, including closing the international borders, and movement restrictions. Whilst COVID-19 is a health emergency, there are multiple effects of the pandemic such as effects of the social activities of the general populace and the economic impact of the country.

The social effect of the coronavirus crisis was realized as a result of the imposition of movement restrictions in many African countries (Ozili, 2020). Some the restrictive measures that were enforced to regulate the spread of coronavirus included: restricting non-essential activities, closing schools and universities, encouraging people to stay home, the lockdown of entire cities and/or countries, demanding essential businesses to run skeletal operations and allowing employees to work from home (Ozili, 2020). These measures inescapably affected economic activities in many African countries, and the policymakers had to use economic policies, both fiscal and monetary policies, to alleviate the negative effects on the economy.

The exact socio-economic impact of COVID-19 and the consequence of each policy response on African countries is unknown (Ozili, 2020), and the literature has not documented the effects of the coronavirus pandemic on many African countries. The

emerging coronavirus literature explored the impact of the coronavirus crisis mostly focusing on a specific sector such as the tourism industry (Gossling et al., 2020), the mining sector (Laing, 2020), the healthcare sector (Ather et al., 2020) or the economy (Fernandes, 2020; Ozili and Arun, 2020; Fornaro and Wolf, 2020). The current study looked at the general economic impact without focusing on a particular sector with particular reference to Zimbabwe. There is limited evidence of the presence of a similar study which has been conducted in Zimbabwe.

The socio-economic impact of the pandemic has been detrimental with economists estimating that the global economy will shrink by 5.2% by end of 2020 (World Bank, 2020). The Sub-Saharan African economic growth will decrease by 2.8% by end of 2020 (World Bank, 2020). Zimbabwe has not been spared. It is estimated that the Zimbabwean economy will bear the brunt of the pandemic by having a 4.5% reduction in growth by end of 2020 (Ncube, 2020). This implies that the working population will not be spared either. In an effort to have some insights on the effects of the pandemic on the working populace, this current study was commissioned. The main objective of the current study was to assess the socio-economic impact of the coronavirus pandemic on the working populace in Harare, Zimbabwe.

The present study contributes to the recent literature on the impact of coronavirus in society (e.g., Chinazzi et al., 2020; Haleem et al., 2020; Chen et al., 2020; Fornaro and Wolf, 2020). The paper contributes to this literature by exploring the socio-economic effect of coronavirus in Harare, Zimbabwe – a context that has not been widely explored in literature.

2. Methodology / Material and methods

A cross-sectional descriptive survey research design was used to carry out the research. The main aim of descriptive research is to describe and interpret the current status of individuals, settings, conditions or events (Mertler, 2017). This was clearly the focus of this research; hence the design was considered relevant. The descriptive research design

was chosen for this study because it helped the researchers to gain insight into the effects of COVID-19 pandemic on the working populace in Harare, Zimbabwe. The research utilised a deductive approach. The population for this research comprised adult working population in Harare province. A random sampling technique was used to draw 100 personnel from the total target population. Data was collected using a structured self-administered questionnaire designed using google form which were sent to selected individuals. The questionnaire link was sent to the selected respondents using either emails or WhatsApp. The inclusion criteria included being formally employed in Harare and residing in Harare as well. The researchers observed the following ethical issues when carrying out the research: obtaining informed consent from each respondent, ensuring that confidentiality of the data was guaranteed and that the respondents were not coerced into responding to the questionnaire, i.e., the participation was voluntary. Data analysis was conducted using a Statistical Package for Social Scientists (SPSS) version 23.

3. Results/findings

This section presents an analysis of the data collected and the results from the research. In addition, interpretation and presentation of the findings in line with the research objectives are expounded.

3.1 Demographic Data

The study sought to assess the demographic variables of the sample. Three variables (sex and age of the respondents, and the household size) were assessed. The findings are presented in sections 3.1.1 to 3.1.3. It is essential to establish the distribution of values for all the demographic variables that contain numerical data before starting any statistical tests (Saunders et al. 2009) in order to have an understanding of the sample characteristics. The other research findings may be influenced by the demographic information.

3.1.1 Sex distribution of the respondents

Table 3.1: Sex distribution of the respondents (n=100)

Sex	Frequency	Percent
Male	46	46.0
Female	54	54.0

As shown in table 3.1, fifty-four percent of the respondents were females and the remainder males. This implies that the views of the respondents in this study were from both males and females. These findings are consistent with the findings from the Zimbabwe 2019 Labour force and Child labour survey, which revealed that in Harare 52% of the workforce were females (Zimbabwe National Statistics Agency, 2019).

