

# From Awareness to Action: Household Earthquake Preparedness and Institutional Risk Communication in Abuja, Nigeria

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## Abstract

Public awareness of a hazard does not necessarily produce practical preparedness, particularly in cities where the hazard is infrequent and institutional guidance is limited. This study examines the relationship between residents' knowledge, household preparedness actions, and perceived local-authority guidance concerning tremors in the Federal Capital Territory (FCT), Abuja, Nigeria. A mixed-methods design combined a structured questionnaire administered to 180 residents with field observations and qualitative responses. Frequencies, percentages, weighted means, action rankings, Spearman rank correlations, and Kendall's coefficient of concordance were used to summarize the evidence. Although 52.8% of respondents reported knowing what to do during a tremor, only 33.3% had undertaken concrete household preparedness and 47.2% had done nothing. Perceived institutional guidance was weak: 44.4% considered guidance inadequate and only 27.8% considered it adequate. Prepared households concentrated on low-cost measures—securing furniture (35%) and identifying safe corners or exits (25%)—while structural retrofitting was reported by only 5%. The thesis reports positive correlations between awareness and specific preparedness actions ( $\rho = .31-.52$ ) and between authority guidance and preparedness actions ( $\rho = .28-.47$ ); non-preparation was negatively associated with awareness ( $\rho = -.42$ ) and authority guidance ( $\rho = -.38$ ). The findings show a pronounced awareness–action gap shaped by limited practical guidance and the cost and complexity of structural measures. Community drills, standardized household guidance, trusted multi-channel communication, and targeted support for structural safety are recommended. Because the analysis relies on cross-sectional and aggregated thesis data, the associations are interpreted as exploratory rather than causal.

**Keywords:** Awareness, Action.

## 1. Introduction

Disaster preparedness is often treated as a consequence of awareness: people who know that a hazard exists are expected to take protective action. In practice, the relationship is less direct. Awareness may remain passive when households lack practical guidance, resources, confidence, or institutional support. This problem is especially relevant for low-frequency hazards, where limited direct experience can weaken the perceived urgency of preparation even when potential consequences are substantial.

Earthquake preparedness illustrates this challenge. Immediate protective knowledge, emergency supplies, secured furniture, evacuation plans, and structural improvements operate at different levels of cost and complexity. A resident may know that tremors can occur yet remain unable to retrofit a building, identify an official evacuation point, or obtain reliable information about appropriate action. Household preparedness must therefore be understood as the outcome of interacting cognitive, material, social, and institutional conditions rather than knowledge alone.

The Federal Capital Territory (FCT), Abuja, provides an important setting for examining this relationship. Nigeria is generally characterized as a low-to-moderate seismic environment, but historical and recent tremors challenge assumptions of complete stability (Tsalha et al., 2015;

Olugboji et al., 2021). Abuja is also a rapidly expanding administrative capital containing planned districts, dense peri-urban settlements, critical public facilities, and varied building conditions. Residents may consequently face a combination of uncertain hazard information, growing exposure, and uneven preparedness.

Existing seismic research in Nigeria has concentrated mainly on event documentation, geophysical explanation, engineering standards, and broad vulnerability. Less attention has been given to how residents translate awareness into household action or how institutional communication affects that transition. This omission matters because preparedness measures are rarely self-executing. Clear and trusted guidance can define appropriate actions, correct misinformation, establish shared expectations, and connect households with emergency and planning institutions.

This article isolates the social-preparedness component of a broader seismic risk and vulnerability study in Abuja. Unlike a general citywide risk assessment, it focuses on three questions: What level of knowledge do residents report concerning actions during tremors?

To what extent have households converted that knowledge into practical preparedness?

How perceived local-authority guidance is associated with reported preparedness actions?

The paper contributes evidence on the awareness–action gap in a low-frequency hazard setting and develops implications for risk communication, community planning, and household resilience.

## **2. Literature and Analytical Framework**

### **2.1. From Risk Awareness to Protective Action**

Risk awareness concerns recognition and understanding of a possible threat. Preparedness is more demanding: it involves decisions and actions taken before an event to reduce harm and improve response. The distinction is essential because awareness can coexist with inaction. Households may accept that a hazard is possible but judge it too remote, lack knowledge of effective measures, face competing priorities, or consider recommended actions unaffordable.

