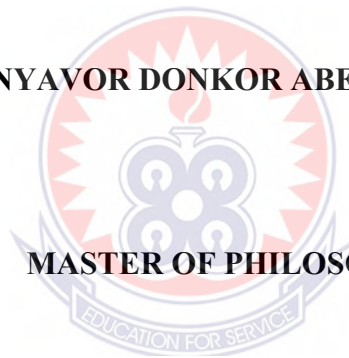


UNIVERSITY OF EDUCATION, WINNEBA

**COVID-19 INTERVENTION IN GHANA: AN ASSESSMENT OF THE
IMPACT ON THE LIVELIHOOD AND SOCIO-ECONOMIC
DEVELOPMENTS OF RURAL FOLKS IN BIA WEST DISTRICT**

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MASTER OF PHILOSOPHY

2021

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IMPACT ON THE LIVELIHOOD AND SOCIO-ECONOMIC
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**A thesis in the Department of Political Science Education,
Faculty of Social Sciences Education, submitted to the School
of Graduate Studies, in partial fulfilment
of the requirements for the award of the degree of
Master of Philosophy
(Political Science Education)
in the University of Education, Winneba**

NOVEMBER, 2021

DECLARATION

Student's Declaration

I, Nyavor Abednego Donkor, declare that this thesis, with the exception of quotations and references contained in published works which have all been identified and duly acknowledged, is entirely my own original work, and it has not been submitted, either in part or whole, for another degree elsewhere.

Signature:

Date:

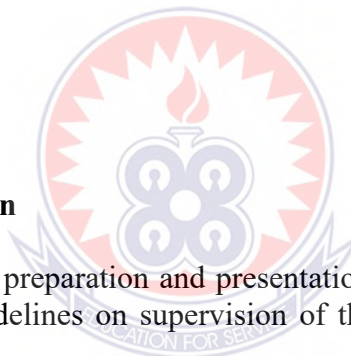
Supervisor's Declaration

I hereby declare that the preparation and presentation of the thesis was supervised in accordance with the guidelines on supervision of thesis laid down by University of Education, Winneba.

Dr. George Asekere (Supervisor)

Signature.....

Date.....



DEDICATION

To my lovely wife Mrs. Cynthia Yeboah Boateng and kids Branislove Adomba Donkor Jnr, and Obrempon Yeboah Donkor.



ACKNOWLEDGEMENTS

Unto God be the glory, great things he has done. I will therefore give thanks to Lord for His steadfast love endures forever. I am particularly indebted and grateful to my dynamic supervisor Dr. George Asekere. I am also highly indebted to Professor Braimah Imurana Awaisu for their constructive and scholarly criticism, suggestions and valuable comments in guiding me through this research work and shaping my thinking in academic pursuit. To my parents, Mr and Mrs Donkor, and the rest of my family members for their financial and prayer support towards my academic accomplishment. I say a very big thanks to you. Very big thanks also go to, Dr. Amanor Lartey, Dr. Maliha Abubakar and Mr. Alhassan Issahaku who upon all their tight schedules helped me in shaping up this work.

Finally, I express my sincere gratitude to the people of Bia West District, without whose willingness I could not have gotten data for this research work.

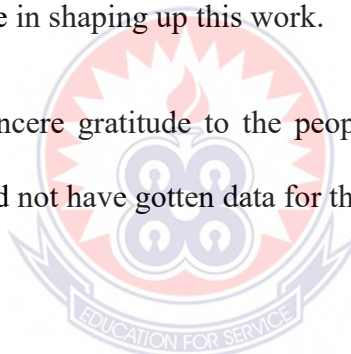
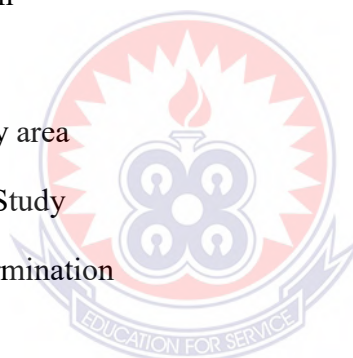


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LIST OF ACCRONYMS AND ABBREVIATIONS

CAPBUSS	Corona virus Alleviation Program Business Support Scheme
CDC	Compounds Disease Control and Prevention
CHIPS	Centre for Community-Based Health Planning Service
COVID-19	Corona Virus Infectious Disease 2019
CSOs	Civil Society Organisations
CST	Communications Service Tax
GDP	Gross Domestic Product
IMF	International Monetary Fund
LGBTQA+	Lesbians Gay Bisexual Transgender Queer Questioning Asexual Ally + Others
MERS	Middle East Respiratory Syndrome
MMDAs	Metropolitan Municipal and District Assemblies
NGOs	Non-Governmental Organisations
OECD	Organisation for Economic Co-operation and Development
RBC	Real Business Cycle
RNA	Rib Nucleic Acid
SARS	Severe Acute Respiratory Syndrome
SMEs	Small-Scale and Medium Enterprises
SPSS	Statistical Page for Social Sciences
TV	Television
UEW	University of Education Winneba
UI	Unemployment index
UK	United Kingdom
UNCTAD	United Nation Conference on Trade and Development
USA	United State of America
WEI	Weekly Employment Index

ABSTRACT

The outbreak of Covid-19 pandemic has jeopardized livelihoods of people and socio-economic development of their communities. In wake of mitigating such effects government made available several relief packages and social interventions. The purpose of the study was to assess the COVID-19 interventions in Ghana; its implementation challenges as well as its impact on the livelihoods and socio-economic development in the Bia West District in the Western North Region of Ghana. To achieve this objective, the study adopted a quantitative method by using the simple random sampling technique to select a total number of 357 respondents for the study. A structured questionnaire was used as instrument for data collection. The data was collected and analyzed using descriptive analysis. The study revealed that majority of the respondents had considerable levels of awareness of the interventions and programs on COVID-19. The study revealed that the reduction in financial burden, empowered the poor, supported income-generating activities, encouraged the entrepreneurial spirit, and reduced the vulnerability to COVID-19 as impact of the interventions. It was revealed that the interventions brought the establishment of new health facilities to augment infrastructural development of the area. The study recommends that government should speed up the implementation of all policies, programmes and establish a database where the citizenry can easily access information. They should also institute a policy implementation team and improve upon the way policies are organised in the country.



CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

The world has, over time, experienced or hit with a number of pandemics. A number of these outbreaks included the Babylon influenza epidemic of 1200 BC, the Diphtheria epidemic the 1735–1741, the 1847 to 1848 influenza epidemic, the third plague pandemic of 1855–1960, the flu pandemic of 1889–189, the Encephalitis lethargica pandemic of 1915, the Mumps outbreaks in the 2000s, the swine flu pandemic of 2009–2010, the Middle East respiratory syndrome coronavirus outbreak of 2012, Kivu Ebola epidemic of 2018–2020 and the most current one COVID-19 pandemic caused by SARS-CoV-2 virus.

The outbreak of Coronavirus disease (also known as COVID-19) was triggered in the latter part of 2019 in Wuhan city in the Hubei province of China (Dogra, Goyal & Sharma, 2020). The disease causes respiratory illness (like the flu) with symptoms such as a cough, fever, and in more severe cases, difficulty in breathing. COVID-19 has continuously spread across the world and affected over 2 million people from 190 countries (World Health Organization (WHO), 2020). The World Health Organization (WHO) first declared COVID-19 a world health emergency in January 2020. Since then, COVID-19 has become a global emergency, and has been detected in over 190 countries (WHO, 2020; Livingston & Bucher, 2020). Among the countries that have been largely overwhelmed by the outbreak of COVID-19 include the United States of America, Spain, China, Italy, France, Iran, Germany, Japan and South Korea (World Health Organization (WHO) 2020c; United Nation Conference on Trade and Development (UNCTAD), 2020). The outbreak of the virus has caused countries all

over the world to close their borders, impose travel restrictions, order the closure of businesses and schools, instructed self and mandatory quarantine, as well as the prohibition of all manner of social gathering (Kim, 2020; Remuzzi & Remuzzi, 2020; Wu, Chen, & Chan, 2020; Sun, Lu, Xu, Sun & Pan, 2020).

That notwithstanding, many of the COVID-19 affected countries have been able to effectively treat some of the reported cases. However, the uncertainties on the availability of vaccines and the emergence of new variants have ignited fear and panic to the economic activities of these countries (McKibbin & Fernando, 2020; Baldwin & Mauro, 2020). Countries across the world, irrespective of size have started experiencing contractions in their Gross Domestic Products (GDP). Transports being limited and restricted among countries has further slowed down global economic activities, created market anomalies and distorted the usual consumption patterns of the countries (OECD, 2020).

The outbreak has already morphed into an economic and labour market shock, affecting both supply (goods and services production) and demand (consumptions and investments), and causing disruptions to the many companies across the globe (UNCTAD, 2020). All industries, irrespective of size, are experiencing substantial difficulties, particularly the aviation, tourism, and hospitality industries, - facing the potential drops in revenue, insolvencies, and job losses. Many employees are unable to go to their places of work or perform their jobs as a result of travel restrictions, border closures, and quarantine restrictions.

Some countries imposed a complete ban on all travels, shutting down all airports in the country. The „stay-at-home policy“ and „social distancing“ movement restrictions

imposed by the governments in many countries had led to rapid shutdowns of cities (Atkeson, 2020; Allam & Jones, 2020).

Obviously, the outbreak of COVID-19 has had significant impacted on livelihoods and socio-economic development that warrant actions from all states around the globe. However, there has been an extensive literature on the general impacts of Covid-19 and its recovery mechanisms but little exist on the implementation challenges of such intervention from government. It is against this backdrop that this thesis investigated the COVID-19 intervention by the government of Ghana; its implementation challenges as well as its impact on the livelihood and socio-economic developments of rural folks in the Bia West District of Western North region of Ghana.

1.2 Statement of the Problem

In the wake of mitigating effects of COVID-19 restriction on the citizenry, the Government of Ghana, through the appropriate agencies, has made available several relief packages and social interventions (Amewu, Asante, Pauw & Thurlow, 2020; Afulani et al., 2020). Some of these interventions included the provision of free water for all Ghanaians, free electricity to lifeline users (from zero to fifty-watt (0-50). Other consumers who used more than fifty 50 watt were given fifty per cent rebate. Additionally, there have been tax cuts and insurance package for frontline health workers. Ultimately, the government introduced „The Coronavirus Alleviation Programme (CAP) Business Support Scheme“ to support SMEs in Ghana with loans and grants, to purposely offset the negative consequences (Production losses, profits losses, capital lost among others) that accompanied the outbreak of COVID-19 (Serwaa, Lamptey, Appiah, Senkyire & Ameyaw, 2020; Owusu-Fordjour, Koomson

& Hanson, 2020; Demuyakor, 2020; Asamoah, Owusu, Jin, Oduro, Abidemi & Gyasi, 2020). Research also stepped up in explaining and analysing the various aspects of the pandemic and what it means for the present and future generation. Some of these studies have focused on the general impact of the pandemics on health and well-being (Osei-Tutu et.al, 2021; Asekere & Blay, 2021), the effect of lockdowns, (Brammah, 2020; Gyasi, 2020), COVID-19 and the State in Africa (Amoah, 2020), the effect of COVID-19 on education (Adarkwah, 2021), socio-economic impact of the pandemic (Asante and Mills,2020; Asante-Poku & Huellen, 2021; Aduhene & Osei-Assibey, 2021)) among others.

The degree to which all of these efforts had a positive impact on all categories of the Ghanaian citizenry is debatable. While efforts were technically made to support women by the CAP BuSS, many of the criteria for receiving funds being records and Tax Identification numbers unconsciously discriminated against women who tended to have less formal business operations (Darkwah, 2021). More so, in CAP BuSS for instance, there is no clear-cut discussion of inclusion.

Furthermore, the rebates on basic services presumed erroneously that all Ghanaians had universal access to these services. However, this is not the case. The wealthy are much more likely to have direct access to these services in their homes and were by extension the ones who benefitted most from the state rebate (Darkwah, 2021). Yet, many Ghanaians were in dire straits and needed support. Mugisha (2020) argues that, three-fourths of Ghanaians lost earnings either because they lost their jobs or because their incomes were slashed. In addition to the fact that the government's efforts at reducing the hardships faced by all Ghanaians were not enough, in some cases, they made things worse. This is particularly true with respect to the rather extreme

punishment attached to the Executive Instruments that were passed to enable the state monitor and restrict our movement as needed. A careful, scholarly analysis is needed to ascertain the true extent to which these various efforts of the state inured to the benefits of all Ghanaians.

Notwithstanding the studies on the impact of COVID-19 interventions by government on the rural people in border towns or areas, little empirical evidence exists to show the linkage between the impact of the interventions on their livelihoods and socio-economic development. This thesis, therefore, seeks to contribute to knowledge generally by helping to fill in the gap in literature by assessing the implementation challenges of government interventions on COVID-19 as well as its impact on the livelihoods and socio-economic impact of people in the Bia West District.

1.3 Purpose of the Study

The main purpose of this study was to assess the COVID-19 intervention by the government of Ghana, its implementation challenges as well as its impact on the livelihood and socio-economic developments of rural folks in the Bia West District.

1.4 Research Objective

This study specifically seeks to achieve the following objectives;

1. To find out the level of awareness of Government intervention programmes among the residents of the Bia West District
2. To examine the effect of government intervention programmes on COVID-19 on socio-economic well-being of residents of the Bia West District.
3. To assess the impact of the residents age, gender and level of education on their level of awareness of the intervention programmes.

4. To explore the implementation challenges of the intervention programs on COVID-19 in Bia West District.

1.5 Research Questions

This study seeks to answer the following questions:

1. What is the level of awareness of government intervention programmes among the residents of the Bia West District?
2. How do the intervention programmes by the Government of Ghana on COVID-19 affect the socio-economic livelihood of the residents of the Bia West District?
3. What is the impact of the residents' age, gender and level of education on their level of awareness of government intervention programmes aimed at mitigating the spread and effect of the pandemic?
4. What are the implementation challenges of government intervention programmes on COVID-19 in the Bia West District?

1.6 Significance of the Study

This study provided insightful information into how the outbreak of COVID-19 affected the livelihood and socio-economic development of the rural communities in Ghana. The findings from this study would provide valuable information to the government of Ghana, Policy makers, Metropolitan Municipal and District Assemblies (MMDAs), Tink-tanks and Stakeholders, on the faring of government's programmes on COVID-19, its implementation, its impact on the livelihood and socio-economic developments of rural folks, and the challenges thereof. This study, therefore, adds to the body of knowledge on corona virus mitigation or alleviation programmes by government, with particular reference to the Government of Ghana.

1.7 Scope of the Study

This research aims to extensively assess the COVID-19 intervention by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges. The respondents for the study were residents of Bia West Districts. The outcome of this study is limited to the study objectives. The attainment of the study objectives was dependent on the answers provided by the respondents. The respondents were chosen from six communities, namely, Essam/Debiso, Yamatwa, Osei kwadwokrom, Adjoafua, Elluokrom and Akaatiso, all in the Bia West District.

1.8 Delimitation of the Study

The study is delimited to some selected communities in the Bia West District in Western North Region of Ghana. The choice of the District for the study emanates from its peculiar closeness to the border and the challenges of border closure in recent times. Content wise, it is restricted to exploring Covid-19 interventions; its implementation challenges as well as its impact on livelihood and socio-economic development in the Bia West District.

1.9 Limitations of the Study

The study was limited in a number of ways. First, the study was limited in terms of its ability to generalize. The study was only concentrated within the Bia West District in Western North Region of Ghana. As such, the findings may not represent the views or perspectives of other districts within the region.

Some respondents were insincere and others unwilling to provide information on their livelihood affairs. This delayed the research process as the researcher had to spend much time explaining the purpose of the study to them. It was also made known to

the participants that their participation in the study would not affect their status in anyway and that the information they would provide would not be shared with their superiors.

Again, respondents delayed in filling and submitting the questionnaires within the agreed time frame that we reached after they consented to participate in the study thereby delaying the data collection process. This made the study to travel beyond the time frame which was earlier planned for this research.

1.10 Organization of the Study

The study is organised into five chapters. Chapter one deals with the introduction, covering background of the study, statement of the problem, purpose of the study, research objectives, research questions, scope of the study, as well as organization of the study. Chapter two provides an overview of existing literature. This chapter provides a review of already existing literature related to the subject matter under study. Chapter three gives the profile of the selected district to be studied. It also describes the data that formed the basis for the research reported in this paper and provides an overview of the methods used in the study. Chapter four reports the results of the empirical analysis. That is, it deals with the presentation, analysis and discussion of the data collected from the field. Chapter five which is the last chapter looks at the summary of the work, findings and conclusions of the research and made recommendations to the Government of Ghana, Policy makers, MMDAs and the residents of Bia west districts.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter focuses on the review of literature that relates to this study. The review of related literature permits a comparison of the findings of this study and similar pieces of research to provide a basis for accepting or refuting earlier conclusions. Theories and concepts that relate to the topic are first discussed.

2.1 Theoretical Framework

This research is underpinned by the policy analysis model by Wildavsky (1979) and the top-down model of political system (Bardach 1977; Pressman & Wildavsky 1973; Maznamini & Sabatier, 1989; Meter & Horn's 1975).

2.1.1 Policy analysis model

Wildavsky (1979) propounded the Policy Analysis Model in the 1979. He described this Model as "an applied subfield whose contents cannot be determined by disciplinary boundaries but by whatever appears appropriate to the circumstances of the time and the nature of the problem" (p. 15).

Wildavsky's based his definition of policy analysis model on three main disciplines or schools of thoughts namely, „policy analysis based on the theories of state explaining how public action functions; and the evaluation of the effects of public action“ (Wildavsky, 1979).

2.1.1.1 Policy analysis based on the theories of state

The first school of thoughts, is centred on comprehending the functions of public sector in the society and making meanings of how they have changed over time; leading to the inclusion of policy in empirical analyses of government activities. Policy analysis, according to the first group of writers, is a method of determining the true state of government's activities by interpreting policies as revealed it (Knoepfel, Larrue, Varone & Hill, 2007; Patton & Sawicki, 1993; Bennett & Howlett, 1992; Bromley, 1990). This movement, which the political sciences dominate and claim in France, tries to combine policymaking with political philosophy and important problems about state theory. On this, Mény and Thoenig (1989, cited in Chabanet & Lemoine, 2021) interpreted their approach as a contribution to concerns about „the emergence and nature of the state“ or „political essence“. Similarly, Jobert and Muller (Dupuy & Zittoun, 2018), situate their work on “The State in Action” (L'Etaten action) in the context of „bridging the gap that still exists today between policy research and broader views on the state in modern society. Policy analysis, on the accounts of Mény and Thoenig (1989, cited in Chabanet & Lemoine, 2021), is divided into many schools of thought, which is described using three theoretical models.

Firstly, the model view state as a „service hatch“ that responds to social demands. This model defines public policies as reactions to societal demands. The proponents of this model, based their arguments and analysis on the optimisation of collective choices, the rationality of decision-making processes, and the behaviour of „bureaucrats“ („public choice“ school, theory of limited rationality). According to this theory, the seeming lack of comprehensive policies on particular subjects or areas like sports, healthcare, education, or even LGBTQIA+ for example, is the reflection of the fact that the society has no public concern or regards over such issues (Mény &

Thoenig, 1989; cited in Chabanet & Lemoine, 2021). It is on this basis that the researcher focuses on government intervention programmes, its implementation challenges as well as the socio-economic well-being of rural folks in the Bia West District.

The second paradigm emphasizes the state as a tool in the hands of either a social class (neo-Marxist approach) or specific groups (neo-managerial approach). In this perspective, examining public action depends on autonomy of the state on its relationship with the individuals and organizations that make up the state. In this light, a social problem can only become a public problem if it relates to the interest of the dominant class. The neo-managerial method begins with a similar premise: it substitutes the concept of class with that of elites (Knoepfel, Larrue, Varone & Hill, 2007; Strier & Feldman, 2018).

