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Effects of fear of infection of covid-19 at the marketplace on psychological wellbeing of microbusiness enterprise traders in Nakuru city top market, Nakuru county, Kenya

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Abstract

This study assessed the effects of fear of infection of covid-19 in the marketplace on the psychological well-being of the microbusiness enterprise traders in Nakuru City Top Market between June and December 2020. The study was guided by Rational Emotive Behaviour theory. The study deployed a cross-sectional survey design. Quantitative data collection was done with a structured questionnaire tool. In addition, a structured Schedule interview questionnaire was used to collect qualitative data. Before the tools were adopted for the actual research, a pilot study was conducted in Naivasha Municipal Market for the purpose of testing the tools' reliability. Statistical Package for Social Sciences (SPSS) was used to analyse quantitative data, and qualitative data were analysed thematically. To safeguard the well-being of the respondents, ethical considerations were observed throughout the duration of the study. The study revealed that the effects of COVID-19 on microbusiness trade affected the psychological well-being of the microbusiness traders in Nakuru City Top Market. The study recommended that group counselling interventions should be introduced to help the traders recover from the post effects of the pandemic and equip them with skills to cope with future catastrophes of a similar nature. The study also recommended psychological wellbeing awareness campaigns to disseminate information to microbusiness traders in Nakuru City Top Market.

Key terms: Effects of COVID-19, fear, depression, anxiety, stress.

INTRODUCTION

Psychological well-being is a human experience devoid of disabling conditions such as depression, anxiety and stress (Centre for Bhutan Studies, 2017). In this state of mind, a person experiences positive emotions, a sense of meaning, healthy relations, environmental mastery and is able to self-actualise. It is about a person's life going well, feeling good and functioning productively and more effectively in the community (Huppert, 2009). In a state of optimal psychological functioning, human beings are flexible and able to cope with adverse life situations such as the ones presented by the COVID-19 pandemic. They are able to continue functioning in social roles. Psychological well-being also helps an individual have a harmonious mind and body relationship. The concept of psychological well-being is an internal equilibrium or balance state of a person (Galderisi et al., 2017).

The viral disease was named coronavirus disease 2019; COVID-19 (Spiteri et al., 2020). Experts speculate that the disease may have emerged in the Huanan Seafood Market in Wuhan town. In China, the capital city of Hubei Province, Wuhan. COVID-19 is a zoonotic disease that can be transmitted from animals to humans under natural conditions (Roberts et al., 2021). The declaration by WHO of COVID-19 as a pandemic took place in March 2020 (Jaguga & Kwobah, 2020). Since the 1918 Spanish flu, the COVID-19 pandemic has been ranked as the fifth recorded pandemic in human history (Liu et al., 2020). Given the disease's nature of spreading, many livelihoods have been affected. The emergence of the coronavirus pandemic in late December 2019 affected microbusiness traders in unprecedented ways (Donthu & Gustafsson, 2020). As a result, the global economic growth in 2020 has negatively been affected far beyond anything experienced in nearly a hundred years (Jackson et al., 2021).

Globally, the pandemic led to psychological challenges. For example, a survey was conducted in the US on over 1.5 million people who visited the Mental Health of America from January to December 2020 (MHA, 2021). Data collected and analysed indicated that 35 percent reported experiencing depression, 20 percent anxiety, and 4 percent posttraumatic stress disorder (PTSD). Critically, 27 percent of the respondents who suffered from severe symptoms of anxiety or depression reported COVID-19 as one of the top concerns that caused them to experience psychopathology; depression, anxiety and stress. In Europe, Italy, a survey conducted between March 27th and April 6th 2020 (Rossi et al., 2020) among 18,147 Italians found that 37 percent of the respondents were diagnosed with PSTD, and depression was reported by 17.3 percent of the respondents. Anxiety was reported among 20.8 percent of the respondents. A high perception of stress was reported among 21.8 percent of the respondents. In 2020, psychological well-being deteriorated in all European countries (Emily, 2021): in France, 27 percent showed a prevalence for anxiety and 20.4 percent for depression; in the UK, 33 percent showed a prevalence for anxiety and 19.2 percent for depression, and in Spain, 18.7 percent showed a prevalence for depression.

