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A disease of the rich and mighty: A misnomer in COVID-19 communication across the media in Nigeria

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Abstract

Introduction: Given the high coverage of the mass media and its significant influence in communicating evidence-based health information, the aim of this study was to describe the misnomer in COVID-19 communication across the media in Nigeria.

Methods: This was a review of newspaper articles that had been published between 1st February and 31st May 2020. Quantitative content analysis was used to describe and analyze the themes which characterized media representations of the COVID-19 outbreak in Nigeria. Identification of codes and themes was done by the researchers and were used to broadly categorize the data obtained into 'general' and 'thematic' categories. Coding for the general category included 14 news media outlets during the first three months of COVID-19 pandemic in Nigeria. Codes for the thematic category included: Description of COVID-19 in Nigeria, Assurances on COVID-19 containment in Nigeria, Support for COVID-19 management, COVID-19 education, Treatment of COVID-19, and the effects of COVID-19 in Nigeria.

Results: In all, 289 news articles met the inclusion criteria and were thus analyzed. The reporting was as follows: Description of COVID-19 (18.3%), Assurances of readiness and containment (13.5%), COVID-19 education (25.3%), Support for management of Coronavirus in Nigeria (14.9%), Treatment of COVID-19 in Nigeria (13.8%), and Effects of COVID-19 (14.2%). Overall, 64 (22.1%) of COVID-19

information across the media was fake news; 35 (12.2%) pertained to the “Description of COVID-19” theme, while 29 (9.9%) pertained to the “Treatment of COVID-19” theme.

Discussion: To facilitate accurate reporting of detailed information by the news media, a collaboration between health agencies and news media outlets should be enhanced to curtail false information ravaging the society.

Take-home message: The role of the media in reporting disease outbreaks cannot be disregarded, although a times they could be misleading, inaccurate, or speculative. To address inaccurate media reporting of health events, open data sharing between scientists, governments, and policymakers, as well as the communication of these to the media should be commenced early in any pandemic situation.

Key words: Coronavirus; COVID-19; Health Information; News media; Health information; SARS-CoV-2; Nigeria.

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INTRODUCTION

Controlling the spread of pandemics is an important function of public health. Pandemics have been described by the United States Centre for Disease Control as epidemics that spread over several countries or continents and affecting a large population [1]. With a description that is not elusive, pandemics refer to the worldwide spread of a new disease [2]. In Nigeria, reports from the World Health Organization and the Nigerian Centre for Disease Control (NCDC) are the principal sources of evidence-based knowledge on the Coronavirus disease (COVID-19) [3].

The COVID-19 pandemic broke out in Wuhan city, China late December 2019, and was declared a pandemic by the World Health Organization on March 11, 2020 [4]. Since this period, COVID-19 has been transmitted across the globe with more than 530,482,156 confirmed cases, 6,308,175 deaths in more than 200 countries and territories as of May 27, 2022 [5]. Nigeria confirmed her index case for COVID-19 on the 27th of February 2020, and intensified containment measures in March 2020 [6]. This aimed at ensuring the prevention of further transmission of COVID-19 among her local population.

As a tool for public health surveillance, advocacy, and policy development, media reports have been lauded as being effective and suitable especially in recent times [7–9]. These education campaigns could include informative literatures for public health promotion such as radio and television jingles, posters, newspaper articles, and social media outlets (e.g., WhatsApp, Facebook etc.). These campaigns served to keep the members of the public informed on up-to-date knowledge on current public health emergencies. These have been suitable in situations where there is a high demand for timely and accurate information [10–14].

Mass media broadcasts could be either used as a means of creating negative emotions (inciting fears through panic messages) or could elicit positive emotions [14]. Positive emotions could allay fears and curtail negative information and could be a source of calmness in any prevailing health emergency, be it globally or locally. The role of the media in reporting disease outbreaks cannot be disregarded, although a times they could be misleading, inaccurate, or speculative [10].

The media plays a vital role in molding the World of today, and news reports have a lasting impact. This explains the reason why media reports especially from online sources on COVID-19 is important [10–14]. An investigation into the quantity of COVID-19-related falsehood communicated across media platforms in Nigeria is needed to understand the factors contributing to distrust in the COVID-19 outbreak response in Nigeria, as well as gain insight into strategies for promoting positive media engagement in risk communication during epidemics and/or pandemics [15,16]. Given the high coverage of the mass media and the likelihood of false health reporting, the aim of this study was to describe the misnomer in COVID-19 communication across the media in Nigeria.