Earthquake preparedness includes both non-structural and structural measures. Non-structural measures—such as securing movable items, identifying safe locations, preparing emergency supplies, and planning household communication—are generally less costly and easier to implement. Structural measures require technical assessment, building-owner cooperation, finance, and regulatory support. A preparedness profile dominated by simple actions can therefore indicate both useful adaptation and an underlying constraint on deeper risk reduction.

The Pressure-and-Release perspective helps explain why household behaviour should not be separated from broader vulnerability. Unsafe conditions arise through pressures such as rapid urbanization, weak regulation, inadequate information, limited income, and poor access to services. Preparedness is consequently shaped by the environment in which households make decisions. Asking why residents have not retrofitted a structure, for example, requires attention to tenure, cost, technical advice, building-control systems, and perceived hazard, rather than attributing inaction solely to ignorance.

### **2.2. Institutional Guidance and Risk Communication**

Risk communication is not simply the transmission of warnings. Effective communication identifies credible sources, explains uncertainty, defines practical actions, reaches different social groups, and allows feedback. The Sendai Framework emphasizes the accessibility of disaster-risk information and the participation of communities in preparedness (United Nations Office for Disaster Risk Reduction [UNDRR], 2015). Where authorities are not visible, residents may rely on informal advice, news reports, personal experience, or unverified claims.

Institutional guidance may affect preparedness through several pathways. First, it can improve procedural knowledge by specifying what to do before, during, and after a tremor. Second, official drills and community engagement can strengthen confidence and collective expectations. Third, guidance can connect household action to spatial planning, emergency routes, open spaces, and critical services. Finally, visible preparation may increase public trust and signal that the hazard deserves proportionate attention.

These effects cannot be assumed. Messages that are vague, alarmist, inaccessible, or inconsistent may fail to produce action. Communication in a low-frequency seismic setting must be

precautionary without exaggerating hazard. It should distinguish reported tremors, seismic hazard, exposure, vulnerability, and risk, and should be integrated with the multi-hazard programmes that residents already encounter.

### **2.3. African and Nigerian context**

Several African cities combine modest or uneven seismic hazard with high vulnerability arising from non-engineered construction, informal growth, and weak code enforcement. Oteng-Ababio (2012) described how earthquake risk in Accra can remain institutionally neglected despite growing urban exposure. Reviews of African seismicity and seismic design provisions likewise identify gaps in codes, data, and implementation (Worku, 2014; Alaneme & Okotete, 2018).

Nigeria has documented intraplate seismic activity, but public disaster management is more visibly associated with floods, erosion, fire, and displacement. Historical catalogues and research on West African intraplate tremors provide a basis for precaution while also demonstrating considerable scientific uncertainty (Tsalha et al., 2015; Olugboji et al., 2021). In Abuja, this uncertainty reinforces the need for accurate communication: residents require practical information that supports preparedness without portraying the city as uniformly high hazard.

## **3. Materials and Methods**

### **3.1. Study Setting and Design**

The study was conducted in the FCT, Abuja, Nigeria. The territory contains planned urban districts, satellite settlements, and peri-urban communities with diverse building forms, socio-economic conditions, and access to public services. A mixed-method, cross-sectional design integrated household questionnaire data, field observation, and qualitative responses.

The social-preparedness component analysed here forms part of a broader investigation of seismic activity, infrastructure vulnerability, community risk, and planning conditions. The present article deliberately narrows the analytical scope to knowledge, preparedness actions, and institutional guidance so that household behaviour can be examined in greater depth.

### **3.2. Sampling and Data Collection**

A multistage sampling procedure was used. The study area was stratified using settlement and land-use characteristics, population density, and relevant environmental conditions. Households and respondents were selected within the strata, while participants with specialized institutional knowledge were approached purposively for qualitative input. The completed survey consisted of 180 respondents.

The questionnaire assessed:

- Knowledge of actions to take during tremors.

- Whether households had undertaken preparedness measures.

- Perceived adequacy of information and guidance from local authorities.

- Specific household actions, including securing furniture, identifying safe locations or exits, storing supplies, structural retrofitting, or taking no action.

Open-ended responses captured reasons for preparation or inaction and perceptions of official engagement. Field observations provided contextual information concerning settlement conditions and visible building or infrastructure issues.

