Solidarity and Social Behaviour: how did this help communities to manage COVID-19 pandemic?

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Abstract

Purpose – During the coronavirus (COVID-19) pandemic lockdowns, stay at home or work from home, many have argued that the westernised non-pharmaceutical interventions (NPI) do not provide remedial in low-income countries like Nigeria, where informal job seekers, street traders, informal labourers and artisans depend mainly on the informal economy. By applying social solidarity (SS) and community-based approach (CBA), the authors evaluate individual acts (trust, altruism and reciprocity) during the lockdown and how these practices evolve from individual approaches to collective actions.

Design/methodology/approach – This study reflects on pragmatism research paradigm that enables researchers to maintain both subjectivity in their reflections and objectivity in data collection and analysis. The authors adopt a qualitative method through purposeful and convenience sampling procedure. Data were analysed thematically to identify elements of SS, individual acts, collective or community actions and perceptions.

Findings – The findings reveal that COVID-19 had a disproportionate impact (lack of food and a fall in daily income) on workers, informal job seekers, informal businesses operators and the poor households. As such, the study developed a reflective model of solidarity exhibited by individual acts and collective acts (practices of resource pooling, information sharing, women empowerment, distribution of palliatives and donations) within trusted circles that helped people cope with the lockdown experiences.

Practical implications – Solidarity represents beliefs, practices of values and norms. The SS exhibited by people through NPI would have implications on planning and monitoring the effectiveness of public health programmes during a pandemic in the future.

Social implications – The findings of citizens and community actions have implications related to the process of building communities – coming together – and solidarity that enhances social development with implications on community health policy agenda during disasters, emergencies and health pandemic.

Originality/value – This is one of the first studies to analyse the relationship between trust, altruism, reciprocity, SS and CBA during the COVID-19 pandemic. Also, it seems reasonable to clarify the concept of SS given the lack of clarity about the definitions from previous studies.

Keywords: Social solidarity, Community-based approach, Community health, COVID-19, Nigeria

Paper type: Research paper

Introduction

Solidarity is not an exogenous analytical concept but a concept inspiring people in contexts of everyday life in crisis (Rakopoulos, 2016). This article examines the contexts and assemblages of social solidarity (SS) and community-based approach (CBA) during the COVID-19 outbreak originating from China that spread rapidly throughout the world, forcing many countries to close their borders, put travel restrictions and ordered their citizens to stay at home or work from home (Gössling, Scott & Hall, 2020; Nicola *et al.,* 2020; Weible *et al.,* 2020). Many dominant approaches see a crisis as a liminal stage of uncertainty between periods of normality (Rakopoulos, 2016). Previous studies stress that social heterogeneities provide resources that communities can mobilize to adapt and sustain themselves in response to disruptions (Leap & Thompson, 2018). Hence, previous studies examined the formation of the behavioural correlates of solidarity, such as expectations of receiving support from others (Lindenberg, 1998; Lindenberg *et al.,* 2006, cited in Bianchi, Flache & Squazzoni, 2020).

Durkheim (1947, cited in Evans & Evans, 1977) asserts that social solidarity network (SSN) was the ensemble of beliefs and sentiments that are common to average members of the society. Solidarity practices are at once specific to crisis and austerity and an issue with a sociocultural history (Rakopoulos, 2016). The theory of SSN is often employed to describe the complex sets of social relationships in the community, sociological, and psychological contexts (Josserand, Schmitt & Borzillo, 2017; Smith, 2009). Although most research in social and personality psychology tend to focus on individuals, those individuals are embedded in larger social networks that in turn shape the behaviours of the individuals (Clifton & Webster, 2017). COVID-19 pandemic has unprecedented impacts on health, business and people's livelihoods (Weible *et al.,* 2020). With the limited medical capacity to treat the disease, nonpharmaceutical interventions (NPI) (such as ban on travel or movement of people) were the main strategies to contain the pandemic (Gössling *et al.,* 2020).

During the peak of the pandemic, Nigerian like many other African countries enforced the westernised social-distancing and stay at home or work from home orders. It was suggested that prolonged lockdown in developing countries, represents a trade-off not between saving lives and saving the economy, but between saving some lives from COVID-19 and potentially condemning far more people to hardship or death by other means (World Bank, 2020). In Nigeria, there were little income supports, social benefit and business support packages from the government. During the lockdown, most of the citizens were subjected to the hardship associated with food insecurity, joblessness and poverty (Vincent, 2020; Punch, 2020a & b).

Therefore, this article examines how SS and community approaches helped people and communities to cope with COVID-19 lockdowns. Despite the centrality of 'community' in disaster research, it has variable meanings and measures and 'communities' reflect the reality that most disasters occur in specific geographic localities and usually affect populations in proximity to its epicentre (Kirschenbaum, 2004).

Africa countries evolving social policies demonstrates the importance of social solidarity to economic, health, disaster and human rights approaches. The critical research questions focus on examining SS and collective behaviours or the lack of it. We evaluate the concepts of trust, altruism, and reciprocity and how these concepts evolve from individual approaches to collective actions. Also, we analysed the notion of trust (whether people can rely on one another to mitigate and cope with the lockdown), if people would help someone without expecting a favour in return and citizens' willingness to return favours or the lack of it. Kirschenbaum (2004) developed the notion of 'disaster communities' by proposing three tiers based on family-kin, micro-neighbourhood, and macro-neighbourhood. Communities are 'place-based' and develop through locally oriented interactions of the residents (Kirschenbaum, 2004) and SS serves as a "tool" for analysing social relationships (Smith, 2009).