METHODS

Study design

This was a review of published newspaper articles.

Study area and population

The study was conducted in Nigeria. Nigeria is in West Africa, and bounded northward by Niger Republic, eastward by Cameroon and Chad, westward by Benin Republic, and southward by the Gulf of Guinea [17]. Nigeria is made up of 36 states, and her administrative headquarters is in Abuja, the Federal Capital Territory. As of 2020, Nigeria had a population of 206.1 million [18].

This study focused on the description accorded to the COVID-19 pandemic by media platforms in Nigeria.

Search strategy

Fourteen daily news media outlets (*The Guardian, Premium Times, Daily Post, PM News, The Punch, Nigerian Tribune, Sahara Reporters, Nairaland, This Day, The Sun, The Nation, Leadership, Linda Ikeji's blog, and Daily Trust*) were purposively selected for this study due to their high coverage and extensive information on their archives. Figure 1 describes the article search strategy. The search was conducted between February 1 and May 31, 2020. It made use of key words such as "Coronavirus" OR "Corona virus" OR "COVID-19" OR "nCoV" OR "novel Coronavirus" OR "SARS-CoV-2" OR "nCoV-2" OR "Coronavirus disease 2019" OR "Severe Acute Respiratory Syndrome Coronavirus 2" OR "new Coronavirus" OR "new Coronavirus Syndrome" AND "Media" OR "News" OR "Newspapers" OR "Broadcast houses" OR "Broadcasting stations" OR "Media platforms" OR "Journalists" OR "Media houses" AND "Nigeria". To ensure that only the articles from the selected news media outlet were retained, the retrieval and screening of all articles containing the keywords either on the headline or body of the news was done, and thus 388 articles were retrieved.

Inclusion criteria

The news must have been reported directly on COVID-19; and must have been published between February 1 and May 31, 2020.

Exclusion criteria

All articles containing only international news on Coronavirus or passing references were excluded.

