

FLATTENING THE CURVE OF CORONAVIRUS (COVID-19) USING COMMUNICATION APPROACH

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ABSTRACT

At one time or the other, the world is confronted with one kind of global calamity or the other, thereby posing serious concern for mankind with the attendant ravaging implications for humanity to contain with. Unfortunately, society is caught napping with little or no resources in place to contain the ugly situation. The situation is worsen by the fact that most national budgets are barely adequate to carter for the basic essentials of her citizenry, let alone provide for emergencies to take care of diseases and natural disasters which are unanticipated.

KEYWORDS: Covid-19, Curve Flattening, Communication Approach

INTRODUCTION

The foregoing necessitates urgent steps by governments to initiate and formulate policies guidelines in order to contain the deadly epidemic as the aftermaths may not be palatable to the society. This has attracted government at various levels, including donor agencies to contribute handsomely to ameliorate the negative and unanticipated consequences of such disasters and diseases. One of such diseases is the current global coronavirus (Covid-19) which has devastated the world. At the twilight of 2019, the global community was invaded and rattled with a strange disease called coronavirus or covid-19 which broke out in Wuhan, a city in China. Since the advent of the disease, the world has known no peace and the entire world has been in disarray and things have not been the same any longer. As the disease continues to spread across the world, no one can tell when it would stop to give humanity breathing space.

Till this moment, the number of people infected is in the increases of people with unquantifiable number of deaths recorded despite various precautionary measures put in place by all countries which have been compelled to activate their health and security apparatuses. The world is making present efforts to curtail further spread of the disease and deaths. Unfortunately, such efforts have not yielded the desired result as more people are infected and deaths recorded based on global statistical index.

Historical Development of Coronavirus (COVID – 19) and Pandemics

Coronavirus (Covid-19) which the World Health Organisation (WHO) described as Pandemic is a strange global disease which originated in Wuhan, a city in China at the twilight in 2019. Medical experts described the new virus as severe acute

respiratory syndrome coronavirus-2 (SARS – COV – 2) while the disease associated with it is referred to as COVID – 19. It is a type of common virus that infects humans typically leading to an upper respiratory infection (URI) (Okoro, 2020).

It is certain that the current COVID-19 pandemic is only one of several pandemics that have ravaged the world. Okon, (2020) cited the Free Encyclopedia and noted “throughout history, there have been several pandemics of diseases such as smallpox and tuberculosis and Black Death which killed an estimated 75-200 million people in the 14th century.

Other notable pandemics include the 1918 to 1920 influenza pandemic otherwise known as the Spanish flu that resulted in dramatic mortality worldwide. There have been history of pandemics that have shaken humanity and some of these outbreaks occurred over 3000 years ago. The widespread of these outbreaks and the death toils qualified them to be classified as pandemics. Pundits have post-label that when a disease occurs in greater numbers than expected in a community, region or season, it is considered an outbreak. In addition to human suffering outbreaks create panic, disrupt the social and economic structure and can impede development in the affected communities. Since no one can predict exactly when or where the next epidemic or pandemic will occur, it becomes necessary for individuals to explore and learn from previous outbreaks.

As humans have spread across the world, so have infection diseases. Even in our modern era, outbreaks are nearly constant. Some of the previous pandemics have outweighed the current Coronavirus (COVID-19), in terms of rapidly in spread and casualties. A few of the previous pandemic would be mentioned for record purpose. In 541AD, the plague of Justinian began to spread and continued to spread for nearly 200 years killed 50 million people in the Middle East, Asia and the Mediterranean basin, according to some estimates. The plague was said to have been caused by bacteria that are spread by rats that were bitten by infected fleas. Perhaps, this is the old version of our current Lassa fever. Between 1331 and 1353, a deadly epidemic known as Black Death killed an estimated 75 million people worldwide. Eight hundred years after the last outbreak, the plague was said to have returned to Europe. Beginning from Asia, the disease spread to the Mediterranean and Western Europe in 1348 and killed an estimated 20 to 30 million Europeans in six years.