In China, the high rate of COVID-19 infections and deaths caused healthcare workers and the public to develop psychological distress; being anxious, depressive moods and feelings of being stressed (Liu et al., 2020). A survey carried out to investigate psychological challenges among the Chinese people indicated that as of 8th February 2020, there was widespread depression at 50.7 percent, anxiety was reported at 44.7 percent, and stress-related symptoms were reported at 73.4 percent. In Africa, the disease experience, social and physical distancing, stigma and discrimination, joblessness, and loss of income occasioned by COVID-19, led to psychopathology among people (Semo & Frissa, 2020). They observed that people in sub-Saharan Africa experienced PTSD, anxiety and depression. In South Africa, Human Sciences Research Council (2020) conducted a study (Nguse & Wassenaar, 2021) that found 33 percent of the South African population was depressed. It also showed that 45 percent of the population expressed fear and anxiety about virus infection. Nguse and Wassenaar (2021) observed that people attending psychotherapy sessions reported anxiety and depressive symptoms because of the effects of the pandemic.

In Egypt, a survey carried out in May 2020 (El-Zoghby et al., 2020) found that 34.1 percent of the respondents reported being stressed at work. It also

found that 53.9 percent and 52 percent of the respondents reported being horrified and helpless, respectively. People also experienced worries about being infected or getting sick. In East Africa, Rwanda was the first country to institute and enforce control measures to reduce and prevent the increase of COVID-19 by implementing a total lockdown, reducing social gatherings, and having its Universities, colleges, and schools closed. It also introduced control measures on how mass gatherings should be conducted, for example, church and mosque gatherings (Kalisa et al., 2020). Confinement measures that were instituted to curb the spreading of the coronavirus disease across Rwanda were likely to have affected both physical and psychological well-being causing stress, anxiety and depression among the Rwandese. From the study observations, Kalisa et al. (2020) inferred that the demonstration by the people of intense anxiousness about health, and the future, unending uncertainty, dysfunctional behaviours, anger targeted at the external and internal, aggression, emotional fearfulness, sad and irritability, were indicators that showed the coronavirus disease negatively impacted the psychological wellbeing of the Rwandese. Kalisa et al. (2020) also observed that culturally, Rwandese attend funeral ceremonies in large masses to offer emotional support to the bereaved and help in preventing complicated grief. However, with the Rwandese government's containment measures, it was impossible to practice this valued culture. Consequently, this exacerbated the development of psychological challenges among the Rwandese.

The 1st case of COVID-19 in Kenya was announced and documented in March 2020 (Shah et al., 2021). Between August and November 2020, one of the first cross-sectional survey studies on the pandemic was carried out. The objective of the survey was to investigate psychological challenges among healthcare workers in Kenya. A sample of 725 healthcare workers was drawn from three hospitals - Coast general teaching and referral, Mombasa; Aga Khan University, Nairobi; and Avenue Health, Nairobi. The study found that 96.3 percent of the respondents were diagnosed with higher rates of psychopathology. The psychopathology experienced by healthcare workers included feelings of being depressed, anxious and experiencing burnout. The findings indicated that healthcare workers developed psychopathology because of the threat to life in the workplace. Information accessed from the Nakuru COVID-19 control centre indicated that in Nakuru County, the first case of COVID-19 infections was detected and confirmed on 1st March 2020. As a result, Nakuru County experienced the devastating effects of the disease, which disrupted many businesses and people's livelihoods, pushing them into poverty and socioeconomic disadvantages. This had a negative effect on the psychological well-being of the microbusiness traders.

Drawing from the previous studies done in other parts of the world and in the country, the Kenyan population and, more specifically, microbusiness traders might have experienced psychological challenges occasioned by the disruption of the economic activities in the country and in Nakuru County. This study assessed the effects of fear of infection of COVID-19 in the marketplace on the psychological well-being of the microbusiness traders in the Nakuru City Top Market.

