# 'No Koro, All Na Scam': The Response and Public Reactions to Corona Virus Pandemic and the Implications in Abeokuta, Southwest Nigeria

# Olasupo Thompson<sup>1</sup> and Comfort Onifade<sup>2</sup>

<sup>1</sup>History and International Studies Unit,
Department of Communication and General Studies,
Federal University of Agriculture Abeokuta,
Ogun State,Nigeria
<sup>2</sup>Social Studies Unit,
Department of Communication and General Studies,
Federal University of Agriculture Abeokuta,
Ogun State, Nigeria

<sup>1</sup>Email: olakunleolasupo@yahoo.com <sup>2</sup>Email: drcaonifade@yahoo

#### Abstract

The novel corona virus (COVID-19) has claimed lives, affected livelihoods and humanity as a whole. In spite of government efforts to tackle the pandemic through public awareness programmes, there seems to be no improvement. The article investigates responses and public reactions to COVID-19 as well as its implications for Abeokuta, southwest Nigeria. It assumes a qualitative approach through fieldwork in Abeokuta. Data was obtained from in-depth interviews, media reports and official social media pages. The Health Belief Model (HBM) of health communication which attempts to understand the widespread failure of people in accepting disease preventives was adopted. The study finds that civil and international communities have assisted the government in managing the issue. It further finds that in spite of the awareness raising campaign to prevent and limit the spread of the disease, public reaction was docile. Factors

responsible for this include cultural beliefs, distrust of government and double-dealing, religion, fake news, politicisation of issues, and international influence. These factors consequently have wider implications on public health, health communication practice and management of future pandemics. The article recommends, among other things, the imperative for the government to work on gaining public trust and in managing health related information accurately and successfully.

**Keywords**: Health history, Health communication, Corona virus, NCDC, Epidemiology.

#### Introduction

The corona virus (COVID-19) emerged in China in late 2019 (Adepoju, 2020a). COVID-19 is an infectious disease caused by a newly discovered corona virus. When a person is infected with the virus, he or she can experience mild to moderate respiratory illness and recover without requiring special treatment, while in some cases symptoms can be severe. Hence, it ranges from common symptoms to serious symptoms. It can also be aggravated by some underlying ailments such as type 2 diabetes, heart diseases, chronic obstructive pulmonary disease (COPD), severe obesity, sickle cell diseases, cancer, etc. (WHO, 2020a; CDC, 2020; Mayo Clinic, 2020). By early 2020, it has spread outside China, showing how highly connected the global world is. Following the declaration of the disease as a pandemic in March 2020 by the World Health Organisation (HURIDA, 2020, p.1), various government institutions across the globe quickly set up protocols to address the pandemic. While the pandemic claimed several lives in its first month across the western world, the cases were minimal in developing countries, especially in parts of Africa; where knowledge about the pandemic was unclear and contradictory (Campbell & McCaslin, 2020). Thus, the observed fact unveiled through fieldwork that people do not engage in health behaviours as recommended has received attention in line with observation of such as a global phenomenon. This phenomenon has been attributed to non-compliance, non-cooperation, and nonadherence (Heiby & Carlson, 1986; Kaplan & Simon, 1990; Laver, 1992).

While attention is globally on the disease, there remains a dearth of knowledge on the beliefs associated with the pandemic

in Nigeria. Using the metaphor, 'No Koro, all na scam', the study investigates responses and public reactions to the corona virus pandemic and its implications on the residents of Abeokuta, southwest Nigeria. It is hoped that this study will add to literature on the pandemic and will become the yardstick for future studies. The health belief model (HBM) of heath communication that was developed by a group of social psychologists in the United States of America's public health service to understand the widespread failure of people in accepting disease preventives or screening tests for the early detection of asymptomatic disease in the early 1950s (Janz & Becker 1984) served as the framework for this study. It is one of the most prominent public health frameworks for understanding why individuals may or may not act in the face of a threat to personal or community health. Its components are the desire to avoid illness, or conversely get well if already ill; and the belief that a specific health action will prevent, or cure illness. Generally, the HBM suggests that individual beliefs and directs cues to action inform behaviour. Exploring six factors such as perceived susceptibility, perceived severity, perceived benefits, perceived barriers, health value and cues to action (Janz & Becker, 1984, p.3), the proponents sought to explain why despite the severity of such epidemic and challenge to life, people still fail to adopt desired attitude.

