

Ghanaians' acceptance of security-related restrictions faces test with COVID-19 lockdown

Afrobarometer Dispatch No. 351 | Daniel Armah-Attoh, Josephine Appiah-Nyamekye Sanny, and Edem Selormey

Summary

Effective Monday, 30 March, parts of Greater Accra and Ashanti regions – the areas of Ghana most affected by the COVID-19 pandemic – were placed on lockdown, in accordance with President Nana Akufo-Addo's announcement in his fourth address to the nation on measures to fight the new coronavirus (Myjoyonline, 2020).

The rapid spread of COVID-19 around the globe has led many countries to institute a variety of prevention and mitigation measures, in some cases including drastic steps curtailing citizens' civil liberties. An example is the Chinese government's near-total lockdown of Wuhan, where the virus first emerged – a measure widely credited with helping stop its rapid spread in that country. Other countries, including several in Africa, have since adopted similar policies as they battle to contain the pandemic.

As of March 29, Ghana had recorded 152 cases of COVID-19 – most of them among recent arrivals from other countries – and five deaths (Ghanaweb, 2020). Facing sharp increases and an anticipated rapid spread, the Trade Union Congress, the Ghana Medical Association, and many others called on the government to declare a lockdown (Emmanuel, 2020; Ibrahim, 2020). Others opposed such a drastic step, arguing that the country's socioeconomic characteristics – including a large informal sector, high rates of unemployment and communal living, and limited access to water and sanitation services – would hinder the success of such a policy.

Although the president stated in his address that residents in the locked-down areas could go out for "essential" errands such as buying food, banking, and using public toilets, the announcement led to panic buying of food items and cooking fuel, with resultant price hikes in the affected areas (Mubarik, 2020).

How prepared are Ghanaians for a lockdown?

In late 2019, before "threat to public security" would have brought to mind a virus, most respondents in a national Afrobarometer survey said they would accept restrictions on their freedom of movement, such as curfews and roadblocks, if public safety were threatened. Residents of Greater Accra and Ashanti are the first to put this willingness to the test.

The lockdown will also challenge the resilience of significant portions of the population who lack ready access to running water and toilets as well as the resources, even in ordinary times, to provide for their basic necessities.

Afrobarometer survey

Afrobarometer is a pan-African, nonpartisan survey research network that provides reliable data on African experiences and evaluations of democracy, governance, and quality of life. Seven rounds of surveys were completed in up to 38 countries between 1999 and 2018. Round 8 surveys in 2019/2020 are planned in at least 35 countries. Afrobarometer conducts

face-to-face interviews in the language of the respondent's choice with nationally representative samples.

The Afrobarometer team in Ghana, led by the Ghana Center for Democratic Development (CDD-Ghana), interviewed 2,400 adult Ghanaians between 16 September and 3 October 2019. A sample of this size yields country-level results with a margin of error of +/-2 percentage points at a 95% confidence level. Previous surveys were conducted in Ghana in 1999, 2002, 2004, 2008, 2012, 2014, and 2017.

Key findings

- In late 2019, three-quarters (75%) of Ghanaians said the government should be able to curtail people's movement in the face of threats to security. The willingness to accept government restrictions on movement was lower in Greater Accra (64%) than in the Ashanti region (79%).
- A lockdown may pose particular challenges for Ghanaians affected by "lived poverty." Almost three-fourths (72%) of respondents said they went without a cash income at least once during the year preceding the survey, while one-third (32%) said they went without needed medical care and one-fourth (26%) reported experiencing shortages of food.
- Only three in 10 Ghanaians (30%) have running water inside their homes or compounds. A similar proportion (33%) source their water from public standpipes.
 - Urban residents (44%) and the relatively well-off (37%) are more likely to have access to piped water inside the house or compound than rural residents (14%) and the poor (24%).
- Fewer than half (46%) of Ghanaians have toilet facilities in their homes or compounds. A majority of Ghanaians (54%) use latrines outside their compounds or have no access to latrines at all.
- Comparing the two regions affected by the lockdown, residents in Ashanti region are far less likely than those in Greater Accra to have piped water (39% vs. 62%) and toilets (56% vs. 68%) in their homes or compounds.
- Even among citizens who experienced lived poverty and lacked ready access to piped water and toilets, most expressed support – in principle, as of late 2019 – for the government's right to restrict people's movements to protect public security.

