Change communication strategy in media campaigns and Covid-19 rising infections in Nigeria

Stanislaus Iyorza*, Leonard Ojorgu
Department of Mass Communication, University of Calabar, Nigeria
e-mail: stanisiyorza@unalca.edu.ng

Abstract
This paper seeks to investigate the relationship between change communication approaches and rising infections in Covid-19 in Nigeria. There are heavily sponsored media campaigns for disease prevention in media advocacy and social mobilization by media organizations, Government and Non-Governmental Organizations, but cases of infections have been on the steady rise. Being correlational research, this study adopts a survey design, using quantitative and qualitative methods to elicit data from the study population. The population of this study included five (5) university Professors and three (3) media practitioners who responded in a personal communication on why media campaign for disease prevention is not as successful as intended, and 334 respondents whose reactions to the change communication approaches in media campaigns in cases of Covid-19 were examined. Findings revealed that most Nigerians were not responding adequately to the change communication strategy and preventive message campaign appeals to wash their hands thoroughly under running water, avoid crowded spaces, and use hand sanitizers. Findings also revealed that the non-availability of the materials and products such as running taps and the high cost of hand sanitizers militated against the people's ability to act. The study recommended that the Federal Government make available all that the people needed to comply with the messages by creating the deserved enabling environment. Simultaneously, communication strategists should use the appropriate language and appeals that are compatible with the plight of the people.

Keywords:
Communication change; covid-19; media campaigns; rising infections; strategy.

1 INTRODUCTION
Change communication strategy has become the concern of media campaigns for prevention in the upsurge of diseases and rising infections in Nigeria (Yta & Umukoro, 2015). The transmission of preventive measures against contracting and spreading the novel coronavirus has been the responsibility of every media channel, from radio, television and newspapers through magazines, the internet, and to the social media platforms in Nigeria and the world. Historically, the first case of Corona Virus Disease, code-named Covid-19, was recorded in Wuhan, a city in China in December 2019, and spread quickly to other cities of the world. World's infections had risen to over 1.1 million with more than 65,000 deaths by the second week of April 2020 and to more than 10.6 million by the 2nd of July 2020. In Nigeria, the Federal Ministry of Health confirmed the first case of Coronavirus COVID – 19 on 27th February 2020 and first death on the 23rd March 2020. National Centre for Disease Control (2020) reported that by the second week of April 2020, the country's case profile rose to 232 with 5 deaths but by the second day of July 2020, Nigeria's infection rate had risen to over 26,800 cases.

The history of rising infections in other diseases in Nigeria has been mind-boggling. USAID (2010) recorded that between 1986, when Nigeria's first HIV/AIDS case was diagnosed and 2001, the prevalence rate rose from 1.8% in 1991 to 5.8% in 2001. The HIV Sentinel Survey [HSS] of National Action Committee on AIDS (NACA, 2010) stated that while the infection rate in 2003 reduced to 4.4% in 2005, it rose to 4.6% in 2008 and dropped to 4.1% in 2010. Between 2001 and 2009, approximately 7 million persons died with an average of 280,000 getting infected and another 203,000 dying yearly in Nigeria. United Nations Agency for International Development, UNAIDS's Statistics (2018) showed that HIV/AIDS infection figure for 2018 was 130,000 with 53,000 deaths. NACA (2020) reported that by 2019, 1.9 million people were living with HIV in Nigeria, with a prevalence of 1.4% among adults aged 15 – 49 years.

As Nigerians began to navigate the nightmare of HIV, the Ebola Virus Disease (EVD) reared its ugly face to the citizens' traumatic welcome. On July 20, 2014, Patrick Sawyer, a Liberian-born American diplomat, flew into Lagos, Nigeria, from Lome, in transit to a conference in Calabar, the Cross-River State capital. He was later discovered to be infected with EVD. He eventually died, and the disease spread to people who had direct contact with him. The outbreak of EVD in Nigeria was so devastating that it outpaced financial and health resources to fight it through media campaigns. Nigeria was quick to contain the EVD and prevent its spread within a short period. National Centre for Disease Control (NCDC, 2019) documented that Lassa fever surfaced with Nigeria's infection figures hitting 70 by 2019.