### **3.3. Measures and Analysis**

Knowledge, household preparedness, and perceived authority guidance were measured using three-category ordinal items. Frequencies and percentages described each response distribution. Weighted means were calculated using three-point scoring in which higher scores represented stronger awareness, preparation, or perceived guidance.

Specific household actions were ranked by reported frequency. The source thesis also reports Spearman rank correlations between each action and the awareness and authority-guidance variables. Kendall's coefficient of concordance was used to summarize the consistency of action prioritization.

Qualitative responses were grouped around three themes: practical knowledge, resource and affordability constraints, and institutional visibility. Quotations were used in the thesis to illustrate these themes; this article paraphrases their substance to protect participants and maintain a concise journal format.

The inferential statistics are treated as exploratory. This article was developed from aggregated thesis tables rather than the respondent-level dataset, so the coefficients could not be independently recomputed or adjusted for socio-demographic covariates. The analysis identifies associations, not causal effects.

### 3.4. Ethical Considerations

Participation was voluntary and informed consent was obtained. Responses were anonymized and personal identifiers were removed. The study sought to discuss seismic risk without causing unnecessary alarm and followed appropriate procedures for community and institutional engagement.

## 4. Results

### 4.1. Knowledge of Actions during Tremors

Ninety-five respondents (52.8%) reported knowing what to do during a tremor, 35 (19.4%) were unsure, and 50 (27.8%) reported that they did not know. The weighted mean of 2.25 on a three-point scale indicates moderate self-reported awareness. Participants who considered themselves knowledgeable generally referred to immediate protective behaviour and remaining calm. Those who were unsure emphasized a lack of training and dependence on guesswork.

The result shows that awareness is neither absent nor comprehensive. Almost half of the sample either lacked knowledge or was uncertain. Moreover, self-reported knowledge does not demonstrate that the stated action is correct, complete, or likely to be performed under stress. The measure is best interpreted as perceived procedural awareness.

Table 1. Knowledge of actions during tremors (n = 180)

| Response   | Frequency | Percentage | Weight | Weighted score   |
|------------|-----------|------------|--------|------------------|
| Yes        | 95        | 52.8       | 3      | 285              |
| Not sure   | 35        | 19.4       | 2      | 70               |
| No         | 50        | 27.8       | 1      | 50               |
| Total/mean | 180       | 100.0      | —      | 405; mean = 2.25 |

Source: Fieldwork (2025).

### 4.2. Household Preparedness

Only 60 respondents (33.3%) reported taking concrete preparedness measures. A further 35 (19.4%) were partly prepared, while 85 (47.2%) had taken no measures. The weighted mean of 1.86 is below the midpoint between partial and full preparation and confirms that practical readiness lagged behind awareness.

The difference between the 52.8% who claimed knowledge and the 33.3% who reported concrete preparation is a central finding. At least some residents understood immediate protective behaviour without modifying their household environment or assembling supplies. Qualitative responses pointed to uncertainty about effective measures, limited official instruction, affordability, and a tendency to rely on hope rather than planned action.

Table 2. Household-level preparedness (n = 180)

| Response        | Frequency | Percentage | Weight | Weighted score   |
|-----------------|-----------|------------|--------|------------------|
| Prepared        | 60        | 33.3       | 3      | 180              |
| Partly prepared | 35        | 19.4       | 2      | 70               |
| Not prepared    | 85        | 47.2       | 1      | 85               |
| Total/mean      | 180       | 100.0      | —      | 335; mean = 1.86 |

Source: Fieldwork (2025).

### 4.3. Perceived Adequacy of Authority Guidance

Only 50 respondents (27.8%) believed that local authorities provided sufficient information or guidance on tremor or earthquake preparedness. Another 50 (27.8%) were unsure, while 80 (44.4%) considered guidance inadequate. The weighted mean was 1.83, the lowest of the three main indicators.

The combined 72.2% who either rejected or could not confirm adequate guidance suggests weak institutional visibility. Uncertainty is meaningful: even where plans or agency activities exist, they have limited practical value to households if residents do not know about them. Qualitative

responses emphasized the absence of community visits, drills, locally specific instructions, and clear information about where to go or whom to contact.

Table 3. Perceived adequacy of local-authority guidance (n = 180)

| Response   | Frequency | Percentage | Weight | Weighted score   |
|------------|-----------|------------|--------|------------------|
| Adequate   | 50        | 27.8       | 3      | 150              |
| Not sure   | 50        | 27.8       | 2      | 100              |
| Inadequate | 80        | 44.4       | 1      | 80               |
| Total/mean | 180       | 100.0      | —      | 330; mean = 1.83 |

Source: Fieldwork (2025).