Lindenberg (1998) and Lindenberg *et al.* (2006) identified five patterns of 'solidarity behaviour' that defined the level of solidarity observable in a social group: cooperation in social dilemmas, fairness in resource sharing, support to others in need, avoiding breach temptations, and considerateness in mishap situations. Since the COVID-19 pandemic, health-related research has grown rapidly to understand its key trends and challenges. However, only limited studies focused on SS or SNA. This article is intended to contribute to the COVID-19 literature, sociological, and psychological contexts as well as exploring the meaning of SS.

The article is organized as follows. The next section reviews the concept of solidarity, a distinguishing feature of SSN and SNA. This is followed by an examination of the concepts of CBA and disaster communities. The next section explains the Nigerian context and challenges. This is followed by the methodology, findings, and discussions and conclusion.

Social Solidarity Network (SSN)

Social psychological research examines the link between trust and sentiments of solidarity (Molm, 2003; Molm *et al.,* 2007; Lindenberg *et al.,* 2006). Social life entails solidarity, which entails altruism (Offer, 2019). SSN describe social relationships and conceive of individuals as social actors. Also, it emphasizes the social- justice, socio- political and socio- economic dimensions of such relationships (Smith, 2009). Both etymologically and in colloquial usage,

solidarity refers to the sense of responsibility or, rather, mutual responsibility (Buzek & Surdej, 2012). Because social networks represent relationships (ties) among people (nodes) in groups, they become of interest to both social and personality psychologists (Clifton & Webster, 2017).

A key distinguishing feature of SSN and social network analysis (SNA) is their focus on the study of not only individual behaviours, attitudes or beliefs, but on the relationships that exist among social actors, and the patterns or implications of these interactions (Smith, 2009). Since the outbreak of COVID-19, communities and informal groups have sprung into action, people have been connecting and looking out for each other more than usual. Solidarity was felt in cities, urban and local communities across the world as people came together to help each other, volunteer to work in hospitals, community hubs and local charities. For instance, in the United Kingdom, three in four adults thought people are doing more to help others since the pandemic and nearly two in three adults had checked in on neighbours who might need help (Public Health England, 2020).

Solidarity often acts as a conceptual bridge between stakeholders and actors. Therefore, SSN involves individual and collective actions (Figure 1). Within the individual actions are elements of trust, altruism, and reciprocity. Trust and shared values increase feelings of self-esteem and security within and between communities (Douwes, Stuttaford & London, 2018). Altruism reflects an unselfish behaviours and desire to live for others and placing what is good for others above what is good for oneself (Douwes *et al.,* 2018). According to Bianchi, Flache and Squazzoni (2020) studies on unequal-power networks have found that this link depends on the generation of trust between partners. Bianchi *et al.* (2020) note that trust is affected by the presence of agreements protecting partners from mutually exploiting each other. Agreements would not allow partners to learn each other's trustworthiness or prevent partners from developing trust relationships and eventually hinder the emergence of solidarity (Bianchi *et al.,* 2020).
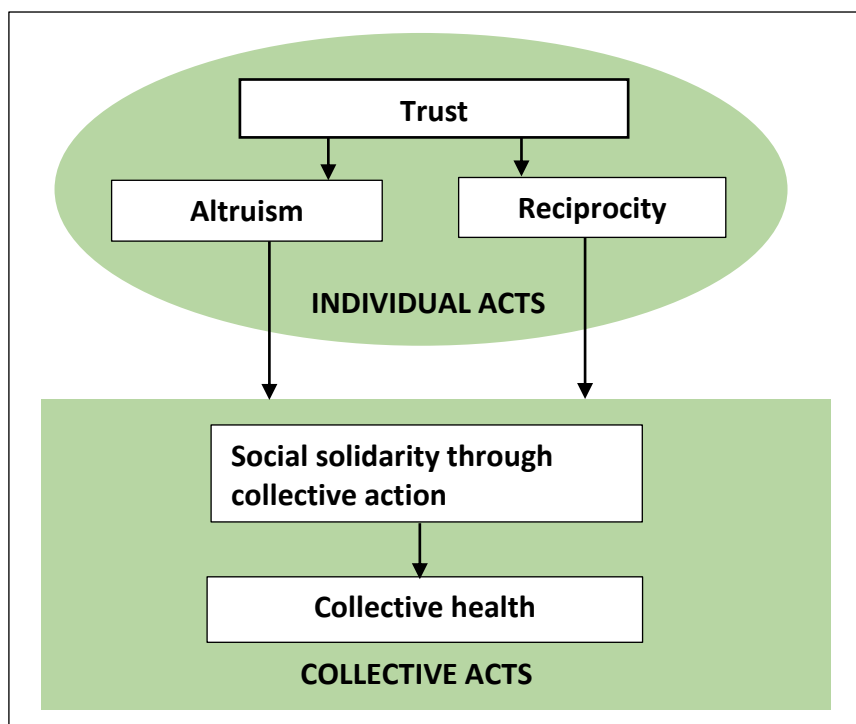
Figure 1. Conceptual Framework of social solidarity and collective action.