3.1.2 Age distribution of respondents

Table 3.2: Age distribution of the respondents (n=100)

Age group	Frequency	Percent
21-24 years	4	4.0
25-39 years	48	48.0
40-49 years	36	36.0
50-59 years	10	10.0

60 years and above	2	2.0

Table 3.2 shows the distribution of the respondents by age. The majority of the respondents (48%) fell into the 25–39-year age group, followed by those in the 40–49-year age group (36%). Only 2% of the respondents were aged 60 years and above. These findings are consistent with the age distribution of the working population in Zimbabwe.

3.1.3 Average household size

The number of family members living together (household size) may be an impetus to the effects of the COVID-19 pandemic; the higher the number, the more difficult it could be to maintain social distance depending on the nature of the dwellings where they reside. This information was assessed during the study and table 3 highlights the minimum, maximum and the mean household size.

Table 3.3: Household members

	Minimum	Maximum	Mean	Std. Deviation	95% C. I
Number of household members	1	11	5.27	1.889	(4.90, 5.65)

The respondents were asked on the number of people who were currently living in their households. The number ranged from 1 to 11. On average each household had 5.3 members, with a standard deviation of 1.889 and a 95% confidence interval of (4.90, 5.65). The 95% confidence interval implies that the average household size in the target population lies between 4.9 and 5.65. A further analysis showed that the household size had a positive relationship with the household expenses (p=0.04). As the household size increases, the household expenses increase. As such, the household size is likely to be a major determinant of the effects of COVID-19 pandemic at family level.

3.2 Descriptive Statistics

In the study, descriptive statistics were computed from the responses obtained in order to determine the means and standard deviations for the variables obtained in the study. As opined by Levin and Rubin (1998), such a technique facilitated the display and interpretation of data by describing the distribution of the study variables. Determining the frequency of a particular phenomenon in a study requires computation of the means or the average scores of data collected, as well as the variability scores of the responses on various items in the questionnaire, which are represented by the respective standard deviations. The study collected data which was obtained using a 5-point Likert scale.

Table 3.4: Mean scores and standard deviations of the dependent variables

Measurement Item	Mean	Std. Deviation
Negative effect on working	4.01	1.307
Striking a balance between work and family	3.49	1.259
Working from home has lots of disruptions	3.34	1.372
Lack of access to internet at home	2.70	1.611
Lack of sensitisation measures by employers	2.53	1.446
Lack of adequate information about COVID -19	2.01	1.345
Increase in household expenses	4.10	1.291
Effect on income	3.71	1.565
Lack of sustainable income to take care of family	3.20	1.428
Fear of losing job	3.38	1.483
Effect on mental well-being	3.16	1.315

Table 3.4 shows that COVID-19 greatly affected how the working population could execute their job-related tasks because of the lockdown which was imposed by the government in March 2020. Despite the relaxing of the lockdown conditions, most formally employed individuals found it difficult to continue going to work every day. Working from home proved difficult as well as there were likely to be a lot of distractions from other family members. As shown in table 3.4, the average score for striking a balance between work and family was 3.49; this implied that the majority of the respondents were agreeable that working from home was difficult. A further analysis showed that distractions in working

from home and striking a balance between family and work was positively correlated ($r=0.581$, $p<0.001$). The pandemic also led to an increase in household expenses of the respondents (mean 4.10; std dev = 1.291). This could be a result of the lockdown as people would be inclined to procure food commodities that would last them the entire lockdown period.

The pandemic also led to an effect on the mental health of the general populace. A mean of 3.16 with a standard deviation of 1.315 was scored for the effect of the COVID-19 pandemic on mental wellbeing. This showed that the majority of the respondents had their mental health affected by the COVID-19 with stress being a common symptom of the effect on mental health. Additionally, the majority of the respondents were afraid to lose their jobs due to the pandemic. A mean of 3.38 with a standard deviation of 1.483 was scored on the fear to lose job.

3.3 Correlation Analysis

Pearson's Correlation analysis was conducted to test whether there was any positive relationship between the following variables: age, household size, sex and the economic and psychosocial impact of COVID-19.