Finally, the model emphasizes power distribution and interaction among social actors, via the representations and organisations of different sector-based or category-based interests (neo-corporatist approach) or through the organizations and institutional rules that frame these interactions (institutional approach) (neo-institutionalist approach). According to the neo-corporatist perspective, public sector employees are mostly „captured“ by interest groups with whom they have privileged and exclusive ties in the exercise of public power (Engelstad, Larsen, Rogstad, & Steen-Johnsen, 2017; Pauly, Verschuere, De Rynck & Voets, 2021). In France, this analysis highlights the importance of major state bodies and their privileged relationships with private-sector partners as a factor that explains how the central administration operates (Burns & Carson, 2002; Schmitter, 2015; Van Veen, 2020).

2.1.1.2 Explaining how public action functions

The subject matter of the second school is to provide education or explanation on how public actions works. That is, conducting an analysis into the function of policy analysis and explaining in general the functioning of the political system based on operational modes and logic of public action (Knoepfel, Larrue, Varone & Hill, 2011; Thissen & Walker, 2013; Fischer & Miller, 2017). Thus, the core purpose of policy analysis is to comprehend the operational modes and logic of public actions rather than to describe how the political system works in general. (Flynn,2005; Paavola, 2008; Dente & Fareri, 1993; Azar, Gholamrezaei, Fard & Hosseini, 2013). In this context, understanding how public action works makes it easier to explain public action.

The concerns of this school are to understanding the complexities of public decision-making processes by partitioning the objects of analysis into distinct variables (for example, actors' rationality, internal decision-making processes in organisations, among others.). This approach is widely practiced by many policy analysts including managers of organisation (Fischer & Miller, 2017; Kraft & Furlong, 2019). This method does not preclude the adoption of a position based on the above-mentioned theories, which explains why a number of authors from the second group fall into both camps. However, the emphasis here is on demonstrating continuities, or general rules of operation that are unique to public activities, rather than on justifying a theory. In this framework, policy analysis enables us to comprehend how the government and, more broadly, public authorities operate.

In summary, the concern for understanding the complexity of public decision-making processes by splitting the target of investigation into different variables is a distinguishing trait of this second school (for example, actor rationality, internal decision-making processes in organisations and their like). This approach was preserved, for example, in public management and decision-making processes; yet, it differs significantly from them in terms of direct operationalization.

2.1.1.3 The evaluation of the effects of public action

The third school of thought, as defined by Wildavsky (1979), attempts to explain the outcomes of public actions and how it affects the society in relation to the objectives and/or indirect or negative consequences. This method is more evaluative than explanatory when compared to the earlier schools of thoughts (Kraft & Furlong, 2019). For the past decade, this method has particularly been popular in France and Switzerland, where policy analysis projects, symposiums, and publications have flourished. In the United Kingdom the related concern has been with „evidence“ for policy (Thissen & Walker, 2013). In view of Thissen and Walker (2013), the third school of thought can be identified based on two main concerns in the context of evaluation.

The first of these entails the creation of a methodological approaches and an evaluations toolbox. This basically involves research into the policy, from conception to implementation, to identify the appropriate evaluation methodologies that may be used to non-market public sector activities. This research is based on statistical analysis of quantitative data, multi-criteria analysis (Maystre, Pictet, and Simos, 1994), (quasi) experimental comparison, cost-benefit analysis, and other methods. This approach has been the topic of extensive research. The work of Deleau et al.

(1986) and the annual publications by the Conseil scientifique de l'évaluation in France provide an exposition on this concept. It is also visible in the guidelines recently issued by European Union, for the evaluation of socio-economic programmes, which are intended to make the evaluation and facilitating the programmes funded by European structural funds.

The second focuses on the evaluation process and how it is used to improve public policies and influence decision-making. Many American and, more recently, European scholars have explored into this subject, this included Rossi and Freeman (1993) for the United States, Monnier (1992) for France, and Bussmann et al. (1998) for Switzerland.

Policy assessment has practically become a profession in Switzerland, where it is practiced by academics at universities, private consultancies, and administrative authorities themselves, owing to the establishment of a legislative and ministerial evaluation service (Organe Parlementaire de Contrôle de l'Administration, Service d'Évaluation du Conseil Fédéral). A professional association (*Société suisse d'évaluation*– SEVAL) monitors the quality of evaluations carried out (meta-evaluations which monitor the adherence to quality, use and ethical standards; Joint Committee of Standards for Educational Evaluation, 2000; Widmer 1996).

This pattern may also be seen in France. It's linked to the growth of national and regional evaluation methods, as well as the development of European policies that need the organization of evaluation exercises during the deployment of European structural funds, for example. A French Evaluation Society was recently established with the goal of making this activity more public and strengthening its organization. However, this trend is having difficulty becoming institutionalized as a normal

practice in government. The disappearance of the inter - ministerial mechanism founded in 1990, as well as the lack of transparency in the operation of the Office Parlementaire des Choix Scientifiques et Techniques, are examples of this difficulties. Despite the interest of actors in policy implementation, the French model for evaluating public policy appears to be characterized by a lack of engagement of policy actors and a very limited use of evaluation results in the modification or creation of public policies (Setbon, 1998, p.15)

The Audit Commission's work, as well as the increased use of quantitative performance indicators in education, health care, and municipal government, has had a comparable influence on the United Kingdom (Audit Commission, 2006; Pollitt, 2003). Even though they are conceptually separate, this evaluative method is usually followed with an explanatory approach, in the sense that it is concerned with the impacts of public action – effects that are quantified on the basis of the communal issue that a policy attempts to tackle – it is an inspiration for our own model.

2.1.2 Top-down approach of political system theory

The second theory that underpins this study is the top-down approach or model in accessing public policies by Bardach 1977; Pressman & Wildavsky 1973; Maznamin & Sabatier, 1989; Meter & Horn's 1975, as proponents of this theory.

According to Heywood (2015), the key assumptions of this model is that there is an established link, relationship or correlation between policy and its implementation (i.e., performance) and such link is shaped by certain factors mainly driven by the central government, and must be followed or complied bureaucratically. In the context of Bia West District, the lack of cooperation among local units and central government and other stakeholders coupled with the politicization of such policies

resulted in the implementation challenges of the Covid-19 intervention.

Secondly, the top-down theorists further assert that policies are best implemented administratively; therefore public bureaucrats must ensure government plans are not distorted by local communities (Khan, 2016). This was evident in the lack of cooperation among stakeholders in implementing the interventions thereby resulting in challenges.

The top-down approach or model is based on the policy process stages model, which proposes that the policy cycle may be broken into several distinct phases (Carnoy, 2014). It conveys the concept that authority ultimately belongs with the central decision makers at the top, who articulate clear policy objectives and hierarchically lead the process of putting these objectives into effect (Carnoy, 2014). It represents a classic elitist understanding of representative democracy, in which elected representatives are seen as the sole legitimate players in a community, able to make collectively binding laws on behalf of the whole community (Heywood, 2015; Zittoun, 2014). The implementation of government interventions in view of this assumption revealed the over centralization of the government intervention policies. Again there was lack of assessment of the local people's needs and wants which resulted in the implementation challenges.

The top-down method also uses a rational model approach and sees implementation as collaboration between goal-setting and goal-achieving activities (Hupe, 2011). In the course of the implementation of government interventions witnessed poor planning measures in addressing the needs of the respondents in the Bia West District.

2.1.2.1 Weaknesses of top-down approach

The top-down approach has a fundamental weakness that's it emphasizes the responsibility of central actors while overlooking the strategic initiatives and importance of local actors, who have the necessary expertise and knowledge of what the real issues are on the ground, are actively involved with the intended audience, and are in a much good position to propose and implement constructive policies (Kettunen, 2016). The top-down model touts itself on its comprehensive command and control structure, but in practice, complete hierarchical control and structure of the implementation process may be difficult to attain. Even if the primary intent was partially met, a deviation from the hierarchical structure and original design might easily be labelled a policy failure. Thus, the top-down strategy for assessment purposes is revealed to be irregular and unpredictable (Jensen, Johansson & Löfström, 2015). This notwithstanding, the adoption of the top-down method was influenced by the assertion by Pulzl & Oliver (2007) that, it is primarily a prescriptive technique in which implementations of policies are interpreted as results.

2.1.2.2 Justification of top-down approach

Scholars like Weible & Nohrstedt (2012); Weible, Heikkila, DeLeon & Sabatier (2012); Kettunen (2016) indicated that, top-down approach is helpful in measuring the success of a policy or programme implementation by looking at how well it is put into effect, or how well a fundamental policy choice is carried out.

Another significant strengths of this approaches stems from the concepts that the concentration on centrally placed actors and their capacity to provide explicit policy objectives and rigorously supervise the implementation process, thereby restricting the degree or amount of change in context (Jensen, Johansson, & Löfström, 2015).

Again, the top-down approach is consistent with overhead democracy, in which elected officials delegate implementation authority to non-elected public servants (civil service). This reduces the number of actors involved in the policy process and promotes accountability and proper evaluation, both of which are required to determine the causes and effects of a policy failure or deficit (Weible, Heikkila, DeLeon & Sabatier, 2012). Thus, the top-down model appears to be a more traditional and realistic way to studying policy implementation as espoused by Howlet & Ramesh, (2003).

In a nutshell, public policies must be executed, so that they can either have an influence or make an impact on the lives of citizens. However, the outcome of such policies for society could be intended or unintended consequences from the action or inaction of the government. Studies have indicated that most public policies have latent (unintended) consequences that may cripple the original intentions of such policies unless adequate mechanisms are put in place to counteract such adverse outcomes (Ogbeide, 2007). This theory therefore, would aid to assess the various government interventions and policies and how they have impacted the lives of the people in the rural areas especially those in the study area.

2.2 Nature and Epidemiology of COVID-19

Virology and Pathogenesis

Coronaviruses are enveloped single-stranded RNA viruses that are zoonotic in nature and cause symptoms ranging from those similar to the common cold to more severe respiratory, enteric, hepatic and neurological symptoms (Zhu, Zhang, Wang, Li, Yang, Song, ... & Niu, 2020; WHO, 2020f). There are six known coronaviruses in humans, in addition to 2019-nCoV: HCoV-229E, HCoV-OC43, SARS-CoV, HCoV-

NL63, HCoV-HKU,1 and MERS-CoV. (Li et al.,2020; National Health Commission of China, 2020a; Chen, Liu &Guo, 2020). In the previous two decades, the coronavirus has produced two large-scale pandemics: SARS (Peiris, Guan, & Yuen, 2004) and MERS (Peiris, Guan, & Yuen, 2004). (Zhou et al, 2020; Zaki, Van, Boheemen, Bestebroer, Osterhaus & Fouchier, 2012). From January 1 to 12, 2020, China CDC researchers collected 585 environmental samples from the Huanan Seafood Market in Wuhan, Hubei Province, China, in order to identify the infection source of 2019-nCoV. They found 2019-nCoV in 33 samples and determined that it came from wild animals sold on the market (Chinese Centre for Disease Control and Prevention, 2020). The researchers next performed laboratory tests on 15 patients' lung fluid, blood, and throat swab samples. These laboratory studies discovered virus-specific nucleic acid sequences in the sample, which differed from known human coronavirus species in terms of coronavirus-specific nucleic acid sequences. Laboratories also found that 2019-nCoV is related to several of the beta () coronaviruses found in bats (Zhou et al, 2020; Wang & Wang, 2020; Lu, Tang & Tang, 2020), and that it belongs to the SARS/ SARS-like CoV group (Zhou et al, 2020; Wang & Wang, 2020; Lu, Tang & Tang, 2020; Zhou et al, 2020).

In Wuhan, researchers enlisted nine inpatients with viral pneumonia who were negative for common respiratory infections in order to undertake next-generation sequencing from bronchoalveolar lavage fluid and cultured isolates. Next-generation sequencing revealed that 2019-nCoV was more distant from SARS-CoV (with about 79 per cent sequence identity) and MERS-CoV (with about 50 per cent sequence identity) than two bat-derived SARS-like coronaviruses, bat-SL-CoVZC45 (with 87.99 per cent sequence identity) and bat-SL-CoVZXC21 (with 87.23 per cent

sequence identity) (Xu, Chen, Wang, Feng, Zhou, Li & Zhong, 2020; Zhou et al, 2020).

2.3 Transmission Pattern of COVID-19

Coronaviruses can be found in a variety of domestic and wild animals, including camels, cattle, cats, and bats (National Health Commission of China, 2020a). Animal coronaviruses are thought to not transmit to humans in the majority of cases (CDC China, 2019). SARS and MERS, for example, were mostly disseminated through close contact with sick persons by respiratory droplets from coughing or sneezing. Early cases of 2019-nCoV were linked to the Huanan Seafood Market in Wuhan, China, implying that these infections were caused via animal-to-person transmission. Additional cases were soon recorded among medical professionals and others who had no prior exposure to the market or visit to Wuhan, which was interpreted as evidence of human-to-human transmission. (World Health Organization, 2020d; Liu et al., 2020; Gralinski & Menachery, 2020).

According to the most recent Chinese health authorities' guidelines (National Health Commission of China, 2020c), the 2019-nCoV can be transmitted in three ways: Direct transmission, aerosol transmission, and contact transmission are the three modes of transmission available. When respiratory droplets (such as those formed when an infected person coughs or sneezes) are swallowed or breathed by someone in close proximity, direct transmission is thought to occur. When respiratory droplets combine with the air, they generate aerosols, which can infect the lungs when breathed. When a person comes into contact with a virus-infected surface or object, the infection can spread to them. Individuals may become infected if they touch their lips, nose, or potentially their eyes thereafter, according to the research (National

health Commission of China, 2020a, National Health Commission of China, 2020c). Aside from these three possible transmission mechanisms, one study suggested that 2019-nCoV infection might potentially be transmitted through the digestive tract. Researchers examined datasets containing single-cell transcriptomes of the digestive system and discovered that ACE2 was strongly expressed in absorptive enterocytes from the ileum and colon, indicating that patients had abdominal pain and diarrhoea symptoms (Zhang, et al, 2020).

2.4 The Socio-Economic Impact of COVID-19 Pandemic

In March 2020, the World Health Organization (WHO) declared the COVID-19 outbreak to be a global pandemic (WHO, 2020d; Livingston & Bucher, 2020; Wu, Chen & Chan, 2020). In reaction to this announcement, governments throughout the world imposed restrictive measures and lockdowns in an attempt to stem the spread of COVID-19, including social distancing (Fong, Gao, Wong, Xiao, Shiu, Ryu, and Cowling, 2020). According to Mandavilli (2020), this strategy has saved thousands of lives in previous pandemics, including the Spanish flu in 1918 and, more recently, a flu outbreak in Mexico City in 2009. Businesses, schools, community centres, and nongovernmental organizations (NGOs) were forced to close as part of social distancing measures, big gatherings were forbidden, and lockdown restrictions were placed throughout multiple nations, allowing only essential mobility. The purpose of these approaches is to assist „flattening the curve,“ or a decrease in the number of new COVID-19 cases each day in order to prevent the disease's exponential growth and, hence relieve pressure on medical services (John Hopkins University, 2020).

Economic activity has slowed significantly as a result of the spread of COVID-19. According to an early World Bank (2020), forecasted a decline in the global GDP by 5.2 per cent in 2020 compared to 2019. Similarly, depending on whether a second wave of COVID-19 occurs, the OECD (2020) forecasted a drop in global GDP of 6 to 7.6%. The International Monetary Fund (IMF) projected a 4.4 per cent decline in 2020 in light of stronger-than-expected recoveries in advanced countries.

The outbreak of coronavirus came with wide ranging economic implications, with different effects expected on labour markets, production supply chains, financial markets, and GDP levels. The negative effects varied by the stringency of the social distancing measures (e.g., lockdowns and related restrictions), their length of implementation, and the degree of compliance with them.

In these conditions, research on the economic impact of the pandemic by Açıkgöz and Günay (2020) determined that the pandemic had substantial, negative consequences on businesses, financial markets, and all sectors of the global economy- culminating in a global economic crisis. According to Açıkgöz and Günay (2020) the uncertainty surrounding the end of the pandemic and possible cure scaled up the anxiety and fears among labour markets, employers and business architects across the globe. Baldwin and Di Mauro (2020), in support of this argument, posited that a number of questions regarding the spreads of economic damage are urgent and must be addressed, especially regarding the duration, the mechanisms of economic contagion, and most importantly, how governments can act to mitigate it. No less importantly, a report by the OECD (2020) conveyed the need for governments to ensure the economic viabilities of local firms, due to the fall in demand and supply. This premise holds true for Small-Scale Medium Enterprises (SMEs), who were the most affected by the

coronavirus epidemic, since the most were compelled to close, limiting their liquidity flow and ultimately leading to insolvency (Baker & Judge, 2020).

The COVID-19 pandemic is not only a public health crisis; it has also had dire economic consequences that have wreaked havoc on many countries (Kraus, Clauss, Breier, Gast Zardini & Tiberius, 2020). Previous research on crises has shown that countries, industries and firms have suffered significantly from the consequences of the global pandemic, due to the shock between supply and demand (Kraus, Clauss, Breier, Gast Zardini & Tiberius, 2020).

Many scholars have been trying to make sense about the economic implications of COVID-19 from a historical viewpoint as it develops. Ludvigson et al (2020) find that in a fairly conservative scenario without non-linearities, pandemics such as COVID-19 are tantamount to large, multiple period exogenous shocks. From the 14th century through 2018, Jordà et al. (2020) examine the rate of return on the real natural interest rate (the level of real returns on safe assets deriving from the demand and supply of investment capital in a non-inflationary environment). Theoretically, a pandemic is supposed to induce a downward negative shock on the real natural interest rate. This is because investment demand falls as a result of abundant capital per labour unit (labour shortage), but savings flows rise as a result of caution or to replace lost wealth. The authors discover that the true natural rate is depressed for 40 years, and then drops to -1.5 per cent after 20 years.

However, historical data analysis may not be adequate. COVID-19 has caused a large surge in economic uncertainties (Baker et al., 2020b), and there are no near historical analogies. Due to the obvious speed of evolution and timely requirements of data, the researchers suggest that there is a need to incorporate forward-looking uncertainty

measures to determine its impact on the economy. The researchers use a real business cycle (RBC) model to demonstrate that COVID-19 caused GDP to shrink by 11% year on year in the fourth quarter of 2020. According to the authors, more than half the contraction is caused by COVID-19. Coibion et al. (2020b) utilise surveys to properly evaluate the underlying economic expectations of households in US. They discover that it is predominantly lockdowns, rather than COVID-19 infections, spur the drops in consumptions, employments, lower inflationary expectations, increased uncertainty, and lower mortgage payments. Other researchers have investigated the role of global supply chains. For 64 nations, Bonadio et al. (2020) employ a mathematical approach to predict a global lockout as a decline in labour supply. The authors conclude that the average decrease in real GDP represents a significant reduction in economic activity, with global supply chain disruptions accounting for a big portion of the decline.

COVID-19's impact is modelled by Elenev et al. (2020) as a decrease in worker productivity and a decrease in labour supply, which has a negative impact on company revenue. The decline in revenue and the successive non-repayment of debt service obligations establish a flood of corporate defaults, which might bring down financial intermediaries. Cespedes et al. (2020) formulate a minimalist economic model in which COVID-19 also leads to loss of productivity. The authors predict a vicious cycle triggered by the loss of productivity causing lower collateral values, in turn limiting the amount of borrowing activity, leading to decreased employment, and then lower productivity. The COVID-19 shock is thus magnified through an „unemployment and asset price deflation doom loop.

Mulligan (2020) assesses the opportunity cost of “shutdowns” in order to document the macroeconomic impact of COVID-19. Within the National Accounting Framework for the US, the author extrapolates the welfare loss stemming from “non-working days”, the fall in labour-capital ratio resulting from the absence/layoff of workers, and the resulting idle capacity of workplace. After accounting for dead-weight losses stemming from fiscal stimulus, the replacement of normal import and export flows with black market activities, and the effect on non-market activities (lost productivity, missed schooling for children and young adults); the author finds the welfare loss to be approximately \$7 trillion per year of shutdown. Medical innovations such as vaccine development, contact tracing, and workplace risk mitigation can help offset the welfare loss by around \$2 trillion per year of shutdown.