Though HBM is not without its limitations in terms of assumptions on health information (Orji, Vassileva & Mandryk, 2012), it is no doubt significant in explaining some variables such as social influences, prior experiences with healthcare system and health behaviours (Lauver, 1992, p.282). It should be applied to health communication to guide health promotion and disease prevention programmes amidst the novel corona virus pandemic (COVID-19). In alignment with Carico, Sheppard & Thomas (2020), the construct of the HBM is applied to community pharmacy patients who may express anxiety, uncertainty, skepticism, or apprehension regarding COVID-19 mitigation behaviour. Public policies are simply what government intends to do or not do. Public policy at any stage be it formulation, implementation or evaluation stages is affected by so many factors. This study now attempts some crucial factors that usually affect public policy in Nigeria.

#### **Cultural Beliefs**

Central to the management of public perception of the pandemic and various health issues, these three factors continued to shape public perception and public policies formulation in Africa broadly, and Nigeria in particular. Although African culture could be divided into social, moral, religious, political, aesthetic, and economic values, Idang (2015, pp.106-107) argues that invention, discovery and diffusion are some of the ways by which a culture can change or grow. Africans find it hard to adjust between their primordial beliefs in certain aspects of their culture and the supposedly modern mode of behaviour. Lambo (1963) contends that the African culture is fraught with most non-literate societies and the perception of supernatural presence in producing results. Awolalu (1976), however, noted that of all aspects of culture, religion remains the most influential in the lives of Africans.

In Nigeria particularly, Basden (1930) argues that in the study of a primitive people, there is probably no more debatable subject than that of their religious beliefs. He went further that the prevailing superstitions instigate the people to commit some foul deeds, and in their religious beliefs the root principles for these customs must be sought (1921, p.61). The British colonial administration in Nigeria gave evidences of how indigenous beliefs affected the developmental efforts in the country, particularly in curtailing diseases, epidemics, and ignorance (Colonial Reports-Annual 1904; 1923; 1924). In fact, Chief Prest Arthur, central minister of communication raised a motion on how the Western region could end the issues of witchcraft, superstitions, and other regressive beliefs in the region by raising the budgetary allocation for education (Western House of Assembly 1953, pp.10-12). Bandura (1977) contends that the behaviour of individuals is better predicted by their beliefs than from the actual consequences of their actions. Asakitikpi (2007) affirms that beliefs have also shaped medical care in the management of diarrhoea among Yoruba women in children and infants in Ibadan metropolis. Corroborating the impacts of beliefs on health and medicine, Darko (2009) and Al Husseini (2011) opine that religious beliefs have had enormous implications on medicine and patient care.

**Ethnicity:** Nigeria is a heterogeneous society with between 250 and 500 ethnic groups and languages (Mustapha 2005; PEFS,

2001); Christian-Muslim divides; North-South divisions among other public policies and public affairs have been fraught with identity crises. Politics in Nigeria has been marred by ethnicity (Nnoli, 1978), which has further affected Nigeria's federal structure (Nwaorgu, 2003), precipitated conflict and affected public policies. Nwaorgu (2003, p.122) rightly puts it, "the view is held that the origin and sustenance of our country's political problems derive from the complete absence of trust among the respective nationalities that make it up." It is, therefore, not surprising that most conflicts in Nigeria usually take ethnic or religious colourations. It is generally regarded as the most basic and politically salient identity in Nigeria (Osaghae & Suberu, 2005). Hence, ethnicity has permeated Nigeria's politics, thereby making issues of national interest including public and foreign policies being politicised.

**Corruption:** The human race is confronted by the issue of corruption. The United Nations Convention against Corruption splits into it into 10 typologies: bribery, embezzlement, public procurement abuse, abuse of function, influence trading, nepotism, money laundering, conflict of interest, judicial corruption, and private sector corruption. It has also submerged all aspect of the nation's sphere of life ranging from family, education, religion to the civil society and even the press. Information management has been painted in lots of controversy over the years. However, the President Muhammadu Buhari administration has assembled some of the best media personages, yet the administration has been caught in the web of poor communication or mismanagement of information. This has resulted in distraught and perceived insincerity of national issues by the Buhari administration. Page (2018), asserts that corruption is the greatest threat affecting Nigeria from attaining its enormous potentials; and also appears ubiquitous and takes many forms.