Willingness to accept restrictions for the sake of security

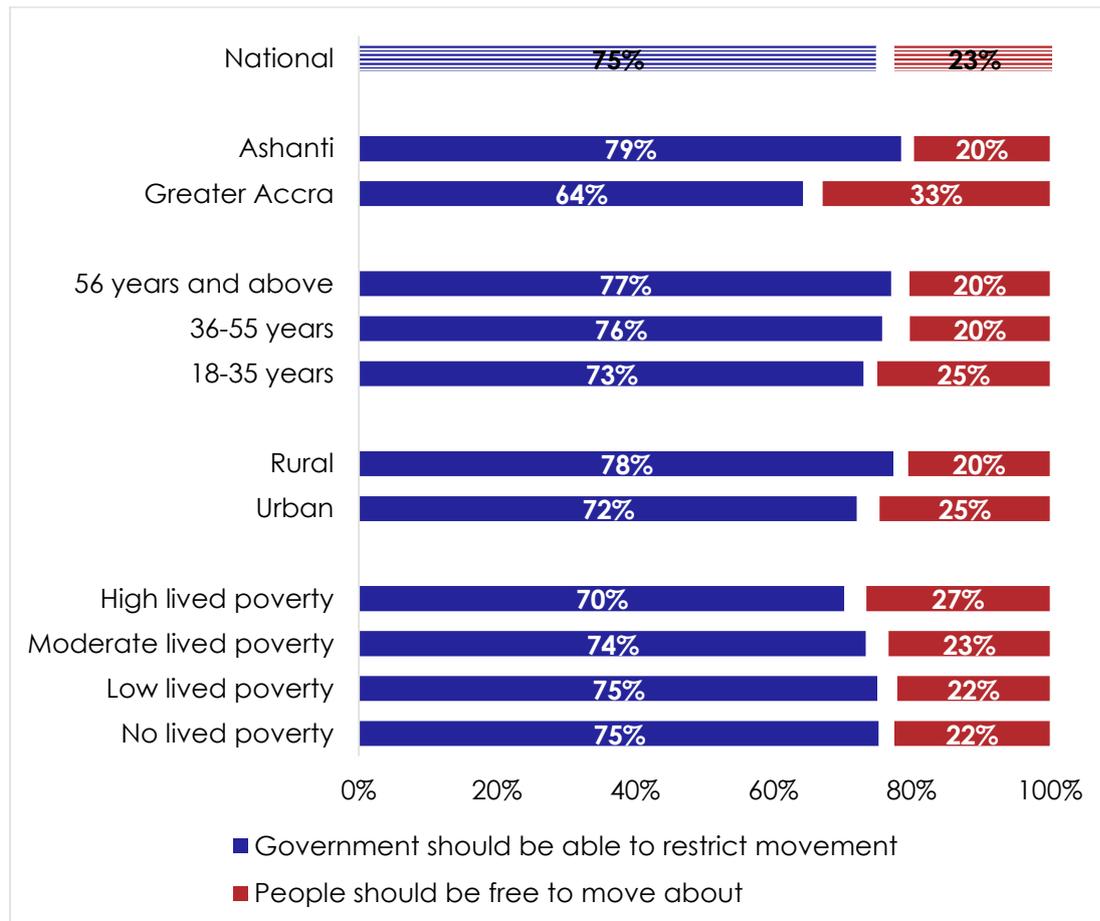
In late 2019, the Afrobarometer Round 8 survey presented respondents with the following two statements and asked them to indicate which was closer to their views:

1. *Even if faced with threats to public security, people should be free to move about the country at any time of day or night.*
2. *When faced with threats to public security, the government should be able to impose curfews and set up special roadblocks to prevent people from moving around.*

Three-quarters (75%) of Ghanaians said they supported the government's right to impose curfews and set up special roadblocks to prevent people from moving around when faced with threats to public security (Figure 1). About a quarter (23%) opposed any restriction on freedom of movement.

The willingness to accept such restrictions was widespread across key socio-demographic groups, though slightly lower in cities than in rural areas (72% vs. 78%) and among those experiencing high lived poverty¹ (70%) compared to those who are economically better off (74%-75%). Although a majority of residents in both Greater Accra and Ashanti regions, where most of the COVID-19 cases have been recorded, were ready to accept restrictions on their right to free movement, acceptance was lower in Greater Accra (64%) than in the Ashanti region (79%).

Figure 1: Willingness to trade freedom of movement for security | Ghana | 2019



Respondents were asked: Which of the following statements is closest to your view?

Statement 1: Even if faced with threats to public security, people should be free to move about the country at any time of day or night.

Statement 2: When faced with threats to public security, the government should be able to impose curfews and set up special roadblocks to prevent people from moving around.