Consumption patterns and debt responses from pandemic shocks have not been analysed prior to COVID-19 (Baker et al., 2020a). This employed transaction-level household data. Baker et al. (2020a) find that households sharply increased their spending during the initial period in specific sectors such as retail and food spending. These increases, however, were followed by a decrease in overall spending. Binder (2020) conducted an online survey of 500 USA consumers to understand their concerns and responses related to COVID-19, which indicated items of consumption on which they were spending either more or less. They find that 28 per cent of the respondents in that survey delayed/postponed future travel plans, and that 40 per cent forewent food purchases. Interestingly, Binder (2020) finds from the surveys that consumers tend to associate higher concerns about COVID-19 with higher inflationary expectations, a sentiment which is found to be a proxy for “pessimism” or “bad times”.

The economic impact of shocks such as pandemics is usually measured with aggregate time series data, such as industrial production, GDP growth, unemployment rate, and others. However, these datasets are available only after a certain lag - usually months or until the end of the quarter. On the other hand, economic shocks resulting from COVID-19 are occurring at real time. In order to analyse the economic impact at a higher frequency, Lewis et al. (2020) developed a weekly economic index (WEI) using ten different economic variables to track the economic impact of COVID-19 in the US. According to the study, between March 21 and March 28, the WEI declined by 6.19 per cent. This was driven by a decline in consumer confidence, a fall in fuel sales, a rise in unemployment insurance (UI) claims, and other variables. Similarly, Demirguc-Kunt et al. (2020) estimate the economic impact of social distancing measures via three high-frequency proxies (electricity consumption, nitrogen dioxide emissions, and mobility records). The authors find that social distancing measures led to a 10 per cent decline in economic activity (as measured by electricity usage and emissions) across European and Central Asian countries between January and April.

In Ghana, the impacts of the COVID-19 pandemic on socio-economic of Ghana is evident in the increased food prices and economic hardships associated with the lockdown directive, and the aggressive relocations and decongestion exercises to enforce social distancing among others. To start with, Ghana is heavily reliant on imported goods from neighbouring countries and like Burkina Faso, Niger and Nigeria (for foods) as well as further away countries like China, India, USA, UK, and Germany (for auxiliary goods) (Tri & Tam, 2021). Amidst the shortage in supplies caused by the global surge of COVID-19 cases, there were sharp increases in the prices of goods and services across the country. Prices of food items doubled and, in some cases, tripled. The price increases were not only limited to imported food but

also locally produced items (Tri & Tam, 2021; Asante & Mills, 2020; Aduhene & Osei-Assibey, 2021; Quarm, Sam-Quarm & Sam-Quarm, 2021). For instance, the prices of gari shot up.

The high prices meant that individuals could buy fewer items than they had planned or had to spend more to buy the same items. It is also important to state that similar increase in food prices characterised market trading in Liberia and Sierra Leone during the Ebola virus epidemic (Glennister et al., 2016; World Bank, 2014). However, the current situation may be worse across the import dependent African nations due to the impact of the COVID-19 pandemic on the economic activities and purchasing power of the rural poor as well as the production and supply logistics of major exporting countries and companies.

2.5 The Concept of Policy Implementation

According to Ezugwu (2013), “policy implementation is a sub part and a stage of the general public policy process. Hence for a meaningful understanding of this concept to be achieved, a basic knowledge of the term policy or public Policy is required”. In this regard, attempt was made towards the explanation of the concept above. The term policy implementation is explained in several ways. Some of which are as follows: According to (Makinde, 2005; Dziany, 2011), Ezugwu (2013) explains policy implementation as the activities that are carried out in the light of established policies. According to Egonmwan (1984) policy implementation refers to the activities that are carried out in the light of established policies. It also refers to the process of converting financial, material, technical and human inputs into outputs – goods and services (Dziany, 2011; Egonmwan, 1984). Edwards (1980) cited in (Dziany, 2011; Makinde, 2005) defines policy implementation as a stage of policy making between

the establishment of a policy and the consequences of the policy for the people whom it affects. It also involves a wide variety of actions such as issuing and enforcing directives, disbursing funds, making loans, and assigning and hiring personnel.

Amir (2020) defined public policy implementation as the acts and process of converting a policy into reality or simply enforcing it. In their opinion, implementation is the process of transforming policy mandates into actions, and policy goals into reality. The Standard Dictionary definition of the term implementation is simply “to put into effects according to some definite plan or procedure”. In this regard, policy implementation can be thought of as a deliberate and sequential set of activities directed towards putting a policy into effects or making it occur. Hence, policy implementation here is the action taken to accomplish the intents, objectives and desired outcomes of a policy.

In conclusion therefore, policy implementation can be seen as the concrete act and or process of carrying out some actions in order to put into effects those decisions and policies made by the government. It is also the realistic activities of putting policies into concrete actions by converting the made policies, laws and orders into tangible realities. From the above definitions, it can be noticed that (1) policy implementation is an activity not a theory; (2) it is a process and not a one-day act; (3) policy implementation is done in relation with the provision of law and policy mandates; (4) It is specifically carried out to solve some perceived public problems; and (5) It has a specific targeted population.

Given these elements of policy implementation, the process is affected by so many factors which most often, hinder its success. Hence, Pressman and Mater (1984) as cited in Ezugwu (2013) states that paradoxically, implementation is in many ways a

slippery subject as it is affected by so many factors. For instance, vague and contradictory policies are difficult to implement and, in most cases, various factors make policy vague. Makinde (2005) also stated that policy implementation is mostly affected by environment, resources, culture and external factors of time dimensions.

2.6 Challenges of Policy Implementation

Policy implementation and service delivery are critical for both the public and private sectors. However, policy implementation is one of the major problems confronting developing nations (Makinde, 2005). Problems associated with policy implementation occur when the desired result on the target or beneficiaries are not achieved. Such problems arise because of missing of certain critical factors which are communication, resources, dispositions or attitudes and bureaucratic structure (Dziany, 2011; Edwards, 1980; Makinde, 2005). These factors operate interactively to hinder policy implementation. Communication is an essential ingredient for effective implementation of public policy. Through communication, orders to implement policies are expected to be transmitted to the appropriate personnel in a clear manner while such orders must be accurate and consistent. Inadequate information can lead to a misunderstanding on the part of the implementers who may be confused as to what exactly are required of them (Dziany, 2011; Makinde, 2005).

Another challenge to policy implementation is inadequate resources. Resources comprise both the human and material such as adequate number of staff who are well equipped to carry out the implementation, relevant and adequate information on implementation process, the authority to ensure that policies are carried out as they are intended, and facilities such as land, equipment, buildings among others as may be

deemed necessary for the successful implementation of the policy (Paki & Kimiebi, 2011).

Another important factor that influences policy implementation is disposition or attitude. According to Dziany (2011), most implementers can exercise considerable discretion in the implementation of policies because of either their independence from their nominal superiors who formulate the policies or as a result of the complexity of the policy itself. The way the implementers exercise their discretion depends, to a large extent, on their disposition toward the policy. Therefore, the level of success depends on how the implementers see the policies as affecting their organizational and personal interests (Makinde, 2005).

Difficulty of policy implementation can still arise if there is no efficient bureaucratic structure especially when dealing with complex policies. According to Edwards (1980) cited in (Dziany, 2011), where there is organizational fragmentation, it may hinder the coordination that is necessary to successfully implement a complex policy especially one that requires the cooperation of many people.

2.7 Addressing Challenges of Policy Implementation

There are a number of things that can be done to address the challenges associated with policy implementation. Roseveare (2008) asserts that policymakers need to build genuine consensus among all stakeholders on the aims of policy implementation concerning a particular programme. If all people are involved, then actual making of the progress of the policy would easily be attained. In addition, all political players and stakeholders need to develop realistic expectations about the policy programme being implemented. Stakeholders, especially grassroots staff who the policy are concerned need to be fully involved in designing and framing the policy changes

(Paki & Kimiebi, 2011). Policymakers are also sometimes tempted to transform indicators that can be measured into goals and targets for projects, because they can be used to show progress over time. Roseveare (2008) however cautioned that this approach can crowd out other goals that may have important underlying merits and that society may consider important.

2.8 Policy Responses to Covid-19 – Some Evidence from Around the World

Ward et al. (2016) have argued that policy responses are complex, contextualized and fragmented. They are driven by a range of forces that have health, environmental, economic or social impact (Torjman, 2005). He further explains that for instance, the 2003 SARS crisis in Toronto generated new policies and responses that would not have been introduced in the absence of this crisis. Hale et al. (2020) assert that, globally, the rapid spread of the COVID-19 has created a wide range of responses from governments including travel restrictions, school closures, bans on public gatherings, contact tracing, social welfare provision, improvement in healthcare facilities, stimulus packages for businesses and individuals, among others. These interventions or responses are in place to contain the spread of the virus, manage the economic impact of the virus, and augment the health systems already in place. Hale et al. (2020) have shown that governments, since recording cases of COVID-19, adopted different measures including school closures, workplace closures, and travel bans. In the Stringency Index, they measure how strict government responses have been. They show that governments adopted more strict measures at the beginning of the pandemic and have since been easing the restrictions as the fatalities reduce.

Regarding health policies, specifically concerning testing policies adopted by governments around the world, Ritchie, Roser, Ortiz-Ospina and Hasell (2020) have grouped countries into four categories. The categories are no testing, testing only for those who have symptoms and key persons, testing for anyone showing any of the COVID-19 symptoms and the open public for testing even available for asymptomatic people. As a global pandemic, almost every country in the world has a testing policy in place. However, the choice of the testing policy has largely depended on the capability of the country to carry tests. WHO (2020) had recommended countries adopt an open testing policy or popularly referred to as mass testing where even asymptomatic patients who could as well spread the virus be tested and isolated.

However, with the associated cost of the tests and its availability, many countries especially in Africa largely depended on the focused testing where people who are showing symptoms were the focus of the testing. Countries such as South Korea, Russia, Germany, and Luxembourg are among countries that were conducting mass testing and have tested a larger number of their populations (Broom, 2020; Stewart, 2020). As the cases and fatalities around the world keep dropping, countries around the world have also relaxed their testing policies (Hale et al., 2020). On the African continent, Hale et al. (2020) report that, countries have adopted one of the above categories as their testing policy. It is shown that a larger percentage of the countries in Africa are focusing on only testing people with symptoms with just a very few adopting the public testing approach.

In a report in The Guardian, Kate Dooley, Director for West Africa at the Tony Blair Institute has explained that governments are rationing their use of test kits due to limited supplies (Akinwotu, 2020). She further explained that African countries who

have placed orders for more test kits are even yet to receive their supplies after months with plausible reasons including demand outstripping supply. As some countries relax most of the restrictions, these countries have made changes to their testing policies for different reasons including health and economic. On health, as many people do not report sick or the mortality rates have fallen worldwide, countries have also relaxed their testing policies, so they do not incur costs.

Ozili and Arun (2020) narrate that the COVID-19 has had a spill-over on various facets of human life including hospitality, travel, sports, health, financial, among other sectors. Undoubtedly the COVID-19 is testing the resilience of individuals, families, businesses, and nations in responding to pandemics. As a policy response, many countries like the United States, United Kingdom, Japan, and Australia are approving large stimulus for sectors and industries to mitigate the effect of the COVID-19 (Duffin, 2020; Ozili & Arun, 2020). Duffin (2020) reports that among the G-20 countries, Japan had passed the largest fiscal stimulus package that amounts to about 117 trillion Yen (about USD\$ 1.1 trillion). In Africa, several countries have also announced stimulus packages to mitigate the effect of the pandemic. For instance, the South African government in April launched an economic and social stimulus package worth over R500 billion (about USD\$26.3 billion) (Schneidman, McLaren & Taylor, 2020). Likewise, according to the International Monetary Fund (IMF) (2020), Namibia launched an economic stimulus and relief package worth 8 billion Namibian dollars (about USD\$482 million) on the 1st of April 2020 to mitigate the impact of COVID-19.

2.9 Policy responses by the Ghana government

With the nature of Ghana's government, public policy mainly emanates from the Executive President at the center which is then translated to the regional and local government levels whose heads are appointees of the President for implementation. As a result, acknowledgement of the COVID-19 by the Executive indicates that the government is ready to respond to the crisis. It is a result of this that the President adopted a televised address to the nation to update citizens on the measures put in place by the government as a response to the crisis. In these addresses are where all policies were outlined for various Ministries, Department, and Agencies to follow up with implementation.

Critical to the fight has been the earlier admission by the President on the potential of the disease to wreak havoc if proper care is not taken. The early admission is evident in the President's first address on "the enhanced measures taken by the government" on 11th March 2020 when the country had not reported any case of COVID-19. In this address, the President outlined some strategies the country was adopting to even prevent the COVID-19 from entering the country. Following the first reported cases on 12th March 2020, the government put in place several strategies to mitigate the spread of the coronavirus. Among these responses include limiting and stopping the importation of cases, detecting and containing cases, caring for the sick, social and economic responses, domestic capability, and deepen self-reliance (Agyemang-Manu, 2020). For instance, the GHS reported that the first two patients who had tested positive were people who have returned from Norway and Turkey (Osei, 2020). After realizing that subsequent positive cases were also people who were returning from outside Ghana, the government on the 22nd of March 2020 placed a travel restriction by closing all borders (air, land, and sea) to human traffic as a means of limiting and

stopping the importation of cases. It is important to emphasize that an Inter-Ministerial Presidential taskforce on COVID-19 was constituted with the President at the head and chairing most of the meetings. This brings to fore the importance attached to the emergency responsiveness and coordinated measures outlined in the public policy responses assessed in this paper. Some policy responses are discussed in the section below with a focus on health, economic, and social used by the government of Ghana to fight the pandemic.

3.9.1 Health

In the area of health, the government's policy responses have come in different forms. The motive has been to ensure that the health sector and healthcare workers can manage the coronavirus situation in Ghana. According to the Health Minister of Ghana, Agyemang-Manu (2020), government interventions in the health sector have included insurance package and tax relief for frontline health workers, tax relief for all health workers for 3 months which have been extended for additional 3 months, setting out isolation facilities for mild cases, strengthen research and developing Ghana Centre for Disease Control and infectious disease centres and last the approach that has helped the country in the fight against the pandemic; the 3-T approach; tracing, testing, and treating. Other health policy responses have come with some controversies. For instance, the package of incentive that was announced by the President on the 5th Address to the Nation on the 5th of April 2020 sparked controversy between the leadership of various health organizations and officials of the Ministry of Health on the definition of who a frontline health worker is in the fight against COVID-19.

The frontline health workers were defined by government officials as staff working in the two testing centres, as well as health workers working in designated isolation and treatment centres. This did not go down well with other health workers in the country. This is because for instance, a health worker in a district hospital may be the first point of call for a patient who may be having any of the symptoms of COVID-19. Such a health worker may then isolate such patient and request for a test in the two designated testing centres and be monitoring the patient until the return of the results and then if positive, transfer the patient to the designated COVID-19 isolation and treatment centre.

In all of these, such healthcare workers are not classified as frontline workers but rather those they had transferred the patient to isolate and treat were classified as frontline health workers. In a statement issued by the leadership of the Government and Hospital Pharmacy Association of Ghana, they stated that “members are not satisfied with the interpretations being given to the term frontline health worker” (Yeboah, 2020). This is because, for them as pharmacists, they may be issuing drugs from all hospitals in the country until people are transferred to the designated centres and therefore for the interpretations given to frontline workers not to include them is problematic. Some of these policies have on the other hand received great responses from healthcare workers, the citizenry, and the world.

2.10 Economy

Aside from causing severe human suffering and loss of life, COVID-19 has also led to a major economic burden, which is lumbering individuals, businesses as well as governments. The policy responses by the Government of Ghana to mitigate the

impact of COVID-19 on the economy can be grouped under fiscal measures and private sector-support (Abbey, 2020).

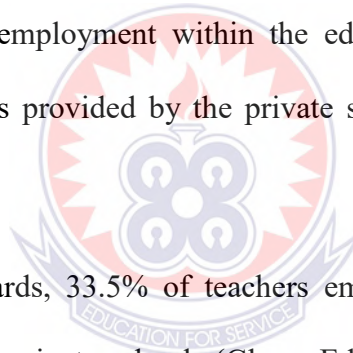
3.10.1 Coronavirus Alleviation Program (CAP)

In the President's maiden address, he stated that he had directed the Minister of Finance to send a proposal on the Coronavirus Alleviation Programme (CAP) to Parliament. The evolution of the Government's policy response towards dealing with the immediate effects of COVID-19 was not one without contention. The maiden statement presented by the Minister of Finance to Parliament did not only exclude the mention of targeted measures towards the highly informal nature of the economy (Abbey, 2020) but also got the minority in Parliament casting doubts over the policy intent given their views about the record of Government being fiscally undisciplined as well as unreliable in delivering on other non-COVID-19 related promises.

In the 2nd statement to Parliament, the Minister of Finance also indicated that the Coronavirus Alleviation Program Business Support Scheme (CAPBuSS) aligns with objective 4, „limit the impact of the virus on social and economic life“ of the nation's 5-point objective in instituting combat measures against the virus (Ministry of Finance [MoF], 2020). The CAP focuses on protecting against job losses, protecting livelihoods, supporting small businesses, and ensuring the programme is efficiently and sustainably implemented“ (MoF, 2020, p. 14). The highly informal nature of the Ghanaian economy, with micro businesses constituting about 85% (Ministry of Trade and Industry, 2019) and contributing about 70% to Ghana's GDP (Abor & Quartey, 2010) were now offered a glimmer of hope of being covered under the new CAPBuSS. The 1 billion Ghana Cedis (about USD\$174 million) CAPBuSS, comprising 600million Ghana Cedis (about USD\$104 million) from Government,

with the remaining from the ARB Apex Bank is intended to reach over 230,000 businesses across the 16 administrative regions of Ghana (National Board for Small Scale Industries, 2020).

Some questions that have arisen since the launch of the CAP include whether the CAP is good for progressive development? Whether it will help micro-businesses deal with the jeopardy of COVID-19? Answers to these questions have been affirmative. Other questions such as whether the support covers all facets of the national economy remain unanswered as groups such as proprietors of private sector schools – who have responsibility for the remuneration of their teachers and yet have their schools closed-down until 2021– are yet to be answered. Their plight has not escaped public discourse as 44.1% of employment within the educational sector, a well-affected sector of the economy is provided by the private sector (Ghana Statistical Service, 2015).



Drilling further downwards, 33.5% of teachers employed in the sector out of the 365,168 can be found in private schools (Ghana Education Service, 2018) for which there are growing calls for action by Government since their counterparts in the public schools continue to receive full salaries several months after all schools were shut down. However, the adequacy of the amount and its proportion to the estimated impact of the COVID-19 on micro-enterprises is still being discussed. What further aggravates the situation for the micro-businesses and the larger intended beneficiaries of the CAPBuSS is the length of time between when the policy intent was signaled and the actualization of the benefits. The fact that it took three (3) months for the first 1,000 applicants to receive in total 1 million Ghana Cedis (about USD\$174,000) as of 24th June 2020 raises several questions especially around the delivery mechanisms

and processes that governments must put in place to respond promptly to the effects of large-scale pandemics such as COVID-19.

Some medium-scale and small-scale enterprises like the Abbosey Okai Spare Part Dealers at a point called on the government to be swift in the disbursement process as despite, the promises they were given on disbursement by July, they were yet to receive any in August (Brown, 2020). What has emerged as an interesting development is the partnership between the public and private sector in setting in motion a delivery mechanism that has the reputable audit firm KPMG as supporting the validation processes of applications and delivery of the financial assistance through mobile money platforms (such as offered by Vodafone) – which is consistent with the overall standing of Ghana as a progressive nation in the use of fintech products to deepen financial inclusion especially in the informal sector. As the pandemic persists, the actual total impact has not been realized.