The advent of any disease to any country puts the media on their toes as they must contend with a lot of information dissemination, sensitization and mobilization, and advocacy. In Nigeria, like in different climes, information and sensitization against disease spread assume a more preventive posture than control in social adverts and social mobilization on social media platforms. In the case of Covid-19 in Nigeria, media advocacy by government officials and medical or health personnel on almost every electronic media has been the order of the day. A Presidential Task Force (PTF) was constituted to get facts about the Covid-19, inform and update Nigerians daily when necessary, and control the disease flow. Besides, the PTF undertakes social mobilization and advocacy to state governments and members of the public on preventive measures against Covid-19 spread.

Nations and international organizations have increasingly been at the forefront of campaigns against the spread of diseases. *The Straits Times* (2020) reported that on the 5th of March 2020, the World Health Organization (WHO) announced its plans to launch a new social media campaign tagged "Be Ready for COVID – 19", with the purpose "to
create awareness and encourage people to be safe, smart and informed in the outbreak of the disease." In Nigeria, national and international radio and television stations including Nigeria Television Authority (NTA) International, African Independent Television (AIT), Channels Television and Silver Bird Television and other privately-owned radio stations and print media undertook intensive and aggressive broadcast of sponsored awareness creation and disease prevention messages daily amidst of the Covid-19 pandemic. Their communication strategy and approach have the same appeal for prevention against transmission of the Covid-19.

On TVC News (2020) transmits on DSTV and GOTV and the creative pattern of their communication of the preventive campaign appeals goes thus:

Wash your hands thoroughly with soap under running water for at least 30 seconds, avoid contact with people’s hands and hard surfaces, always sneeze into a piece of tissue or cough or sneeze in your elbow, avoid crowded spaces, stay at home if you feel unwell and seek medical help if you have a fever, cough, or difficulty in breathing.

Despite the heavily sponsored advocacy and social mobilization campaigns by Government and Non-Governmental Organizations, as well as corporate social responsibility activities of the Nigerian media and individuals for disease prevention, cases of infections keep rising. The rising infections amid daily media preventive campaigns on almost all media platforms call to question the efficacy of the Nigerian media's change communication strategy. Is the communication strategy faulty or challenged by some external factors? If faulty, what is wrong, but if challenged by other external forces, what are they? This study seeks to find answers to the challenges of planned communication for change in general.

With the massive investment of time, efforts, and money to create awareness for the prevention of Covid-19, this research seeks to close the gaps with the following questions: 1) To what extent have Nigerians complied with the appeals of the change communication strategy in media campaigns for Covid-19 prevention in Nigeria?, 2) What factors militate against change communication strategy in media campaigns for Covid-19 prevention in Nigeria?, 3) How can change communication strategy in media campaigns for Covid-19 prevention flatten the curve of rising infections in Nigeria?.

This research investigates the efficacy of change communication strategy in media campaigns for the prevention of the spread of Covid-19 and Malaria in Nigeria. Specifically, this research seeks to: 1) Investigate the extent to which Nigerians have complied with the appeals of the change communication strategy in media campaigns for Covid-19 prevention in Nigeria, 2) Find out factors that militate against change communication strategy in media campaigns for Covid-19 prevention in Nigeria, 3) Find out how to change communication strategy in media campaigns for Covid-19 prevention can flatten the curve of rising infections in Nigeria?.

The study will add to existing scholarship, the knowledge about the challenges of effective media campaigns. The study will be of immense value to African scriptwriters or message designers, editors, production managers, and programmers or directors of radio, television, and print communication organizations in Nigeria and charting new horizons in African Communication studies. The study will present a concrete basis for understanding and executing effective health interventions.

2 REVIEW OF LITERATURE

The C-change Final Report I, 2012 defines change communication as the art and practice of informing, influencing and motivating individuals, communities, institutions and public audiences about important health and development issues. Thus, change communication seeks to consciously address social factors that influence behavior and development within a socio-ecological framework. Iyorza (2015) argues that although change starts with an individual, it must be manifested in social norms, groups, policies, or structures to be sustainable. Urie Bronfenbrenner's ecological model (1978) and McKee, Manocourt, Chin and Carnegie's socio-ecological model for change (2000) suggest that change communication has three approaches: media advocacy, social mobilization, and personal behavioral change communication. Like strategic communication, change communication begins with designing a communication plan; identifying objectives desired change and perceived barriers. The process also involves focusing, designing, and creating the communication and intervention tool(s). Change communication as an intervention tool is implemented, monitored, and evaluated based on set objectives.