#### 4.4. Pattern of Specific Preparedness Actions

Preparedness was concentrated in simple, low-cost actions. Sixty-three respondents (35%) reported securing furniture, and 45 (25%) identified safe corners or exits. Twenty-seven (15%) stored emergency supplies. Structural retrofitting was reported by only nine respondents (5%), while 36 (20%) reported no preparation.

The ranking indicates a practical gradient. Actions requiring limited expenditure or technical support were more common than permanent modifications to buildings. Retrofitting's low adoption cannot be explained by awareness alone; it may reflect cost, tenure, access to qualified professionals, uncertainty about standards, and the perceived rarity of damaging events.

Table 4. Specific household preparedness actions and exploratory associations

| Preparedness action            | Frequency | Percentage | Rank | $\rho$ with awareness | $\rho$ with authority guidance |
|--------------------------------|-----------|------------|------|-----------------------|--------------------------------|
| Securing furniture             | 63        | 35         | 1    | .52*                  | .47*                           |
| Identifying safe corners/exits | 45        | 25         | 2    | .50*                  | .44*                           |
| Storing emergency supplies     | 27        | 15         | 3    | .45*                  | .39*                           |
| No preparation                 | 36        | 20         | 4    | -.42*                 | -.38*                          |
| Retrofitting structures        | 9         | 5          | 5    | .31*                  | .28*                           |

Source: Fieldwork (2025). Kendall's  $W = .62$ ; \* $p < .05$  as reported in the thesis.

Awareness was positively related with each of the five reported actions (.31–.52), as was perceived authority guidance (.28–.47). Non-preparation was negatively related with awareness (.42) and guidance (.38). The strongest correlations were between securing furniture and finding a safe place/exit. These findings lend support to the idea that knowledge and institutional support may facilitate a household's implementation of acceptable responses; they do not demonstrate that authority guidance caused the behaviour.

## 5. Discussion

### 5.1. What is the Awareness Action Gap?

These findings clearly show a discrepancy between perceived and actual preparedness. Slightly over fifty percent of people said they knew what to do, with only a third having taken tangible steps for preparing themselves and a slight majority having done nothing. This discrepancy highlights the danger of assuming community resilience based solely on awareness of hazards.

A number of factors may be responsible for the gap. The various blocks within a householder's mind may only be capable of holding actions that 'immediately follow' and not the other emergency preparation actions that precede the event. Householders may be pressed for time and information is not coalesced into a household checklist of relevant tasks or a locally-specific plan of action. Specifics such as a 'lack of funds, knowledge of technical details, permission from a landlord, or fellow community members' may suffice as reasons for non-completion. Certain hazards don't happen frequently enough for any reasonable time or energy to be spent preparing the householder (frequency of occurrence) and 'are competing for the household's time' (599).

The approach to particular actions confirms this reading. Fixing furniture and locating exits were far more prevalent than retrofitting. Homes seem to choose measures which are visible,

affordable and to some degree individually manageable. These measures work well, but leave far too many buildings and vital services structurally exposed. Preparedness policy must therefore maintain available household measures and link families into professional and regulatory channels of structural safety.

### **5.2. Institutional Margin as a Term of Condition of Preparedness**

Perceived authority guidance had the lowest mean score, and 44.4% considered it deficient. The correlations reported in the thesis indicate that as perceived authority guidance increased there was increased adoption of preparedness actions. While causality cannot be deduced we observe a reasonable progression: households require some reliable advice on the tenets of effective preparedness actions and how to distinguish it from informal conjecture.

Institutional visibility is not just shouting out generic messages after a tremor. Instead, residents need copy after copy of tailored, concrete and locally-based messages. Schools, health posts, area councils, resident and other associations, religious or community groups, the media both old and new channels can echo messages.<sup>1</sup> Officials should openly communicate the element of uncertainty, since a low-to-moderate hazard does not mean the complete absence of threat and that preparedness does not necessarily translate into the occurrence of an upcoming big quake.

Communication should also be connected to place. Households should know how to move safely, where to find open spaces, who to call in an emergency, and all the potential dangers from building condition or population access. In a densely populated settlement, it might rely on communal arrangements, as narrow alleyways, overcrowding and lack of open spaces leave little room for individual solutions.