What is known as the Great Plague of London began in China in 1334 and spread along trade routes, wiping out entire towns, according to some historical and pathological authorities. In the light of this, Florence, Italy, lost a third of its 90,000 residents in the first six months. Overall, Europe lost 25 million people. In 1633, settlers from France, Great Britain and the Netherlands were alleged to have “imported” smallpox to Massachusetts USA. The disease quickly spread to the Native American population.

It is not clear how many people were killed by the smallpox epidemic, though historians estimate some 20 million people may have died after the European landed.

The media plague began in the 1860s and killed more than 12 million people in China, India and Hong Kong. It wasn't until the 1890s that people figured out how the bacteria infection spread and a vaccine was developed as a remedy for it. The largest plague outbreak in the 20th century occurred in Manchuria between 1910 and 1911. Approximately, 60,000 people died. The plague still occasionally causes smaller outbreaks in parts of sub-Sahara Africa.

The great flu pandemic that occurred between 1918 and 1920 was estimated to have killed between 30 to 50 million people worldwide. It was called the Spanish Flu even though it did not originate from Spain. It was so-called because Spanish media were at liberty to report the incident because of the enormous press freedom the country employed

at the time. In 1984, scientists identified the Human Immune Deficiency virus or HIV as the cause of the dreaded Acquired Immune Deficiency Syndrome (AIDS). That same year, the deadly disease killed more than 5,500 people in the United States. At present, more than 35 million people around the world are living with HIV infection, even as records have shown that more than 25 million people have died of AIDS since the first cases were reported.

Severe Acute Respiratory Syndrome, better known as SARS, was first identified in 2003 in China, though the first case was believed to have occurred in November 2002. By July 2003, more than 8,000 cases and 774 deaths have been reported globally. In 2012, approximately 122,000 people worldwide died from Measles, a highly contagious disease caused by a virus. Typhoid fever kills around 216,000 people a year. Tuberculosis, an infectious bacteria disease killed an estimated 1.3 million in 2012. These are some of the infectious diseases that most concern health officials currently. In 2016, the World Health Organisation declared a public health emergency of international concern over Zika virus predicting that three to four million people would be infected within a year as it was “spreading explosively” throughout America.

Zika is the first mosquito-borne disease to cause the birth defect. Medical experts say the devastating birth defect is microcephaly. This virus is also associated with miscarriage, still birth and other neurological deficits (Okoro, 2020).

Despite the persistence of disease and pandemics throughout history, there seems to be a gradual reduction in death rates as a result of improved health care. However, the current rapid spread of coronavirus worldwide appears to defy medical measures put in place by governments to contain the high rate of infectious and mortality recorded worldwide as the flattering circle remains fluctuating. Perhaps, this is due to certain factors – inability to manage the global outbreak, through adequate budgeting provisions, blatant disregard for public policy formulation by government and lacking political will on the part of the government.

OBJECTIVES OF THE STUDY

The study “Flattening” the curve of coronavirus (COVID-19) using communication approach has the following specific objectives:

- To identify the communication approach employed by government and other relevant agencies to contain COVID-19 pandemic in Nigeria.
- To ascertain the effectiveness or otherwise of the communication approaches in curbing the COVID-19 pandemic in Nigeria.
- To identify the communication challenges associated with the COVID-19 control measures in Nigeria.
- To recommend measures that would enhance effectiveness of COVID-19 and other similar campaigns in future.

Public Policy Direction

The devastating effects of COVID-19 have compelled governments all over the world to initiate policies to contain the spread and curtail the high rate of mortality in their countries. Some of these measures may appear draconic and harsh, but they are well-intended to serve the interest of humanity. These measures are many and varied and include shutting of interstate borders to curtail community contact and transmission, closure of public places such as markets, hotels and other entertainment and public places such as schools, offices and business premises, formulation of extant emergency laws to

curtail and restrict social gathering, declaration of national emergencies such as that of the United States of America, placement of travel bans in countries with high coronavirus cases, including closure of all international airports to in and out travellers etc.