LITERATURE REVIEW

Albert Ellis, in 1994, came up with Rational Emotive Behaviour Theory (REBT) (MacLaren et al., 2016). The theory proposes that human thoughts, feelings and behaviours are integrated together as a system. Human beings are disturbed because of thinking, feeling and acting in dysfunctional and self-defeating ways. The REBT theory emphasises that people's emotions and emotional disturbance are, to a large extent, the product of their thoughts, ideas or constructs about an event in the environment such as COVID-19. The theory assumes that the determinants of human emotions and behaviour are cognitions. The theory claims that the activity of these cognitions may be observed and changed, leading to the achievement of desired behavioural and emotional changes in human beings.

Deducing from this research's findings, this theory helped in understanding how traders reacted to the effects of fear of infection of COVID-19 in Nakuru City Top Market and how their reactions affected their psychological well-being. An online survey was done in the US to examine the spread of fear across both time

and space in the whole country (Fitzpatrick et al., 2020). The results of the survey were released on March 23, 2020. The survey was intended to locate where fear of COVID-19 intersects with social, physical, or emotional harm and psychological wellbeing. The online survey was done on 10,368 respondents that were aged 18 years and above. The results of the study found that people were worried, full of fear and unsure of COVID-19 and its consequences on themselves. They were also worried and feared the consequences of the disease on their families, communities, and on the country. The study found that fear was greater in densely populated areas such as urban areas and locations with higher reported cases of the disease.

The study results clearly indicated a linkage between the fear of COVID-19 and psychological well-being challenges. Challenges observed by the study were anxiety and depressive moods. Over 25 percent of respondents reported levels of anxiety ranging from moderate to severe symptoms, and they required clinical treatment. Fitzpatrick et al. (2020) note that from the study's finding, the fear of COVID-19 among the communities and families of the US population was real and paralysing. People feared gatherings and other social events, including closing businesses to minimise contact. From the study, it could be deduced that the impact of fear of COVID-19 in the marketplace is a reality and could have consequences on the psychological well-being of the business community.

COVID-19 caused mass fear and generated many psychiatric manifestations of psychological disorders at all levels of society (Dubey et al., 2020). Specifically, Dubey et al. (2020) found that workers serve many people; for example, frontline healthcare workers were highly exposed to the risk of contracting COVID-19. This scenario made them liable for the experience of harmful psychological outcomes. The psychological outcomes likely to be experienced by frontline healthcare workers included burnout, anxiety, fear of infecting other people, fear of mixing with other people, depressive feelings, heightened dependence on substance use and PTSD.

Dubey et al. (2020) observed that mass fear of the disease among people was linked with uncertainty, including its unpredictable course, inability to tolerate uncertainty and the perceived risk of getting infected. They postulated that these factors might cause psychological reactions such as people behaving and acting in unacceptable ways, being emotionally distressed and adopting avoidance reactions towards other individuals. Dubey et al. (2020) revealed that findings of a survey which was done in China among over 1200 respondents drawn from about 200 cities in the month of January to February 2020 indicated that more than 75 percent of respondents reported experiencing worry about their family members getting infected with COVID-19. Over 50 percent of the respondents were preoccupied with the fear of infection by the disease, and 25.6 percent of the respondents felt COVID-19 was a threat to their very own existence.

The preceding literature review revealed that fear of infection of COVID-19 significantly affected the psychological well-being of people occasioning psychopathology, depression, anxiety and stress. The effects were more severe on people living and working in crowded places, such as the marketplace, where individuals stood a high chance of having close interactions with many other people. Given the environment in which micro-business enterprise traders operate, it was inferred that the fear of COVID-19 in the marketplace affected the psychological well-being of the business community in unprecedented ways.

METHODOLOGY

A cross-sectional survey design was deployed in this research study (Babbie, 2016). This design measures the identified characteristics of a sample only once at one point in time, making it suitable for the current study. The independent variable was conceptualised as fear of infection of COVID-19 at the marketplace. The dependent variable was conceptualised as the psychological well-being of the microbusiness traders. The study focused on the period between June and December 2020. This was the period when the Kenyan government and other governments of the world instituted control health protocols to limit the increase of disease infections in populations. The study sought to establish the psychological well-being status of the Nakuru City Top Market traders during the period.