Table 3.5: Correlation analysis

		Sex	Age	Household size	Economic impact	Psychosocial impact
Sex	Pearson Correlation	1	-.133	.035	.063	.163
	Sig. (2-tailed)		.187	.728	.532	.104
Age	Pearson Correlation	-.133	1	.030	-.139	-.022
	Sig. (2-tailed)	.187		.770	.169	.829
Household size	Pearson Correlation	.035	.030	1	.255*	.194
	Sig. (2-tailed)	.728	.770		.011	.054
Economic impact	Pearson Correlation	.063	-.139	.255*	1	.336**
	Sig. (2-tailed)	.532	.169	.011		.001
Psychosocial impact	Pearson Correlation	.163	-.022	.194	.336**	1
	Sig. (2-tailed)	.104	.829	.054	.001	

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

***Correlation is significant at the 0.01 level (2-tailed)*

From table 3.5, it can be deduced that economically and psychosocially, the COVID-19

pandemic did not discriminate based on sex and age. Both males and females were affected the same economically and psychosocially according to the findings of the study. There was no association between sex and economic impact of COVID-19 (r=0.063; p=0.532) and between sex and psychosocial impact of COVID-19 (r=0.163; p=0.104). The household size has a significant positive relationship with the economic impact of COVID-19 pandemic (r=0.255; p=0.011). This implies that the households with more family members were more likely to bear the brunt of the pandemic than households with fewer family members. The study also showed that there is a positive and significant association between the economic and psychosocial impact of COVID-19 (r=0.336, p=0.001). This implies that people who were affected by the COVID -19 economically were more likely to be affected psychologically.

4. Discussion

The conducted research aimed to analyse the socio-economic impact of COVID-19 on the formally employed populace in Harare, Zimbabwe. The results show that COVID-19 had both economic and psychosocial effects on the working population in Harare. The findings are consistent with literature. Ozili (2020) postulated that the coronavirus pandemic is affecting all segments of the African population especially social groups in the most vulnerable situations. The social crisis caused by the pandemic should be properly addressed through several interventions such as formulation of social policies, otherwise the pandemic may increase inequality, exclusion and discrimination and unemployment.

The findings from the current research support findings from earlier studies (Chinazzi et al., 2020; Haleem et al., 2020; Chen et al., 2020; Fornaro and Wolf, 2020) where the shrink in the economy is likely to have negative impact of the working population as there are likely to be job loses, due to industries shutting down. As postulated by the World bank that the global economy is likely to shrink by 5.2% by end of 2020, with the Zimbabwean economy projected to decrease by 4.5% by end of 2020, the fears cited by the respondents in the study such as loss of jobs, psychosocial impacts of the pandemic

are likely to be fulfilled. These findings are crucial to the government as policy decisions can be made based on the findings.

5. Conclusions and Implications

This article discussed the socio-economic effects of coronavirus pandemic in Harare. The findings reveal that the coronavirus pandemic affected the social and economic well-being of the working citizens in Harare. The implication of the findings is that social policies can affect the social and economic well-being of citizens. Secondly, the coronavirus pandemic has revealed how a biological crisis can be transformed to a sociological and economic subject. There is need for the policy makers to enforce social policies and economic policies that ameliorate the effects of the COVID -19 pandemic. Currently, it is difficult to fully know how long the coronavirus crisis will last and how many citizens will be affected. What is known though is that the economic impact is already severe in the country. Chances are that the country might slide into recession and there is need for the government to implement measures that would mitigate these anticipated impacts. The fiscal resources could be used to offer direct support to affected individuals and businesses in order to protect the productive capacity that will be needed to revive the economy when the coronavirus crisis ends. Other indirect measure to consider is to provide a sustained social safety nets for everyone during the pandemic using social and economic policies. There are several ways of doing this, such as making cash transfer payments to all households. There is need to also think about measures that will reboot the economy after the coronavirus crisis is over such as providing bailout relief to small and big businesses so that they will not lay-off workers during the crisis and during the recovery process. The Reserve Bank of Zimbabwe needs to find the right mix of monetary policy tools that will stimulate growth in the economy while the fiscal authorities should do the same using the fiscal tools at their disposal.

This study will provide an opportunity for future studies. Future research can examine why there was no significant difference between males and females as far as the socio-economic impact of COVID-19 was concerned in Harare. Future studies can also

examine the impact of the coronavirus pandemic on the level of financial inclusion in Zimbabwe.