Abbey (2020) reports that the financial loss to master crafts-persons and their apprentices of artisans during 2-weeks of the lockdown in Ghana was around 456 million Ghana Cedis (about USD\$80 million) which almost consumes the 600million Ghana Cedis (about USD\$104 million) devoted by the government. As of Thursday, 18th June 2020, more than 450,000 applicants had registered for the programme with 75 percent of the number completing their applications (Donkor, 2020) The CAP established by the government of Ghana is similar to what has been established in other countries especially in the African continent. The IMF reports that in South Africa, the government is also assisting companies and workers facing distress through the Unemployment Insurance Fund (UIF). A COVID-19 intervention fund of 500 billion Naira (about USD\$1.2 billion) has also been provided to among other

things provide relief and support employers in Nigeria. Other African countries like Zimbabwe putting in place ZWL\$500million (about USD\$1.3 million) to support SMEs, Tanzania supporting the private sector with US\$376 million, and 8 billion Namibian dollars (about USD\$482 million) as economic stimulus and relief package for Namibia (IMF, 2020).

2.11 Social

Apart from the impacts of the COVID-19 on health and the economy, Diwakar (2020) asserts that there are also some social impacts like an increase in poverty and inequality and adverse effects on vulnerable people. Social measures that have been put in place to fight the COVID-19. The President of Ghana in his address on the 15th March 2020 stated that he was banning all public gatherings including conferences and workshops, religious activities, except for private burials that were limited to 25 people attending. These restrictions have been in place until 31st May 2020 where the President in his 10th addresses eased some of the restrictions and allowed for meetings of up to 100 people.

As the science of the virus depicts high transmission through human touch and physical interactions, and with the celebration of festivals, funerals, weddings, and mass gatherings not ignoring these, it has been the most prudent to impose a ban. The ban, however deepened the woes of informal business operators such as event organizers and decorators, local performing artists, food vendors, among others. Other social responses that have been put in place include some social protection measures to support the vulnerable in the society such as the distribution of free meals to „kayayei“ – a popular term for the phenomenon of head porters mostly from deprived rural areas of Northern Ghana and working in market places as a carrier of goods.

According to the International Labor Organization (2020), the crisis also calls for a social protection system that provides some benefits to meet the needs of the people. Our study focuses on the provision of free water and the electricity subsidy for some Ghanaians as a social protection measure to mitigate the impact of the virus on Ghanaians.

Free Water for all Ghanaians and subsidized electricity

Water bills The WHO has recommended hand washing as one of the most effective ways of reducing the spread of COVID-19. Stoler, Jepson and Wutich (2020) add that if there is inadequate water, it poses additional challenges including cleaning surfaces where COVID-19 would have survived and maintaining clean environments. As frequent washing of hands under running water has become a necessity with most families being home, utility bills especially water and electricity (power) which are a necessity will increase.

The policy initiative is to cushion the citizens and reduce the impact of the lockdown that was imposed. On the free water for all Ghanaians, the President stated in his 5th address that Government will absorb the water bills for all Ghanaians for the next three months, i.e. April, May, and June. All water tankers, publicly and privately-owned, are also going to be mobilized to ensure the supply of water to all vulnerable communities. Many Ghanaians went on social media to praise the government's efforts for this initiative. Some scholars have also praised the government's plan to absorb the cost of water (Smiley, Agbemor, Adams & Tutu, 2020).

They described the intervention as a good example of an intervention meant to ease the burden of water access on poor households who may compromise proper hygiene in the time of COVID-19 because of water insecurity (Smiley et al., 2020, p. 2). The

big question however remains; how many people will indeed have access to this free water by the government? According to Smiley et al. (2020), a sizable proportion of household are not linked to the national pipeline and have no metered supply and therefore depend on resold water from vendors who sell water door to door using pushcarts, water tankers, and sometimes private wells (Stoler et al., 2020).

Unlike the public services, informal water supply systems and their workforce are not obligated to operate these regulated supply chains under emergency conditions (Stoler et al., 2020, p. 2). There have been media reports where citizens called the Ministry of Sanitation and Water Resources hotlines to report that they had not benefitted from the free water service because they did not have direct pipelines and these informal water suppliers were asking them to pay even though the government had indicated they were going to reimburse these private suppliers. The Ghana Water Company Limited has also issued several notices in the print and electronic media requesting private water vendors to contact them for their inclusion in the community water supply reimbursement scheme. In the 6th address, the President announced an electricity relief package; 3 months free electricity for the vulnerable (life-line customers) and a 50% subsidy for all other consumers (residential and commercial). Even though the question has also been asked on the electricity relief as to if indeed the targeted vulnerable do even have electricity to benefit from this initiative. Unlike the water supply, the electricity situation did not have such private and informal suppliers.

At the end of the three months, the government has announced an extension of the water and electricity packages until the end of 2020. The free water and subsidized electricity as a measure to cushion the social costs of lockdowns and affected

livelihoods have been generally welcomed. Some critics however argue that the extension is populist and only for electoral purposes as Ghana goes to the polls in December 2020. Another argument has been that the extension could blow government expenditure out of gear especially in a time where the government is already spending a lot to protect lives against COVID-19. Some section also believes that citizens would see increasing tariffs for these items in 2021 after the current government has won the election– akin to a situation of robbing Peter to pay Paul. The case of Ghana compares favourably with some other African countries who also have in place subsidized social tariffs. The IMF reports that in Togo, the government is subsidizing water and electricity tariffs worth over USD\$3 million. Countries like Uganda, Burkina Faso, and Senegal are also supporting their citizens with subsidies on social tariffs like water and electricity.

2.12 Conclusion

The Ghana government has intervened in most of the facets of the human lives affected by the COVID-19. Key among the responses include the 3T-approach, the CAP-20, and the supply of free water, and subsidized electricity for the citizens. The overall policy response within the economy targeting the private sector has also brought to the fore the critique of the conventional capitalist economic theory of minimal (if not completely exclusionary), Governmental intervention in the market economy with governments finding solace in redistribution and welfare policies. The global reports on the number of persons who have sunk further into extreme poverty and thereby eroding the gains of the past decade towards the SDG 1 have also highlighted the need for pragmatic policy responses to pandemics that are not steeped in uncompromising stance towards chosen economic paradigms of nation-states. In imposing total lockdowns in major economic centres of Ghana (Greater Accra, Kasoa,

and Greater Kumasi) as well as placing bans on social gatherings with executive instruments regularly amended, the nexus between the social and economic spheres was amplified by the stark reality of livelihoods being at stake. It is without a doubt that the harsh effects on livelihoods contributed to policy responses of the provision of free water supply and subsidized electricity to cushion the lower income-earners from the socio-economic shocks of the crises. The policy responses of the Ghanaian government have so far been positive and continue to contribute greatly to mitigating the impact of COVID-19 on the citizens. The literature however, fails to discuss the impact of these policies livelihood of the people living in the rural areas, the kind of people that have benefitted from these policies and the measures to correct this anomaly.

The chapter discussed literature the theoretical frame work of the study. The literature also discussed the nature, epidemiology and transmission of Covid-19 pandemic. The literature review brought attention to the socio-economic impacts of Covid-19 pandemic. It also presented any discussion on the concept of policy implementation, challenges of policy implementation, ways of addressing challenges of policy implementation, policy responses to covid-19 – some evidence from around the world, and policy responses by the Ghana government.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter presents the methodology followed in carrying out the study. It gives a description of the study design and target population, sampling procedures, research instruments, procedures followed in data collection, processing and analysis as well as data presentation.

3.1 Research Approach

This study, as earlier indicated, adopted the quantitative research approach. Quantitative research, according to Bell, Bryman and Harley (2018) focuses on gathering numerical data to explain a particular phenomenon. Thus, it deals with statistical measurements or numerical analysis of data collected through questionnaires, polls, and surveys, or by manipulating existing statistical data to investigate, explain or predict phenomena. Creswell (2009) suggests that quantitative data deals with logic, numbers, and objective stances. According to Oberiri (2017), quantitative research method deals with quantifying and analysis variables in order to get results. He stressed further that quantitative research approach involves the utilization and analysis of numerical data using specific statistical techniques to answer questions like who, how much, what, where, when, how many, and how. The overall aim of the adoption of quantitative approach for this study is to sort out features, count them, and construct statistical models in an attempt to explain what is observed as pinned Bryman & Becker (2012).

3.2 Research Design

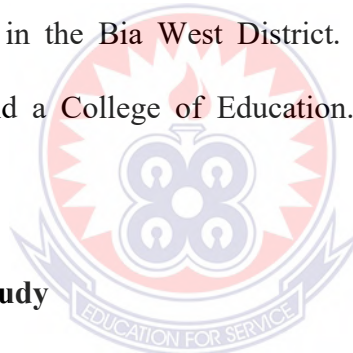
The study adopted a survey design to assess the Covid-19 interventions in Ghana. According to Sukamolson (2007) survey research design encompasses the use of scientific sampling method with a designed questionnaire to measure a given population's characteristics through the utilization of statistical methods. He stressed further that survey design is a form of quantitative research that is concerned with „sampling questionnaire, questionnaire design, questionnaire administration“ for the sake of gathering information from the group/population under study, and then make analysis in order to better understand their behavior/characteristics. To Kerlinger (1973) survey research design focuses on respondents, the vital facts about such respondents, and their beliefs, opinions, attitudes, motivations and behavior. Survey design is used to describe quantitatively a sectional aspect of a given populations which involves, obtaining data from respondents to study the relationship for the purpose of generalization (Kraemer, 1991).

According to Oberiri (2017) the Merriam-Webster Dictionary indicated that the word survey to be derived from Anglo-French word „surveer“ which means to look over. He stressed further that the dictionary, defined survey to means (a) to examine as to condition, situation, or value-appraise; (b) to query (someone) in order to collect data for the analysis of some aspect of a group or area; (c) to determine and delineate the form, extent, and position of (as a tract of land) by taking linear and angular measurements and by applying the principles of geometry and trigonometry; (d) to view or consider comprehensively; and (e) to inspect, scrutinize.

3.3 Profile of the study area

Bia West District is located in the West North Region of Ghana. The district was formally part of the Juaboso Bia District but was latter curved out to become a district in 2004 by the Legislative Instrument (LI). The Bia West District is one of the 261 Metropolitan, Municipal and District Assemblies (MMDAs) in Ghana and forms part of the 9 MMDAs in the Western North Region. It has a total surface area of 1,287.265 square kilometres. The District capital, Essam is located 420km to the northwest of Sekondi-Takoradi and 250km to Kumasi. In all, the total population of Bia West District as projected by the Ghana statistical services for 2019 is 115,976 people.

The District is endured with natural resources like timber and gold. Farming is the main economic activity in the Bia West District. The district is blessed with two Senior High Schools and a College of Education. Ghana statistical service report (2019).



3.4 Population of the Study

A study population can be defined as the entire collection of cases or units about which the researcher wishes to draw conclusions Kothari (2004). Babbie (2002) also defined it as the specified aggregation of the elements in the study. Ngulube (2005) emphasised that it is important for the researcher to carefully and completely define the population before collecting samples. Formulating a research design is to define the population according to the objectives of the study.

The population of this study comprises all the resident of the Bia West District. The selection of this community was based on their proximity, accessibility and convenience in data collection. In all, the total population of Bia West District as projected by the Ghana statistical services for 2019 is 115,976 people.

3.5 Sample Size Determination

The researcher employed a statistical model by Yamani (1964) to settle on the sample size at a 95% confidence level with 5% margin of error. The sample size for this study included the total number of households within the study area.

$$n = \frac{N}{1 + N(\hat{\theta}^2)}$$

Where n = the sample size, N = the sample frame, 1 = a constant, and $\hat{\theta} = 0.05$

Given the population of Bia West District as projected by the Ghana statistical services for 2019 is 115,976, therefore,

$$\text{Therefore, the sample size} = n = \frac{115,976}{1 + 115,976(0.05)^2} = \mathbf{399}$$

3.6 Sampling

Using the statistical model by Yamani (1964) the sample size for this study is 399. A simple random sampling technique was adopted to select the respondents for this study. According to Meng (2013), simple random sampling method of sampling is the one of the basic and common type of sampling method used in quantitative social science research and in scientific research. The main benefit of simple random sampling is that each member of the population has an equal chance of being chosen for the study. This guarantees that the sample chosen is representative of the population, in an unbiased way. In turn, the statistical conclusions drawn from the analysis of the sample will be valid (Frerichs, 2008).

3.7 Sources of Data

This study relied on primary and secondary data. A primary data provides first-hand evidence or information on a situation, phenomena or an event that can be used to

create a picture of what happened at the time (Kagan, Rossini & Sapounas, 2013). The primary data for this study was sourced through a structured questionnaire.

Secondary data is the data originally collected for a different purpose and reused for another research question (Hox & Boeije, 2005). This data was obtained from books, press briefings, Ministerial address, Presidential Address, journals, magazines, newspapers and other research works both published and unpublished, hardcopy and online/softcopy.

3.8 Data Collection Process

For ethical reasons, a letter of introduction from the Dean of Graduate school of University of Education, Winneba was obtained to introduce the researcher during the data collection, after establishing the necessary contacts with the respondents. The researcher used the letter to introduce and sought consent and permission from the respondents to participate in the study. The researcher explained the purpose of the study and procedure for responding to the structured questionnaire to the study participants. Respondents were assured of the necessary confidentiality and anonymity. The questionnaire was self-administered by the researcher. The researcher made available time to respond to the concerns of each participant. The data collection process covered a period of about one month, given the size of the study area.

3.9 Data Collection Tool

The primary data was collected by administering face-to-face questionnaires to the respondents. Subar, Ziegler and Thompson (2001) posit that the main reason for using questionnaire is the fact that a large number of respondents can be reached relatively easy and it is economical. It also provides quantifiable answers for a

research topic which are also easy to analyse. Then also all the participants are literate, and therefore can read and respond to the items. The questionnaire was being designed in four sections. The first section included the demographic data of respondents consisting of variables such as age, sex, marital status, and educational level. The second section collected data on the level of awareness of COVID-19 among the residents of the Bia West District. The third section collected information on the level of awareness of Government intervention programs to mitigate the spread and effect of the pandemic. The fourth section collected information regarding the effects of Government intervention programs on COVID-19 on the social life the residents of the Bia West District. The final section gathered data on the implementation challenges of Government intervention programs on COVID-19 in the Bia West District.

3.10 Reliability and Validity

Validity is the extent to which the instruments used during the study measure the issues they are intended to measure (Amin, 2005). It is context bound and should be viewed as a process of accumulating evidence that support the meaningfulness of a measure which can also be grouped into three to include; content validity, criterion validity and construct validity (Switzer, Wisniewski, Belle, Dew, & Schultz, 1999). The researcher made sure that the content and context of both the questionnaire is reviewed and approved by a Senior Lecturer at University of Education, Winneba (UEW).

Reliability is the ability to detect the only true score from error (Switzer, Wisniewski, Belle, Dew, & Schultz, 1999). That is the degree to which a research instrument yields consistent results after repeated trials (Mugenda et al., 2003). With regards to

the reliability of data, the researcher relied on the information given by the respondents of Bia West and its selected communities. The research used Test-retest as proposed by Hagan (2014) to achieve such reliability.

3.11 Data Analysis

Data obtained from the field was analysed and presented using Statistical Package for the Social Scientist (SPSS) version 21.0. This study utilised quantitative methods to analyse the data. The data analysis was done using both descriptive and inferential statistics. The descriptive statistics was done using Statistical Package for the Social Scientist (SPSS) 21.0, the descriptive covered frequency, percentage, mean and standard deviation, whereas the inferential statistics was done using Stata v.15, covering independent t-test, One – Way ANOVA, and Pearson Correlation analysis.

3.12 Ethical Issue

This study is solely for academic purposes; therefore, all respondents were not identified by their names but rather, they were identified with codes during dissemination of results. The confidentiality and privacy of the respondents were assured, hence, all information or data provided by the respondents are kept confidential. The respondents' involvement and participation in the study was on voluntary terms and was not exposed to any form of risks, coerced or induced with any form of monetary or kind of reward. Likewise, the researcher gave full affirmations to all the reference materials utilized as a part of the study.

3.13 Fieldwork challenges

Constraints are inevitable in any research work and the study encountered the following setbacks in the course of the data collection;

Firstly, the study could not capture everything about Covid-19 pandemic and has however assessed the interventions resulting from the pandemic. Financial constraint was another big challenge; the researcher had encountered some financial difficulties in executing the research in the field where some respondents demanded money or some sort of reward before their involvement as respondents in the study.

Secondly, some respondents were insincere and others unwilling to provide information on their livelihood affairs. This delayed the research process as the researcher had to spend much time explaining the purpose of the study to them. It was also made known to the participants that their participation in the study would not affect their status in anyway and that the information they would provide would not be shared with their superiors.

Again, respondents delayed in filling and submitting the questionnaires within the agreed time frame that we reached after they consented to participate in the study thereby delaying the data collection process. This made the study to travel beyond the time frame which was earlier planned for this research.

In some cases, some respondents constantly asked for the incentives when they realised that it was a research study. They might have the thought that the researcher would get remuneration in one way or the other somewhere.

Another challenge encountered by the researcher during the collection of data was language barrier. The researcher encountered a challenge with respondents who could

only speak Mossi language which was foreign to the researcher. Nevertheless, with the help of an interpreter the problem of language barrier was addressed.

Finally, some of the respondents thought the study was a deliberate attempt to expose the weakness of government interventions in addressing the pandemic to political opponents to gain political advantage out of it. Nonetheless, the purpose of the study was clearly stated repeated to respondents before their involvement.

3.14 Conclusion

This chapter discussed the general approach and specific techniques that were adopted to address the objectives of the study. These included the research settings, the reason for the choice of the study area and how the study was carried out. Primary data was collected from respondents of the six (6) selected communities in the Bia West District of the Western North Region of Ghana. The questionnaire was self-administered by the researcher and the simple random sampling technique was adopted. The method of data analysis was also captured in the chapter. Ethical issues concerning the conduct of the study and challenges encountered in the fieldwork were also captured in the chapter. The chapter also highlights the importance of ethical standards in the conduct of research. The framework for data analysis together with delimitations, limitations and challenges were also looked at. Lastly, the field work was also discussed.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.0 Introduction

This chapter presents the findings of the study. It covers the response rate, demographics of the respondents and the analysis of the findings with regard to the objective of the research

4.1 Response Rate

Response rate, according to the American Association of Public Opinion Research (2015) is the total number of people who answered the survey divided by the total number of people in the research sample. In other words, response rate denotes the proportion of people or observation that characterise a study (Deutskens, De Ruyter, Wetzels & Oosterveld, 2004). According to Baruch and Holtom (2008), the response rate of a survey is a significant indicator or gauge of its quality and it is usually expressed as a percentage – where a higher response rate signifies that the survey results are representative of the overall research population.

Table 4.1 below illustrate the response rate for this study.

Table 4.1: Response Rate

Response Rate	Frequency	Per cent.
Questionnaires completed and returned	357	89.5
Questionnaires returned incomplete	34	8.5
Questionnaires never returned	9	2.0
Total	399	100

Source: Field work, 2021.

The data in table 4.1 above present the response rate of this study. From table, a total of 399 questionnaires were dispatched for this study, however, only 357 questionnaires were returned complete, signifying an 89.5% response rate. Also, 34 questionnaires representing 8.5% returned incomplete and nine (9) questionnaires never returned. As a result, the researcher examined the data gathered from the 357 respondents. According to Kothari (2004), a response rate of 70% and more is completely appropriate for a survey, although a number of scholars and researchers, on the other hand, have maintained that there is no such thing as an appropriate response rate in research (Krosnick, Presser, Fealing, Ruggles & Vannette, 2015). Despite this, many other researchers and authors believe that a higher response rate ensures a fair representation of the study population as well as the accuracy of the survey results (Johnson & Wislar, 2012; Baruch & Holtom, 2008; Chater & Simpson, 1987). A 60 percent response rate, according to Krosnick, Presser, Fealing, Ruggles and Vannette, (2015), is marginal, 70 per cent is acceptable, 80 per cent is fair, 90 per cent is excellent, and 100 per cent is perfect. As a result, the 98.2 per cent response rate in this study is a fair reflection of the desired study sample.