Lockdown and effects on the poor

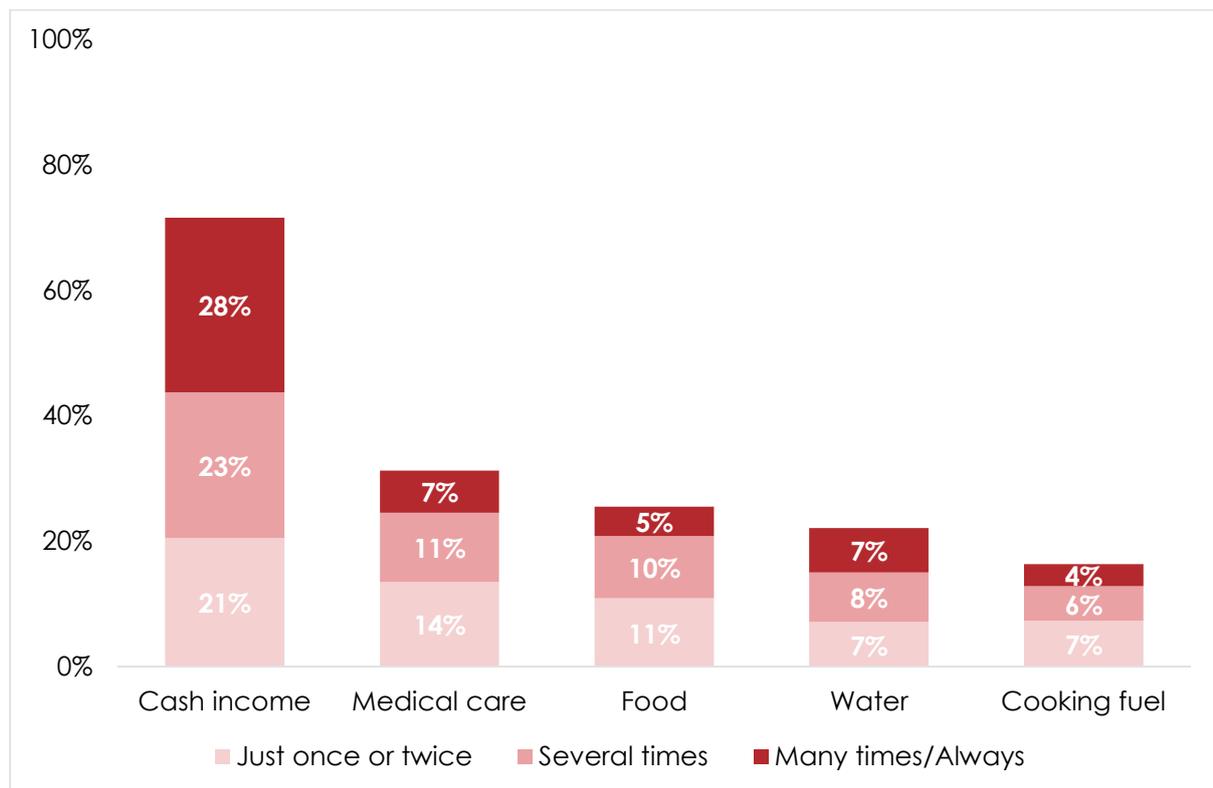
News of the presidential directive to “stay at home” was met with a mad rush in the markets, resulting in skyrocketing prices, as people in the affected areas tried to stock up on food and other essential items. But how many Ghanaians can afford to fill their carts? In the Afrobarometer survey conducted in September-October 2019, we asked citizens how often

¹ Afrobarometer’s Lived Poverty Index (LPI) measures respondents’ levels of material deprivation by asking how often they or their families went without basic necessities (enough food, enough water, medical care, enough cooking fuel, and a cash income) during the preceding year. For more on lived poverty, see Mattes, Dulani, & Gyimah-Boadi (2016).

they or their families had gone without basic necessities (enough food, enough water, medical care, enough cooking fuel, and a cash income) during the preceding year. The three most common forms of deprivation reported by Ghanaians were lack of a cash income, medical care, and food (Figure 2).

Almost three-fourths (72%) of respondents said they went without a cash income at least once during the year preceding the survey, including 28% who did so “many times” or “always.” One-third (32%) said they went without needed medical care, while one in four (26%) reported going without enough food. Fewer respondents reported experiencing shortages of water (22%) and cooking fuel (17%).