**Methodology:** This research applied a qualitative research method by the use of interviews to elicit information from the respondents on their knowledge and reaction to the corona virus, dwelling mainly on Abeokuta, capital of Ogun State, Nigeria. The employment of qualitative method becomes imperative owing to its usefulness in many fields, including emergency care research

(Erlingsson & Brysiewicz 2017). In-depth interviews were conducted among key informants (KI) and messages were also sent via WhatsApp to a closed group of a population that resides in Abeokuta. 23 respondents were interviewed for the study. Three were members from a WhatsApp group while 20 respondents were interviewed one-on-one or via telephone. These respondents were selected for convenience and snowball, where we identified people based on recommendations. The gender of the respondents shows that 12 were females and 11 were males. They all have at least primary education. The age ranges from 18 to 73 years. Their views were thematically categorised and analysed through content analysis. The field work spanned from August 3-28, 2020. Ethical consideration was granted by the Ethical Committee in the Department of Communication and General Studies, Federal University of Agriculture Abeokuta, Ogun State, Nigeria.

# **Findings Responses**

The first index case was announced by the federal government on 27 February 2020 when an Italian suspected to have contracted the virus entered Nigeria (NCDC, 2020). In response to the pandemic, the federal government of Nigeria started by banning flights from some countries with high rates of spread of the virus on March 18, 2020 and five days later, it announced the closure of the nation's airspace and land borders (Al Jazeera, 2020). The federal government gave N10 billion to Lagos State government since the state was the epicentre of the pandemic and also gave N5 billion to the Nigeria Centre for Disease Control (NCDC), the agency responsible for management of epidemic and infectious diseases nationwide (@MBuhari 2020:8.57PM, March 26 2020; Salaudeen, 2020). Furthermore, the federal government announced that a 14-day lockdown of Lagos, Ogun and Abuja would commence on Monday, March 30 2020, in which government aimed to use the period to identify, trace and isolate all infected persons (Buhari, 2020). Aside the implementation of social distancing, partial easing of lockdowns, asking the vulnerable population such as those above 50 years old, pregnant women, nursing mothers, among others, to stay away from worship centres, the government mandated the compulsory use of face masks in the public to check the spread of the virus.

The Ogun State government also replicated most of the activities of the federal government. At the initial state of the emergence of the virus, the Ogun State government banned inter-state movements, gave out palliatives and also enforced a lockdown, particularly against public gatherings as measures to curtail the spread of the pandemic in March 20th 2020 (Ayinla, 2020). Members of the civil society groups, including religious organisations, pressure groups and political parties also embarked on public sensitization programmes (HURIWA, 2020, p.6). Artistes in the indigenous movie and music industries as well as television and radio owners also followed suit with songs, adverts, jingles, films among other forms of entertainment to make sure that the general public is not only aware of the pandemic but also informed of its severity and the need to stop the spread. Cartoon versions were produced on both national and cable television networks. These efforts were complemented with responses from the international community (WaterAid, 2020).

#### **Public Reactions**

We entertained the respondents and categorised their responses based on the factors that shaped those reactions. Some factors were responsible for the reactions of the general public to the pandemic.

Table 1: Public Knowledge on the Initial/Present Existence of COVID-19

Initial Knowledge on Existence of COVID 19	Respondents	Percentage %
I have heard of 'Koro' (COVID-19)	23	100
I have not heard of 'Koro' (COVID-19)	0	0
Total	23	100
Present Knowledge on the Existence of COVID- 19  It is still in Abeokuta	0	0
(Nigeria) and deadly	O	O
It is no more in Nigeria	20	87
It is still in Abeokuta (Nigeria) but not as severe as government says	3	13
Total	23	100

Source: Field Work 2020

Table 2: Factors Responsible for the Disbelief on Severity of COVID-19

Factors	Respondents	Percentage %
Cultural Belief	9	39.1
Fake News and National	5	21.7
and International		
Governments Distrust		
Religiousity and Religion	6	26.1
Politics, Political Elites and	3	13.1
Resistance to Change		
_		
Total	23	100