This study has two limitations. The first limitation relates to the sample period. A longer sample period is better because it can yield a much richer result and insight. Secondly, the currency of the data is another issue. It is possible that the currency of the data may be overtaken by future events as the coronavirus continues to spread rapidly on a daily basis. Lastly, the sample size of the study could have been too small to ensure that the results can be generalised nationally.

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7. Declaration of conflicting interests

The authors do not have any potential conflict of interest.

8. Author contributions statement

F.C developed the questionnaire for the data collection and P.C reviewed the questionnaire. Additionally, F.C wrote the main manuscript text and P.C prepared all the tables. Both authors reviewed the manuscript.

9. References

Ather, A., Patel, B., Ruparel, N.B., Diogenes, A. and Hargreaves, K.M. (2020), "Coronavirus Disease 19 (COVID-19): implications for clinical dental care", *Journal of Endodontics, Vol. 46 No. 5, pp. 584-595.*

Chen, H., Xu, W., Paris, C., Reeson, A. and Li, X. (2020), Social Distance and SARS Memory: Impact on the Public Awareness of 2019 Novel Coronavirus (COVID-19) Outbreak, *medRxiv, available at:https://www.medrxiv.org/content/medrxiv/early/2020/03/16/2020.03.11.20033688.full.pdf.*

Chinazzi, M., Davis, J.T., Ajelli, M., Gioannini, C., Litvinova, M., Merler, S., and Viboud, C. (2020), "The effect of travel restrictions on the spread of the 2019 novel coronavirus (COVID-19) outbreak", *Science, Vol. 368 No. 6489, pp. 395-400*

Coronarvirus Resource Center, Johns Hopkins University Medicine. (2020), Johns Hopkins University Medicine. *Medicine JHU. https://coronavirus.jhu. edu/map.html*

Fernandes, N. (2020), "Economic effects of coronavirus outbreak (COVID-19) on the world economy", Available at SSRN 3557504.

Fornaro, L. and Wolf, M. (2020), Covid-19 Coronavirus and Macroeconomic Policy, *Working Paper, available at: SSRN: https://ssrn.com/abstract=3560337*

Gossling, S., Scott, D. and Hall, C.M. (2020), "Pandemics, tourism and global change: a rapid assessment of COVID-19", *Journal of Sustainable Tourism, pp. 1-20.*

Guan, W.J., Ni, Z.Y, Hu, Y., Liang, W.H., Ou, C.Q., and He, J.X., (2020), Clinical characteristics of coronavirus disease 2019 in China. *N Engl J Med. 2020. https://doi.org/10. 1056/NEJMoa2002032.*

Haleem, A., Javaid, M. and Vaishya, R. (2020), "Effects of COVID 19 pandemic in daily life", *Current Medicine Research and Practice, pp. 1-2.*

Laing, T. (2020), "The economic impact of the Coronavirus 2019 (Covid-2019): implications for the mining industry", *The Extractive Industries and Society, in press*

Levin, R.I., and Rubin, D.S. (1998), *Statistics for Management, 7th Edition*, Pearson

Mertler, C. (2017), *Introduction to action research*. Thousand Oaks, CA: SAGE Publications

Ncube, M. (2020), *The 2020 Mid-Term Budget and Economic Review*, Ministry of Finance and Economic Development, Zimbabwe

Ozili, P. K. (2020), COVID-19 in Africa: socio-economic impact, policy response and opportunities, *International Journal of Sociology and Social Policy Emerald Publishing Limited 0144-333X DOI 10.1108/IJSSP-05-2020-0171*

Ozili, P.K. and Arun, T. (2020), "Spillover of COVID-19: impact on the global economy", Available at SSRN 3562570

Saunders, M., Lewis, P. and Thornhill, A. (2009), *Research Methods for Business Students*, Fifth edition

World Bank (2020), The Global Economic Outlook during the COVID-19 Pandemic: A Changed World

World Health Organisation (2020), WHO Director-general's opening remarks at the media briefing on Covid-19 - 11 March 2020. 2020. World Health Organisation. *https://www.who.int/dg/ speeches/detail/who-director-general-s-opening-remarks-at-the-mediabriefing-on-covid-19%2D%2D-11-march-2020*

Zimbabwe National Statistics Agency, (2019), *Labour Force and Child Labour Survey Report*