Figure 2: Went without basic necessities | Ghana | 2019

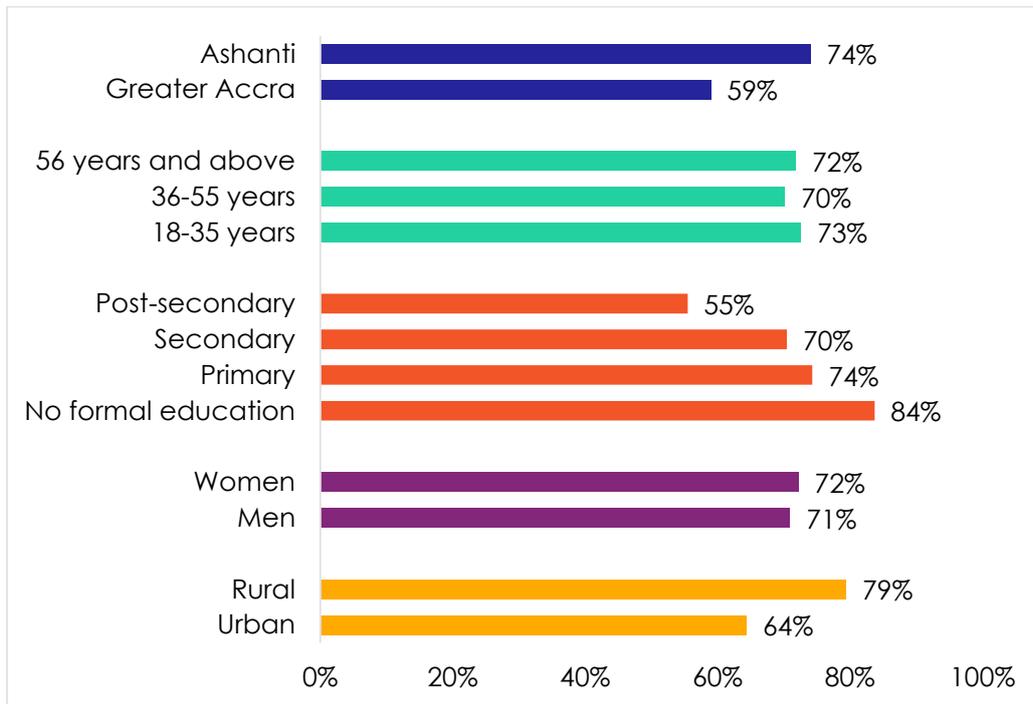


Respondents were asked: Over the past year, how often, if ever, have you or anyone in your family gone without: Enough food to eat? Enough clean water for home use? Medicines or medical treatment? Enough fuel to cook your food? A cash income?

The experience of going without a cash income, medical care, and food was about equally common among all age groups and both genders, but was far more common among rural residents and the uneducated compared to urban residents and those with higher levels of education (figures 3, 4, and 5).

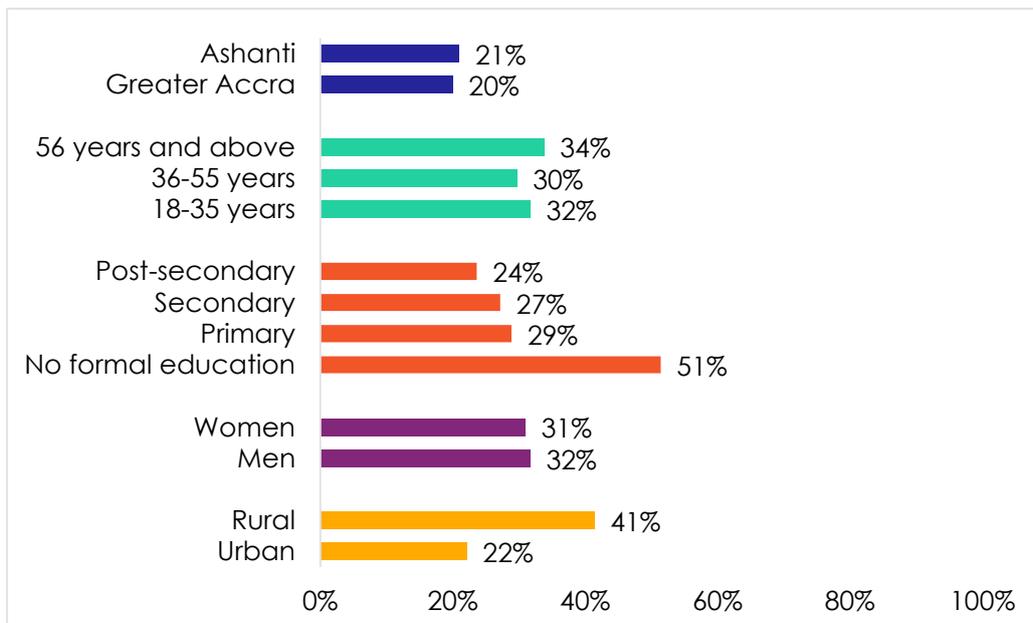
Deprivation of medical care and food was twice as common among those with no formal education than among those with post-secondary education. Regionally, more residents of Ashanti region than Greater Accra reported having gone without a cash income (74% vs. 59%) and food (26% vs. 20%).