### **5.3. Urban Resilience: Bridges with Local Communities**

Results extend sources of preparedness from personal knowledge and capacity to an urban system. Housing conditions, transport, institutions, emergency services and building control all influence household behaviour. Makes sense in the context of African cities, where urban development and governance shape disaster risk (Oteng-Ababio, 2012; Alaneme & Okotete, 2018).

In the case of Abuja, seismic preparedness would be most effective if incorporated into more comprehensive, multi-hazard community resilience initiatives, rather than into a separate campaign to address a hazard which occurs infrequently. The capacities listed above would also be beneficial in the event of floods, fires, storms, etc.

## **6. Recommendations**

### **6.1. Set Default Household Guidance along the following Axes:**

The FCT should produce a succinct household preparedness health and safety guide that has been technically validated content should include undertaking actions before a seismic event, behaviour during the event, safety considerations afterwards, emergency numbers, and the liabilities of non-professional building evaluation. Information should be presented in non-technical language and formats and should be aligned across all agencies.

### **6.2. Transition in the Process from mere Information Campaigns to Significant Participation**

Community programmes should provide demonstrations, school and neighbourhood drills, household planning discussions and alerts of local assembly points. Hands-on experiences give residents a chance to test-out concepts and reveal local limitations that general messages may overlook.

### **6.3. Tackling the Cost Issue**

This can either be through local fund raising drives since the practice involves the local community e.g. Pledge from BMC European Tour and aiming to engage the local community in Mauritius and fund raise on an on-going basis. Recommendations are as follows:

Authorities and professional institutions need to apply distinctions between low-cost non-structural technique and those that involve design input. The need for a periodical assessment of buildings will need to be built into regulations that focus on critical system and projects in high occupancy buildings, and household recipients should be provided with familiar advice on when

professional assessment may be needed. Assistance programs should focus on deprived and hard-to-reach location rather than just applying the presumption that information alone will result in structural amelioration.

#### **6.4. Establish Trusted Multi-channel Communication**

Information should be provided to area councils, emergency agencies, planning authorities, schools, health facilities, residents associations and appropriate media. Messages should be repeated, localized, consistent, and not contradictory. Arrangements should be made to allow residents to raise concerns and request clarification.

#### **6.5. Keep Track of Results of Battle Readiness (6.3)**

Programme evaluation must focus on changes in behaviour rather than message exposure. Regular questionnaire surveys can follow households as they construct, acquire hazards, stockpile, participate in drills, and recall/salient official information. If respondent level data can be acquired, then multivariable analysis of household outcome on factors of income, education, tenure status, structure type, prior tremor experience and location should be performed.

### **7. Limitations**

The research employed a cross-sectional design and depended heavily on self-reported behaviour. Respondents may have exaggerated awareness or readiness, and the three-point scales yielded little information about the robustness of the action taken. The sample was confined to selected study sites.

The results for the correlation coefficients and significance levels were sourced from aggregate thesis tables. The respondent level data set was not accessible during the preparation of this article for independent verification, confidence intervals, control for confounding variables, or for more detailed tests of scale reliability. These results should therefore be considered exploratory.

In addition, the study never assessed if the knowledge of measures each household reported taking was technically correct, nor tested the effectiveness of each measure. Future work should include scenario-based knowledge questions, direct observation where applicable, validated household preparedness scales, and longitudinal assessment of communication strategies.

### **8. Conclusion**

Complacency in household seismic-related preparedness seems to be common in Abuja as a majority of the respondents reported that they knew what to do, believed in the efficacy of what to do and claimed to have practiced it so as to reduce their vulnerability to the hazards of earthquakes. In terms of best practices, 52.8% responded yes, 33.3% practiced the best practice and 47.2% practiced nothing. 59.7% said local-authority guidance was not good. 100% of the respondents relied on simple affordable actions rather than structural actions. 59.7%.

Evidence also suggests that awareness alone is neither necessary nor enough. Residents need true and operational information as well as institutional and material support for measures beyond their own reach, from trusted, reliable, repeated, locally-specific sources. Embedding seismic preparedness within wider urban resilience programmes for Abuja will counter top-down complacency in the city and create lasting household and community actions while not over emphasising the city's seismic hazards.

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