The research study targeted 388 microbusiness enterprise traders operating businesses within the Nakuru City Top Market, Nakuru County, Kenya. Nakuru Top Market is an enclosed business centre that has stalls that individual traders own. The study also targeted two key informants; the chairman of Top Market and the Nakuru County market superintendent from the Nakuru City Trade Office. The choice of the market for the study was due to the fact that it provided a study population that was easily accessible and had the same characteristics; they were all microbusiness traders located at the same point and who have been doing business in the same place for a long time, even before the outbreak of COVID-19. They experienced the toll of the pandemic on their business at the same time and scale. This fitted well with the choice of the research design for the study.

The sample size was 78 respondents, 20 percent of 388 microbusiness traders (Gay & Mills, 2019). The study deployed a probability sampling method (Oladipo, 2015) to pick the respondents for the study. In addition, the research study made use of a structured questionnaire and structured interview schedule for key informants to obtain primary quantitative and qualitative data, respectively. A pilot study of 10 percent (8) of the questionnaires was done in Naivasha Municipal market to ensure the tools were error-free. The research study used content validity which involves the degree to which an instrument includes items randomly selected from a universal set, for example, of all the possible microbusiness traders in Nakuru City Top Market (Taherdoost, 2016). The measure of reliability was established using Cronbach's alpha. A Cronbach's alpha of 0.70 or higher coefficient of reliability was acceptable for this study (Tavakol & Dennick, 2011).

The Statistical Package for Social Scientists (SPSS) version 26 software analysed the quantitative data. From the findings; the Cronbach's for fear of infection of COVID-19 at the marketplace was 0.748. Ethical considerations were observed throughout the period of the study. COVID-19 Ministry of health protocols was also observed.

RESULTS AND DISCUSSION

As indicated in Table 1 below, out of 78 questionnaires administered, 78 were completed and returned. This constituted a 100 percent response rate. Mugenda and Mugenda (2003) indicated that a response rate of 50 percent was adequate for analysis and reporting, a rate of 60 percent is good, and a response rate of 70 percent and above is excellent. Therefore, the response rate of 100 percent was excellent for this study.

Table 1 - Response rate

Response	Frequency	Percentage (%)
Returned Questionnaires	78	100
Unreturned Questionnaires	0	0
Total	78	100

Source: Research Data, (2022)

Reliability Results

Reliability analysis was subsequently done using Cronbach's Alpha which measures the internal consistency by establishing if specific items within a scale measure the same construct. (Nachmias & Frankfort-Nachmias, 2012) established the Alpha value threshold at 0.7, thus forming the study's benchmark. Cronbach Alpha was established for fear of infection of COVID-19 at the marketplace, as indicated in table 2.

Table 2: Reliability results

Variable	Cronbach Alpha	Number of Item

Fear of infection of COVID-19	0.748	5

Source: Research Data, (2022)

Table 2 illustrates the reliability results as measured through the Cronbach alpha. From the findings, the Cronbach for fear of infection of COVID-19 was 0.748. This indicates that the alpha value threshold was over 0.7. This illustrates that the variable was reliable as its reliability value exceeded the prescribed threshold of 0.7. This, therefore, depicts that the research instrument was reliable.

Gender

The study sought to establish the respondent's gender as the views of male and female respondents may differ on some of the aspects asked. Therefore, on gender, the findings are indicated in Table 3.

Table 3: Gender of the Respondents

Gender	Frequency	Percentage (%)
Female	58	74
Male	20	26
Total	**78**	**100**

Source: Research Data, (2022)

The findings in table 3 indicate that the majority (74%) of the respondents were female, while (26%) of respondents were male. This distribution was slightly skewed towards the females. There were more female respondents compared to males in Nakuru City Top Market.

Age

The difference in age of the respondents was regarded as a key contributing factor to their take on the effects of fear of infections of COVID-19 in the marketplace on the psychological well-being of microbusiness enterprise traders in Nakuru City Top Market, Nakuru County, during the period of COVID-19 between June and December 2020. Respondents' age ranges are shown in Table 4.