Change is a process of transformation in any individual or organism from an initial position to another position. It is a necessary phenomenon that mostly occurs with the aid of physical or psychological pressure or persuasion. In some cases, change occurs naturally, but instituted forces, in other instances, propel change. The concept of change is, therefore dynamic and unpredictable but certain. To a reasonable extent, change is the final product of the individual's decision in the behavioral disciplines. Social forces or influences on behavior propel it. The Trans Theoretical model of change as cited by Iyorza (2015) indicates that an individual's changed behavior undergoes six stages namely: pre-contemplation (not ready) stage, contemplation (getting ready) stage, determination, or Preparation (ready) stage, action stage, maintenance stage and recurrence or relapse stage (which is not a must), but may experience a relapse at any stage.

The change communication strategy is part of a plan that defines priority audiences whose behavior must change and what to say to them in which appropriate medium to convince them to adopt new and helpful behavioral modes. The communication strategy gives direction to planned intervention. It ensures different products, materials, activities, and ideas all ultimately work well together and support each other towards a clear vision of change. Iyorza (2015) and Marushevska (2018) attempt to view a communication strategy to include a summary of analysis requires the media campaign, a draft implementation plan, and a draft evaluation plan.

The strategy requires that one articulate the problem and the changes the problem calls for (desired changes) for suitable communication. In the campaign message for prevention against Covid-19, the desired change is for message
recipients to adopt and practice the guidelines for preventing the spread of the disease, washing hands regularly, using a facemask, and avoiding crowded areas. Iyorza (2015) adds that the communication strategy should identify the existing research gaps and what efforts made in the past to solve the problem.

Most fundamentally, the communication strategy is a planned communication procedure that depends mostly on considering all categories of the audience involved. The first category is the primary audience and followed by the secondary audience which influences the primary audience, and the tertiary audience, whose activities affect the primary audience's behavior. The perceived barriers that can pose obstacles to achieving efficacy in communication and communication objectives should be SMART; Specific, measurable, attainable, realistic, and Time-bound.

A communication strategy also spells out a combination of media channels (media) to be used in the media campaign, including interpersonal channels as one-to-one communication, peer-to-peer exchanges, social networks, training and skill-building activities in small groups, and community-based channels (Ogar & Edor, 2020; Yte, 2020).Bulletin boards, community meetings, parent-teacher meetings, church bulletin boards, posters, drama groups, cultural events, community radio, and mass and social media channels, such as television, radio, newspapers, billboards, transit advertising, internet, Facebook, blogs, YouTube videos, SMS are considerations help create the key content and appeals in the entire communication plan. Factors that influence communication channels' choice include the complexity of the issue, the sensitivity of the problem, the audience's literacy level, desired reach, prevailing social norms, cost and media habits, and preferences of intended audiences.

A communication strategy spells out a draft implementation plan which answers questions such as i). Who will do the work? (Staffing), ii). What's a realistic timeline? (Time), iii). How much will all this cost? (Budget). Moreover, what roles and responsibilities are expected of partners and allies? (Partnering). It is worthwhile to take the time necessary to address these practical considerations. Otherwise, resources can get wasted moving in directions that, in the end, are not a feasible part of the plan.

Evaluation data collection at discrete points in time to systematically investigate a program's effectiveness. Does evaluation answer such questions as What kind of change happened with the people or communities reached by our efforts? Were these changes mean for our program? How close did we get to our targets? Evaluation requires the measurement of change over time. The best approach to measuring change is to have a good solid baseline, which refers to data collected early to represent the situation before the program takes any action accurately. The solid data will be collected over time for comparison. Several key decisions need to be made before collecting baseline data.

Freimuth, Cole and Kirby (2011, pp. 77) state that every disease prevention media campaign aims to inform and influence individual and community decisions and appeal for healthy attitudes and behaviors that enhance healthy living. Disease prevention through media campaigns appears in forms of media advocacy and social mobilization. Disease prevention campaigns from the media are believed to be influential to the audience through messages, appeals, and narratives. Ike (2005) states that the art of acquiring knowledge and the preference for what beneficial knowledge to acquire from the media is supported by Albert Bandura's Social Learning and Elihu Katz, Jay Blumler, and Michael Gurevitch's Uses and Gratification Theories of the media, which will be validated or questioned. Belch and Belch (2001) explain that media message recipients cognitively possess messages based on numerous factors, including message content, media scheduling and repetition, motivational or persuasive bases' ability and experience of the message recipients, and their cognition of suitable appeals the message.