4.2 Demographics Characteristics of Respondents

The demographics of the respondent were collected for the study. This included the gender of the respondent, their age, level of education, occupation, and the number of years the respondents had lived in the Assembly.

4.2.1 Gender of the respondents

The question was posed to the respondents about their gender; the aim of analysing gender of respondent is to determine the gender background of the respondents for this study.

Table 4. 2: Respondents' gender

Gender	Frequency	Percent
Male	191	53.5
Female	166	46.5
Total	357	100

Source: Field work, 2021.

The data from table 4.2 shows that out of the 357 participants, 191 (53.5%) were males, while the females were 166 (46.05%). This data show that more males participated in this study than females. Though this data contradicts with the gender ratio and dynamics of Bia West as projected by the Ghana statistical services, however it be attributed the sampling techniques (simple random sampling method) and the ethical consideration as applied in this study; where only the individuals who concerted and avail themselves to participate in this study.

4.2.2 Age group of respondents

Table 4. 3: Age group of respondents

Age	Frequency	Per cent
18 – 30yrs	71	19.9
31 – 40yrs	122	34.2
41 – 50yrs	105	29.4
51 – 60yrs	48	13.4
61yrs and above	11	3.1
Total	357	100.0

Source: Field work, 2021

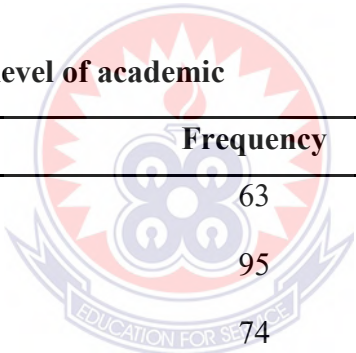
The age of the respondents for this study is shown in Table 4.3. The data in the above table shows that 19.9 per cent of respondents of this study were between the ages of 18 and 30 years, 29.4 per cent of respondents were between the ages of 31 and 40

years, 34.2 per cent were between the ages of 41 and 50 years, remaining 13.4 per cent were between the ages of 51 and 60 years and 3.1 per cent of respondents were 61 years old and above Table 4.2 shows that a good of the respondents (54.1%) were between the ages of 18 and 40. This finding suggests that Bia West District Assembly has a large percentage of youthful population. The researcher views this result to signify a positive prospect for Bia West District Assembly.

4.2.3 Highest academic qualification

Examining the educational qualification of respondent is a critical factor in determining people's in-depth understanding of phenomenon. Following this, the study elicited respondents' educational levels. Table 4.4 below presents the result

Table 4. 4: Employee's level of academic



Response	Frequency	Per cent
No formal education	63	17.6
Basic Education	95	26.6
Senior High School	74	20.7
Diploma level	59	16.5
Bachelor level	55	15.4
Postgraduate	11	3.1
Total	357	100.0

Source: Field work, 2021

The educational background of the respondents ranges from No formal education, Basic Education, Senior High school through Diploma, Degree, and Postgraduate level of education. The data from table 4.4 showed that 17.6% of the respondents had no formal education, 26.6% had basic education, 20.7% of them had High school level of education, 16.5% have Diploma level of education, 15.4% of them had

Bachelor's level of education, and only 3.1% of them had Postgraduate level of education. This revealed that majority (82.4%) of the respondents had some levels of education. Only 17.6% of them had no formal education. It is thus clear that the respondents had sufficient intellect to understand the themes, veracities and phenomena under considerations, by extension the policies and programs of government towards COVID-19. Thus, the results of this study reflect the viewpoints of persons with fairly high levels of education.

4.2.4 Employment status

Table 4.5: Employment status

Response	Frequency	Per cent
Unemployed	67	18.8
Self-employed	105	29.4
Employed by government	84	23.5
Employed by private individuals	34	9.5
Students	49	13.7
Apprenticeship	18	5.0
Total	357	100.0

Source: Field work, 2021.

The employment status of the respondents selected for this study ranges from unemployed, self-employed, employed by government, employed by private individuals, students and apprenticeship. The data from table 4.5 above shows that 18.8% of the respondents selected for this study are unemployed, 29.4% of them are self-employed, 23.5% of them are employed by government, 9.5% of them are employed by private individuals, 13.7% of them are students, and 5.0% of them are apprentices. This revealed that most (62.4%) of the respondents who participated in this study had some form of employment; self-employed or employment by

government or private individuals. A percentage of 18.8 unemployed is subjectively high given that assembly has youthful population. Nevertheless, this may be attributed to raging effects of the outbreak of COVID-19 and its consequences on businesses and the world of employments. Thus, constituting one of the core rationales behind this study – to assess the COVID-19 intervention by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges at Bia West District

4.2.5 Respondents length of stay in the Bia West District

This study envisaged that the respondents' years spent in a community may be very significant in soliciting their views or contribution to the subject matter. Hence, assessing the COVID-19 intervention by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges at Bia West District requires respondents or participants who have lived or stayed longer in the respective communities of Bia west district. During the survey, the number of years in the district became necessary. It helped to determine respondents „level of familiarity and their knowledge on the problem under study. Table 4.5 presents the respondents length of stay in Bia West District.

Table 4.6: Respondents' length of stay in Bia West District

Age	Frequency	Per cent
Less than 1 year	12	3.4
2 – 5years	31	8.7
6 – 10years	33	9.2
11 – 15years	59	16.5
16 – 20years	89	24.9
21 years and above	133	37.3
Total	357	100.0

Source: Field work, 2021.

Table 4.6 illustrate the number of years the respondents have lived or stayed in the Bia West District. The results from table 4.6 shows that only 3.4% of the respondents had lived in the Bia West District for less than one (1) year, however, 8.7% have lived in the district for the periods between 2 – 5years, 9.2% have lived in the district between the periods of 6 – 10years, 16.5% have lived in the district for the periods between 11 – 15years, 24.9% have lived in the district for the periods between 16 – 20years and 37.3% have lived in the district for the periods between 21 years and above. This result shows that majority (87.9%) of the respondents have in the Bia West District for 10 years and above, and thus, may be conversant with the nature of the social and economic parameters of the district assembly, the rate at which COVID-19 has affected lives in the district assembly, the factors effecting the social and economic development. of the district assembly, as well as the scope and parameters to which government COVID-19 intervention programs has effect the livelihood and socio-economic development of Bia West District Assembly. Therefore, the information gathered from them was valid and true reflection of the situation on ground. It can also be concluded that the findings for this study represent the perception of people who have lived within the area of study for considerably over 2 years, and had the experience, information and knowledge regarding the subject matter understudy.

4.3 Awareness of government intervention programs to mitigate the spread and effect of the of COVID-19 among the residents of Bia West District

As part of the objective of this study, it was imperative to assess the respondents’ awareness of government intervention programs to mitigate the spread and effect of COVID-19. This objective is centred on the preposition that policy awareness constitutes a significant variable that facilitates successful policy implementation, the

rule of the policy compliance and allow for accountability for non-compliance. In this light, this study, first, beseeched the views of the respondents on their awareness of any government intervention on COVID-19. For this, the participants were asked to indicate “Yes” or “No” to this question. Those who responded “yes” were asked to continue to Question 2. Their responses were analysed and presented in table 4.7 below.

Table 4.7: Respondents’ gender

Gender	Frequency	Per cent
Yes	342	95.8
No	15	4.2
Total	357	100

Source: Field work, 2021.

The data in table 4.7 show that nearly all the study participants have the awareness of government interventions and programmes on COVID-19. However, little over 4 per cent of them claimed never to have heard or been aware of any government interventions and programmes on COVID-19. This could be attributed to the education background of the study participated, as about 17.6% of them had no formal education. Nevertheless, overwhelming majority (95.8%) of the respondents submitted is aware of government interventions and programmes on COVID-19. A number of factors may have influenced this result. Some of these factors may include but not limited the public educations and sensitisations by the government, weekly address to the nation by the president of the republic, public campaigns and educations by the CSOs, NGO and the media. Other factors may be attributed to the raging nature of COVID-19 out breaks- the lockdowns, restrictions of movements, and the closure of borders may have intimated public curiosity of the citizenry on the

adversities of COVID-19 outbreak. Also, the campaigns and political ads that characterised the 2020 could have been a contributory factor, as most of the government policies and programming for alleviating the effect of COVID-19, were the key tools and subjects for the election, particular the ruling government (party).

Government awareness creation concentrated on delivering information about how the government handles the COVID-19 outbreak since the spread of the novel as proper and effective risk communication depends on consistent media presence with information and guidance (Abrams & Greenhawt, 2020; Park et al., 2020). The Ghanaian government depended on accurate, confident, transparent, and trusted communication which are effective values during risks and emergencies. (Park & Lee, 2018).

4.3.1 Government intervention programs to mitigate the spread and effect of the COVID-19 among the residents of Bia West District

Furthermore, this study sought the views of the respondents on the various intervention programs and policies rolled out by the government, and whether those intervention programs and policies help reduced the spread and effect of COVID-19 in their communities. The respondents were asked to choose from a five-point Likert scale ranging from, Completely Disagree [1], Mostly Disagree [2], Neutral [3], Partially Agree [4], and Mostly Agree [5]. The responses from the study participants were analysed in mean and standard deviation, and according presented in the table below. It is necessary to clarify at this point that, only the 342 respondents who affirmed [Yes] to have some levels of awareness of government interventions and programmes on COVID-19 in table 4.7.

Table 4.8: Government intervention programs to mitigate the spread and effect of the COVID-19 among the residents of Bia West District

Statement	Completely Disagree Freq(%)	Mostly Disagree Freq(%)	Neutral Freq(%)	Partially Agree Freq(%)	Mostly Agree Freq(%)
Free water	5(1.4)	2(0.58)	3(0.87)	19(5.5)	313(91.5)
Provision of cooked and uncooked food to the vulnerable	5(1.4)	5(1.4)	0	19(5.6)	313(91.5)
Reduced electricity tariff	12(3.5)	14(4.1)	11(3.2)	15(4.3)	290 (84.8)
Free COVID-19 testing	63(18.4)	56(16.3)	67(19.6)	17(4.9)	139(40.6)
Free COVID-19 Vaccine	83(24.0)	52(15.2)	67(19.1)	21(6.1)	119(34.7)
Financial supports to businesses	83(24.3)	52(15.2)	67(19.6)	35(10.2)	105(30.7)
Tax waiver on income taxes of frontline workers	91(26.6)	52(15.2)	59(17.3)	35(10.2)	105(30.7)
The Coronavirus Alleviation Program Business Support Scheme (CAP-BuSS)	91(26.6)	55(16.1)	59(17.3)	48(14.0)	89(26.02)
Reduction of CST from 9% to 5% to reduce the cost of communication services.	101(29.5)	88(25.7)	44(12.8)	67(19.6)	42(12.3)
Relief packages for private schools.	124(36.3)	98(28.7)	49(14.8)	29(8.5)	42(12.3)
Government supported entrepreneurs with disability in the Northern, North East and Savannah regions.	205(59.9)	97(28.4)	7(2.0)	22(6.4)	11(3.2)

Source: Field work, 2021.

From Table 4.8 the study could say that about 5(1.4%) and 2(0.58%) of the respondent completely disagree and disagree, respectively with the assertion that free water was an effective intervention, whereas 19(5.52%) and 313(91.5%) respondents partially agree and mostly agree with the assertion been made with 3(0.87%) who are unsure and indecisive.

The findings suggest a generally positive perception among the respondents regarding the effectiveness of free water as an intervention, with a substantial majority in agreement.

From the same table results, indicate varying opinions among respondents on the statement about the provision of cooked and uncooked food to the vulnerable. While 5 (1.4%) respondents completely disagree and another 5 (1.4%) mostly disagree, a substantial proportion, with 19 (5.55%) agreeing and a significant majority of 313 (91.5%) strongly agreeing with the claims.

The findings suggest strong overall support for the provision of cooked and uncooked food to the vulnerable, but the presence of some disagreement emphasizes the importance of exploring the nuances and reasons behind differing opinions.

Results from Table 4.8 on the statement regarding reduced electricity tariff indicates diverse responses among respondents. A remarkable percentage, with 12 (3.51%) completely disagreeing and 14 (4.09%) mostly disagreeing, express dissatisfaction with the notion. Conversely, 11 (3.22%) respondents agree, and 15 (4.39%) strongly agree with the proposed reduced electricity tariff. The majority of respondents, constituting a significant 290 (84.79%), seem unsure or indecisive about the statement.

The findings suggest a high level of uncertainty or indecision among the respondents regarding the proposed reduced electricity tariff, with a substantial majority of 84.79% falling into this category. This implies that there is a lack of consensus or clear agreement among the participants about the proposed reduced electricity tariff. The majority of respondents appear to be unsure or hesitant in expressing a definite stance on this particular statement.

From the same Table 4.8, the responses regarding the statement on Free COVID-19 testing exhibit diverse opinions among the participants. A notable proportion of 139 respondents (40.64%) strongly agree, while 63 (18.42%) strongly disagree, and 56 (16.3%) disagree. Additionally, 67 respondents (19.59%) express a neutral stance, and 17 respondents (4.97%) agree with the statement.

While a significant proportion strongly agrees, there are also notable percentages that strongly disagree, disagree, and express a neutral stance. The diverse responses indicate a range of perspectives among the participants on the topic of free COVID-19 testing.

The data on the perception of the provision of a free COVID-19 vaccine reveals a diverse range of opinions among respondents. A significant portion, with 83 respondents (42%), completely disagree, while 52 respondents (15.2%) mostly disagree. On the positive side, 67 respondents (19.14%) partially agree, 21 respondents (6.14%) mostly agree, and a substantial majority of 119 respondents (34.79%) strongly agrees with the statement. The findings highlight a divided sentiment among respondents, with a substantial number opposing the idea of free COVID-19 vaccines, yet a considerable proportion supports it, particularly with a strong agreement from a majority. The diversity in opinions suggests the importance of considering various perspectives and factors influencing attitudes towards the provision of free COVID-19 vaccines.

Table 4.8 illustrates the diverse range of opinions among respondents regarding the provision of financial support to businesses. A significant number, with 83 (24.3%) strongly disagreeing and 52 (15.2%) disagreeing, express skepticism or dissatisfaction. On the other hand, there is a notable proportion of respondents who

are neutral (67, 19.6%), agree (35, 10.2%), or strongly agree (105, 30.7%) with this intervention. The findings suggest a complex terrain of opinions, with a mixture of skepticism, neutrality, and positive views regarding the provision of financial support to businesses.

According to the findings in Table 4.8, which outlines the data on the proposal for a tax waiver on income taxes of frontline workers, there is a variety of opinions among respondents. A substantial number, with 91 (26.6%), strongly agree, and 52 (15.2%) agree with the proposition. On the other hand, 35 (10.2%) disagree, and a significant majority of 105 (30.7%) strongly disagree. Additionally, 59 respondents (17.3%) remain neutral or undecided on the matter. The findings suggest a divided perspective among respondents, indicating that opinions are varied and not overwhelmingly in favour or against the proposed tax waiver for frontline workers.

In reference to Table 4.8, it is evident that there is a diversity of opinions among the respondents regarding the Coronavirus Alleviation Program Business Support Scheme (CAP-BuSS). A significant portion strongly disagrees (26.6%), while 16.1% disagree, and 17.3% mostly disagree with the scheme. Additionally, 14% remain neutral, and 26.02% agree with the program. The findings suggest a varied spectrum of opinions on the Coronavirus Alleviation Program Business Support Scheme, with a notable presence of both positive and negative sentiments among the respondents.

The information presented in Table 4.8 underscores the diversity of opinions surrounding the proposed reduction of CST from 9% to 5%, all with the common goal of reducing the cost of communication services. A substantial number of respondents, with 101 (29.5%) completely disagreeing and 88 (25.7%) mostly disagreeing, suggest significant dissent. Additionally, 44 (12.8%) respondents are undecided on the matter.

On the contrary, there is some level of support, with 67 (19.6%) agreeing and 42 (12.3%) strongly agreeing. The findings suggest a divided perspective among respondents, with a significant portion expressing dissent, a outstanding number remaining undecided, and a minority supporting the proposed reduction. This underscores the complexity and differing views surrounding the issue of reducing CST with the common goal of reducing the cost of communication services.

The data from Table 4.8 reveals a range of opinions among survey participants concerning relief packages for private schools, highlighting the diversity of perspectives on this matter. A substantial portion, with 124 respondents (36.3%), completely disagree, while 98 respondents (28.7%) mostly disagree. Additionally, 49 respondents (14.8%) remain neutral on the matter. In contrast, 29 respondents (8.5%) partially agree, and 42 respondents (12.3%) mostly agree with the provision of relief packages for private schools. The results indicate that respondents had differing opinions, with a sizable percentage voicing disagreement, a substantial fraction expressing indecision, and a minority approving the suggested reduction.

In accordance with the data presented in Table 4.8, the analysis of responses to the statement 'Government supported entrepreneurs with disability in the Northern, North East, and Savannah regions' highlights a substantial level of disagreement, with 205 respondents (59.9%) completely disagreeing and 97 respondents (28.4%) mostly disagreeing. A small number of respondents, 7 (2.0%), remained neutral on the matter. Conversely, 22 respondents (6.4%) partially agreed, and 11 respondents (3.2%) mostly agreed with the statement. The predominant trend indicates a significant level of disagreement, implying that a considerable portion of the surveyed

population does not perceive adequate government support for entrepreneurs with disabilities in the specified regions.

As discussed under table 4.7, a number of factors may have attributed to the results in both table 4.7 and table 4.8. A notable factor is the education and sensitisation programmes by government, as well as the use of these government intervention programmes for campaigns and subject of discussions on radios and TVs during the run up to the 2021 elections. Nevertheless, the respondents were asked to disclose their sources of information concerning COVID-19 and the policies and programmes of government thereof. Their responses were analysed and presented in table 4.9 below.

Table 4.9: Sources of information concerning COVID-19

Variables	Frequency	Per cent
Tv/Radio Sources	342	29.1
Community /Local Information Centre	291	24.8
Social Media and Internet Source	207	17.6
Family/Friends Source	119	10.1
Newspaper	99	8.4
Healthcare Providers	87	7.4
NCCE	29	2.5
Total	1174	100.0

Source: Field work, 2021.

Multiple responses

From the data in table 4.9, TV/Radio was the main sources of information on COVID-19 and it accompanying government intervention policies and program. TV/Radio Sources was affirmed by the entire 342 respondents, making of 29.1% of the total observations. TV and radio have, over decades, been the most popular, vital and credible source valuable information for many Ghanaians. The foremost purpose or

objective TV and radio is to inform and educate and includes public service announcements, daily news, weather forecasts, interviews, and documentaries (Mohammed, et al., 2021; Ngonso & Chukwu, 2021). This was followed by Community /Local Information Centre and social media and internet source, recoding the frequencies of 291 and 207 respectively. Other sources of information included Family/Friends Source [frequency= 119, percentage= 10.1], Newspapers [Frequency =99, percentage = 8.4], Healthcare Providers [frequency= 87, percentage =7.4], and NCCE [frequency= 29, percentage = 2.5]. Consequently, the TV, Radio, social media, Internet Source and the Newspapers have been the major sources of COVID-19 information across the globe (Ngonso & Chukwu, 2021; Aleem, Saeed & Farooq, 2021; Mohammed, et al., 2021; Jahrir & Tahir, 2020).