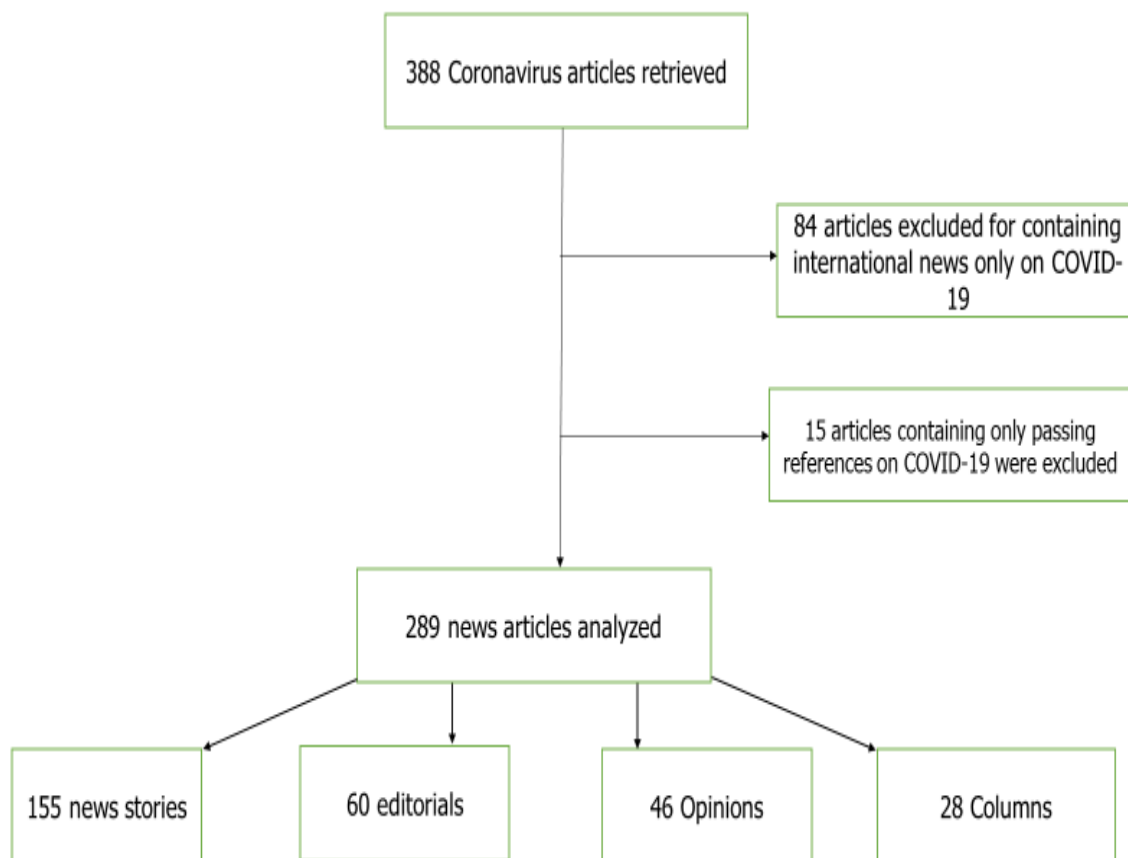


Figure 1. Sampling strategy for the study.

Data analysis

A quantitative content analysis was used to describe and analyze the themes which characterized media representations of the COVID-19 outbreak in Nigeria. Coding and analyses of the retrieved articles were done manually by the authors. Identification of codes and themes was done by two of the researchers for the 289 selected articles and were used to broadly categorize the data obtained into “general” and “thematic” categories. Coding for the general category included 14 news media outlet and months of the nCov-2 pandemic outbreak in Nigeria. Codes for the thematic category included: Description of COVID-19 in Nigeria, Assurances on COVID-19 containment in Nigeria, Support for COVID-19 management, COVID-19 education, Treatment of COVID-19, and the Effects of COVID-19 in Nigeria. The theme “COVID-19” education was further sub-divided into two: Prevention and Control of Coronavirus, and Transmission of COVID-19. Reports were defined as false if previously disseminated COVID-19 information were later debunked and updated based on available evidence.

RESULTS

In the first three months of the COVID-19 pandemic in Nigeria, the 14 Nigerian news media outlets (*The Guardian, Premium Times, Daily Post, PM News, The Punch, Nigerian Tribune, Sahara Reporters, Nairaland, This Day, The Sun, The Nation, Leadership, Linda Ikeji’s blog, and Daily Trust*) published 388 COVID-19 articles. Articles that met the inclusion criteria were 289 news and were analyzed - *The Guardian* accounted for 17%, *Premium Times* 12%, with *Daily Post* and *PM News* each at 10%, *The Punch*

and *Nigerian Tribune* at 7% each, *Sahara Reporters* accounted for 6%, with *Nairaland*, *This Day*, *The Sun*, and *the Nation* accounting for 5% each, *Linda Ikeji's blog* for 4%, and *Daily Trust* accounted for 3% of the published news between February (before the outbreak) and May, 2020 (different periods in the outbreak) (Table 1 and Figure 2).

Table 1. Description of news media themes at different periods of the COVID-19 pandemic in Nigeria.

| Recurring theme | February | March | April | May | Theme total | % |
|--|----------|-------|-------|-----|-------------|------|
| Description of COVID-19 | 10 | 12 | 14 | 17 | 53 | 18.3 |
| Assurances of readiness and containment | 6 | 10 | 11 | 12 | 39 | 13.5 |
| COVID-19 education | 3 | 12 | 25 | 33 | 73 | 25.3 |
| Support for management of Coronavirus in Nigeria | 2 | 8 | 14 | 19 | 43 | 14.9 |
| Treatment of COVID-19 in Nigeria | 0 | 10 | 13 | 17 | 40 | 13.8 |
| Effect of Coronavirus in Nigeria | 0 | 6 | 13 | 22 | 41 | 14.2 |
| Total | 21 | 58 | 90 | 120 | 289 | 100 |