Source: Douwes, Stuttaford & London (2018)

Solidarity according to Durkheim (1947, cited in Evans & Evans, 1977, p. 34), solidarity represents shared beliefs (sentiments) and practices which involved both acting and feeling guided by set values and common norms of behaviour. Religion was a unified system of beliefs and practices that were relative to sacred things according to Durkheim. Social networks analysis (SNA) provides researchers with a multiparadigm perspective and how to conceptualize informal social networks in organizations (Kilduff & Tsai, 2003). Borgatti, Everett and Johnson (2013) described the various research design and data collection in social network research. In this article, the focus is not SNA but on SS. However, it appears that sociologists often disagree about definitions of SS, hence it seems reasonable to clarify the concept (Evans & Evans, 1977). Therefore, we reviewed previous definitions (as presented in Table 1).

Table 1. Review of literature on definitions of Solidarity

Authors	Definitions	Elements of solidarity
Young (1968)	The degree to which the meaning areas maintained by a community manifested a unified or coordinated configuration.	Unification and coordination
Moxley (1973)	Represents consensus, symbiotic, collectivities, cohesiveness, interdependence, and moral integration as well as integration.	Collectiveness
Moxley (1973)	The tendency of a system to process all incoming and outgoing information according to one integrated format; or more concretely, it is the degree to which the meaning sectors of a symbolic structure, no matter how differentiated, show overall unity.	Symbolic structure
Wilde (2007)	The feeling of reciprocal sympathy and responsibility among members of a group which promotes mutual support.	Mutual support
Adair (2008)	Shared commitments to social practices; social regulation is direct and externalized control over such practices is via law and custom.	Shared commitments
Douwes *et al.* (2018)	Solidarity is an element of human association that emphasizes the cohesive social bond that holds a group together, which is valued and understood by all group members.	Social bond

Complied by the Authors.

The relationship between SS and community solidarity (CS) highlights two issues: first, how SS practices and paradigms overlap with community development, and second, how SS brought communities together which allows citizens to form a risk-adjusted strategy on COVID-19 prevention and containment measures. Therefore, this article stresses connectedness, looking at the configurations of activities laying citizens claims to solidarity. It focuses on articulating citizens experiences, individual behaviours and collective actions during the COVID-19 pandemic.

Roblain *et al.* (2020) maintain that solidarity actions can take different forms, such as volunteerism, donating to the disadvantaged, political activism or collective actions. Meaning arises in the process of interaction between people and involves a sense of "we-ness" (Evans & Evans, 1977, p. 40). Roblain *et al.* (2020) argued that the two broad forms of solidarity-based actions can be distinguished as benevolent support and activist support. Benevolence aims at alleviating the suffering of people in need while activism, aims at changing the socio-

political system (Roblain *et al.,* 2020). Consequently, SS and CBA are gaining prominence in healthcare research (Lavery, 2018; Pratt, Cheah & Marsh, 2020).

Community-based Approaches (CBA)

The term CBA has a wide range of meanings (McLeroy *et al.,* 2003). CBA has been developed with the aims of redefining and transforming local communities. CBA refers to multicomponent interventions that generally combine individual and environmental change strategies across multiple settings aiming to prevent dysfunction and to promote well-being among population groups in a defined local community (Economos & Hennessy, 2011). Interventions may be citywide, using mass media or other approaches, or may take place within community institutions, such as neighbourhoods, schools, churches, worksites, voluntary agencies, or other organizations (McLeroy *et al.,* 2003). In most cases, entire communities are used as units of intervention.

The term community is seldom defined and can be understood in many ways (Räsänen *et al.,* 2020). Kirschenbaum (2004) explains that certain general rules have applied in trying to define disaster communities. Disaster community can be applied to examine the interaction-based community of informal social networks. In general, these have been viewed primarily in terms of their physical and geographic boundaries. There is never a clear demarcation of the dispersion of the social networks linked to the disaster area (Kirschenbaum, 2004). CBA is popular in promoting public health policies and research. As a setting, the community is primarily defined geographically and is the location in which interventions are implemented (McLeroy *et al.,* 2003). Targeting population groups at high risk may be a more feasible approach in terms of interventional costs as well as in measuring the outcome of such an initiative (Economos & Hennessy, 2011). Various levels of intervention may be employed, including educational or other strategies that involve individuals, families, social networks, organizations, and public policy (McLeroy *et al.,* 2003).

Räsänen *et al.* (2020) identify three dimensions: ecological (space and time), social structural (networks and interactions), and symbolic cultural (identities, norms and values). The first conceptualization of community refers to the community as a (small) spatially defined entity or the totality of individuals and social structures within a specific geographical location (Räsänen *et al.,* 2020). The focus is a specific place, typically a village or a residential area, and the community. The second conceptualization CS refers to the interaction-based community (i.e., interactions between people) (Räsänen *et al.,* 2020). The interaction-based community is tightly connected to the concept of social capital, which can be divided into

strong social networks (bonding capital), weaker social networks (bridging capital), and linkages between power and citizens (linking capital) (Räsänen *et al.,* 2020). The foci in this understanding are informal co-operation and everyday life of the inhabitants of the specific community (Räsänen *et al.,* 2020).