In Nigeria today, there are intensive and increased health campaigns targeted at the maintenance of a high sense of hygiene, including thorough hand washing, hand sanitizing, and keeping of adequate social distance as in the most recent case of the Corona Virus pandemic, but why most of the campaigns are less effective is the research gap to be bridged as proposed. The focus of communication research has shifted from understanding and analyzing the media's traditional functions as a conveyor belt for information, education, and entertainment to a more critical analysis of the role media and its contents serve as social and behavioral change agents. This focus has birthed diverse communication research areas that seek to understand how society interacts with its media and how the media construct a personal worldview that shapes behavior.

Analysis of the literature would suggest that some of these areas' focus include: media and consumerism (Iqani, 2012); media and terrorism (Marthoz, 2017); media and education (Baran 2012); media and politics (Oates, 2008); and media and health. Of these areas of mention, there appears to be an increased focus on research about media and health behavior, particularly as it relates to health promotion and disease prevention and control. One can argue that the geometrical rise in the number of inextinguishable diseases in the world, especially those that afflict nations whose traditional ways of life compound inadequate health care and systemic failures in health delivery, may be responsible for the research focus on the role mediated messages and content play in health promotion and disease prevention and control. While developing countries seem to face various health challenges, African countries seem to be expanding the global disease map or landscape. For example, Mbossou et al. (2019) say in 2018, "29 different diseases accounting for 96 outbreaks were reported to the WHO by 36 out of 47 countries in the WHO African region.

Equally important here is that most African countries share a huge burden or are significantly challenged on communicating health issues aimed at disease prevention and control effectively. One such country is Nigeria. With its expansive landscape, exploding population, and religious beliefs and cultural practices, Nigeria appear to intercept mediated communication about health and wellness through health campaigns such as the 'Make Naija Stronger' (2016), Polio Eradication Initiative (2017) and Children against Measles and Meningitis (2019). Despite the communication efforts to reduce the rising infections of different diseases at different times in Nigeria, the prevalence and infection rates continue to be on the rise. Clearly, because some of these campaigns have been ineffective, it begs several questions such as, how effective are the communication approaches adopted by the media in their health promotion and disease
prevention campaigns? Why have infections continued to be on the rise despite the communication interventions? What gaps exist between expensive and intensive media campaigns/communication and the rise in infections?

3  METHOD
This study is correlational research that sought to investigate the relationship between change communication approaches and Covid-19 rising infections in Nigeria. The study adopted a survey design, using qualitative and quantitative methods to elicit data from the study population. The population of this study included five (5) university Professors and five (5) media practitioners who voiced their opinions through personal communication on why media campaign for disease prevention is not as successful as intended, and 334 respondents whose reactions to the change in communication approaches in media campaigns in cases of Covid-19 were examined. The online interview method was adopted for the interview contact with participants using the WhatsApp platform. The audience reaction to change communication campaign approaches questionnaire was designed to get responses for respondents randomly selected from Calabar, Cross River State, Nigeria.

4  RESULT
Quantitative data was derived to tackle the first research question: To what extent would Nigerians have complied with the appeals of the change communication strategy in media campaigns for Covid-19 prevention in Nigeria. A total of 500 copies of the Reactions to the change communication strategy in media campaigns in cases of Covid-19 questionnaire were distributed but those that were returned and considered valid for this study numbered up to 334. The presentation and analyses are as follows:

| Table 1. Demographic Information of Audience |
|---------------------------------------------|
| **Audience Information** | **Frequency/Percentage** |
| **Sex** | Male | 138 | 42% | Female | 196 | 58% |
| **Educational Qualification** | No Edu | 34 | 10% | Basic Edu | 83 | 25% | Dip/NCE | 40 | 12% | BA/B.SC above | 176 | 53% |
| **Age** | 16-30 | 184 | 55% | 31-40 | 71 | 21% | 41-50 | 56 | 17% | 51 above | 23 | 7% |