4.4 The Degree to which the Government Intervention Programs on COVID-19 Affects the Social Life and Economic Development of the Residents of Bia West District

This section of the study examines the degree to which Government intervention programs on COVID-19 has affected the social and economic development of lives people in the Bia West District. The respondents were required to rate the levels or frequencies they agree or disagree with the statement provided in table 4.10 using a five-point Likert scale rating as; Undecided/Neutral =0, Strongly Disagree =1, Disagree =2, Agree = 3 and Strongly Agree = 4. The responses from the residents or respondents were analysed in mean and standard deviation, and presented in table 4.10 below

Table 4. 10: The effects of government intervention programs on COVID-19 on the social life and economic development of the residents of Bia West District

Statement	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
	Freq(%)	Freq(%)	Freq(%)	Freq(%)	Freq(%)
The relief and intervention programs have help reduced the extra financial burden on the people of Bia West District	43(12.6)	35(10)	42(12.3)	80(23.4)	142(41.5)
Relief and intervention programs have empowered the poor (especially women) and supporting income-generating activities, encouraging the entrepreneurial spirit, and reducing the vulnerability to COVID-19	55(16.1)	35(10.2)	47(13.7)	71(20.8)	134(39.2)
The relief and intervention programs by the government has helped reduced the levels of poverty and raised the standard of living as well as the earning capacity of vulnerable people in Bia West District	62(18.1)	99(28.9)	47(13.7)	35(10.2)	99(28.9)
The COVID-19 relief and intervention programs by the government has had positive effect on economic, social and infrastructural development of Bia West District	99(28.9)	105(30.7)	28(8.2)	43(12.6)	67(19.6)
The relief and intervention programs have come about skill development training, technological supports, and strategies related to better education, health and sanitation, including livelihood enhancement measures	100	121	32	28	61
The COVID-19 relief and intervention programs has positively affected the work routine, business income and profitability of the people of Bia West District	120(35.1)	101(29.5)	32(9.4)	28(8.2)	61(17.8)
The relief and intervention programs by the government has help reduced the spread of COVID-19 drastically in Bia West District	184(53.8)	99(28.9)	23(6.7)	13(3.8)	23(6.7)

Source: Field work, 2021.

Table 4.10 illustrates diverse perceptions among respondents regarding the impact of relief and intervention programs on reducing the extra financial burden in Bia West District. A notable portion, with 43 (12.6%) respondents, strongly disagree, while 35

(10%) disagree. There is some uncertainty, as indicated by 42 (12.3%) respondents who are undecided. On the positive side, 80 (23.4%) agree, and a significant majority of 142 (41.5%) strongly agree that these programs have alleviated financial burdens. The findings indicate a mixed perception among respondents, with a significant positive view but also notable disagreement and uncertainty regarding the effectiveness of relief and intervention programs in reducing financial burdens in the Bia West District.

In Table 4.10, a comprehensive analysis unfolds diverse perspectives regarding the assertion that relief and intervention programs empower the poor, particularly women, and contribute to supporting income-generating activities. This, in turn, fosters entrepreneurial spirit and reduces vulnerability to COVID-19. A notable portion of respondents, with 55 (16.1%) strongly disagreeing and 35 (10.2%) disagreeing, reflects a significant level of skepticism. On the other hand, 71 (20.8%) agree and 134 (39.2%) strongly agree, suggesting a substantial number of respondents expressing confidence in the positive impact of relief programs. The undecided category consists of 47 respondents (13.7%), indicating a level of uncertainty. The findings highlight a spectrum of opinions ranging from skepticism to confidence regarding the impact of relief and intervention programs. The uncertainty among a subset of respondents adds complexity to the overall interpretation of the data.

In the context of the government's relief and intervention programs, the diverse opinions among respondents are evident, with supporting data presented in Table 4.10. A notable portion, with 62 (18.1%) strongly disagreeing and 99 (28.9%) disagreeing, expresses skepticism about the effectiveness of these programs in reducing poverty and enhancing the standard of living and earning capacity of

vulnerable people in Bia West District. Additionally, 47 (13.7%) respondents remain undecided. On the positive side, 35 (10.2%) agree, and another 99 (28.9%) strongly agree with the impact of the government's efforts. The findings suggest a varied landscape of opinions, with a notable proportion expressing skepticism or disagreement, some remaining undecided, and a significant number acknowledging the positive impact of the government's efforts.

In light of the varied responses captured in Table 4.10, it is evident that there are diverse opinions among respondents regarding the effectiveness of COVID-19 relief and intervention programs by the government in Bia West District. A considerable portion, with 99 respondents (28.9%), strongly disagree, and an additional 105 respondents (30.7%) express disagreement. A notable 28 respondents (8.2%) are undecided. On the contrary, 43 respondents (12.6%) agree, and a significant majority of 67 respondents (19.6%) strongly agree with the positive effects of these programs. The findings suggest a diversity of perspectives, ranging from strong disagreement to strong agreement, highlighting the need for further investigation into the reasons behind varying opinions and potential areas for improvement in the government's COVID-19 relief efforts in the Bia West District.

In Table 4.10, the data reveals a range of opinions pertaining to relief and intervention programs, specifically focusing on skill development training, technological supports, and strategies for improving education, health, sanitation, and livelihood. A notable portion of respondents, with 100 (strongly disagree) and 121 (disagree), expresses disagreement. Meanwhile, 32 respondents remain undecided. On the positive side, 28 respondents agree, and 61 strongly agree. The findings suggest a mix of positive and

negative sentiments, with a need for attention to the concerns or uncertainties expressed by those who disagree or are undecided.

As evidenced by the insights in Table 4.10, the data provides a comprehensive view of the repercussions of COVID-19 relief and intervention programs on work routines, business income, and profitability in Bia West District. A notable proportion, with 120 respondents (35.1%), strongly disagree, and 101 respondents (29.5%) disagree with the statement. There are 32 respondents (9.4%) who remain undecided. On the positive side, 28 respondents (8.2%) agree, and 61 respondents (17.8%) strongly agree with the assertion. The findings highlight a range of opinions, with a notable proportion expressing negative views on the impact of COVID-19 relief and intervention programs.

The data from Table 4.10 underscores the notable level of disagreement among respondents regarding the government's relief and intervention programs, as indicated in the assessment of the statement. A significant proportion, with 184 (53.8%) strongly disagreeing and 99 (28.9%) disagreeing, indicates skepticism about the effectiveness of these programs in drastically reducing the spread of COVID-19 in Bia West District. Furthermore, 23 respondents (6.7%) are undecided on the matter. A smaller percentage, with 13 (3.8%) in agreement and 23 (6.7%) strongly agreeing, express support for the government's efforts. The findings highlight a prevailing sentiment of skepticism and disagreement among the respondents, with only a minority expressing support for the government's relief and intervention initiatives in the context of combating the spread of COVID-19 in the Bia West District.

This finding is agreement with Kumi (2020) whose finding reveals that, the state in its ability to deploy large numbers of healthcare workers and provide a whole range of essential services such as subsidies for water and electricity, free examination fees, stimulus packages and so on has shown clearly that it can do far more for its citizens than it ordinarily does.

4.4.1 The impact of the residents age, gender and level of education on their level of awareness of Government intervention programs to mitigate the spread and effect of the pandemic

Also, as part of the objectives, this study sought to determine whether the gender, age, and education levels of the respondents had any significant impact on their levels of awareness of Government intervention programs to mitigate the spread and effect of the pandemic. The rationale for this objective is to establish whether the demographic or background of the respondent had any influence on their level of awareness of Government intervention programs to mitigate the spread and effect of the pandemic. Using Independent test, the results are presented in

4.4.2 Gender and awareness of government intervention programs on COVID-19

This section of the study sought to find out whether the gender of the respondents had any significant impacts on their level of awareness of Government intervention programs on COVID-19. To achieve this objective, the respondents' background data on gender in table 4.2 was matched against their responses on the awareness of Government intervention programs on COVID-19 in table 4.7, using independent t-test.

Table 4. 11: Summary of independent t-test showing the respondents Gender and the awareness of government intervention programs on COVID-19

Sex	N	df	T	P
Male	19171.70	-0.52	0.31	
Female	16674.10			

Significant at the 0.05

Results from Table: 4.11 indicates that there is no significant difference between males and females with regards their levels of awareness on Government intervention programs on COVID-19 [$t_{(43)} = -0.52, p = .31$]. At .05 level of significance, males did not differ from that of females. The effect of gender on their levels of awareness on Government intervention programs on COVID-19 was insignificant since it failed to meet the necessary significant difference to emerge male gender superior over the female gender. That notwithstanding, the result from Table: 4. 11 is an indication that the gender of the respondents does not have significant impact on the respondents' levels of awareness on Government intervention programs on COVID-19. In other words, the respondents (residents of Bia west municipal assembly) levels their levels of awareness on Government intervention programs on COVID-19 is not influenced by their gender.

4.4.3 Respondents age and their levels of awareness on Government intervention programs on COVID-19

The rationale here is to find out whether the age of the respondents influenced their levels of awareness on Government intervention programs on COVID-19. Table: 4. 12 below present the results.

From the descriptive tables, it is realized that respondents within 41-50years had the highest mean, followed by 31-40years, with 61years and above scoring the least. However, to determine if these mean differences are significant, there was the need to resort to One-way ANOVA.

Table 4.12: Summary of one – Way ANOVA results of respondents Age and their levels of awareness on Government intervention programs on COVID-19

	Sum of Square	df	Mean Square	F	<i>p</i>
Between Groups	2208.08	6	368.00	1.00	.06
Within Groups	34707.25	351	98.25		
Total	36915.33	357			

Source: Field work, 2021.

From Table 4.12, there was an insignificant variance among the 5 groups at the 0.05 level of significance [$F_{(6, 351)} = 1.00, p = .06$]. From the (Table: 4. 13) above, the results showed that there was statistical insubstantial variance age of respondents in the levels of awareness on Government intervention programs on COVID-19. This implied that the health of respondents' age difference does not play any role on their levels of awareness on Government intervention programs on COVID-19. The result showed no significant effect of respondents' age differences to their levels of awareness on Government intervention programs on COVID-19.

4.4.4 The respondents' levels of education and levels of awareness on Government intervention programs on COVID-19

Furthermore, it was imperious to establish the relationship between the respondents „levels of education and levels of awareness on Government intervention programs on COVID-19. The study considers these levels of education as the independent variables; No formal education, Basic education, Secondary education, Diploma, Bachelor's Degree and Postgraduate levels of education, and the levels of awareness on Government intervention programs on COVID-19 as the dependent variable. The outcome of this analysis is presented in Table 4.13 below.

Table 4.13: Pearson correlation analysis between the respondents' levels of education and levels of awareness on Government intervention programs on COVID-19

Variables	Levels awareness on Government intervention programs on COVID-19	P-value
No formal education	Pearson Correlation .117*	0.01
	N 63	
Basic Education	Pearson Correlation .140*	0.00
	N 95	
Senior High School	Pearson Correlation .475**	0.05
	N 74	
Diploma level	Pearson Correlation .519*	0.01
	N 59	
Bachelor level	Pearson Correlation .603**	0.05
	N 55	
Postgraduate	Pearson Correlation .696**	0.05
	N 11	

Source: Field work, 2021.

The data in Table 4.13 shows that the respondents' levels of education (independent variables) correlate with their levels of awareness on Government intervention programs on COVID-19 (dependent variables). The general overview of Table 4.14

reveals that the respondents' levels of education have some significant impact on their levels of awareness on Government intervention programs on COVID-19.

That notwithstanding, a detailed look into the results in Table: 4.13 depicts that the respondents who had Tertiary level of education exhibited superior level of awareness on Government intervention programs on COVID-19 over than their peers who had other levels of education, This is shown by the Pearson correlation coefficient of ($r=.711$, $p<0.05$) for the respondents with Post graduate as their highest form of academic qualification, followed by the Pearson Correlation coefficient of ($r=.696$, $p<0.05$) for the for the respondents with Bachelor's Degree as their highest form of academic qualification, the ($r=.603$, $p<0.05$) for the for those with Diploma as their highest form of academic qualification. However, the respondents who had Diploma level of education or academic qualification recorded moderate level of IPC compliance. This shown by the Pearson correlation coefficient of ($r=.519$, $p<0.01$). Nevertheless, reflect with Basic Education and those with no formal education recorded the weakest relationship ($r=.117$, $p<0.01$) and ($r=.140$, $p<0.01$), respectively as shown in Table 4.13.

Overall, the result from Table 4.13 suggests that the levels of awareness on Government intervention programs on COVID-19 is largely influenced by the levels of education or academic qualifications, such that the respondents with low or no formal education exhibit low levels of awareness of Government intervention programs on COVID-19, whereas those with high level of education exhibit high levels of awareness on Government intervention programs on COVID-19. A number of factors could be attributed to these results. The obvious factor is that individuals with high levels of education may have been exposed to wider scope government

intervention programs on COVID-19 through reading, newsletters, media among several other sources than their counterparts with less or no formal education.

This finding is in direct tandem with Dankwah (2021), who argues that another major lacuna in the government's policies was its lack of attention to the fact that its citizens have a variety of socio-demographic characteristics that shape their resilience to the kind of shock that the pandemic has wrought. While on the face of it, the poor are the most vulnerable, some segments of the poor population are even more vulnerable and require special attention to ensure that they are not left to their own devices in the pandemic. The poor in rural communities, the poor in the poorer regions of Ghana, the poorly educated poor, poor women and the poor with disability all have differing needs that require state attention. Lumping the poor together as one amorphous blob denies them true access to information and social protection that the state seeks to provide its citizens.

4.5 The Implementation Challenges of the COVID-19 Intervention Programs in the Bia West District

Moreover, the third and final objective of this study explored the respondents' opinion on some of the Implementation Challenges of Government Intervention Programs on COVID-19 in the Bia West District. The respondents were required to rate the levels or frequencies they agree or disagree with the statement provided in Table 4.14 using a five-point Likert scale rating as; Undecided/Neutral =0, Strongly Disagree =1, Disagree =2, Agree = 3 and Strongly Agree = 4. The responses from the residents or respondents were analysed in mean and standard deviation, and presented in table 4.14 below

Table 4.14: The implementation challenges of government intervention programs on COVID-19 in the Bia West District

Implementation Challenges	Strongly Disagree Freq(%)	Disagree Freq(%)	Neutral Freq(%)	Agree Freq(%)	Strongly Agree Freq(%)
Politicisation of the programme	12(3.5)	11(3.2)	9(2.6)	55(16.1)	255(74.56)
Lack of Cooperation or inadequate participation of the local citizenry	19(5.6)	39(11.4)	39(11.4)	45(13.15)	200(58.5)
Overly central government control over the programmes	29(8.5)	35(10.2)	51(14.9)	77(22.5)	150(43.9)
Lack of proper research and needs of assessment of the local people needs and wants	78(22.8)	58(16.4)	22(6.4)	77(22.5)	107(31.3)
Inadequate logistics for mass education and reaching out to people who might be needing the intervention most	77(22.5)	59(17.3)	33(9.7)	77(22.5)	96(28.1)
Inadequate Funding for the implementation of programmes	89(26.0)	55(16.1)	28(8.2)	75(21.9)	95(27.7)
Low level of education among the local people	129(37)	55(16.1)	28(8.8)	75(21.9)	55(16.1)
Poor implementation planning	101(29.5)	62(18.1)	51(14.9)	51(14.9)	77(22.5)
Inadequate mass education and Sensitization of the People on the some of the intervention programmes	97(28.3)	92(26.9)	45(13.2)	31(9.0)	77(22.5)

Source: Field work, 2021.

The challenges encountered in implementing government intervention programs for COVID-19 in the Bia West District are elucidated in Table 4.14. Respondents

expressed diverse views on the politicization of the program, with 12 (3.5%) strongly disagreeing, 11 (3.2%) disagreeing, and 9 (2.6%) maintaining a neutral stance. In contrast, a considerable number of respondents, with 55 (16.1%) agreeing and a significant majority of 255 (74.56%) strongly agreeing, pointed to the politicization of the program as a challenge. The findings indicate a prevalent concern among respondents about the politicization of COVID-19 intervention programs, with a substantial majority expressing strong agreement on this being a notable challenge.

The data from Table 4.14 illustrates the perceived challenges in the implementation of government intervention programs on COVID-19 in the Bia West District, particularly related to the lack of cooperation or inadequate participation of the local citizenry. A notable proportion of respondents, with 19 (5.6%) strongly disagreeing and 39 (11.4%) disagreeing, express a level of disagreement. However, a significant majority, with 200 (58.5%) strongly agreeing and 45 (13.15%) agreeing, suggests a prevailing sentiment of agreement regarding this challenge. There seems to be a substantial division of opinions among respondents. While a significant number acknowledge challenges related to citizen cooperation, an even larger majority perceives the issue as a valid concern, indicating that addressing this challenge should be a priority in enhancing the effectiveness of government interventions in the context of COVID-19 in the Bia West District.

Table 4.14 showcases the differing opinions among respondents regarding the extent of central government control over the programs. A noteworthy portion of respondents, with 29 (8.5%) strongly disagreeing and 35 (10.2%) disagreeing, express reservations about overly central government control. On the other hand, a significant portion, with 77 (22.5%) agreeing and a substantial majority of 150 (43.9%) strongly

agreeing, seems to accept or endorse such control. 51 (14.9%) respondents take the neutral stance.

The data suggests a diversity of perspectives, with a substantial portion expressing reservations about central government control, while a significant majority appears to be in favour of such control.

As highlighted in Table 4.14, the findings point towards diverse perspectives regarding the deficiency in conducting proper research and needs assessment of the local community's needs and desires. A notable portion, with 78 (22.8%) respondents completely disagreeing and 58 (16.4%) mostly disagreeing with the statement. Additionally, 22 (6.4%) respondents express uncertainty about this issue. On the contrary, 77 (22.5%) agree and a significant majority of 107 (31.3%) strongly agree. The results suggest a lack of consensus among respondents, with a substantial number expressing disagreement and uncertainty about the adequacy of research and needs assessment in the local community. On the other hand, a considerable portion, particularly a majority, agrees with the statement, emphasizing the importance of conducting thorough research and needs assessments.

In the context of addressing inadequate logistics for mass education and reaching out to those who might need the intervention most, diverse perspectives among respondents are highlighted in Table 4.14. A notable portion, with 77 (22.5%), completely disagree, while 59 (17.3%) mostly disagree. Additionally, 33 (9.7%) respondents express uncertainty. On the agreement side, 77 (22.5%) agree, and a significant majority of 96 (28.1%) strongly agree with the statement. The findings highlight a range of opinions, with notable levels of both support and opposition. The

presence of uncertainty indicates that some respondents may require additional information or clarification on the issue.

The data presented in Table 4.14 underscores the diversity of opinions among respondents concerning the insufficient funding allocated for program implementation. A notable portion, with 89 (26.0%) completely disagreeing and 55 (16.1%) mostly disagreeing, expresses dissatisfaction. Additionally, 28 (8.2%) respondents are neutral or unsure, while 75 (21.9%) mostly agree and a significant majority of 95 (27.7%) completely agree with the statement. The conclusions suggest a range of perspectives, with a substantial proportion expressing dissatisfaction and a significant majority indicating agreement with the assertion that funding for program implementation is inadequate.

The findings presented in Table 4.14 underscore the diversity of perspectives regarding the low level of education among local people. A significant portion, with 129 respondents (37%), completely disagree, while 55 respondents (16.1%) mostly disagree. On the contrary, a smaller percentage, with 28 respondents (8.8%), agree, and a substantial proportion of 75 respondents (21.9%) strongly agree with the statement. Additionally, 55 respondents (16.1%) remain unsure or indecisive. The findings suggest a diversity of perspectives, with a significant proportion disagreeing with the assertion, a notable segment strongly agreeing, and a portion remaining uncertain.

Table 4.14 illustrates the heterogeneous views among respondents concerning issues in implementation planning. A notable portion, with 29.5% (101 respondents), completely disagree, while 18.1% (62 respondents) mostly disagree with this assertion. On the contrary, 14.9% (51 respondents) agree, and an equal proportion

strongly agrees (14.9%, 51 respondents). Additionally, 22.5% (77 respondents) express uncertainty or indecision on this matter. The conclusions drawn are that there is a lack of consensus among respondents, with a substantial number expressing disagreement, a significant but equal proportion expressing agreement, and a notable percentage remaining uncertain or indecisive.