The third conceptualization refers to a community of practice and interest (i.e., specialized networks of actors who share a practice they perform together). These actors engage in common actions and share an (imagined) identity and align activities towards a shared goal, shared interest, which promotes collaborative behaviour in the group (Räsänen *et al.,* 2020). These informal communities organize themselves and actors within them can include authorities, civil society organizations and community residents (Räsänen *et al.,* 2020).

Finally, another form of CBA is the community as an *agent* which emphasises respecting and reinforcing the natural adaptive, supportive, and developmental capacities of communities (McLeroy *et al*., 2003). COVID-19 underscores the urgency of holistic community-based approaches to health, hygiene, food insecurity and poverty. CBA is essential for health and wellbeing as it promotes the value of social connections, neighbourliness, sense of belonging, consultation, control, and mutual trust. Consultation with the community (listening to the people, getting inputs from them, understanding their concerns and all leaders joining hands, working together to defeat this virus is doing is very, very important, according to World Health Organisation Director (see, e.g., Mbewa, 2020).

The Nigeria context and challenges

Social solidarity stresses the interdependence between individuals in a community, which allows individuals to feel that they can enhance the lives of others (Douwes *et al.,* 2018). In the wake of global responses to the COVID-19 pandemic, the Nigerian government followed global practices by imposing lockdown and containment measures – stay at home order. The questions many policymakers and international development agencies ask is how we can reconcile these measures with poverty-environment, harsh economic and informal economy dependent low-income countries like Nigeria. Many have argued that the westernised approach does not provide remedial in an environment of informal job seekers, street traders, informal labourers and artisans who depend on the informal economy that is based on daily wages (Punch, 2020a). About 9 in 10 rural and urban workers in Africa depend on the informal sector for daily income and wages (Vincent, 2020; African Development Bank, AfDB, 2013).

One would be forgiven for thinking Nigerians swim in richness, but no, majority of the population lack access to necessities such as food, clean water, electricity, basic health care,

basic education, etc. The past governments failed to provide adequate medical facilities or add new health facilities. According to a report by BBC Africa (2020), Nigerians spent more than 1 billion naira (about $800m) on treatment in overseas hospitals in 2013. Economically, Nigeria has become the poverty capital of the world by overcoming India (World Economic Forum, 2019). According to the World Economic Forum (WEF, 2019), African highest oil producer in the world and one of the largest populations of youth in the world has about 90 million people - roughly half its population - living in extreme poverty (those living on less than $1.90 per day) and unemployment among the working-age group has hit 23.1 per cent.

COVID-19 lockdown only exacerbated the poverty problem. According to the World Bank, the attributes of poverty and institutional void include poor access to credit, poor health and education facilities, poor access to information, high-interest rates on borrowing, lack of insurance, high rates of unemployment and over-dependent on informal and low productive sectors. This situation is not only peculiar to Nigeria but 14 out of 18 countries where poverty is rising are in Africa and the forecast is that if current rates persist, 90 per cent of the world's poorest will be living on the continent by 2030 (WEF, 2019).

Corruption is so pervasive in Nigeria that it has turned public service for many into a kind of criminal enterprise (Human Right Watch, 2011). Nigeria is rank 146 of the least corrupt nation out of 180 countries according to the Corruption Perceptions Index reported by Transparency International (Transparency International, 2019). It is estimated that over $400 billion of the Nigerian oil revenue has either been stolen or misappropriated since Nigeria gained independence in 1960 (Okoye, 2012). Corruption in Nigeria is responsible for all kinds of woes, such as abandoned public projects, poor quality of implemented projects, nepotism, insecurity, high rate of poverty and high rate of unemployment (Ijewereme, 2015).

Research Method

Methodological coherence describes the 'congruence between the researcher's epistemological and ontological viewpoint, theoretical position/perspective, the methods, and so on' (Poucher *et al.,* 2020). This article is derived from the qualitative research method (Schoonenboom & Johnson, 2017). Qualitative research is an iterative process in which improved understanding to the scientific community is achieved by making new significant distinctions resulting from getting closer to the phenomenon studied (Aspers & Corte, 2019). Poucher *et al.* (2020, p. 164) maintains that "determination of a methodologically coherent study rests on the understanding that the various elements of a qualitative study (e.g., research question, methods, methodology,

presentation of results) are aligned with the philosophical assumptions underpinning the research".

Data Collection Process

Due to the lockdown and stay at home order during the peak of the COVID-19 pandemic, we designed semi-structured questions and used telephone interviews (narrative approach) to explore the research questions. A purposeful and convenience sampling procedure (Suri, 2011) was used to identify and select community leaders, town union leaders and church leaders identified through Facebook in the South-eastern and South-South regions of Nigeria. We sent the link requesting for volunteers to participate in the study to the community leaders and solicited that they send it to youth leaders, notably business owners, religious leaders, community leaders, senior public servants and social media influencers in their towns, cities and villages.