Of the six themes identified, it was found that two themes (description of COVID-19, and COVID-19 education) constituted about one-half of the media reports, while the other four themes (assurances on containment, support for management, treatment, and effects of Coronavirus in Nigeria) were the remaining one-half. The description of COVID-19 constituted one-fifth (16%) of the media reports, and included the bias associated with its nomenclature as the *Wuhan* virus, the illness of the Whites and internationals in the period before it was declared a pandemic (February). In the second month (March), COVID-19 was described as a disease of the rich and mighty, a political scam for corruption, especially with similarities to malaria, and as a public health emergency. During this period, the concept of herd immunity of Blacks against COVID-19 alongside the inability of the virus to survive in hot climates like Nigeria was stressed. It further contained a clear-cut description of being a respiratory illness with possible transmission on to other persons with an inevitable death sentence (Table 2). Overall, the descriptions accorded to COVID-19 between February and March 2020 were largely fake news. Similarly, treatment options for COVID-19 patients, including the use of alcohol, local delicacies, and herbal remedies (concoctions) were also fake. The use of Chloroquine and hydroxychloroquine as potential drugs for treatment was identified during this period, however, knowledge was still lacking on the safety and efficacy of these drugs for managing COVID-19 cases during this period. In total, 64 (22.1%) of COVID-19 information across the media was fake news; out of which 35 (54.7%) pertained to the “description of COVID-19” theme, while 29 (45.3%) pertained to the “treatment of COVID-19” theme.

Table 2. Definition of COVID-19 themes based on news media reports.

| S/N Theme | Definition |
|--|---|
| 1 Description of COVID-19 | <i>This included the bias associated with its nomenclature as the Wuhan virus, the illness of the Whites and internationals, and as a public health emergency. Also include disease of the rich and mighty, and as a political scam for corruption, especially with similarities to malaria. It further included fears and panic messages associated with eventual death from COVID-19.</i> |
| 2 Assurances of readiness and containment | <i>This included the assurances of the Federal government that COVID-19 would not enter the shores. It also revolved around government's assurances of being in control of the situation, with current efforts gearing towards its containment.</i> |
| 3 COVID-19 education | <i>This comprised education of all preventive measures such as hand hygiene, social distancing etc. It also included community engagement, and active case search at the community level. It also included the sources of transmission such as contact with infected person and infected droplets, and from asymptomatic patients.</i> |
| 4 Support for management of Coronavirus in Nigeria | <i>This comprised news reports on trainings for frontline health workers, and material and logistical contributions from organizations or private individuals.</i> |
| 5 Treatment of COVID-19 in Nigeria | <i>This included rumors of alcohol, local delicacies, herbal remedies (concoctions), and Chloroquine as cure. It also comprised reports on the existence of fake vaccines, and trials on hydroxychloroquine as a potential drug for treatment.</i> |
| 6 Effect of Coronavirus in Nigeria | <i>This comprised the impacts of the threat of Coronavirus particularly on social gatherings, entertainment, education, business activities, and earnings.</i> |

In the third and fourth months (April and May) however, COVID-19 was described as a social leveler and as a technological weapon, while the reports on the technological weapon were debunked specifically in the fourth month. Midway into the fourth month, COVID-19 became known as an avenue for domestic violence, rather than a social leveler.

On the assurances for control of COVID-19 in Nigeria, news media reports comprised about one-ninth (14%) of retrieved news reports. These included the assertions of the Federal government that COVID-19 would not enter the shores of Africa or Nigeria especially in the period before the pandemic (February). Through the second, third, and fourth months (March, April, and May respectively), news media reports revolved around government's assurances on being in control of the COVID-19 situation, with efforts geared towards its containment. In the third and fourth months,

spraying of disinfectants or air purifiers were reported as an ineffective means of preventing further transmission.

News reports on COVID-19 education wholly made up one-fourth (25.5%) of retrieved articles. Throughout the second, third, and fourth months (March, April, and May) of the pandemic, the routes of transmission identified by news reports included contact with infected person and infected droplets. In the third month, air purifiers were reported to possibly extract viruses, and so were sprayed in public places. Possible transmission of uninfected persons by asymptomatic individuals was reported in this period and extending into the fourth month of the pandemic. Also, in the third and fourth months, it was reported that the risk of COVID-19 transmission increases with a disregard of the recommended COVID-19 preventive measures.