The data in Table 4.14 reveals a spectrum of perspectives regarding the effectiveness of mass education and sensitization in relation to intervention programs. A notable portion, with 97 (28.3%) strongly disagreeing and 92 (26.9%) disagreeing, suggests dissatisfaction with the current efforts. Additionally, 45 (13.2%) respondents remain neutral, 31 (9.0%) agree, and a substantial majority of 77 (22.5%) strongly agree with the intervention programs. Despite the dissatisfaction expressed by some respondents, the fact that a significant majority (22.5%) strongly agree with the intervention programs indicates overall support for these initiatives. This positive response could be a valuable asset in refining and strengthening future interventions.

4.6 Conclusion

The chapter presented the analysis of the data gathered from the primary and secondary sources. This was done in line with the objectives of the study. The data gathered have been analysed, discussed and interpreted by the researcher in an attempt to find answers to the questions study the asked. The chapter began with the demographic data of respondents. The chapter revealed the challenges of implementation of covid-19 interventions as well as its impact on livelihood and socio-economic development in the Bia West District. The chapter revealed politicization, lack cooperation, poor planning among others as the challenges of the implementations of covid-19 interventions in the Bia West District. The summary of

the findings, conclusions of the study and recommendations are discussed in the next chapter



CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMENDATIONS

5.0 Introduction

The study assessed COVID-19 intervention by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges in the Bia West District of Western north of Ghana. This section of the study dealt with the summary of key findings of the study, the conclusions of the study, research implications as well as recommendations for further studies.

5.1 Summary of the Study

This study sought to attain four specific objectives, as follows:

1. To find out the level of awareness of Government intervention programs to mitigate the spread and effect of the of COVID-19 among the residents of Bia West District
2. To examine the degree to which the Government intervention programs on COVID-19 affects the social life and economic development of the residents of Bia West District.
3. To assess the impact of the residents age, gender and level of education on their level of awareness of Government intervention programs to mitigate the spread and effect of the pandemic
4. To find out the implementation challenges of Government intervention programs on COVID-19 in the Bia West District

5.2 Summary of the Major Findings

5.2.1 Awareness of government intervention programs to mitigate the spread and effect of the of COVID-19 among the residents of Bia West District

The study found that nearly all the respondents were awareness of the government interventions and programmes on COVID-19. A number of factors may have adduced this result. Key among such factors included the weekly state of the nation address by the president of the Republic of Ghana, public campaigns and educations by the CSOs, NGOs and the media. Other factors like the lockdowns, restrictions of movements, and the closure of boarders have intimated public curiosity of the citizenry on the adversities of COVID-19 outbreak. Some of the government interventions and programmes on COVID-19 mentioned by the respondents included Free water, Provision of cooked and uncooked food to the vulnerable, Reduced electricity tariff, Free COVID-19 testing, Free COVID-19 vaccine, financial supports to businesses, tax waiver on income taxes of frontline workers, the Coronavirus Alleviation Program Business Support Scheme (CAPBuSS), reduction of CST from 9% to 5% to reduce the cost of communication services, relief packages for private schools, However, about four per cent of them claimed never to have heard or been aware of any government interventions and programmes on COVID-19.

5.2.2 The degree to which the government intervention programmes on COVID-19 affects the social life and economic development of the residents of Bia West District

This study found that the relief and intervention programs have help reduced the extra financial burden on the people of Bia West District, empowered the poor (especially women) and overall had positive effect on the local economy, social and infrastructural development of the Bia West District. For instance, the government of

Ghana expanded infrastructure by building new Community-Based Health Planning Service (CHIPS) compounds in the Bia West District.

5.2.3 The impact of the residents age, gender and level of education on their level of awareness of Government intervention programs to mitigate the spread and effect of the pandemic

It was revealed that the age, gender and educational level of the respondents has no effect because information was disseminated on radio, television as well as social media platforms. The free meals for the poor and vulnerable, free water and the 50% electricity tariff to life line users and other government interventions were properly promoted by the media outlet, civil society organisations (CSOs) and non-governmental organisations at the local level.

5.2.4 The implementation challenges of government intervention programs on Covid-19 in the Bia West District

The study found politicisation of the programme, lack of cooperation or inadequate participation of the local citizenry and overly central government control over the programmes as some of the implementation challenges face by government in rolling out the intervention programs for COVID-19 in the Bia West District

Other challenges include lack of proper research and needs of assessment of the local people needs and wants, inadequate logistics for mass education and reaching out to people who might be needing the intervention most and inadequate funding for the implementation of programmes.

Moreover, low level of education among the local people, and poor implementation planning as some of the implementation challenges face by government in rolling out the intervention programs for COVID-19 in the Bia West District

5.3 Conclusion

The outbreak of Covid-19 pandemic has jeopardized livelihoods of people and socio-economic development of their communities. In wake of mitigating such effects government made available several relief packages and social intervention. The purpose of the study was to assess the COVID-19 interventions in Ghana; its implementation challenges as well as its impact on the livelihood and socio-economic development in the Bia West District of the Western North Region of Ghana.

The study concludes that, the implementation of the programmes came with a challenges such as; politicization of the programme, lack of cooperation or inadequate participation of the local citizenry, inadequate logistics for mass education and reaching out to people who might be needing the intervention most, and inadequate funding for the implementation of programs. Further, the high level of awareness of COVID-19 intervention programmes by the government in the Bia West District demonstrates the positive impact that government's publicity machinery contributed to the overall strategy of mitigating the spread of the pandemic. Additionally, the intervention programmes on COVID-19 by the state had had positive affect the social life and economic development of the residents of Bia West District. For instance, some of the programmes such as financial assistance to start-up businesses empowered the poor – mostly women. Also, the free water and subsidized electricity by the state encouraged the entrepreneurial spirit of people who otherwise felt hopeless in the midst of the uncertainty. The challenge mainly had to do with lack of

knowledge on the state intervention programmes, largely driven by illiteracy. As extensively discussed in chapter 4, many of the people who had little or no idea of government intervention and support programmes on COVID-19 were not formally educated. In effect, the state intervention in the Bia West District was largely positive, although there were challenges relative to implementation, such as over centralization, multiple actors (state, political parties, religious groups, etc) and politicization. Some of these are in sync with earlier studies on the challenges of government intervention on COVID-19. Also, the implementation challenges reflect the theoretical assumptions of the top-down model and the political systems theory where state official subordinate other actors in the implementation chain. This work thus extends the discourse, contributes to the literature with a focus on the rural border communities.

5.4 Recommendations

Based on the findings and conclusions, the study recommends the following:

First, the Government of Ghana, through the Ministry of Health and all appropriate institutions and stakeholders should continue with the mass education.

Second, the Government of Ghana should institute a policy implementation team and improve upon the way policies are organised in the country.

Third, the Government of Ghana should ensure resource adequacy and improve upon communication relative to COVID-19.

Fourth, the government should also speed up the implementation of all policies, programmes and establish a database where the citizenry can easily access information.

5.5 Recommendations for Future Research

The following recommendation was therefore made for future research:

Since this study was limited to only Bia West District in the Western North Region of Ghana, future research with a bigger sample size is needed to properly understand COVID-19 interventions by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges.



REFERENCES

- Açikgöz, Ö. & Günay, A. (2020). The early impact of the Covid-19 pandemic on the global and Turkish economy. *Turkish Journal of Medical Sciences*, 50(SI-1), 520-526.
- Adarkwah, M. A. (2021). I'm not against online teaching, but what about us? ICT in Ghana post Covid-19. *Education and Information Technologies*, 26(2), 1665-1685.
- Adegboye, O. A., Adekunle, A. I., Pak, A., Gayawan, E., Leung, D. H., Rojas, D. P., & Eisen, D. P. (2021). Change in outbreak epicentre and its impact on the importation risks of COVID-19 progression: A modelling study. *Travel Medicine and Infectious Disease*, 40(9), 101- 188.
- Adjei, P., Afriyie-Mensah, J., Ganu, V. J., Pupilampu, P., Opoku-Asare, B., Dzefi-Tettey, K., & Agyei-Nkansah, A. (2020). Clinical characteristics of COVID-19 patients admitted at the Korle-Bu Teaching Hospital, Accra, Ghana. *Ghana Medical Journal*, 54(4), 33-38.
- Aduhene, D. T. & Osei-Assibey, E. (2021). Socio-economic impact of COVID-19 on Ghana's economy: Challenges and prospects. *International Journal of Social Economics*, 5(12), 12-18.
- Afulani, P. A., Gyamerah, A. O., Aborigo, R., Nutor, J., Malechi, H., Laar, A., ...& Awoonor-Williams, J. J. (2020). Perceived preparedness to respond to the COVID-19 pandemic: A study with healthcare workers in Ghana. *Journal of Global Health Science*, 16(4), 10-24.
- Allam, Z. & Jones, D. S. (2020). Pandemic stricken cities on lockdown. Where are our planning and design professionals [now, then and into the future]? *Land use Policy Journal*, 97, 104-105.
- Amewu, S., Asante, S., Pauw, K. & Thurlow, J. (2020). The economic costs of COVID-19 in Sub-Saharan Africa: Insights from a simulation exercise for Ghana. *The European Journal of Development Research*, 32, 1353–1378.
- Amir, A. (2020). Public policy implementation: Study on educational budgeting of palopo. *Journal La Sociale*, 1(1), 5-11.
- Amoah, L. G. A. (2021). COVID-19 and the state in Africa: The state is dead, long live the state. *Administrative Theory & Praxis*, 43(3), 355-365.
- Asamoah, J. K. K., Owusu, M. A., Jin, Z., Oduro, F. T., Abidemi, A., & Gyasi, E. O. (2020). Global stability and cost-effectiveness analysis of COVID-19 considering the impact of the environment: using data from Ghana. *Chaos, Solitons & Fractals*, 140, 110-113.

- Askekere, G., & Blay Arko, A. (2021). The politics of mental health amidst COVID-19 in Ghana. *African Journal of Social Science Education*, 1(1), 92-113.
- Asante, L. A., & Mills, R. O. (2020). Exploring the socio-economic impact of COVID-19 pandemic in marketplaces in urban Ghana. *Africa Spectrum*, 55(2), 170-181.
- Atkeson, A. (2020). What will be the economic impact of COVID-19 in the US? Rough estimates of disease scenarios. Retrieved on 30th August, 2021 from: <https://www.nber.org/papers/w26867>
- Aucoin, P. (2017). New public management and new public governance: Finding the balance. *Governance*, 3(2), 115–137.
- Azar, A., Gholamrezaei, D., Fard, D., & Hosseini, H. K. (2013). Higher education policy analysis in the fifth development plan using system dynamics. *Journal of Education*, 5(4), 22-29.
- Baker, T. H. & Judge, K. (2020). How to help small businesses survive COVID-19. *Columbia Law and Economics Working Paper*, 620.
- Baldwin, R., & Di Mauro, B. W. (2020). Economics in the time of COVID-19: A new eBook. *VOX CEPR Policy Portal*, 7, 2-3.
- Baruch, Y. & Holtom, B. C. (2008). Survey response rate levels and trends in organizational research. *Human Relations*, 61(8), 1139-1160.
- BBC New (23rd March 2020). Coronavirus: Markets for Accra on shut down for disinfection exercise against covid-19. Retrieved on 17th February 2021 from: <https://www.bbc.com/pidgin/tori-51945455>
- Becker, S., Bryman, A. & Ferguson, H. (Eds.). (2012). *Understanding research for social policy and social work 2E: Themes, methods and approaches*. Policy press.
- Bell, E., Bryman, A. & Harley, B. (2018). *Business research methods*. Oxford University Press.
- Bennett, C. J. & Howlett, M. (1992). The lessons of learning: Reconciling theories of policy learning and policy change. *Policy Sciences*, 25(3), 275-294.
- Bouckaert, G., & Kuhlmann, S. (2016). Introduction: Comparing local public sector reforms: Institutional policies in context. In *Local public sector reforms in times of crisis* (pp. 1-20). London: Palgrave Macmillan.

- Bouckaert, G., Nakrosis, V., & Nemeč, J. (2011). Public administration and management reforms in CEE: Main trajectories and results. Network of Institutes and Schools of Public Administration in Central and Eastern Europe. *The NISPAcee Journal of Public Administration and Policy*, 4(1), 9.
- Braimah, A. I. (2020). On the politics of lockdown and lockdown politics in Africa: COVID-19 and partisan expedition in Ghana. *J. Polit. Sci. Int. Rel.*, 3(3), 44-55.
- Bromley, D. W. (1990). The ideology of efficiency: searching for a theory of policy analysis. *Journal of Environmental Economics and Management*, 19(1), 86-107.
- Burns, T. R. & Carson, M. (2002). European Union, neo-corporatist, and pluralist governance arrangements: lobbying and policy-making patterns in a comparative perspective. *International Journal of Regulation and Governance*, 2(2), 129-175.
- Carnoy, M. (2014). *The state and political theory*. Princeton University Press.
- Chabanet, D., & Lemoine, L. (2021). The social and solidarity economy in France faced with the challenges of social entrepreneurship. In B. Gidron, and A. Domaradzka (Eds.), *The new social and impact economy*, springer international publishing (pp. 141–160). Springer: Cham, Switzerland.
- Chater, S. N. & Simpson, K. H. (1987). Response rates. *Anaesthesia*, 42(3), 328-328.
- Chen, Y., Liu, Q. & Guo, D. (2020). Emerging coronaviruses: genome structure, replication, and pathogenesis. *Journal of Medical Virology*, 92(4), 418-423.
- Christensen, T. & Lægreid, P. (2017). *Transcending new public management*. London: Taylor & Francis.
- Demuyakor, J. (2020). Coronavirus (COVID-19) and online learning in higher institutions of education: A survey of the perceptions of Ghanaian international students in China. *Online Journal of Communication and Media Technologies*, 10(3), e202018.
- Dente, B., & Fareri, P. (1993). *Deciding about waste facilities citing lessons from cases of success in five European countries: Guidelines for case-study analysis*. Milan: Istituto per la Ricerca Sociale.
- Dogra, A., Goyal, B., & Sharma, A. M. (2020). Corona virus: A novel outbreak. *Biomedical and Pharmacology Journal*, 13(1), 05-10.
- Dupuy, C. & Zittoun, P. (2018). Methods of French policy studies. *Policy Analysis in France*, 11, 79-90.

- Dziany, K. F. (2011). The effects of bureaucracy on policy implementation in the public sector: A case study of Ghana Audit Service, Ashanti Region. (MBA Thesis), Kwame Nkrumah University of Science and Technology.
- Eaton, S. E. (2017). Comparative analysis of institutional policy definitions of plagiarism: A pan-Canadian university study. *Interchange*, 48(3), 271-281.
- Edwards III, G. C. (1980). *Implementing public: Policy*. Washington, DC: Congressional Quarterly Press.
- Egonmwan, J. A. (1991). *Public policy analysis: Concepts and applications*. SMO Aka and Brothers Press.
- Emery, Y., Giaque, D. & Ritz, A. (2009). Institutional policies and reforms of public administration. In S. Nahrath and F. Varone, (Eds), *Rediscovering public law and public administration in comparative policy analysis: A tribute to Peter Knoepfel* (pp. 159-176). Lausanne, Bern: Haupt.
- Engelstad, F., Larsen, H., Rogstad, J. & Steen-Johnsen, K. (2017). Introduction: The public sphere in change. Institutional perspectives on neo-corporatist society. In F. Engelstad & A. Hagelund (Eds.), *Institutional change in the public sphere* (pp. 1-21). De Gruyter Open Poland.
- Ezugwu, U. M. (2013). Policy implementation and national development: A study of Japan and Nigeria railway policies. *Public Policy*, 35(6), 152-268.
- Fischer, F. & Miller, G. J. (Eds.). (2017). *Handbook of public policy analysis: Theory, politics, and methods*. New York: Routledge.
- Flynn, N. (2005). Explaining the new public management: The importance of context. In *New Public management* (pp. 69-88). New York: Routledge.
- Fong, M. W., Gao, H. , Wong, J. Y., Xiao, J., Shiu, E. Y. C., Ryu, S. & Cowling, B. J. (2020). Nonpharmaceutical measures for pandemic influenza in nonhealthcare settings: Social distancing measures. *Emerging Infectious Diseases*, 26(5), 976–984
- Frederickson, H. G., Smith, K. B., Larimer, C. W. & Licari, M. J. (2018). *The public administration theory primer*. New York: Routledge.
- Ghana statistical service report (2019).
- Gralinski, L. E., & Menachery, V. D. (2020). Return of the Coronavirus: 2019-nCoV. *Viruses*, 12(2), 135.
- Gyasi, R. M. (2020). Fighting Covid-19: Fear and internal conflict among older adult in Ghana. *Journal of Gerontological Social Work*, 63(6-7), 688-690.

- Heywood, A. (2015). *Political theory: An introduction*. Macmillan International Higher Education.
- Homburg, V. (2008). *Understanding e-government: Information systems in public administration*. Routledge.
- Horn, M., & Horn, M. J. (1995). *The political economy of public administration: Institutional choice in the public sector*. Cambridge University Press.
- Hox, J. J., & Boeije, H. R. (2005). Data collection, primary vs. secondary. *Encyclopedia of Social Measurement*, 1(1), 593-599.
- Hupe, P. L. (2011). The thesis of incongruent implementation: Revisiting Pressman and Wildavsky. *Public Policy and Administration*, 26(1), 63-80.
- International Monetary Fund [IMF] (2020). COVID-19 Crisis poses threat to financial stability. Retrieved on September 12, 2021 from: <https://blogs.imf.org/2020/04/14/COVID-19-crisis-poses-threat-to-financial-stability/>.
- Jensen, C., Johansson, S. & Löfström, M. (2015). Policy implementation in the era of accelerating projectification: Synthesizing Matland's conflict-ambiguity model and research on temporary organizations. *Public Policy and Administration*, 33(1), 95-105.
- John Hopkins University (2020). *New cases of COVID-19 in world countries*. Johns Hopkins Coronavirus Resource Centre. Retrieved September 12, 2021 from: <https://coronavirus.jhu.edu/data/new-cases>.
- John, P. (2013). *Analysing public policy*. London: Routledge.
- Johnson, T. P. & Wisler, J. S. (2012). Response rates and nonresponse errors in surveys. *Jama*, 307(17), 1805-1806.
- Kagan, V., Rossini, E., & Sapounas, D. (2013). *Data sources*. New York, NY: Springer.
- Kenu, E., Frimpong, J. & Koram, K. (2020). Responding to the COVID-19 pandemic in Ghana. *Ghana Medical Journal*, 54(2), 72-73.
- Kerlinger, F. N. (1973). *Review of research in education*. London: Sage.
- Kesmodel, U. S. (2018). Cross-sectional studies-what are they good for? *Acta obstetrica et gynecologica Scandinavica*, 97(4), 388-393.
- Kettunen, P. (2016). Implementing public policy. *Scandinavian Journal of Public Administration*, 20(2), 119-124.