In the light of government's concern to contain the pandemic and curtail the rate of infection and high mortality rate, many countries based on the advice of the World Health Organisation (WHO), adopted policies aimed at tackling the disease squarely. In Nigeria, the National Council for Disease Control (NCDC) rolled out certain measures aimed at drastically flattening the curve of coronavirus pandemic.

In Nigeria, closing of interstate borders to restrict interstate movements was effected mounting security personnel at the borders to ensure total restrictions and movement from one state to the other. Unfortunately, such measures become a money-making avenue for security personnel to extort money from commuters. The enforcement and implementation of some of the measures met a brick wall because of certain factors. For instance, it was difficult for people to stay indoors and cut down on outings because the provision of palliatives to the citizenry was haphazardly implemented. While there was provision by government to provide relief to the most vulnerable segment of the society, very few people could have access to the palliatives as some of the items and monies were diverted into private pockets by government officials who were directly in charge. In some instances the items were hoarded with the intention of converting them to personnel use.

Also, the policy of social distancing did not take into consideration the socio-cultural structure of the traditional set-up in some African societies. For instance, some traditional societies perceive the physical and social distancing as an affront and aberration to their collective cultural and social cohesion and disruptive of the traditional life-style. This is so as there was no deliberate and sustained effort to educate and enlighten the populace on the ravaging coronavirus which was perceived as strange.

Aside from the Presidential Task Force (PTF) and COVID-19 that monitored and briefed the public frequently on the state of infections and death induces, no such effort was replicated in the rural areas where majority of the population reside. The fact is that only a few urban dwellers could have access to the broadcast and print media where daily reports and updates were given. This left most rural dwellers out of information relevant to the COVID-19 pandemic.

THEORETICAL FRAMEWORK

This study is anchored on structural functionalism theory. Functionalism is a sociological perspective which sees society as a system. This means that the society is made up of a set of interconnected parts which together form a whole. According to functionalists, the basic unit of analysis is society and various parts that make up the society are understood purely with regards to their relationship to the whole (Rutzen, 1995).

From the structural functionalism perspective, the society is viewed as an organism like human body with several important parts that work together harmoniously towards the survival and maintenance of the organism (human) being. In this connection, therefore, to understand any part of the society is to analyse its relationship with other parts and its contribution to the maintenance of the society. Functionalists argue that just as the human body has some basic needs that must be satisfied for it to survive, so also does society has its own basic needs that must be met if it must continue to exist.

The implication of the structural functionalism perspective is that for a society to function in any aspects of its endeavour, be it health, politics, economics, etc., other facets or units must perform their own functions or carry out their

responsibilities diligently to enable the particular task to be achieved. In relation to the present study “Flattening the Curve of Coronavirus (COVID-19) all relevant stakeholders in the campaign to curtail the high rate of infection and mortality in Nigeria and the world as a whole must live up to expectation if the curve must be flattened and reduced to the barest minimum. The government and relevant agencies such as the Presidential Task Force on COVID-19 medical personnel in the various health institutions, security personnel, community leaders, medical personnel assigned with the responsibility to disseminate relevant messages and other relevant stakeholders must perform their duties creditably and live above board if the task of flattening the curve of COVID-19 must be achieved. Anything short of this is unacceptable. The question is: to what extent have the various stakeholders live up to expectation? Have government agencies perform efficiently and effectively? What about security agencies put to mount the interstate borders? Have they not compromised by receiving gratification from commuters to frustrate government effort to curtail community transmission? What about family heads and parents? The task of ensuring the success in the control of the spread of the pandemic is a concerted one which must not be left in the hands of one social structure alone. Failure on the part of health officials, security personnel, family heads, etc. would invariably lead to failure to arrest the rapid spread of the virus and eventual high number of deaths across the country and the world as a whole.

The relevance of this study to the study cannot be overemphasized. Perhaps, the difficulty to win the war against the spread of COVID-19 and the high mortality rate in the country can be attributed to failure of each of the social structures to perform their individual tasks. Appreciable performance of each of the units would have resulted in the success of the efforts to nip the pandemic menace in the bud.