A total of 98 persons responded to the request. The online link had an option that asked for volunteers to participate in a telephone interview. Of the 98 persons that completed the online link, 39 persons (about 39.79%) volunteered to participate in the study by providing their phone numbers. The 39 persons were contacted and interviewed. The adoption of a narrative approach in this research is methodologically consistent with an ontological and epistemological position that considers society made of meaningful actions and interpretation as the principal mode of inquiry (Antonazzo, 2019).

The main themes of the research questions focused on people experiences during the lockdown, individual behaviours, the solidarity and collective actions that developed in the society. This study used open-ended questions that allows the researchers to encourage the participants to elaborate on the phenomenon (Pratono *et al.,* 2020). To encourage participants to share their experiences and elaborate the phenomena from their point of view, the interviews was flexible and carefully adapted to the context (Pratono, 2019). The interviews lasted between 20 – 30 minutes. Interviews were recorded, transcribed and analysed thematically to identify themes and sub-themes from the data. Throughout the study, we followed and observed the social distancing measures and COVID-19 rules in Nigeria by not engaging face-to-face interviews or travelling to meet respondents.

Also, we followed the ethical procedures by informing participants about the aim and objectives of the study. Consent was obtained from the participants before the interviews proceeded, they were informed that they can withdraw at any time or choose not to answer any questions if they wished. They were informed that the telephone interviews were being

recorded and promised anonymity, hence no personal information was generated that will enable the identification of participants. Of the 39 persons that were interviewed, 15 were women and 24 men with ages between 23 years and 56 years. Also, 28 persons were self-employed, while only 11 were engaged in regular wage-employment.

Data Analysis and Coding Process

All the interview data were entered in a Microsoft Excel spreadsheet composed of multiple tabs. The thematic analysis helps to identify dominant themes that best fit the research questions (Guest, MacQueen & Namey, 2012). Also, coding and recoding of emergent themes were performed to help extract meaning from the data (Blair, 2015). Vollstedt and Rezat (2019) describe three kinds of coding procedures: open, axial, and selective coding. Coding was undertaken through Excel. The first step of coding (open coding), the data are coded into general themes by assigning a word or phrase to each category (Igwe *et al.,* 2018). In the second step, axial coding, data are put back together in new ways by making connections between themes. The coding was conducted by members of the research team. Coders identified responses (categories) related to the research questions.

Open coding is the part of data analysis that focuses on the conceptualisation and categorisation of phenomena through an intensive analysis of the data (Vollstedt & Rezat, 2019). Open coding enables researchers to familiarise themselves with each case as a stand-alone entity and allows unique patterns to emerge before attempting to identify cross-case patterns (García & Welter, 2011). Axial coding was undertaken to determine the categories of data and dimensions of categories. In the third step, selective coding, a core category is selected with the goal of interpreting them (Igwe *et al.,* 2018). The emerging relationships between the elaborated concepts need to be integrated into an overarching framework with one core category (Vollstedt & Rezat, 2019).

Findings and Discussion

The themes that emerged from the qualitative data include (i) social solidarity and community action; and (ii) perception and people experiences of the lockdown.

Social solidarity and community action

Solidarity is an element of human association that emphasizes the cohesive social bond that holds individuals or a group together. SS and CS were evident during the COVID-19 lockdown. We enquired about all types of individual and collective behaviours and solidarity or the lack

of it. Under SS, we identified individual acts concerning the concepts of trust, altruism, and reciprocity and how these concepts evolve from individual approaches to collective actions or CS (Table 2). We evaluated the notion of trust by asking whether people can rely on one another to mitigate and cope with the lockdown necessitated by COVID-19 pandemic. Concerning altruism, we asked participants if they would help someone without expecting a favour in return during the lockdown. We examined the concept of reciprocity by evaluating participants' willingness to return favours or the lack of it. The findings are presented in Table 2.

Table 2. Elements of social solidarity and collective action

Themes	Categories
Individual acts	**Trust**
"City dwellers tend to look out only for themselves and their immediate families than look out for strangers. Also, people in the rural areas rely on one another more than those in the urban and cities because it is hard to trust strangers or people that are not in your social or family circle" (Social media influencer).	
"Strong ties in the rural areas come from community leaders, business leaders and influential persons in the communities who are change agents that volunteer to solve social or developmental problems" (Religious leader).	
"Not anymore. People do not trust each other as before. Trust is limited to family members, not with friends or strangers" (Youth leader).	
"People have lost hope in government and their agents because politicians have repeatedly lied to the people and make bogus promises they are never kept. Hence, during the lockdown, people never trusted that any assistance will come from the government" (Community leader).	
"People trusted in their close friends and families to provide information regarding the pandemic" (Youth Leader).	
"You can't trust nobody. In the urban and cities, people tend to act for themselves or their immediate families because of lack of trust and fear of reciprocity, especially if you're a woman" (Women leader).	
"Trust has eluded modern societies. People are afraid to collect gifts or materials from strangers for fear of the unknown such as witchcraft and ritual. Therefore, people relied mostly on their family network or social friends during the lockdown" (NGO coordinator).	
"God expects us to do favours out of our heart and not to expect anything back from that person" (Religious leader).	**Altruism**

"During the lockdown, individuals and communities were donating food and cash material to women, especially widows and those without stable means of livelihoods" (Community leader).

"Only when it concerns vulnerable or elderly people and about young people who should go and work harder" (Business owner).