Figure 3: Went without a cash income | by socio-demographic group | Ghana | 2019



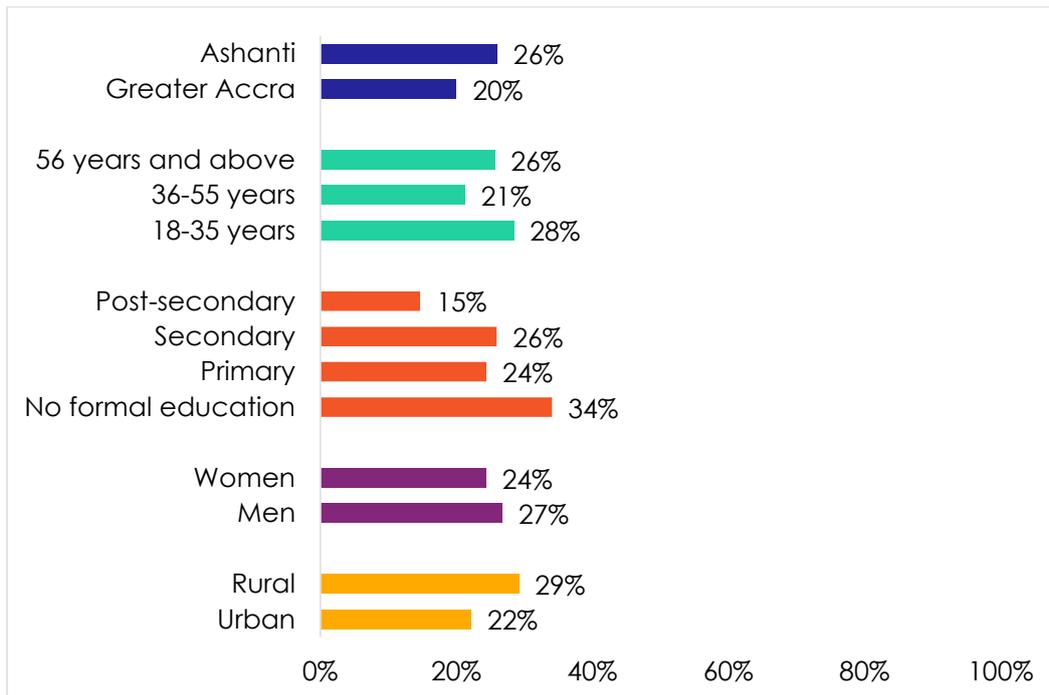
Respondents were asked: Over the past year, how often, if ever, have you or anyone in your family gone without a cash income? (% who said "just once or twice," "several times," "many times," or "always")

Figure 4: Went without medical care | by socio-demographic group | Ghana | 2019



Respondents were asked: Over the past year, how often, if ever, have you or anyone in your family gone without medicines or medical care? (% who said "just once or twice," "several times," "many times," or "always")

Figure 5: Went without enough food | by socio-demographic group | Ghana | 2019



Respondents were asked: Over the past year, how often, if ever, have you or anyone in your family gone without enough food to eat? (% who said “just once or twice,” “several times,” “many times,” or “always”)

Is the lockdown likely to pose sanitation challenges?

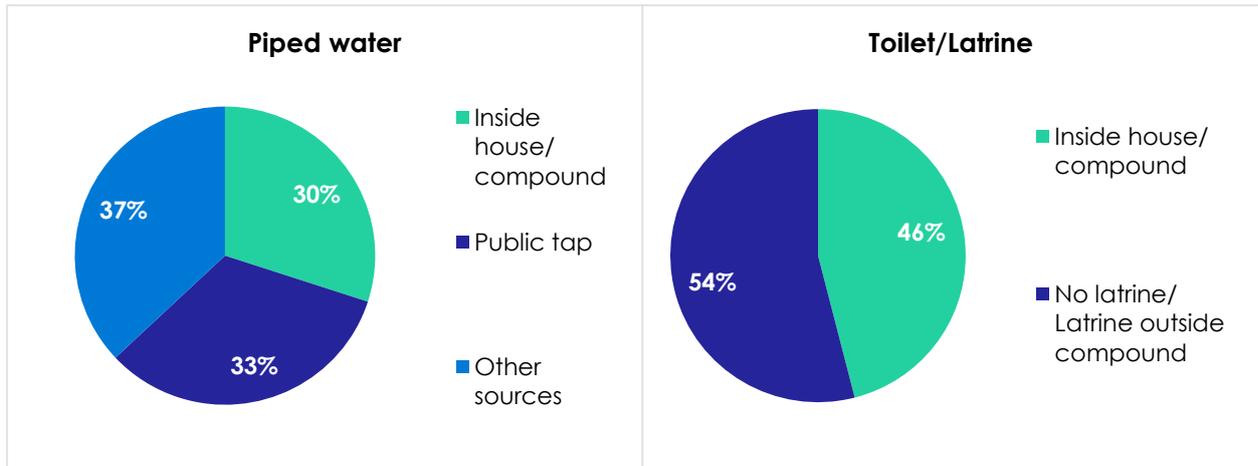
As the world struggles to “flatten the curve” of the COVID-19 pandemic, the World Health Organization and other experts preach frequent handwashing under running water and proper hygiene as the best protective measures against the spread of the virus. However, the Afrobarometer survey shows that only three in 10 Ghanaians (30%) have piped water inside their houses or in their compounds (Figure 6). One-third (33%) depend on public taps or standpipes for their water needs, while 37% rely on other sources, such as a well, a spring, bottled or “sachet” water, surface water, etc.