In order to achieve full success in the combat against the COVID-19 pandemic in the country, all the safest procedures in respect to all the non-pharmaceutical guidelines issued by health organisations must be followed to the letter. It is obvious that no matter the efforts of communication media and personnel to carry out the campaigns to reduce the rate of infection and mortality in the country such efforts would hit rock and remain a mirage if other social structures in the country abdicate their individual responsibilities because the media are not magicians who will perform magic wand to eliminate the pandemic.

METHODOLOGY

The study adopted the survey research design as it is most suitable for a study of this nature. This is because the coronavirus (COVID-19) pandemic measured the perceptions attitudes, opinions and behaviours of Nigerians in respect to their encounter with the diseases at the time. Personal observation of the researcher also constituted a very valuable source of data gathering in the study.

The study also employed secondary data such as newspapers articles, opinions and editorials, daily television update on COVID-19 as presented by the Chairman of Presidential Task Force and National Centre for Disease Control (NCDC).

Implications of COVID-19 Pandemic in Nigeria

The economic, social, political and spiritual implications on Nigeria were multi-dimensional and had serious implication on physical, psychological and emotional psyche of Nigerians of all social strata. To say that the coronavirus disease scare disrupted the socio-economic, socio-cultural, economic, religious and political fabric of Nigeria is no exaggeration.

There is no gainsaying that the COVID-19 pandemic disrupted social solidarity, socio-cultural cohesion among the African descents. In fact, it appears the pandemic was purposely designed to dismantle the common patrimony and affinity of the traditional African heritage. At the economic front, the consequences were very severe and caused untold hardship on the Nigeria populace; business premises, hotels and recreation centre, schools (nursery, primary and tertiary) witnessed a complete lockdown and proprietors suffered massive losses, causing very high rate of unemployment as private employers could not afford to pay employees for being out of business. Pupils and students of primary and tertiary institutions idled away at home constituting a nuisance to parents and guidance. There were indices of social-ills perpetuated by adults and young people and a high number of rapes was recorded at very un-proportionate dimension, some of which were incestuous. There was also a very high rate of criminality as the jobless and unemployed must keep body and soul together through either legitimate or illegitimate means of livelihood.

Agriculture also suffered a great deal with anticipated and envisaged hunger and the future. The country also recorded a high rate of unplanned and unwanted pregnancies owing to idleness and confinement at home. The virus also caused a disruption of academic calendar at primary, secondary and tertiary levels. The hospitality and tourism industries were not left out as local and international flights were banned. This caused a great financial loss for countries which depended on this sector for economic gain. The social and physical distance and stay at home measures introduced by relevant authorities to contain the spread of the pandemic and reduce the mortality rate created strange, strained relationships among relatives, social and cultural disorientation and disdain for cultural norms, values and beliefs. It is feared that the deep wound created by this phenomenon may be difficult to heal.

The sit-at-home directive issued by the government created untold hardship for Nigerians as it was economically unproductive – created a great economic waste, hunger and poverty in the land. Some of the measures were clearly in contrast with the World Health Organization which advised that countries should create a balance between lives and livelihoods; between protecting their people, while minimizing the social and economic damage. Lockdown of the country translated to lockdown of the economy.

The COVID-19 pandemic witnessed interventions by several agencies and organisations. In spite of the fact that many Nigerians could not be tested for coronavirus or get results of test on time because of the low testing capacity for COVID-19 so many donations came to boost the testing capacity.

In spite of the huge donations to contain the virus, the Socio-Economic Rights and Accounting Project (SERAP) has raised concern about lacking transparency in the use of funds and resources to combat the spread of coronavirus (or COVID-19) in Nigeria (Egbe, 2020).

Communication Strategies for COVID-19 Campaigns

Health campaigns, like other campaigns-political, religion, etc. require deliberate planning and sustained efforts in order to bring about desired results. Different communication strategies and approaches can be used in effective development communication goals globally.