On the other hand, reports on COVID-19 prevention and control in the second month of the pandemic contained recommendations on the use of face masks, and calmness to tackle the infection. In the third month (April), reports included the closure of academic institutions, provision of hand sanitizers at public places, ban on social gatherings, and border closure, and in the 4th month (May) specifically centered on active case search at the grassroots, with community engagement.

News media reporting on the support for the management of COVID-19 in Nigeria constituted about one-fifth (15%) of retrieved articles. These included supports from non-governmental organizations, corporate bodies, coalition groups, international organizations, religious organizations, and private individuals. The supports reported were either in cash or other forms such as training of personnel, either directly to the National Centre for Disease Control or on an individual basis. Also, palliatives (both in cash and kind) were distributed to the poor in the country.

The treatment options on COVID-19 in Nigeria also gained significant reporting on the news media, constituting about one-seventh (15%) of retrieved articles. In the second and third months of the pandemic, trending reports included rumors of alcohol, local delicacies, and herbal remedies (concoctions) as cure. In the third and fourth months of the pandemic, the existence of fake vaccines was reported, and it was stressed that there were no curative measures yet in existence for COVID-19. However, in the fourth month of the pandemic, reports on treatment centered on the clinical trials for hydroxychloroquine (in use for treating milder stage of the infection) which is to be tested for its complete potency in treating COVID-19.

The effects of the COVID-19 pandemic in Nigeria reported on the news media constituted one-seventh (14.5%) of retrieved articles. Fear, anxiety, and symptoms such as dry cough and shortness of breath gained significance in news media reports throughout the second, third, and fourth months (March, April, and May). Also, heightened stress associated with self-diagnosis of other symptoms as COVID-19 symptoms, and panic buying of Chloroquine tablets were frequently reported in the third and fourth months. Hunger, poverty, indebtedness, increased crime rate, shutting of academic institutions, and massive job loss were associated with the third and fourth months of the COVID-19 pandemic in Nigeria.

DISCUSSION

This study aimed to describe the misnomer in COVID-19 communication across the media in Nigeria. "The description of COVID-19" was the second leading theme in the media coverage of COVID-19 in Nigeria. With widespread news on fallacies and myths which lacked evidence, panic messages introduced fear and hopelessness to the hearts of many Nigerians, affecting healthcare

workers and the general population alike. The role of the media cannot be undermined in risk communication for pandemic control, however, one of the limitations to health information disseminated across media platforms is the lack of peer review, as well as the dissemination of wrong information [19,20]. Misnomers in disease representation begun prior to the COVID-19 pandemic and have negatively influenced the adoption of protective behaviors in many settings [21]. It was revealed that Ebola caused fear episodes among more than an average of healthcare workers [22]. The Severe Acute Respiratory Syndrome was constructed as a “killer” in Britain, but as a governmental failure in Hong Kong [23,24]. Also, the United Kingdom’s Daily Mail enhanced the circulation of the myth that COVID-19 was caused by the consumption of a bat by a woman that lived in Wuhan city [25]. Long after COVID-19 misinformation prevailed, the pandemic gained proper definition as a respiratory illness ravaging the globe across many media platforms. Due to the updated accurate information, individuals became more health literate, and adhered better to recommended COVID-19 public health safety measures. To address media misrepresentation of health events, open data sharing between scientists, governments, and policymakers, as well as the communication of these to the media should be commenced early in any pandemic situation [26,27].

On assurances of management and containment of the COVID-19 pandemic, results obtained explain the government’s role in allaying citizens’ fears. This was geared towards restoring and building trust in the government’s capacity to handle the COVID-19 situation. Trust in government’s capacity to respond adequately to the COVID-19 situation has been described as a major weapon needed to contain and control the COVID-19 pandemic in Nigeria [28]. This in a way serves to maintain calmness, reduce panic, and curtail false information being circulated around. With the least proportion, this finding reflects that the reports on role of the government in assuring citizens of staying in control of the COVID-19 outbreak in Nigeria was either insufficient or minimally communicated by media houses. A responsive action must be modelled by the government, national health agencies, and media platforms to improve compliance to COVID-19 preventive measures among the public [29,30].