Table 4: Age Group of the Respondents

Age group	Frequency	Percentage (%)
20 - 30 years	5	2
30 - 40 years	11	15
40 - 50 years	34	46
50 - 60 years	26	35
Above 70 years	2	2
Total	**78**	**100**

Source: Research Data, (2022)

The results in Table 4 revealed that 15 percent of respondents were 30-40 years, 46 percent of respondents were 40-50 years, and 35 percent of respondents were 50-60 years. In addition, 2 percent of respondents were above 70 and below 30 years,

respectively. This indicates that most respondents were 40-50 years old.

Highest Level of Education

The level of education was viewed as a factor that may affect respondents' view on the effects of fear of infection of COVID-19 in the marketplace on the psychological well-being of microbusiness enterprise traders in Nakuru City Top Market, Nakuru County during the period of COVID-19 between June and December 2020. On the highest level of education among respondents, the response was as follows:

Table 5: Academic Qualification of Participants

Academic Qualification	Frequency	Percentage (%)
Secondary	**35**	**45**
Certificate	**15**	**19**
Diploma	**10**	**13**
Undergraduate	**7**	**9**
No Education	**11**	**14**
Total	**78**	**100**

Source: Research Data, (2022)

The findings indicated that the highest number of respondents attained a secondary level of educational qualification at 45 percent. In addition, 13 percent had diplomas, 9 percent had undergraduate degrees, and 14 percent were not educated.

Business Training

The study sought to establish the number of people working at Nakuru City Top Market with business training. On business training, the findings are indicated in Table 6.

Table 6: Business Training

Business training	Frequency	Percentage (%)
No	58	74
Yes	20	26
Total	**78**	**100**

Source: Research Data, (2022)

The findings in table 6 indicate that most (74%) of the respondents did not have any business training, while 26 percent had some business training. This shows that the majority of the people had no prior business training. This is highly relevant in analysing the findings as it may have played a role in how the microbusiness traders prepared themselves when COVID -19 was declared in the country. This might have helped in mitigating the fear of infection from COVID-19.

Length of Time in Business

The length of time respondents had stayed in the market was viewed as influencing their views on the "Effects of fear of infection of COVID-19 on the psychological wellbeing of microbusiness enterprise traders in Nakuru City Top Market, Nakuru County" during the period of COVID-19 between June and December 2020. On working experience, the response was as follows:

Table 7: Working Experience of Participants

Working Experience	Frequency	Percentage (%)
0-5 Years	**10**	**13**

6 - 10 years	**23**	**29**
11-20 years	**34**	**44**
20 years and above	**11**	**14**
Total	**78**	**100**

Source: Research Data, (2022)

From table 7, 13 percent of respondents had worked for below 0 - 5 years. 29 percent had worked for 6 -10 years, while 44 percent had worked for 11-20 years. 14 percent of the respondents had worked for 20 years and above. This indicates that the majority of respondents had worked for 11-20 years. This reveals that they had been in the market long enough to give reliable information on the effects of fear of infection of COVID-19 in the marketplace on the psychological well-being of microbusiness owners.

Effects of Fear of Infection of COVID-19 in the Marketplace

The study sought to determine the views of the respondents on the effects of fear of infection of COVID-19 in the marketplace. A Likert scale of 1 – 5 was used such that 1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree and 5 = Strongly Agree. The findings are summarised in Table 8 below.

Table 8: Effects of Fear of Infection of COVID-19 in the Marketplace

STATEMENT	MEAN	SD
I was afraid of being infected with COVID-19 and falling sick.	4.01	1.324
I was afraid my customers would be infected by COVID-19 and fall sick.	3.79	0.425
I was afraid that I could infect my family members when I got home after work with COVID-19.	3.54	1.156
I was afraid the COVID-19 infections would affect my business badly, resulting in closure.	3.68	0.974
I was afraid the COVID-19 infections would not end soon.	3.88	0,987
Composite Mean	**3.78**	

Source: Research Data, (2022)

From the findings in table 8, the majority of the respondents, with a mean of 4.01, agreed that they were afraid of being infected with COVID-19 and falling sick. A mean of 3.79 showed respondents supported their fear that their customers would be infected with COVID-19 and fall sick. I was afraid that I could infect my family members when I got home after work with COVID-19 was met with a mean of 3.54, which indicates most respondents agreed they could infect family members with COVID-19 when they got home after work. A mean of 3.68 indicates that respondents agreed that they were afraid the COVID-19 infections would affect their business badly, resulting in closure. Finally, most respondents agreed that they feared Covid-19 infections would not end soon, scoring a mean of 3.88.