Rogers & Shoemaker's (1971) diffusionist approach has sometimes been employed to effect development communication campaigns. It argues that innovation and development efforts should begin from urban centres. This is a typical Western modernization oriented top-bottom (master – servant) communication approach to the dissemination of

message. This is reminiscent of downward communication pattern. It is essentially directive communication where instructions, directives and orders are simply dished out from superior quarters to inferior citizens. This is typical of most governments in Developing countries like Nigeria where government officials and developmental communication planners launch campaigns from campaign headquarters without having personal contact with the target audience (the rurals). This strategy cannot be effective in achieving the desired result because it does not take into consideration, the people's peculiar problems lacking a thorough knowledge and understanding of the complex socio-cultural political religious, educational and cultural environment of the people to be mobilized. Perhaps, that is why the current campaign to curb the spread of coronavirus has remained unabated.

Daniel Lerner's diffusionist variant generalized from his Middle East studies (1988) stated that on the contrary meaningful development in any given body politic must began from the rural areas in order to have a multiplier effect.

Research findings in communication behaviour of rural people from different cultural settings have found that these approaches have been modified to be relevant to the rural people. However, it can be effective if the change agent (information planners and implementer) is careful to appreciate the people's peculiar circumstances. This must include a thorough knowledge and understanding of the people's socio-economic, political, religious, educational and cultural environments of the people.

Chin and Benne (1976), writing on general strategies for effecting change in human societies recognized three types of strategies: (a) the Empirical Rational Strategies (b) Normative Re-educative Strategies, and (c) Power-coercive Approaches

The Empirical Rational strategies are the most frequently employed by men of knowledge in America and Western Europe. The fundamental assumptions underlying this strategy are that men are rational and that men will follow their self-interest once this is revealed to them. The working operation of this system is that a change is purposed by some person or group which knows the situation that is desirable, effective and in line with the self-interest of the person, group, organization or community which will be affected by the change. The advantage of the strategy is that the proposed change has more chances of succeeding because the person or target group is assumed to be rational and moved by self-interest. The proposed change is likely to be effective if it can be rationally justified and if the proposal can show evidence that the group or community will gain by the change. This view parallels Katz (1974) view about the Uses and Gratification Theory which postulates that in any communication situation the individual audience member or message receiver (e.g., a former or potential voter or coronavirus victim usually has specific information needs and consciously exposes himself to communication mainly to satisfy or gratify those needs. The implication is that the individual audience members will act on a piece of information depending on whether it satisfies their needs and aspirations. The corollary is to pose the question: to what extent or how effective have the Nigerian health workers or the Presidential Task Force on COVID-19 taken into consideration the basic assumptions or prescription of the Uses and Gratification Theory. The truth is that the health officials or members of the Presidential Task Force, the National Centre for Disease Control (NCDC) and other relevant bodies responsible for the propagation of information on COVID-19 have not taken the pains to enlighten the Nigerian populace on the need to imbibe the habits of adhering to the measures put in place by the government to curtail the spread of the coronavirus pandemic. Perhaps, if these premises were taken into consideration during the campaign, the disease would have been quickly nipped in the bud. It therefore behoved on the agencies or organisations vested with the

responsibilities of managing information on COVID-19 to examine the specific needs of the Nigerian populace and re-design relevant messages that would convince and compel them to willingly embrace the measures put in place to curtail the rate of infection and mortality rate in the country.

The second group of strategies is the Normative – re-educative strategies. This approach is different from the empirical rational strategies. The Normative-re-educative strategies assume that human motivation is different from that underlying the empirical-rational strategies. It posits that patterns of action and practice should be supported by socio-cultural norms and commitments on the part of the individuals to these norms. Socio-cultural norms are usually supported by the attitude and value systems of individuals' normative outlooks which sustain their commitments. This sociological viewpoint re-affirms the fact that people's culture, values and beliefs system provide the framework upon which people's behaviour and attitude are predicated. Audience members will reject any message that does not reinforce or disparage their cultures, values and beliefs. The question is: have the handlers of COVID-19 messages related issues taken into consideration the assumption of this theory? Have they considered the cultural norms, values and belief system of the traditional people of Africa to drive home relevant information patterning to coronavirus in Nigeria? Have they considered the congregation pattern of African in their typical settings? What about the blowing of air by elders and chiefs into the palms of their subjects as a way of blessing them? And what about embracing and hugging loved ones to demonstrate love and affinity? Until propagations or handlers of COVID-19 information learn to study and appreciate these values, norms and beliefs of the typical traditional Nigerian social structure, it may be difficult for any meaningful success to be recorded in the coronavirus campaigns. The implication is that for the Nigerian populace, especially the rural to be on the same page with relevant authorities in the campaigns, the people whose cooperation is being sought must be brought to change their normative orientations and discard old patterns so as to develop new commitments to new ones.