Source: (Field Survey, June 2020)

Table 1 reflects the study population's demographic information based on the variables of sex, educational qualification, and age. Data indicate that even though more female respondents (58%) than the male (42%), the gap is not much. Respondents with first degree and above (53%) constituted the highest number followed by those with Ordinary Diploma or Nigerian Certificate in Education (NCE) (40%), then those with Basic or Primary Education (25%). Respondents with no educational qualification constituted 10% of the population. The majority-educated respondents’ participation shows that respondents were enlightened to give reliable responses to the questions. Respondents between the ages of 16 and 18 years constituted the highest population (55%), followed by those between 31 and 40 years (21%), then those between 41 and 50 years (17%). Respondents aged 51 years and above constituted 7% of the research population. This also indicates that respondents were mature to have their opinions depended on.

| Table 2. Audience Position on Media Campaigns on Prevention of Covid-19 |
|---------------------------------------------------------------|
| **Audience Position** | **Audience Response** |
| | **Frequency** | **Percentage (%)** |
| Audience receiving messages from NCDC | Yes | 277 | No | 57 | Yes | 68 | No | 3 |
| Audience exposed to information on Covid-19 | Yes | 295 | No | 39 | Yes | 88 | No | 12 |
| The audience who believes in the reality of Covid-19 | Yes | 181 | No | 153 | Yes | 54 | No | 46 |
| Audience afraid of visiting hospitals during Covid-19 pandemic | Yes | 270 | No | 64 | Yes | 81 | No | 19 |
| Audience receiving palliatives from the government during Covid-19 pandemic | Yes | 20 | No | 314 | Yes | 6 | No | 94 |
| Audience believing local media information and updates on Covid-19 | Yes | 161 | No | 173 | Yes | 48 | No | 52 |
| The audience being mobilized on media platforms on Covid-19 | Yes | 114 | No | 220 | Yes | 34 | No | 66 |
| Audience involved in interpersonal communication on Covid-19 | Yes | 291 | No | 43 | Yes | 87 | No | 13 |

Source: (Field Survey, June 2020)

Table 2 is designed to elicit reactions on the extent to which Nigerians have complied with the appeals of the change communication strategy in media campaigns for Covid-19 prevention in Nigeria. To unravel this, investigating the audience position generally became necessary. Majority of Nigerians (68%) accept to have been receiving sensitization messages from the Nigeria Center for Disease Control (NCDC); a more significant majority of the respondents (88%) agreed to be exposed to information on Covid-19 from multiple sources but the difference in the gap between the number of persons who believe that Covid-19 is a reality (54%) and those who think the disease is not real (46%) is not wide. Thus, whereas a little more than half of Nigerians believe in the reality of the disease, close to half of the population is yet to come to terms with the reality of Covid-19.
Observably, the fear of been subjected to test, fear of being stigmatized if discovered to be infected, and many more reasons may be responsible for why many respondents (81%) are afraid to visit the hospital even where most messages in the media campaign appeal to suspects who may feel unwell to visit the health centers. The Federal Government of Nigeria and some state governments claim to be spending millions of Naira on palliatives to the less privileged in the country, but the study shows a significant number of respondents (94%) responded that they have never received any palliative from the government during the period of the pandemic. This may be why most of the respondents (52%) find it difficult to believe the information and update from the local media on Covid-19, even though the difference in number with those who still accept media update (48%) is very slim. An encouraging number of respondents (66%) agree to be part of the mobilization of others to stay safe in the pandemic period. In comparison, another more significant majority (81%) accepted to have had interpersonal communication with many others on preventive measures against contracting Covid-19.

| Audience Reactions to Communication Appeals | Audience Response |
|--------------------------------------------|-------------------|
| **Frequency** | **Percentage (%)** |
| Audience responding to washing hands appeals | Yes 302 No 32 | Yes 90 No 10 |
| Audience responding to use of hand sanitizers appeals | Yes 112 No 222 | Yes 34 No 66 |
| Audience responding to avoidance of shaking hands appeals | Yes 114 No 220 | Yes 35 No 65 |
| Audience responding to stay at home under lockdown appeals | Yes 55 No 281 | Yes 16 No 84 |
| Audience responding to sneezing into the elbow or tissue appeals | Yes 70 No 264 | Yes 21 No 79 |
| Audience responding to use of facemask appeals | Yes 192 No 143 | Yes 57 No 43 |