Source: Field Work 2020

#### Discussion

Figure 1 shows that the initial reaction on the knowledge about the disease. However, this changed subsequently as 20 respondents believe that it is no more in Nigeria (87%), three respondents (13%) believe that it still exists but it is not as severe as government makes it look. The government ease of lockdown was identified as one of the triggers for the change in attitude. Factors that informed the knowledge of the public on the disease were categorised thematically. These factors as shown in Figure 2 includes: cultural beliefs, fake news and government distrust/double dealings, religion and religiousity and politics, political elites, and resistance to change.

# **Cultural Beliefs**

All the respondents acknowledged government efforts though, but their reactions to the existence of the virus varied. For a respondent, "I do not think there is *koro* (corona virus), they are only giving us figures on daily basis" (KI/ Male/ c56years/11 August 2020). This opinion was supported by two respondents (KI/Female/Trader/28 years/13 August 2020; KI/Female 50years/Public Servant/12 August 2020). In fact, one of them doubted the existence of the virus and asked that we point out those in the isolation centre to her so as to confirm the claims of government and its agencies on the veracity of covid-19 (KI/Female/50years/Public Servant/12 August 2020). Another key interviewee stated that "those that are dying may have died of

other complications, but because government is not sincere, they will say it is *koro*." Three key informants interviewed at Alogi, stated that they have stopped using face masks and keeping social distancing because if the corona virus still existed, they would have contracted the disease (Key Interviewees/Traders/ 28years/ 23 years/69years/ Females/14 August 2020). One of them said specifically that:

I don't think there is still corona virus because if there was corona virus, many market women including some of us who are traders would have contracted the virus. If you go to Kuto Market or Adatan market and see the way people move around without keeping to social distancing, then you will doubt the existence of the virus. Though it may exist, it is for the wealthy people. (Key informant/ Trader/28 years/14 August 2020)

A couple also alleged that government is only making money from the scenario that they do not think that there is corona virus; and that if there was, religious institutions should not have been closed as that would have been the only solution to the pandemic (KI/Trader/62years/15 August 2020; KI/Welder/73years/15 August 2020). The husband sharing his opinion on the use of face mask stated that "when I got to Ibadan and I realised that people were not wearing face mask like we do here in Abeokuta, I had to quickly remove my face mask so that they would not tag me as a village man. I was surprised that there was a vigil in a church close to where I put up (KI/Welder/73years/15 August 2020). Another key informant who is an Ifa Priest said the uproar about corona virus is what the Yoruba forefathers refer to as chronic malaria (Akolba). He further stated that, that is why ginger, garlic, turmeric and lime would cure it (Ifa Priest/56 years/14 August 2020). Elsewhere, the Director-General of the National Orientation Agency, Garba Abari raised an alarm that some young people in Nasarawa State were forcing and harassing COVID-19 compliant residents to remove their face masks because to them the virus does not exist (Aborisade, 2020).

# Fake News and National and International Governments' Distrust

Fake news is gaining prominence in recent daily lives and public space (Thompson et al., 2019). According a respondent, "some

people say when their person die for hospital, doctors they pay them make them talk say na koro kill the person" (KI, Undergraduate/ male/ 21 years/9 August 2020). Such claims have filled the social media. Another respondent stated that he had always doubted the emergence of the virus in Nigeria but that some information he got from the internet further raised his doubts about the virus as many accounts and recordings on the internet revealed how some unknown people claimed that they were forced to acknowledge that it was corona virus that killed their relatives (KI, Graduate Student/Photographer/male/ 29 years/12 August 2020). A respondent shared the encounter he had with a nurse at one of the private hospitals in Abeokuta on the reality of the virus. He stated that a qualified senior nurse in one of the religious hospitals in Abeokuta told him that there was no corona virus in Nigeria because so far, the hospital has not recorded any.