Power-coercive approaches can also be utilized in effecting change in human societies. The approach in power coercion contrast sharply with the empirical-rational strategies and normative-re-education strategies. The power-coercive approach is somewhat closely related to the diffusions approach, which is typical Western modernization oriented top-to-bottom (master-servant) communication approach to dissemination of information. Power-coercion like the Roger-Shoemaker's diffusionist model, believes that knowledge resides with those who have power and authority.

This approach is similar to Kotler (1972) power (coercion) strategy which aims at producing behavioural compliance or cooperation in the change target through the use of agent-controlled sanctions. In coercion strategy the agent is concerned more with changing the behaviour rather than the beliefs and values of the change target. The coercion approach is not dynamic and can be aptly used when the goal of the change agent is purpose-specific and is a short-term measure. What is common to all forms of coercion is that they are revolutionary and ad-hoc in nature. The problem with this strategy is that it is militant, undemocratic and sometimes irrational and the change agent often resorts to all forms of crude, corrupt and unacceptable method by all means to ensure compliance provided he achieves his purpose. Perhaps, the coercion approach may be recommended in the campaign to compel Nigerians to adopt the measures employed by the Nigerian Presidential Task Force on COVID-19 and enforce compliance so as to reduce or flatten the curve of coronavirus in Nigeria. This is more so as Nigerians are prone to readily obey rules when sanctions are attached to non-compliance.

Moemeka (2012, p. 112) identifies two basic levels at which to examine the strategies that may be considered appropriate for implementing advocated social change or development. The first is the socio-political level, which is

concerned with establishing an effective and efficient rapport between the development or the development agency and the target social system in order to create a conducive atmosphere for exchange of ideas about an advocated change. The second strategy is the communication level which is concerned with the message, channel and the target audience. Moemeka (2012) further explains that the scene for social change endeavour is set at the socio-political level, while the details of implementation are worked out at the communication level.

Moemka (2002, p. 115) explains that:

Socio-political strategies are those directed at determining communication/target audience making relationship in the process of meeting the identified need of a target social system. They are concerned with how to relate to the target social system in such a way as to avoid unnecessary conflicts arising from difference in socio-cultural background, perception of objectives, existing mind-set and methods of implementation. They are based primarily on the socio-political climate or tone of the community.

Moemeka further explains that the development communicator who is working within the existing socio-cultural/political system must gain the attention of the people and emphasized that adequate knowledge of the subject-matter and of the socio-cultural contexts of the target social system would always help to turn the disadvantage into advantage. This strategy is similar to the Chin and Berne (1976) Normative- re-educative strategies which recognize the socio-cultural norms of the target audience.

The second strategy identified by Moemeka (2012) is the communication level which he refers to as communication based strategy. He sees communication as the vehicle through which implementation of any development programme is actualized. He identified three variants of the communication-based strategy which is of two type: Extension and community development and ideological and mass mobilization; the mass media strategy which is of two types: the centralized and the localize (or decentralized); and the integrated strategy which combines the interpersonal and mass media strategies in ratios appropriate to each social system, based on felt needs and socio-cultural realities.

Interpersonal strategies is the oldest strategy for using communication to generate social change or development within social systems while the mass media strategies emphasizes the centralized control of mass media personnel, infrastructure and concert as well as the control of the direction and flow of mass media messages for the purpose of development.