The overall mean was 3.78. This signifies that the majority of the respondents agreed on the negative effects of fear of infection of COVID-19 in the marketplace on the psychological well-being of microbusiness enterprise traders in Nakuru City Top Market, Nakuru County.

These research findings agree with the research findings of Dubey et al. (2020), who observed that

mass fear of the disease among people was linked to uncertainty, its unpredictable course, inability to tolerate uncertainty, and the perceived risk of getting infected. Fitzpatrick et al. (2020) observed that people were worried, full of fear and unsure of COVID-19 and its consequences on people. They pointed a linkage between fears of COVID-19 with psychological well-being challenges.

During the interview with the Nakuru County Market superintendent, he said, *"my greatest fear and concern was the sea of humanity that was all around the market because of the many public transport stages that surrounded the market. Nakuru City is a transit town in western Kenya. Commuters from Nairobi to western Kenya pass through Nakuru City. This scenario worried me that I and the traders would be infected with COVID-19. I was also very afraid I would take the disease to my family members at home, mostly that all my children were at home after the schools were closed."*
The researcher also wanted to know whether the microbusiness traders received any Psychological counselling services. When asked, he replied and said, *"No, we only received public health officers who came to teach us how to prevent ourselves from getting infected with COVID-19; the symptoms and what to do when you suspect you have been infected".*

This confession from the market superintendent indicated that there is a need for the dissemination of information about counselling services to Top Market microbusiness traders. Living with emotions of fear, anxiety and uncertainty over time without psychological counselling could cause psychopathology among microbusiness traders in Top Market.

Inferential Statistical Results

Inferential statistics used in the study included the use of correlation analysis and multiple regression analysis. The use of different tests was driven by the need to corroborate results and to query the results further to find out more about the underlying patterns explaining such results.

Correlation Analysis

The study applied the Pearson product-moment correlation coefficient, which is a measure of the strength of linear association between two variables. It was used to measure the degree of association between variables under consideration. Where the Pearson coefficient is less than 0.3, the correlation is weak, and 0.5 implies a strong correlation.

Table 9: Correlations Coefficient

		fear of infection from COVID-19	psychological wellbeing of microbusiness enterprise traders
fear of infection from COVID-19	Pearson Correlation Sig. (2-tailed)	1	
psychological wellbeing of microbusiness enterprise traders	Pearson Correlation Sig. (2-tailed)	.631** .000	1

** Correlation is significant at 0.01 level (2-tailed)
Source: Research Data, (2022)

The correlation analysis to determine the effects of fear of infection of COVID-19 on the psychological well-being of microbusiness enterprise traders shows a significant correlation existed ($r = 0.631$, $p < 0.05$). Furthermore, Pearson's correlations coefficient was higher than 0.5, suggesting a strong relationship existed between the effects of fear of infection of COVID-19 and the psychological well-being of traders. Therefore, it is evident that the independent variable could explain the levels of psychological well-being of microbusiness enterprise traders in Nakuru Top Market. The correlation summary shown in table 9,

therefore, indicates that the associations between the independent variable and the dependent variable were significant.

Regression Analysis

Simple regression analysis was employed in determining the significance of the relationship between the dependent and independent variables pooled together. This analysis indicates how the independent variable influences the dependent variable collectively and to what extent each independent variable affects the dependent variable. The results are indicated in the model summary in Table 10.