He further stated that the nurse wondered why it is only the government hospital that is recording cases of the pandemic (KI, University Professor/60years/14 August 2020). Another respondent stated in Yoruba language that,, 'Ko si koro mo jo, atiigbati Ijobatituwa le, figo la de ngbo. Tikorobayiwa, Ijoba ko *nituwale* — There is no corona virus again. Since the government eased the lockdown, what we hear is just figures. If there was still corona virus, the government would not have eased the lockdown." (KI, Trader/54years/Female/24 August 2020). The above further shows that members of the public misunderstood the ease of lockdown for the end of the pandemic. Another respondent claimed that laws on social distancing and face masks were for the poor, since the politicians were not leading by example particularly in electoral campaigns, burial of prominent politicians and even the president. As he put it, "when did Buhari start wearing mask? Have they prosecuted those at the wedding ceremony of a minister's son or burial of Kyari? (KI, 45 years/ male/civil Servant/26 August 2020).

Fake news has also influenced public reaction on the pandemic. Fake news was further spread by international politics and events. Some public health experts like George Washington's University Dr Jeremy Brown, optimistically suggested that warmer weather may inhibit the spread and viability of the disease. Another example was when Tanzanian President, John Magufuli claimed that he was surprised that the samples taken from a goat, a sheep

and pawpaw, but tagged with human names, which he secretly sent to the country's laboratory returned positive of the coronavirus (Biryabarema & Smith, 2020). When President Trump announced the efficacy of the *Hydrochloroguine* many people across the world and developing countries particularly were reported to have hoarded it at home and also abused the drug, thereby causing poisoning (Busari & Adebayo 2020). More so, the response of government to some of the cases in terms of prosecution shows why people continue to doubt the disease. Some examples were when government prosecuted some celebrities who flouted the lockdown rules such as Funke Akindele-Bello (aka, Jennifer), her husband, Abdulrasheed Bello (aka, JJC Skillz) and Azeez Adeshina Fashola (aka, Naira Marley) (Iriekpen, 2020), but none of the political class or elites who flouted the laws were arrested and prosecuted during campaigns in states like Ondo and Edo, respectively and even during the burial of some political bigwigs that were buried during the period.

# Religiosity/Religion

In March 2020 when the virus was still at its budding stage in the country, many religious leaders went on air to either disparage or prophesy the end of the pandemic. According to one respondent, "I do not think the COVID-19 exists. And if it does, God is strong enough to remove it and avert from affecting his own people. If a person like me, who is a pastor, is afraid of COVID-19, how can I preach to my congregation? How will they believe in me or know that God indeed exists?" (KI/M/Pastor and Phone repairer/ 34years/3 August 2020). Another informant stated that with what some pastors have said about the virus, he does not think it exists. He queried if those agents of government or corona virus were better gifted than the pastors who challenged the existence of the virus (KI/male/commercial motorcyclist/38years/13 August 2020). A woman claimed that if God be for her, no corona virus could be against her. She likened the corona virus to a Bible story where God struck the homes of some people but spared some who had marked their homes. As she asked, "have you not heard the song, when I see the blood, when I see the blood, when I see the blood, I will pass, I will pass over you...over you (KI/Trader and Evangelist/ female/49 years/13 August 2020).

Similarly, a hairdresser who was making hairdo for some children but was not putting on face mask or adhering to social distancing stated that she was not adhering to the rules because there is no corona virus around her by the grace of God (KI/ Female/hairdresser/33year/15 August 2020). Another interviewee stated that people are dying because it is their appointed time to die and not coronavirus (Key Informant/Male/ 41 years / Public Servant / 11 August 2020). A respondent acknowledged that though the pandemic is real, the people of Abeokuta are fortunate that God has not let it to be devastating in the town (KI, Professor/Female/65years/25 October 2020). To be fair to the respondents, their beliefs may have been reinforced by many videos and teachings of popular religious leaders which went viral on the cure and end to the pandemic. Some examples were when a pastor claimed that a particular rainfall would put an end to the virus; another pastor claimed that he was surprised that government did not involve his church in healing some of the suspected patients in isolation wards; another claimed that he was going to China to destroy the virus; yet another claimed that his church had healed many COVID-19 patients secretly without involving the government and another claimed that the pandemic was caused by 5G wireless communications technology (Egbunike, 2020). Pastor Enoch Adejare Adebayo, a highly revered televangelist, while addressing his members across the world stated that:

I want to assure you that there's no virus that will come near you at all. Because it is written that those that dwell in the secret place of the Most High shall abide under the shadow of the Almighty. I want to believe this is time for God to show clearly there's a difference between those who serve Him wholeheartedly and those who do not (Oludare, 2020; https://www.facebook.com/Churchgist.org/videos/corona-virus-matters/2807757442678256/).