The mass media strategy has been widely criticized by many development communication experts on grounds that it is exclusively elitist and urban based and excludes more than 70% of the rural populace from having access to development messages relevant to their development needs and aspirations.

The Integrated Strategy

Recognizing that neither of the two major systems, interpersonal and mass media are perfect and have their limitations and problems, the integrated strategy aims at eliminating their inadequacies while maximizing their potentials and strengths.

The integrated media strategy which is highly recommended is the fusion of two broad categories – the mass media and oramedia (indigenous media). As Jefkins and Ugboajah (1986, p. 93) put it:

Planners of development campaigns should think of integrated communication rather than about the use of specific media. As long as communication is extended, the action energized, the psychological mood set, the socio-cultural context identified, and the audience mobilized, it is unnecessary to worry about any given media.

Jefkins and Ugboajah (1986) in arguing against the use of the mass media alone by African countries for almost all development campaigns advise against the wrong conception in their relatively low cost, convenience and effectiveness thereby becoming blinded to the fact that communication for development should be a multi strategy approach devised to reach the target audience wherever they are found. They note that these target audiences are not restricted either in size and location as they could be found in buses, in trains, in market places, in village, in entertainment centres, fishing cracks, in schools, in factories, or even in places of worship. The choice and use of specific media type should be predicated on the particular purpose and audience to be served by the development programme. It behoves on development agents therefore to be competent communicators adaptable to changing circumstances and mode of communication.

A combination of both the mass media and indigenous media are advantageous for several reasons. Where the mass media offer limited functions, the oramedia will fill the gap and vice versa. The mass media have the singular advantage of reaching many people at a time and create cognitive influence (knowledge, awareness and interest), while traditional or indigenous media can be an effective relay chain to the mass media but can only reach a few people at a time. The main trust of the integrated multi-media approach is that both the mass media and traditional media are complementary to each other. The implication of integrated approach is that all likely hindrances or impediments would be eliminated if a joint action is instituted with the collaboration of the two broad categories. The reconciliation of the two-systems would create a communication balance which can be actualized when certain conditions are put in place.

Lending credence to the multi-media approach, MacBride (1981, p. 56) holds the view that a combination of group media and mass media is probably the appropriate answer but warned that it would be a wrong approach if the role of large audience media is made to suffer to the advantage of small audience media. He advises developing countries not to bother about choosing between big and little media but rather to display wisdom and foresight in their attempt to balance big and small media because they need both to survive.

Perhaps, media campaigns on coronavirus pandemic to flatten the curve may not have yielded the desired success because government has ignored the integrated media strategy while concentrating on the sole use of the mass media to the neglect of interpersonal and group media.

The Burden of Misinformation and Fake News

Elegbede (2020, p. 19) expressed concern over the spread of fake contents and misinformation about the coronavirus disease especially in the social media. The unbelief attitude of Nigerians which has been strengthened by traditional and social media has compounded the so-called mystery of coronavirus. To some, coronavirus is nothing more than malaria and so there was no need for the populace to be scared.

In the words of Elegbede (2020, p. 19):

In my searches across the social media channels during the period, I found out that the misinformation appears more on Facebook and WhatsApp. These fake contents border on the unimaginable to the religious, myths and

misconceptions. Some fake stories may indeed be amusing to the reader, but the danger that they pose to health and society could be enormous; they could be counter-productive and result in more deaths.

Some of the fake news propagated by social media platforms is completely at variance with press releases and information on the websites of local and international organisations charged with the responsibilities of controlling the disease and providing credible information on its outbreak rate of spread or infection and deaths. Websites of accredited and credible organisations such as the Nigerian Centre for Disease Control (NCDC), the Nigerian Office of World Health Organisation (WHO) and the United Nations International Children's Emergency Fund (UNICEF).