In addition, fewer than half (46%) of Ghanaians have a toilet or latrine in their house or compound. A majority (54%) use latrines outside their compounds or have no access to latrines.

Little wonder that in his announcement of the lockdown, the president granted persons in the affected areas some exemptions to enable them to procure essentials (which is likely to include water for those who access it from public standpipes), go to the bank, or use a public toilet.

Urbanites are three times as likely as rural residents to have access to piped water inside the house or the compound (44% vs. 14%) (Figure 7). However, almost the same proportions in both urban (30%) and rural (33%) settlements depend on public taps or standpipes for piped water. As might be expected, access to piped water in the house or compound decreases with one’s experience of poverty (37% among the best-off vs. 24% of those with high lived poverty). Comparing the two lockdown regions, residents in Ashanti region are far less likely to have piped water in their houses or compounds than those in Greater Accra (39% vs. 62%). About equal percentages get their water from public taps or standpipes.

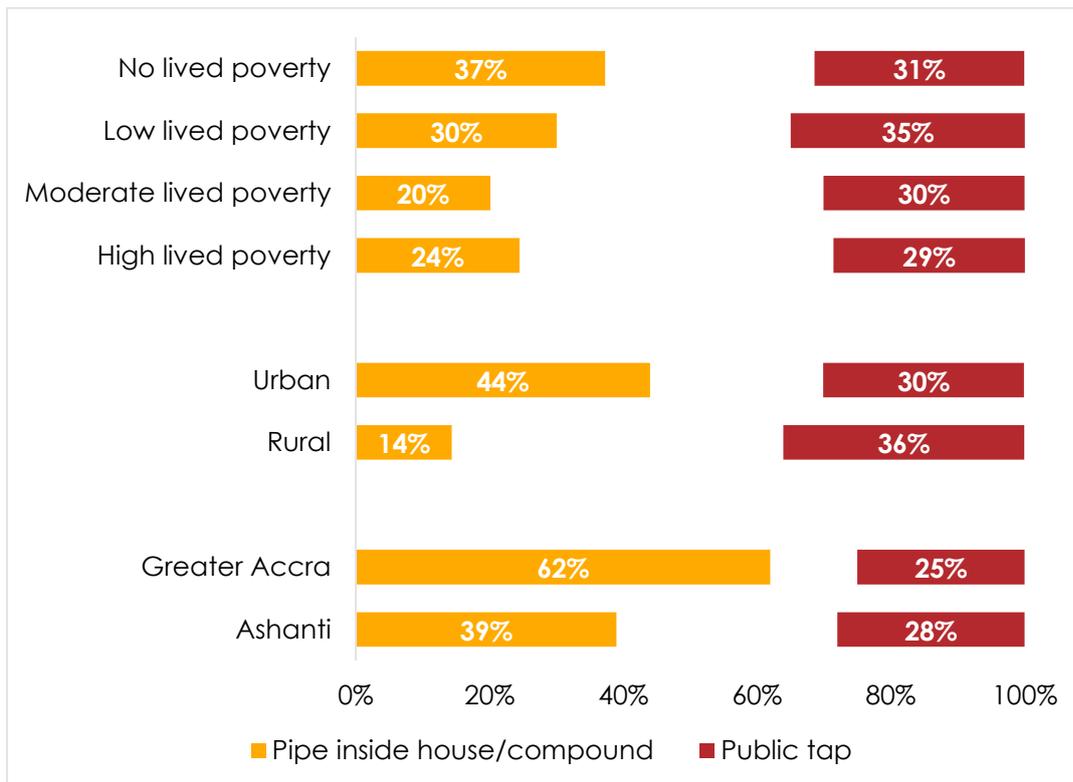
Figure 6: Point of access to water and toilet | Ghana | 2019



Respondents were asked:

Please tell me whether each of the following are available inside your house, inside your compound, or outside your compound: Your main source of water for household use?
 Do you have a toilet, water closet or latrine available for your use? [If yes:] Is it inside your house, inside your compound, or outside your compound, or is there none available?