"The bible teaches us to live a selfless life, help and care for each other. That is why the church was involved in coordinating relief materials during the lockdowns (Religious leader).

"Solidarity helped to go into local initiatives such as COVID-19 enlightenment, sourcing and distribution of free face masks, etc" (Social media influencer).

Of course, giving and exchanging favours helps one to expand the social network that will be required in future during social ceremonies, a period of hardship, deaths or sickness" (Business leader).   **Reciprocity**

"Some people help with the mind of asking something in return now or in future, hence, people are hesitant to collect gifts from strangers" (Women leader).

"Nowadays people just focus on themselves and do not think about others because people have been betrayed by the government and politicians" (Women leader).

"The motive for solidarity is that what comes around, goes around, the saying goes [...]. People give because the future is uncertain. You might be rich today, but you never know the future and if you will require help from others" (Religious leader).

Collective Acts

"We worked together, pooled resources together and distributed essential materials to less privileged households and widows" (Youth leader).   **Unification and coordination**

"People relied on information from social media – Facebook and WhatsApp to get a better understanding about the pandemic and the preventive measures" (Social media influencer).   **Social bond**

"Nothing happened in my community. No help and assistance from government or individuals. Everyone had to find ways to survive" (Youth Leader).

"Solidarity actions were lacking in the cities and crime was high and people were afraid, especially at night as people took to crimes due to hardship during the lockdown. This situation led to setting up voluntary vigilante groups and neighbourhood watch" (Senior public servant).

"Lack of government actions formed the basis of social solidarity during the lockdown. They ordered everyone to stay at home but   **Collectiveness and symbolic structure**

there was no clarity in the information about the pandemic and government plans" (Traditional ruler).

"Everyone came together – civil servants, business owners, traditional leaders and were united together to overcome the challenges of the lockdown" (Youth leader).

"There is mistrust among people and lack of leadership in our community. As a result, people ignored community leaders calls for united initiatives because past community projects lacked accountability and transparency" (Business owner).

"The lockdown provided opportunities for communities to come together and plan about community challenges such as security issues, town planning and community projects" (Community leader).

Mutual support and shared commitments

"The community was united during the lockdown, everyone taking responsibility in their capacity" (Traditional leader).

Our findings revealed that people in the rural areas trusted on one another more than those in the urban and cities. Also, rural locations had had more interaction-based community that urban and cities. Shared beliefs, cultural norms and religion formed the foundation for SS and CS in rural areas. Like Durkheim findings, religion and cultural values provided a unified system of belief and practices related to individual and collective actions. Nigeria is a religious state and most of the population practices Christianity or Islam. These religions teach "love your neighbours as you love yourself" and "help someone without expecting a favour in return". This was the foundation for moral integration (as stated by Moxley, 1973) and sacred things (highlighted by Durkheim). Hence, participants shared a positive view of altruism and how people looked after each other.

A sense of collective actions and CS was displayed through pooling resources together to help disadvantaged households, contributing to community development or volunteering to join many people-focused initiatives in the absence of government programmes. In their study Douwes et al. (2018) have suggested that self-interest can be a motive for solidarity, however, self-interest must be accompanied by feelings of affection and trust in order for this to be true. Our finding showed that receiving a favour do not leave one feeling obliged to return it, but there is anticipation that a reciprocal might be required in the future. Reciprocal acts or bonds were found to be more established within families who lived in the cities, while selfless concern (altruism) were more exhibited by rural people. Above all, there was a sense of "we-ness" among rural communities than the urban and city dwellers.

People experiences of the lockdown

CS and SS provide a bridge for public health and social development. Health education has been crucial as many Nigerians live in denial of the devasting reality of the coronavirus (Punch, 2020a). Government measures were described as inadequate and ineffective;

> *"Government measures are defective in several ways from the formulation of COVID-19 containment policies, testing, support and palliative measures. There have not been much to support small-scale businesses and ordinary citizens" [Community leader].*

> *"Only an insignificant proportion of the population has been supported and the majority have been marginalised and do not know when help will come to them and how" [Social media influencer].*

People supported one another through the sharing of information about COVID-19 preventive measures and action deemed necessary and proportionate to support the vulnerable people during the lockdowns. From the interviews, it was clear that COVID-19 pandemic disrupted people's livelihoods, with a disproportionate impact on rural and urban households, informal job seekers, street traders, low-income earners and informal businesses operators. The pandemic further highlighted the deep economic and social inequalities and inadequate health and social protection systems in Nigeria;

> *"Ordinary people and vulnerable groups have been subjected from hardship from poverty to the real suffering from lack of income, food deprivation and hunger" [NGO coordinator].*

Travel bans and lockdowns were not only limiting the movement of people across borders but also disrupted food supply chain, informal jobs, manufacturing, trade, education, social and religious activities. According to the World Bank (2020), this situation is particularly acute in developing nations where the majority of the population have extremely limited savings and are especially vulnerable to "economic shutdowns" of any duration.

> *"The lockdown of the economy has affected households negatively. It has devastated people's income and some people find it very difficult to feed their families" [Religious leader].*

"People are saying, poverty and hunger are worse than the main reason for the lockdown" [Social media influencer].