- Kim, K. H. (2020). COVID-19. *International Neurourology Journal*, 2(1), 19-24. <https://doi.org/10.5213/inj.2020edi.001>
- Knoepfel, P., Larrue, C., Varone, F. & Hill, M. (2007). *Public policy analysis*. New York: Policy Press.
- Knoepfel, P., Larrue, C., Varone, F. & Hill, M. (2011). *Public policy analysis*. New York: Policy Press.
- Kothari, C. R. (2004). *Research methodology: Methods and techniques*. Nairobi: New Age International.
- Kraemer, K. L. (1991). *Introduction*. Paper presented at the information system research challenge: survey research method. New Delhi: Sage.
- Kraft, M. E., & Furlong, S. R. (2019). *Public policy: Politics, analysis, and alternatives*. CQ Press.
- Kraus, S., Clauss, T., Breier, M., Gast, J., Zardini, A. & Tiberius, V. (2020). The economics of COVID-19: initial empirical evidence on how family firms in five European countries cope with the corona crisis. *International Journal of Entrepreneurial Behavior & Research*, 11(12)20-25
- Kuhlmann, S., & Wollmann, H. (2019). *Introduction to comparative public administration: Administrative systems and reforms in Europe*. Edward Elgar Publishing.
- Lane, J. E. (2002). *New public management: an introduction*. Routledge.
- Li, Q., Guan, X., Wu, P., Wang, X., Zhou, L., Tong, Y., ...& Xing, X. (2020). Early transmission dynamics in Wuhan, China, of novel coronavirus-infected pneumonia. *New England Journal of Medicine*, 382(13), 1199-1207
- Li, T., Wei, C., Li, W., Hongwei, F. & Shi, J. (2020). *Beijing union medical college hospital on " pneumonia of novel coronavirus infection" diagnosis and treatment proposal (V2. 0)*. Med J Peking Union Med Coll Hosp.
- Liu, T., Hu, J., Kang, M., Lin, L., Zhong, H., Xiao, J., ...& Deng, A. (2020). *Transmission dynamics of 2019 novel coronavirus (2019-nCoV)*.
- Liu, W., Yue, X.-G., & Tchounwou, P. B. (2020). Response to the COVID-19 Pandemic: The Chinese experience and implications for other countries. *International Journal of Environmental Research and Public Health*, 17(7), 2304. <https://doi.org/10.3390/ijerph17072304>
- Livingston, E. & Bucher, K. (2020). Coronavirus disease 2019 (COVID-19) in Italy. *Jama*, 323(14), 1335-1335.

- Makinde T. (2005). Problems of policy implementation in developing nations: the Nigerian experience. *Journal of Social Sciences*, 11(1), 63-69.
- Mandavilli, A. (2020). Wondering about social distancing? *The New York Times*. Retrieved from <https://www.nytimes.com/2020/03/16/smarter-living/coronavirus-social-distancing.html>
- Martinez-Alvarez, M., Jarde, A., Usuf, E., Brotherton, H., Bittaye, M., Samateh, A. L., ...& Roca, A. (2020). COVID-19 pandemic in west Africa. *The Lancet Global Health*, 8(5), e631-e632.
- Mathiasen, D. G. (1999). The new public management and its critics. *International Public Management Journal*, 2(1), 90-111.
- Meng, X. (2013, May). Scalable simple random sampling and stratified sampling. In *International conference on machine learning*, (pp. 531-539). PMLR.
- Ministry of Health (2020). Ghana COVID-19 Emergency Preparedness and Response Project & Additional Financing. Retrieved from <https://www.moh.gov.gh/wp-content/uploads/2016/02/FINAL-COVID-19-ESMF.pdf> (17th February 2021)
- National Health Commission of China (2020a). Prevent guideline of 2019-nCoV. Retrieved on August 1 2020: <http://www.nhc.gov.cn/xcs/yqfkdt/202001/bc661e49b5bc487dba182f5c49ac445b.shtml>
- National Health Commission of China. (2020b). An update on the incidence of pneumonia with novel coronavirus infection as of 24:00 on 31 January 2020. <http://www.nhc.gov.cn/xcs/yqfkdt/202002/84faf71e096446fdb1ae44939ba5c528.shtml> (accessed on 1 August 2020).
- OECD (2020). *Supporting people and companies to deal with the COVID-19 virus: Options for an immediate employment and social-policy response*. San Francisco: OECD.
- Olsen, C., & St George, D. M. M. (2004). Cross-sectional study design and data analysis. *College Entrance Examination Board*, 26(03), 2006.
- Omair, A. (2015). Selecting the appropriate study design for your research: Descriptive study designs. *Journal of Health Specialties*, 3(3), 153.
- Osei-Tutu, A., Affram, A. A., Mensah-Sarbah, C., Dzokoto, V. A., & Adams, G. (2021). The impact of COVID-19 and religious restrictions on the well-being of Ghanaian Christians: The perspectives of religious leaders. *Journal Of Religion And Health*, 3, 1-18.

- Ou, F., Wu, H., Yang, Y., Tan, W., Zhang, J., & Gu, J. (2020). Countermeasures for rapid spread of new coronavirus pneumonia in Wuhan. Retrieved on 2 August 2020 from: *Chinese General Practicing Nursing*. <http://kns.cnki.net/kcms/detail/14.1349.R.20200131.1319.002>.
- Owusu-Fordjour, C., Koomson, C. K., & Hanson, D. (2020). The impact of Covid-19 on learning-the perspective of the Ghanaian student. *European Journal of Education Studies*, 7(3), 88- 101.
- Paavola, J. (2008). *Explaining multi-level environmental governance*. SRI Papers (Sustainability Research Institute, Leeds University), 10.
- Paki, A. E. & Kimiebi I. E. (2011). Public policy in Nigeria: An implementation paradox. *Journal of Social Science and Public Policy*, 3
- Pal, L. (2012). *Frontiers of governance: The OECD and global public management reform*. Springer.
- Pal, L. A. (2009). The OECD and global public management reform. *Croat. Pub. Admin.*, 9, 1057.
- Pandis, N. (2014). Cross-sectional studies. *American Journal of Orthodontics and Dento facial Orthopedics*, 146(1), 127-129.
- Patton, C. V. & Sawicki, D. S. (1993). *Basic methods of policy analysis and planning*. New York: Routledge.
- Pauly, R., Verschuere, B., De Rynck, F., & Voets, J. (2021). Changing neo-corporatist institutions? Examining the relationship between government and civil society organizations in Belgium. *Public Management Review*, 23(8), 1117-1138.
- Peiris, J. S. M., Guan, Y., & Yuen, K. Y. (2004). Severe acute respiratory syndrome. *Nature Medicine*, 10(12), S88-S97.
- Quarm, R. S., Sam-Quarm, R. & Sam-Quarm, R. (2021). The socio-economic ramifications of the COVID-19 pandemic: The Case of Ghana. *Journal of Economics and Business*, 4(1).
- Remuzzi, A. & Remuzzi, G. (2020). COVID-19 and Italy: what next? *The Lancet*, 395(10231), 1225-1228.
- Roseveare, D. (2008). *Addressing the challenges of policy implementation: key elements distilled from OECD experience*. A paper delivered at OECD conference, Mexico. Retrieved from <https://www.oecd.org/education/school/41883366.pdf> (16th July 2021)

- Saunders, M., Lewis, P. & Thornhill, A. (2007). *Research methods*. Business Students (4th ed.). London: Pearson Education Limited.
- Schedler, K., & Proeller, I. (2000). *New public management*. Stuttgart/Wien.
- Schmitter, P. C. (2015). Will the present crisis revive the neo-corporatist Sisyphus? *British Journal of Industrial Relations*, 43(4), 635–658.
- Serwaa, D., Lamptey, E., Appiah, A. B., Senkyire, E. K., & Ameyaw, J. K. (2020). Knowledge, risk perception and preparedness towards coronavirus disease-2019 (COVID-19) outbreak among Ghanaians: A quick online cross-sectional survey. *The Pan African Medical Journal*, 35(44).
- Setia, M. S. (2016). Methodology series module 3: Cross-sectional studies. *Indian Journal of Dermatology*, 61(3), 261.
- Strier, R., & Feldman, G. (2018). Reengineering social work's political passion: Policy practice and neo-liberalism. *British Journal of Social Work*, 48(3), 751-768.
- Subar, A. F., Ziegler, R. G., Thompson F. E., Johnson, C. C. Joel L. Weissfeld, D. R, Katherine H. K., and Richard B. H.(2001). Is shorter always better? Relative importance of questionnaire length and cognitive ease on response rates and data quality for two dietary questionnaires. *American Journal of Epidemiology*, 153(4), 404 – 409.
- Sukamolson, S. (2007). Fundamentals of quantitative research. *Language Institute Chulalongkorn University*, 2, 1-20.
- Sun, P., Lu, X., Xu, C., Sun, W., & Pan, B. (2020). Understanding of COVID-19 based on current evidence. *Journal of Medical Virology*, 92(6), 548-551.
- Thissen, W. A., & Walker, W. E. (2013). *Public policy analysis*. Springer.
- Tri, N. M., & Tam, L. T. (2021). The Impact of the COVID–19 pandemic on socio-economic. *Psychology and Education Journal*, 58(4), 763-771.
- UNCTAD. (2020). *Coronavirus (COVID-19): News, analysis and resources*. United Nations Geneva.
- VanVeen, A. (2020). From neo-corporatism to regulatory governance. *Information and Power in History: Towards a Global Approach*, 4(1), 5-9
- Velavan, T. P. & Meyer, C. G. (2020). The COVID-19 epidemic. *Tropical Medicine & International Health*, 25(3), 278.

- Wang, C., & Wang, X. (2020). Prevalence, nosocomial infection and psychological prevention of novel coronavirus infection. *Chin General Pract Nurs*, 18, 2-3.
- Wang, X., & Cheng, Z. (2020). Cross-sectional studies: strengths, weaknesses, and recommendations. *Chest*, 158(1), S65-S71.
- Wei, Q. & Ren, Z. (2020). Disinfection measures for pneumonia foci infected by novel coronavirus in 2019. *Chin J Disinfect*, 37, 59-62.
- Weible, C. M., & Nohrstedt, D. (2012). *Coalitions, learning and policy change: Routledge handbook of public policy*. New York: Routledge.
- Weible, C. M., Heikkila, T., DeLeon, P. & Sabatier, P. A. (2012). Understanding and influencing the policy process. *Policy Sciences*, 45(1), 1-21.
- WHO (2020a). Coronavirus disease 2019 (COVID-19) situation report- 1. Retrieved on 15th December, 2020 from: https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200121-sitrep-1-2019-ncov.pdf?sfvrsn=20a99c10_4
- WHO (2020b). Coronavirus disease 2019 (COVID-19) situation report- 61. Retrieved on 15th December, 2020 from: https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200321-sitrep-61-COVID-19.pdf?sfvrsn=ce5ca11c_2 (on 15th December, 2020).
- WHO (2020c). Coronavirus disease 2019 (COVID-19) situation report -86. Retrieved on 15th December, 2020 from: https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200415-sitrep-86-covid-19.pdf?sfvrsn=c615ea20_6 (on 15th December, 2020).
- WHO (2020d). Novel Coronavirus–China. Retrieved on 15th December, 2020 from: <https://www.who.int/csr/don/12-january-2020-novel-coronavirus-china/en/> .
- WHO (2020e). Novel Coronavirus-Japan (ex-China). <https://www.who.int/csr/don/17-january-2020-novel-coronavirus-japan-ex-china/en/> (accessed on 1 August, 2020).
- WHO (2020f). Statement on the second meeting of the international health regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV). <https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international>
- Wildavsky, A. (1979). Policy as its own cause. In *The art and craft of policy analysis* (pp. 62-85). Palgrave Macmillan, London.
- Wu, Y. C., Chen, C. S., & Chan, Y. J. (2020). The outbreak of COVID-19: An overview. *Journal of the Chinese Medical Association*, 83(3), 217.

- Xu, X., Chen, P., Wang, J., Feng, J., Zhou, H., Li, X., ...&Hao, P. (2020). Evolution of the novel coronavirus from the ongoing Wuhan outbreak and modelling of its spike protein for risk of human transmission. *Science China Life Sciences*, 63(3), 457-460.
- Yamani, Y. (1964). *Sample size determination: Research methods and thesis writing. A multi-disciplinary approach/research design and methodology*, 100. Albany, NY: State of New York University Press.
- Yawson, A. E., Oduro-Mensah, E., Tetteh, J., Adomako, I., Adjei-Mensah, E., Owoo, C., ...&Lartey, M. (2020). Clinical features of COVID-19 in Ghana: symptomatology, illness severity and comorbid non-communicable diseases. *Ghana Medical Journal*, 54(4s), 23-32.
- Yin, R. K. (2003). Designing case studies. *Qualitative Research Methods*, 5, 359-386.
- Zaki, A. M., Van Boheemen, S., Bestebroer, T. M., Osterhaus, A. D., &Fouchier, R. A. (2012). Isolation of a novel coronavirus from a man with pneumonia in Saudi Arabia. *New England Journal of Medicine*, 367(19), 1814-1820.
- Zhou, P., Yang, X. L., Wang, X. G., Hu, B., Zhang, L., Zhang, W., ...& Chen, H. D. (2020). *Discovery of a novel coronavirus associated with the recent pneumonia outbreak in humans and its potential bat origin*. BioRxiv.
- Zhu, N., Zhang, D., Wang, W., Li, X., Yang, B., Song, J., ...& Niu, P. (2020). A novel coronavirus from patients with pneumonia in China, 2019. *New England Journal of Medicine*, 382(8), 727-733.
- Zittoun, P. (2014). *The political process of policymaking: A pragmatic approach to public policy*. Springer.

Appendices

APPENDIX A

Questionnaire

Strictly Confidential, for Academic Research Only

**ASSESSING THE COVID-19 INTERVENTION BY THE GOVERNMENT OF
GHANA, ITS IMPACT ON THE LIVELIHOOD AND SOCIO-ECONOMIC
DEVELOPMENTS OF RURAL FOLKS, AS WELL AS ITS
IMPLEMENTATION CHALLENGES AT BIA WEST DISTRICT**

Dear Respondent,

I am currently undertaking a survey to assess the Covid-19 intervention by the government of Ghana, its impact on the livelihood and socio-economic developments of rural folks, as well as its implementation challenges at Bia West District. I would be pleased if you could kindly spare about 30 minutes of your time to answer the following questions in this survey.

This study is purely for academic purposes and all information and responses provided will be treated confidential and anonymous.

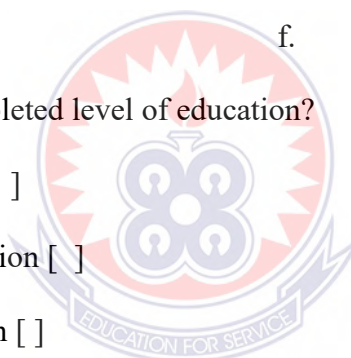
Thank you.

SECTION A

Respondents' Background Information

Please tick [] the responses that best correspond to your opinion

1. What is your gender?
 - a. Male []
 - b. Female []
2. How old are you?
 - a. Less than 20 years []
 - b. 20 - 30 years []
 - c. 31 – 40 years []
 - d. 41 – 50 years []
 - e. 51 – 60 years []
 - f. above 60 years []
3. What is the highest completed level of education?
 - a. Basic education []
 - b. Secondary education []
 - c. Tertiary education []
 - d. Professional certificate []
 - e. No formal education []
4. What is your occupation
5. How long have you lived/stayed in this district?
 - a. Less than 1 year []
 - b. 2 – 5 years []
 - c. 6 – 10 years []
 - d. 11 –15 years []
 - e. 16 – 20 years []
 - f. 21years + []



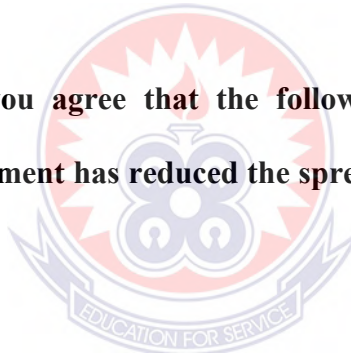
SECTION B

LEVEL OF AWARENESS OF GOVERNMENT INTERVENTION PROGRAMS TO MITIGATE THE SPREAD AND EFFECT OF THE OF COVID-19 AMONG THE RESIDENTS OF BIA WEST DISTRICT

The follows questions are targeted at assessing your level of awareness regarding Government intervention programs to mitigate the spread and effect of the of COVID-19. Please tick in the space [] as they apply to you.

1. Are you aware of any government intervention on COVID-19?
 - a. Yes []
 - b. No []

In your opinion, do you agree that the following intervention programs as provided by the government has reduced the spread and effect of the of COVID-19 in your community?



2. Free water
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []
3. Reduced electricity tariff
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []

4. Financial supports to businesses
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []
5. Provision of cooked and uncooked food to the vulnerable
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []
6. The Coronavirus Alleviation Program Business Support Scheme (CAPBuSS)
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []
7. Relief packages for private schools.
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []
8. Tax waiver on income taxes of frontline workers
 - a. Completely Disagree [],
 - b. Mostly Disagree []
 - c. partially agree []
 - d. Mostly Agree []



9. Reduction of CST from 9% to 5% to reduce the cost of communication services.

- a. Completely Disagree [],
- b. Mostly Disagree []
- c. partially agree []
- d. Mostly Agree []

10. Free COVID-19 testing

- a. Completely Disagree [],
- b. Mostly Disagree []
- c. partially agree []
- d. Mostly Agree []

11. Free COVID-19 Vaccine

- a. Completely Disagree [],
- b. Mostly Disagree []
- c. partially agree []
- d. Mostly Agree []



12. What are your sources of information concerning COVID-19?

- a. Newspaper []
- b. Tv/Radio sources []
- c. Social media and internet source []
- d. Family/Friends source []
- e. Scientific Article and journals source []
- f. Healthcare providers []
- g. Other (please specify).....

SECTION C

THE DEGREE TO WHICH THE GOVERNMENT INTERVENTION PROGRAMS ON COVID-19 AFFECTS THE SOCIAL LIFE AND ECONOMIC DEVELOPMENT OF THE RESIDENTS OF BIA WEST DISTRICT.

This section examines the degree to which Government intervention programs on COVID-19 has affected you're the social life and economic development of your District.

13. The relief and intervention programs by the government has help reduced the spread of COVID-19 drastically in Bia West District

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []



14. The relief and intervention programs have help reduced the extra financial burden on the people of Bia West District

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

15. The COVID-19 relief and intervention programs by the government has had positive effect on economic, social and infrastructural development of Bia West District
- a. Undecided/Neutral []
 - b. Strongly Disagree []
 - c. Disagree []
 - d. Agree []
 - e. Strongly Agree []
16. The COVID-19 relief and intervention programs has positively affected the work routine, business income and profitability of the people of Bia West District
- a. Undecided/Neutral []
 - b. Strongly Disagree []
 - c. Disagree []
 - d. Agree []
 - e. Strongly Agree []
17. Relief and intervention programs have empowered the poor (especially women) and supporting income-generating activities, encouraging the entrepreneurial spirit, and reducing the vulnerability to covid-19
- a. Undecided/Neutral []
 - b. Strongly Disagree []
 - c. Disagree []
 - d. Agree []
 - e. Strongly Agree []
18. The relief and intervention programs by the government has helped reduced the levels of poverty and raised the standard of living as well as the earning capacity of vulnerable people in Bia West District

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

19. The relief and intervention programs have come about skill development training, technological supports, and strategies related to better education, health and sanitation, including livelihood enhancement measures

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []



SECTION D

THE IMPLEMENTATION CHALLENGES OF GOVERNMENT INTERVENTION PROGRAMS ON COVID-19 IN BIA WEST DISTRICT.

Please indicate the degree to which you agree or disagree with the following statements. Please tick in the space [] as provided.

In your opinion, do you agree that the following underlisted factor have hampered with the implementations of the Government intervention programs on COVID-19 in your community?

20. Inadequate Funding for the implementation of programmes

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []



21. Politicisation of the programme

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

22. Lack of Cooperation or inadequate participation of the local citizenry

- a. Undecided/Neutral []
- b. Strongly Disagree []

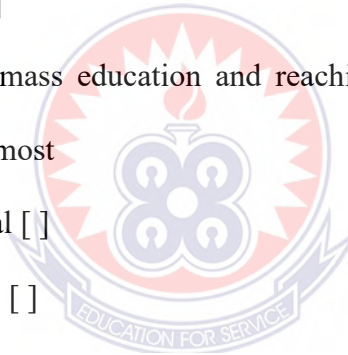
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

23. Inadequate mass education and Sensitization of the People on the some of the intervention programmes

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

24. Inadequate logistics for mass education and reaching out to people who might be needing the intervention most

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []



25. Poor implementation planning

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

26. Low level of education among the local people

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

27. Lack of proper research and needs of assessment of the local people needs and wants

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

28. Overly central government control over the programmes

- a. Undecided/Neutral []
- b. Strongly Disagree []
- c. Disagree []
- d. Agree []
- e. Strongly Agree []