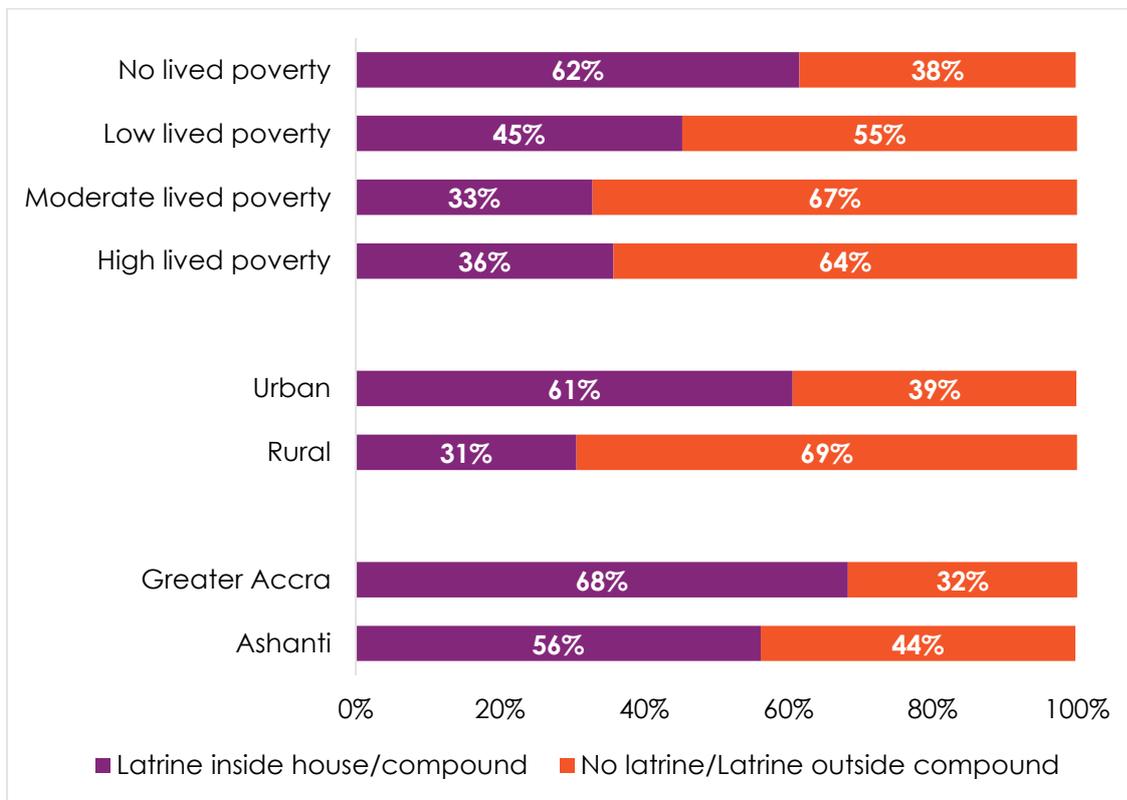
Figure 7: Source of water for household use | by rural-urban residency, lived poverty and region | Ghana | 2019



Respondents were asked: What is your main source of water for household use?

Rural residents are 30 percentage points more likely than urban residents to have to resort to public latrines or to lack access to latrines altogether (69% vs. 39%). And in the two regions most impacted by COVID-19, about one-third or more depend on latrines outside their compounds or lack access to latrines (32% in Greater Accra, 44% in Ashanti) (Figure 8).

Figure 8: Location of toilet or latrine | by lived poverty, rural-urban residency, and region | Ghana | 2019



Respondents were asked: Do you have a toilet, water closet or latrine available for your use? [If yes:] Is it inside your house, inside your compound, or outside your compound, or is there none available?

Deprivation doesn't weaken support for government right to limit movement

Even among Ghanaians who experienced lived poverty and lacked ready access to piped water and toilets, support was strong, in late 2019, for the government's right to restrict people's movements to protect public safety.