According to some national newspaper reports, the lockdown has unleased widespread social insecurity, hunger and economic joblessness (see, e.g., Punch, 2020b). Due to inadequate measures by the government, people engaged in SS and CS. Individuals, families, neighbours and members of the public were connected and looked out for each other more than usual. Also, informal social groups sprung up in many local, urban and cities.

Social Solidarity Model

The purpose of theory is to increase scientific understanding by explaining and predicting phenomena (Hunt, 2014). Our research findings suggest that individual and collective actions were pivotal in the dissemination of information concerning the pandemic, distribution of preventive and relief materials to disadvantaged people in the society. Hunt (2014) suggests some factors that substantially explain theory's development. The theory: (1) addresses important issues; (2) exhibits high explanatory and predictive power; (3) respects other disciplines' literatures; and (4) has normative implications (Hunt, 2014). SS and CS recognise the needs of human beings to come together to solve the problems they have in common (Buzek & Surdej, 2012; Clifton & Webster, 2017; Mukerji & Chauhan, 2019).

From the findings, it appears that the level of trust varied from rural, urban and cities. Like the findings from Young (1968) rural communities looked out for one another, while city dwellers tend to look out only for close families and friends. Also, individual approaches to collective actions varied from social group and locations (as shown in model Figure 2, adapted from Douwes *et al*. (2018) but modified to reveal the level of impact). Rural communities were more focused and united in pursuit of community development and helping one another. The lack of trust in the cities meant that people relied mostly on families and close friends than on strangers. Also, a sense of moral integration existed in rural areas than in the cities. Reciprocal acts existed within families and social friends in the urban and cities.
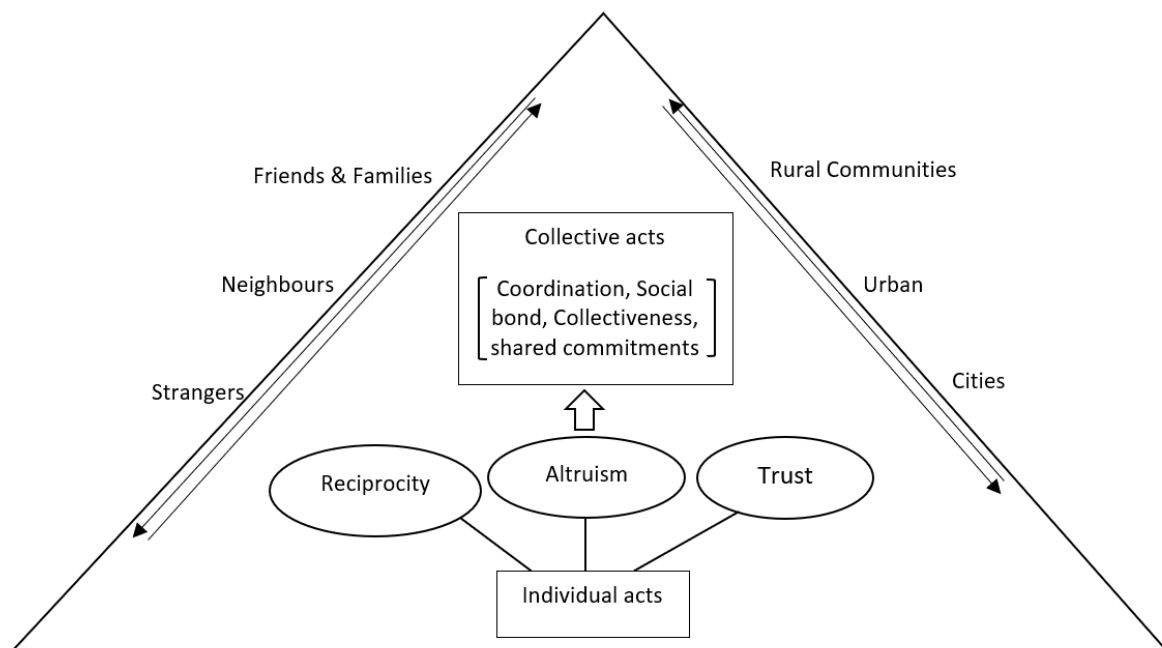
Emergent Model

Figure 2: A reflective hierarchical model of social solidarity

During the COVID-19 lockdown, solidarity manifested in several ways. Trust in others enabled interactions that helped people deal with the experiences of the COVID-19 lockdown. Likewise, trust shrinks rapidly if one move from rural to urban and cities. Altruism (unselfish behaviours and desire to live for others) dwindles in the urban and cities. Most people also reciprocate the fairness of others during the COVID-19 pandemic. Unfairness is also reciprocated and people who feel mistreated during the pandemic came together to exhibit social solidarity. People willingness to trust and be fair to others during the pandemic was reflected in several ways. Social networks created social bond, norms of reciprocity and trustworthiness and collectiveness during the lockdown.

First, people valued their neighbours and supported vulnerable people in the fight to prevent the spread of COVID-19 pandemic. Second, community support was evident as people came together to plan and execute some community projects, people-focused palliatives (such as relief materials, food, cash and masks). Solidarity in developing countries during COVID-19 pandemic has become critical since government preventive measures and palliative scheme has been inadequate.