Table 10: Simple Linear Regression Analysis Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.463[a]	.291	.436	1.655

Source: Research Data, (2022)

a. Predictors: (Constant) fear of infection of COVID-19

In Table 10, R is the correlation coefficient which indicates the relationship between the study variables; from the findings shown in table 10, it is notable that there exists a strong positive relationship between the study variables as indicated by 0.463. The coefficient of determination, which is the percentage variation determination in the dependent variable that is supported by the variation in the independent variable, is indicated by the R square, which is 0.291. This implies that 29.1 percent of the variance in the psychological well-being of microbusiness enterprise traders at Nakuru City Top Market can be explained by fear of infection of COVID-19. This indicates that other factors can explain 70.9 percent of the changes. Adjusted R squared is the determination coefficient that indicates the variation in the dependent variable due to changes in the independent variable. From the findings in the above table, the value of adjusted R squared was 0.436, indicating a variation of 43.6 percent.

Analysis of Variance

The Analysis of Variance (ANOVA) indicates how well the model fits. The data and the results are presented in table 11 as shown below.

Table 11: Analysis of Variance (ANOVA)

	Sum of Squares	Df	Mean Square	F	Sig.
Regression	26.643	4	35.794	9.408	.002[b]
Residual	43.785	97	2.927		
Total	70.428	101			

Source: Research Data, (2022)

a. Dependent Variable: psychological wellbeing of microbusiness enterprise traders.

b. Predictors: (Constant) fear of infection of COVID-19.

From the ANOVA statistics, the study established that the regression model had a significance level of 0.002, indicating that the data was ideal for making a conclusion on the population parameters as the significance value was less than 0.05. F (9.408) statistic is the regression mean divided by the residue mean. The significant value shown by 0.002 is smaller than the estimated value of 0.05, which implies that the data was significant for making the conclusion that the predictor variable, fear of infection of COVID-19, explains the variation in the dependent variable, is psychological well-being of microbusiness enterprise traders.

Table 12: Regression Coefficient results

Model	Unstandardised Coefficients		Standardised Coefficients	T	Sig.
	B	Std. Error	Beta		
(Constant)	1.427	2.091		.562	.003
fear of infection of COVID-19	.304	.090	.413	2.701	.002

Source: Research Data, (2022)

a. Dependent Variable: psychological wellbeing of microbusiness enterprise traders.

From the analysed data in table 12, the established regression equation was:

$Y = 1.427 + 0.304X_1$

X_1 is fear of infection of COVID-19. From the above linear regression model, the independent variable has a positive coefficient. This indicates a positive relationship between the dependent variable (Y), the psychological well-being of microbusiness enterprise traders and the independent variable, fear of infection of COVID-19.

Discussions of the Findings of the Research Study

On the effects of fear of infection of COVID-19 on the psychological well-being of microbusiness traders at the Nakuru City Top Market, respondents were in agreement with a composite mean of 3.78. The correlation analysis shows a significant correlation existed ($r = 0.631$, $p < 0.05$). With interactions being a constant, especially in a market setting, the fear of infection of COVID-19 was a constant weight on the psychological well-being of the microbusiness traders. The responses served to show the pandemic came with a lot of uncertainty, and the constant fear it brought negatively affected the psychological well-being of the microbusiness traders in the marketplace. REBT theory helped in understanding the development of negative psychological effects due to the fear of infection of COVID-19 on microbusiness traders in Nakuru City Top market.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions: It can be concluded that the effects of fear of infection of COVID-19 on the psychological well-being of the microbusiness traders at the Nakuru City Top Market had negative effects on the psychological well-being of microbusiness traders. The Pearson correlations analysis showed a strong relationship between the effects of fear of infection of COVID-19 and the psychological well-being of the microbusiness traders. The variables proved to be reliable with values of 0.631. The fear of infection of COVID-19 in the marketplace caused depression, anxiety and stress among microbusiness traders.

Recommendations: Campaigns on psychological wellbeing awareness need to be enhanced in Nakuru City Top Market to provide information on psychological interventions available and how the microbusiness traders can access them. Psychoeducation in matters of psychological well-being needs to be provided to the traders. In addition, there is a need for group counselling for the microbusiness traders in Nakuru City Top Market to help them heal from the post effects of COVID-19.

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