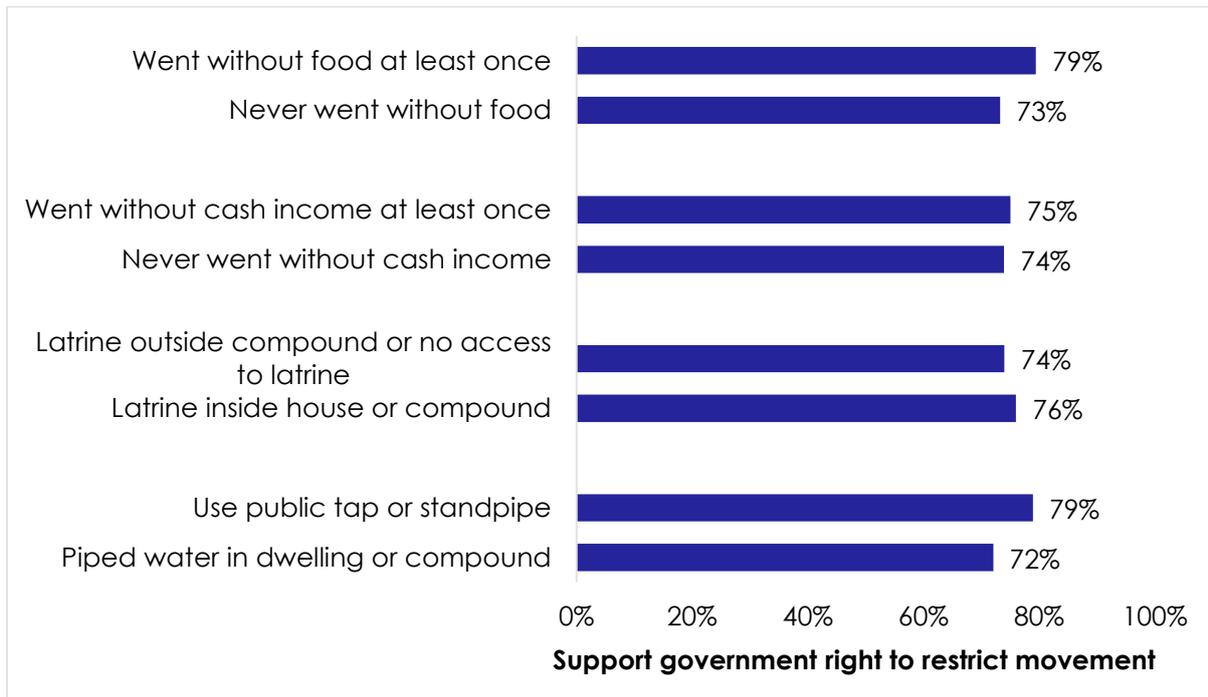
Respondents who had gone without a cash income during the previous year were just as supportive of such restrictions as those who had not (75% vs. 74%). Similarly, citizens who

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depend on latrines outside their compounds or have no access to latrines at all were about as likely to endorse the government's right to limit movement as were those who have toilet facilities in their homes or compounds (74% vs. 76%) (Figure 9).

In fact, individuals who had gone without enough food at least once during the previous year were somewhat more likely to endorse the government's right to limit movement (79%, vs. 73% among those who had not experienced food shortages), as were citizens who rely on public pipes for water (79%) compared to those with running water in their homes or compounds (72%).

Figure 9: Willingness to trade freedom of movement for security | by point of access to water/toilet and deprivation of cash/food | Ghana | 2019



Respondents were asked: Which of the following statements is closest to your view?
 Statement 1: Even if faced with threats to public security, people should be free to move about the country at any time of day or night.
 Statement 2: When faced with threats to public security, the government should be able to impose curfews and set up special roadblocks to prevent people from moving around.
 (% who “agreed” or “agreed very strongly” with Statement 2)

Conclusion

In principle, most Ghanaians are willing to accept restrictions on their freedom of movement in times of crisis. In Greater Accra and Ashanti region, this attitude now faces the test of the COVID-19 pandemic and government measures to contain it. While our data suggest that a majority of citizens are likely to adhere to the lockdown directive, one should bear in mind that significant proportions of the population – one in four citizens nationwide, one in three in Greater Accra, and one in five in Ashanti – expressed opposition, as of late 2019, to restrictions on their movements even in the face of a security threat.

Survey findings on Ghanaians' resource and infrastructure limitations are also cause for concern as anti-COVID-19 measures take effect. For substantial numbers of citizens who are not able to cover their basic necessities even in ordinary times, confronting a lockdown without adequate reserves is a frightening prospect. And for the many who lack access to running water and toilets in their homes and compounds, the most important preventive measures against the coronavirus will be a challenge.

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Afrobarometer, a nonprofit corporation with headquarters in Ghana, is a pan-African, non-partisan research network. Regional coordination of national partners in about 35 countries is provided by the Ghana Center for Democratic Development (CDD-Ghana), the Institute for Justice and Reconciliation (IJR) in South Africa, and the Institute for Development Studies (IDS) at the University of Nairobi in Kenya. Michigan State University (MSU) and the University of Cape Town (UCT) provide technical support to the network.

Financial support for Afrobarometer Round 8 has been provided by Sweden via the Swedish International Development Cooperation Agency, the Mo Ibrahim Foundation, the Open Society Foundations, the William and Flora Hewlett Foundation, and the U.S. Agency for International Development (USAID) via the U.S. Institute of Peace.

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Afrobarometer Dispatch No. 351 | 30 March 2020