To examine the proposed typologies, this study used the criteria based on categorization (Hunt, 2014). A reflective model of social solidarity (Figure 2) shows the disproportionate SS between rural, urban and cities. Rural communities were bonded together through traditional

values and religious beliefs (sentiments) of togetherness and interdependence. Like Fessler (1952) rural communities functioned as a social group which have set values and common norms. There was a strong feeling of social interactions in rural areas than urban centres and cities. There were more tendencies for social distancing and stranger notion in the cities due to fear of unknown and reciprocity. These affected the solidarity expressed toward others in the urban and cities.

Conclusions and Implications

A sense of shared beliefs (sentiments) and mutual self-interest is at the core of SS and communities are motivated by moral values, religion and cultural norms. In this article, we adopted a narrative approach as the ontological and epistemological position that considers subjectivity and objectivity in analysing people's acting and feeling. We examined the degree to which communities maintained a unified or coordinated action towards overcoming the impact of COVID-19 lockdowns. SS enabled the dissemination of vital information concerning preventive measures and coordination of relief materials. SS and CS embody an ethic of social religious and moral responsibility as exhibited in many communities during COVID-19 pandemic. Communities came together to support each other, educate and raise awareness about the disease and support vulnerable groups.

Creating trust and empathy are core element of solidarity. The collectiveness and a sense of "we-ness" that developed among business owners, community leaders, youth leaders, public servants, religion leaders enabled people to overcome some of the hardship imposed by the lockdowns. The spirit of cooperation in solving mutual problems helped people cope with the pandemic hardship. Trust grows with familiarity among families and friends and shrinks rapidly from neighbours to strangers. The spirit of collaboration, collectiveness and cohesiveness enabled actors to be viewed as "allies" rather than as rivals or competitors. These have implications towards strengthening institutional and community resilience and adaptability during a pandemic. This suggests integrating an SS-type model in future pandemic or disasters. The model exemplifies how members of the society and the community form a symbolic structure to pursue mutual or public interests.

The bases of solidarity - moral imagination, recognition, understanding, empathy - can be built by community engagement over time (Pratt *et al.*, 2020). The solidarity exhibited by individual behaviours (trust, altruism, and reciprocity) and collective action (practices of resource pooling, information sharing, women's empowerment, distribution of palliatives and donations) were analysed in this article. Our findings revealed that a sense of solidarity varied

from members of rural, urban and city dwellers. The level of trust, altruism, and reciprocity was more in rural than urban and cities. Also, a sense of trust, altruism, and reciprocity was felt more among families/friends than neighbours and less among strangers.

One of the main concerns of local, international agencies, activities and non-governmental agencies during the peak of the COVID-19 pandemic was how the lockdown/stay at home order will impact on livelihood, food and general welfare of people in developing countries (like Nigeria) whose majority of the population depend on informal jobs and daily labour. Therefore, not able to go out to work and staying home means losing their jobs and their livelihoods (International Labour Organization, ILO, 2020).

Overall, solidarity – coming together by having shared interest, goals and mutual benefits – enhanced social and community cohesion during the pandemic. In developing countries with limited public resources and revenues, individuals and community support (social capital) are vital resources to have to achieve economic development. There is a high rate of poverty and unemployment in Nigeria. Majority of the population depend on the informal economy like street trading, daily paid work and informal market. COVID-19 exacerbated these conditions and threaten to jeopardise the health, livelihoods, security, education, social and economic development.

The findings and analysis of social solidarity have social, economic and policy implications. Culture and society influence norms. Building trust during the pandemic was of mutual interests and social cohesion. Many individuals, businesses, and organizations worked together to build trust, exchange obligations and cooperation. People tend to act altruistically (i.e., people are more likely to help those who need help even if there is no reciprocal). This behaviour varies among individuals and among cultural norms. Solidarity is required for NPI, planning and monitoring the effectiveness of public health programmes during a pandemic in the future. Solidarity enhances social cohesion and community development. Also, solidarity enabled businesses to cope with the challenges (e.g., loss of revenues and supplies) associated with lockdowns, work from home and stay at home. Finally, community solidarity is required in public health, national orientation and developing public goods.

As part of our contributions, this article adds to the literature on COVID-19, social solidarity and community studies. Solidarity is needed to solve future pandemic, disasters and global economic challenges, but what does this entail? In this article, we re-examined the definitions of SS and explored the elements of SS and collective action during the COVID-19 pandemic. Solidarity represents beliefs, practices of values and moral norms. Our findings show that SS enhanced interconnections of people and communities during the COVID-19

pandemic. Solidarity has an organic or ethical category - civic virtues and collective identity. It involves specific social cohesion and mutual integration. In this context, the actor seeks how to help, and actors believe they are obligated to provide help.

Despite the merits of the qualitative research (applied to the social world and the concepts and behaviours of people within it), there are several limitations related to the number of participants, data saturation, and the scope of the study. Also, certain factors can affect the subjects' responses and biases (Igwe *et al.,* 2020). The narrative approach recognizes that a story is never the whole story since any story is embedded in a context (Gartner, 2007; Igwe Madichie & Amoncar, 2020). Despite the limitations, this article provides the foundation for future studies on CBA, SNA and SS approach to public health and disasters research, especially from a developing country context.

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