It has become obvious that the spread of fake news has become a source of worry to some of the credible organisations charged with the responsibilities of informing the public with reliable data and have made deliberate efforts to counter them. For instance, on March 23, 2020 the World Health Organisation used its twitter handle to alert Nigerians on the distribution of fake contents and wrong information in the media about the pandemic and advised people to visit the official website and social media pages of WHO the Federal Ministry of Health and NCDC for credible information. People should be wary of fake news and misleading information which has the propensity to cause more harm than good to the public expressed disgust at the level of disinformation as regards COVID-19 pandemic. In the words of Yusuf (2020, p. 13):

Since February 27, when Nigeria recorded its first COVID-19 case, there has been an overwhelming amount of information on social media, websites and mainstream media about the virus. The increased access to information has led to a proliferation in sources of information, with the consequence that has enabled the spread of misinformation and fake news.

The truth is that when there is a vacuum, scarcity of relevant and legitimate sources of information, it would give room to unreliable source of information which would eventually leave vulnerable people with misinformation and disinformation. The best alternative is to encourage credible organisations such NCDC, WHO and Presidential Task Force on COVID-19 to employ multi-media messages to reach different target audiences at the grassroots.

DISCUSSION OF FINDINGS

Findings from FGDs and interviews indicated that several communication media and interpersonal means were employed during the COVID-19 sensitisation campaigns. They include the broadcast media (radio and television), newspapers, public address system (motorized campaigns) in market places, prison establishments, local government councils using local languages, village assemblies; etc. Essentially, the campaigns were carried out by agencies such as the National Orientation Agency (NOA), civil society groups, Presidential Task Force (PTF) on COVID-19. There were also distribution of flyers and posters with messages on preventive measures for the masses. Other interpersonal channels include traditional rulers, age grades, women associations, youth associations and other similar groups in the localities.

It was also revealed that there was collaboration between relevant agencies such as World Health Organisation (WHO), UNICEF, and National Centre for Disease Control (NCDC) during the campaigns. However, it was revealed that the campaigns did not take off on time until the spread of the virus has taken a greater hold on the Nigerian populace before government swung into full action.

The campaigns were not without hitches. Most of the challenges stemmed from effective enforcement of the measures put in place by government. They include, inability of government to enforce social distancing in public places, wearing of nose mask, avoidance of handshaking and hugging during greetings which were regarded by the locals as disrupting socio-cultural order. It was also noticed that some of the security agents compromised in enforcement of interstate restrictions as they received bribes and look the other way during the process.

CONCLUSIONS

Coronavirus (COVID-19) remains one of the pandemic diseases that have ravaged the world and devastated global economy thereby created massive upheavals in all facets of the society. The disease has raised serious concern among countries of the world and has attracted sympathy with donation from global agencies and financial institutions, corporate bodies and individuals. Despite efforts geared toward containing the disease, the infection rate and mortality rate appears unabated.

Nigeria as a country has not been the same after the pandemic ravaged the country. The disease resulted in total lockdown of the economy, including closure of educational institutions, religious houses, and restrictions of movements at both state and interstate including local and international air flights. All these have created socio-economic challenges of immeasurable dimension.

RECOMMENDATIONS

A problem identified is a problem almost solved. In the light of the issues x-rayed in the coronavirus (COVID-19), it is pertinent to attempt making some suggestions.

- Before resorting to sanctions, all measures and directive of government should be properly disseminated including exhausting all form of dialogue through mutual understanding.
- All relevant agencies should be engaged and committed to sensitization campaign on the deadly coronavirus pandemic (COVID-19), to stem the spread of the scourge. This should include all state decentralized to the local government level – mandated to create awareness campaign across the state to enlighten the people on how to contain the transmission of the coronavirus pandemic (COVID-19).
- To stem the rising tide of fake and dangerous news about the coronavirus pandemic, people should be encouraged to rely only on credible channels such as WHO, NCDC, and other health-related organisations for information about the disease.
- The National Orientation Agency (NOA) should be alert to her responsibility by educating and enlightening the public using several means of communication, including megaphone mounted in vehicles and move from village to village, community to community, to persuade and convince people that COVID-19 is real.
- The Presidential Task Force in COVID-19 should invest heavily on the traditional means of communication using town-crier, traditional institutions (age grades, traditional rulers), religious leaders, civic society groups, and other means to get the message on coronavirus across to the rural population.

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