Source: (Field Survey, June 2020)

Table 3. Audience Reactions to Appeals of Change Communication Strategy

Table 3 seeks to address the crux of change communication strategy and its appeals in message campaigns for the prevention of Covid-19. Data reveal that 90% of the respondents agree to the washing of their hands always as appealed by the campaign messages, but 66% of the respondents do not use hand sanitizers as appealed by some messages, obviously because of the sudden inflation in the cost of the sanitizers and the financial inability of most Nigerians to afford hand sanitizers. Those who afford and use hand sanitizers constitute 34% of the study population. On a positive note, most of the respondents (65%) yield to appeals to avoid shaking hands and hugging others. Unfortunately, a significant number of study respondents (84%) say they could not yield to the communication appeal to stay at home under a lockdown directive. This is obviously because of the need to search for food and basic needs to survive. Respondents (79%) also indicated that they are not yet used to sneezing in the elbow or tissue as directed by most message appeals but more than half of the population (57%) agrees to have complied with the use of nose mask as against 43% of those who said they hardly use them.

5 QUALITATIVE DATA PRESENTATION AND DISCUSSION

Qualitative data were derived from online interviews with participants, and the aim was to seek answers to the first two research questions that are addressed under the following sub-headlines:

Factors that militate against change communication strategy in media campaigns for Covid-19 prevention in Nigeria? Participants reacted differently to the question's demand that sought to find out factors against change communication approaches' efficacy. Obokoadata (personal communication, 2020) states that:

*Media advocacy strategy for disease prevention communicates to the public and not with the public. Take Covid-19 for instance, you tell people to wash hands every time, but there are no running taps; how do they understand how to do that every time?*

The above view shows a clear disparity between the planning of change communication messages and the lack of consideration of the audience's plight. This implies that the media messages for prevention of Covid-19 and Malaria in Nigeria may be targeted to the right audience and may be understood by the majority of them but the efficacy of the message is lost because message sponsors do not know that running water in Nigeria is difficult to come by while hand sanitizers and soaps are expensive commodities for the people to purchase especially in Nigeria where the prices were astronomically inflated when the people were experiencing pay cuts and job losses. This also explains that the efficacy of change communication in media campaigns and the supportive persuasive theories may be challenged by the absence of certain basic needs of the audience that further challenge their motivation to act.

The above view corroborates another participant's position. Kur (personal communication, 2020) posits that the absence of the Nigerian government's political will to provide a conducive environment and materials for people to comply with the appeals of the media preventive campaigns, especially in the case of Covid-19 is a hindrance to achieving success to the change communication approach. The government's lack of political will implies that change communication messages may be well-strategized, but the wherewithal to comply may be lagging. This appears to be true because in Nigeria for instance, media campaign messages put certain demands on the people, some of which are beyond their level of compliance (Iyorza 2015; Iyorza 2017; Iyorza & Abu 2020). Kur (personal communication, 2020) states:

*Messages that demand that people should stay at home during the Covid-19 pandemic and lockdown in Nigeria were ineffective because the government was not providing adequate palliatives to the majority of those who did not have food and other basic needs of life to warrant them to stay locked-down for the period the government requires. For instance, in the United States and some European countries, the message appeal to stay at home may work because one understands that their government gave them adequate palliatives in the form of food and money.*
In the case of Malaria prevention, the media campaign messages demand mostly the use of mosquito nets and governments have made efforts to make the nets available as much as possible but the desire to use the mosquito nets for other purposes such as fishing and protection of farms from insect attacks make it challenging for the positive responses to the change communication appeals. This is also another mitigating factor in the efficacy of the messages.