The results obtained on the support for the management of COVID-19 which had a very low proportion explains that collaborative efforts for the control of COVID-19 are lacking. This result could be due to the recognition of the fact that Nigeria as a country presently lacks the capacity to combat pandemics. The “Coalition Against COVID-19” was set up out of a sense of corporate social responsibility of private organizations to see to such provisions [31]. Similarly, religious organizations and individuals also arose to support the government-led COVID-19 outbreak response, however, the support garnered was insufficient [31]. Regarding collaboration, there are no half measures. The solution must be collective, predicated in deliberately cultivated consensus [32-35]. In lieu of this, there arose the need for the trainings of frontline healthcare workers and equipping of health facilities, as well as the establishment of isolation centers. Also, limited availability of personal protective equipment and the need for the establishment of isolation centers have necessitated multisectoral collaboration [36].

COVID-19 education was the theme with the highest proportion. This included education on the mode of transmission, identification of signs and symptoms, and information on the contact details of the National Centre for Disease Control, or the address of isolation centers. This explains that an improvement of people’s awareness or knowledge level through debunking false information

through the online news sites or at the community level is key to preventing further transmission. The results obtained identified that contact with infected droplets constitute the major means of transmission of COVID-19 [37]. Like other viral infections such as the Severe Acute Respiratory Syndrome and Ebola, media coverage pointed out that they are highly infectious diseases capable of being transmitted to uninfected persons at a fast rate [38,39]. Incorporating volunteers into COVID-19 sensitization campaigns would promote the dissemination of COVID-19 information in community settings [40]. Public education on the safety and efficacy of the COVID-19 vaccine shortly after its release has helped to address misconceptions and fallacies regarding adverse events following acceptance of any of the brands of the COVID-19 vaccines [29,30,32,41]. To improve stringency on all public health safety measures for COVID-19 control, including vaccination, community participation is of utmost importance [32,42,43].

Findings obtained from the treatment options for COVID-19 is noteworthy. Many pieces of information on COVID-19 treatment were based on religious and traditional claims as found in the Ebola report on the threat in Ghana [44]. With misinformation around rumors of possible cure on traditional delicacies, herbal treatments, and possible abuse of identified drugs such as Chloroquine were promoted [45]. Such misinformation could have been because of numerous international reports already available in the country prior to the outbreak in Nigeria. Similarly, medical misinformation characterized most social media reports during the Ebola outbreak in Guinea, Liberia, and Nigeria in September 2014 [46]. Hope became restored when the potency of hydroxychloroquine as a treatment option was reported by the World Health Organization, although its use was later declared not to be beneficial [47].

The effects of COVID-19 have been reported on the individual and national levels. The most frequently reported impacts included hunger, impoverishment, indebtedness, fears, and anxiety. The frequency of crime increased at an alarming rate during the COVID-19 pandemic in Nigeria. These effects tend to be worrisome as they impact directly on people's mental health. Also, with the lockdown and other preventive measures in place, many have wrongly perceived the implemented public health safety measures as strategies to deny people of their freedom. Social safety nets should be built and serviced to promote adherence to home stay.

Study limitations

This study was conducted shortly after Nigeria reported her index case of COVID-19, hence, media description of COVID-19 after the development and implementation of effective case management strategies were not captured in the results.

CONCLUSION

The study identified six vital themes which characterized media reporting of COVID-19 in Nigeria, namely: description of COVID-19, assurances of readiness for and management of COVID-19 outbreak, COVID-19 education, support for management, treatment, and the effects of COVID-19 in Nigeria. These themes prompt better understanding of news media reports on the threats and impacts of deadly infections such as COVID-19 on the Nigerian population. It is noteworthy that drugs or vaccines are suitable for addressing infectious disease outbreaks but are not sufficient of their own in the management of novel infections. Community engagement and support is required to facilitate the containment of disease outbreaks. The provision of personal protective equipment,

logistics, high-scale surveillance, and all-time protection for front-line health workers are also very essential resources to be greatly made use of.

The adoption of hygienic measures should be always encouraged not only in combatting the COVID-19 pandemic, but also in preventing future epidemics or pandemics. Also, to facilitate accurate reporting of detailed information by the news media, we hereby recommend nationwide trainings for journalists by institutions such as the public health institute before and at different periods during a pandemic. Furthermore, collaboration between health agencies and news media outlets should be enhanced to curtail false information ravaging the society.

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