Ayakoroma (personal communication, 2020) identifies a lack of audience' confidence in the government and other message sponsors as another encumbrance to preventive media campaign messages. This view holds that there is a systemic failure as the Federal government of Nigeria is sincere in handling Covid-19 and Malaria information in some cases. In the case of Covid-19, Ayakoroma (personal communication, 2020) argues that Covid-19 is believed to be real but there is suspicion that the government is churning out fake figures to present a rise in the infection figures to attract financial sympathy of developing nations and donors. Again, the government's unwillingness to accept the use of herbal substitutes tested and assumed to be effective in the cure of the Covid-19 and Malaria has heightened doubts among Nigerians in the media message campaigns. Ayakoroma (personal communication, 2020) adds:

Other factors responsible for the inefficacy of the sponsors' messages include the provision of Nigeria's Center for Disease Control phone numbers to people to call when they are not tested and may not call for lack of call units or fear of being stigmatized if they have the Covid-19 virus and Nigerians suspicion that there are no isolation centers as claimed in most messages even as the government claims she is handling Covid-19 cases. Treatment of patients is transparent in countries like Britain, but Nigerians only hear or read the daily permutations of Covid-19 positive cases in their country in the media.

Gbilekaa (personal communication, 2020) opines that the language used to communicate to Nigerians, especially the less literate who are rural dwellers in Nigeria is a major encumbrance to the success of change communication strategy in the approach to achieve success in the preventive media campaigns in the cases of Covid-19 and Malaria. This view posits that the less literate Nigerians are yet to understand certain scientific terms used in the campaigns because they have no local alternatives in the various languages that exist in Nigeria. Therefore, terms like Corona Virus and Malaria are still used in the adverts that are produced in local languages for the local communities. Gbilekaa (personal communication, 2020) states:

They hardly understand probably because of their low literacy levels; for instance, how can one interpret Covid-19 to suit the locals in Nigeria who do not understand English? Even most English speakers are yet to understand what Covid-19 is. Consequently, cultural factors, illiteracy, and reckless attitude of message recipients become mitigating factors against messages' efficacy.

This brings to question the issue of message focusing and designing – the communication strategy. From the use of language that is hardly compatible with most Nigerians' literacy levels, one raises the question of who the radio, television, print, or social media campaigns are targeting; are they targeting the urban elite, the rural folk, or the urban poor? Ekwok (personal communication, 2020) identifies one-way communication from the Nigeria Centre for Disease Control (NCDC), the existence of communication gaps in the facts about Covid-19 and Malaria, and the high cost of data units to access authentic and detailed information about the diseases by Nigerians as significant reasons why there is a low level of compliance to change communication appeals in media campaigns for the prevention of diseases.

This implies that the NCDC floods information indiscriminately about diseases in the media with little or no easy opportunity for the audience to ask questions in feedback forms. In cases where journalists attempt to ask questions that would generally help Nigerians to get clarifications, members of the Presidential Task Force (PTF) in Nigeria sometimes played down on questions and did not explain their actions. They could not provide detailed information about the disease thereby giving room for rumor and myths to evolve. Nigerians are great media audiences, especially on social media platforms but they prefer to use their data units for communication with friends rather than facilitating information on disease prevention among their peers. Observably, during the lockdown in Nigeria, Mobile Telecommunication Network (MTN) gave out 10 free Short Message Services (SMS) for subscribers to communicate with friends and relations about prevention of the Covid-19 but hardly did a reasonable percentage of Nigerians did that. The inability of friends and relatives to reinforce information about the diseases even when gifted the opportunity is another challenge to the behavior change communication approach's success.

Five media practitioners from Cross River Broadcasting Corporation, Calabar, Nigerian Television Authority (NTA), and Voice of Nigeria (VON), who participated in the interview, collectively advanced five reasons for the audience's low compliance change communication appeals. They include a lack of multi-media approach, absence of aggressive enforcement of disease prevention campaigns by most media organizations and non-use of opinion leaders to reinforce the campaign messages. Other reasons include lack of continuity of the messages communicated earlier on the media stations and absence of enforcement agents' commitment to supporting the compliance of change communication appeals as in the compulsory use of face mask during the Covid-19 pandemic and compulsory use of mosquito nets in the case of Malaria. Media practitioners believe that opinion leaders have not been used to propagate and reinforce information on diseases in Nigeria.

How to change communication strategy in media campaigns for Covid-19 prevention can flatten the curve of rising infections in Nigeria?

On the way forward, participants made the following suggestions:

- Change communicators in media campaigns for disease prevention should design messages in tandem with the people's environment's needs. Communication for change is beyond devising effective communication strategies such as advocacy and persuasive or appealing statements and directing the audience to comply. Thus, change communicators can suggest alternatives in line with approved procedures rather than depending on one procedure that may appear impossible for them to comply.
• Change communicators and media message designers should endeavor to use the most appropriate channel (including language) for the right audience, hence the consideration for 'ethnocommunicology'. Words that have no direct interpretational meanings in the local languages should be interpreted and coded accordingly to represent symbols and signs associated with the disease in the local dialects of the people who may be less literate.

• The Federal government of Nigeria should provide adequate palliatives to her citizens, especially the extremely poor and most vulnerable. These palliatives should be in the form of food, money, and basic materials necessary for complying with the message appeals in the change communication approach.

• Government agencies such as the NCDC and Federal Ministry of Health should make available detailed information from research on communication platforms that the citizens can access easily. Such information should pass through media advocacy programs such as done on some private television stations in Nigeria but should be more interactive where phone lines should be opened to the audience who should feel free to ask questions and get clarifications on myths and rumors surrounding the diseases. With this strategy, the question of suspicion and disbelief would have been addressed and many citizens would comply with the change communication appeals outlined in the media campaigns.

• The Federal Government and sponsors of media campaigns for disease prevention should be transparent in providing information using pictures and videos of the alleged built isolation centers and using testimonials (persons who were infected and are healed like some serving Governors of some states in Nigeria) to reinforce their claims about the reality of the existence of Covid-19 in Nigeria. This will help dispel the fear theory invoked by most Nigerians about Covid-19 and encourage compliance to the change in communication message appeals.

• The Federal Government of Nigeria should sponsor an aggressive multi-media communication approach (all forms of print and electronic media, including social media and opinion leaders). The Government should encourage person-to-person campaigns by meeting the motivational needs of the citizens.

6 CONCLUSION

There have been adequate media campaigns for the prevention of contracting and spreading of Covid-19 in Nigeria. Almost all available media have engaged one advocacy, social mobilization, or outright social adverb or the other for the campaigns which are daily transmitted. Most Nigerians have been exposed to some form of enlightenment about Covid-19 in the media. Still, only a little more than half of Nigerians seem to believe the reality of the disease's existence. For many who doubted its existence, they believed any information to the contrary. Many Nigerians, therefore, refuse to visit hospitals for fear of being tested forcefully and quarantined if the tests are positive.

Most Nigerians could not access the Federal and State governments' much media claimed palliatives might have heightened the level of doubt about Covid-19 as informed by the media campaigns. This has resulted in an insignificant level of response to Nigerians' media campaign appeals, thereby faulting the efficacy of the change communication strategy in communication planning. Apart from more Nigerians complying with the use of facemasks than those not using them, most Nigerians could not adhere adequately to communication strategy appeals for regular hand-washing with soap, hand sanitizers, and avoidance of shaking hands and staying in crowded areas and sneezing in one's elbow. Many could not comply with the stay-at-home appeal from the messages; hence, they searched for food and other necessities. The change communication strategists also ignored opinion leaders' use, including religious leaders in projecting their appeals. These leaders are known to be very influential in terms of persuading people in Africa.

External factors were found to be more responsible for the communication strategy's inefficacy in the media campaigns for disease prevention than internal factors. Internal factors that militated against the change communication strategy in media campaigns for Covid-19 prevention in Nigeria was the language factor. The inability to interpret and communicate scientific terms associated with Corona Virus to most less literate Nigerians, especially those in rural areas and who may not have access to android phones due to the high cost of the new technology and absence of network providers in their areas. Outside this, the high cost of hand sanitizers and the unavailability of running water are some of the external factors that militate against the audience's compliance level.

The Federal and State governments' failure to be transparent in transmitting information about the importation of the Chinese medical team received an herbal solution from Madagascar, school feeding programs of school children during the pandemic. The amount from donors to help tackle the pandemic in Nigeria also affected Nigerians' belief in the reality of the disease's existence. The sharing formula for the government's palliatives, which appeared to be doubtful and which a lot of Nigerians could not access, and compelled the media provided, and even to assume that the whole Covid-19 pandemic was a political game in Nigeria, thereby negating the very objectives of changing the peoples' attitudes to healthy ones within a short possible time. Others felt that the pandemic was a plan of the Federal Government to attract foreign funds from foreign donors. These beliefs were built as myths against the success of the communication strategy.

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