Aside from these blank cheques given to assure their members and the general public, many of them, when the government began to gradually ease the lockdown also queried the logic behind the opening of markets where social distancing was hardly adhered to to the detriment of religious places where prayers would have been offered to end the pandemic. As one of the pastors put it, "I can smell a rat. The forces of darkness are influencing people at

various levels because the growth of the church is the greatest headache of the devil" (Global Voices 2020; https://twitter.com/i/status/1258122771684560897)

# Politics, Political Elites and Resistance to Change

Some of the respondents stated that while they believe that the corona virus exists, the Nigerian government has not been sincere in its handling of the matter. As well, many of the respondents agree that it exists abroad as a result of the transparency and casualties recorded. A respondent emphasised that the death of political giants and elites, who with their vast resources lost the battle to the dreaded virus shows without doubt that the virus existed (KI, Male/ University lecturer/ WhatsApp/47years/ 9 August 2020/3:48pm). Some indigenes of Abeokuta raised some doubts about the authenticity of the virus. According to a respondent, yes, I believe there is covid-19 in Nigeria. But in every rumor spread, there's an evidence of truth in them. Our leaders are not plain enough or truthful to us enough though, that doesn't mean that I should doubt the existence of the covid-19 (Female/ WhatsApp/ 25years/ 9 August 2020/9:36 am).

Another woman who doubted the figures being released daily said that she is convinced on the basis that even some governors have raised alarm on the authenticity of the corona virus. She gave examples of how some governors have come out to doubt the reality of the pandemic, even when some of them had contracted it (KI/female/Trader/Trader/58 years/10 August 2020). To corroborate her, the governor of Oyo State, Engineer Seyi Makinde once stated on a national media that the whole thing was obscure to him. Indeed, he was not the only one to have raised doubts over the existence of the virus. An elder statesman, High Chief Raymond Dokpesi had earlier reported his confusion about the virus as he stated that all the medications he received at the isolation centre were malaria drugs (Odunsi 2020). Similarly, the Kogi State governor, Alhaji Yahaya Bello had raised issues with the figures accrued to his state. In a video posted by the governor on his Facebook page on March 25, which went viral, he said "ninety percent of the noise about COVID-19 is for political, economic, financial [or] material gain. The other 10% relates to ordinary flu, like the common cold Nigerians generally suffer" (Offiong, 2020; https://www.youtube.com/watch?v=4G69vqkYnDA

Aside from such utterances, he had in May demanded that the federal government delegation comprising officials of NCDC and the Department of Health Services of the Federal Ministry of Health to assess the level of compliance to immediately go on isolation. This response made the delegate to flee the Kogi State for fear of being quarantined by the state government. As laughable as this might sound, his Cross River State counterpart had also questioned the rationale of federal government's responses. The governor who is a Professor in the sciences once stated that "you don't need social distancing when you are properly protected because for your mucal glands it secretes the mucus and the mucins already form a network of coats to attack the virus" (Onyeji & Adebowale, 2020). His Commissioner for Health, Dr Mrs. Betta Edu, who is a medical doctor and the Chairman of the State COVID-19 Task Force, had on so many occasions denied any case of the pandemic in the state even when members of the Nigerian Medical Association, Cross River State chapter affirmed that the state had recorded some cases. According to the NMA Chairman, Dr Agam Ayuk: "the members of the Association and residents of Cross River State have been put in a precarious public health and safety situation due to the confusion and uncertainty created by the delayed updating of the results by NCDC (Adebulu, 2020).

In response to these issues, the Minister of Health, Dr Osagie Ehanire, had to caution authorities and health officials in Kogi and Cross River States against playing politics with the COVID-19 pandemic, noting that such rhetoric was capable of upsetting the national response against the pandemic. He further stated that, "there should be no politics in response to a disease that is as infectious as COVID-19. We want to remove this disease from the realm of politics and religion (Onyeji & Adebowale, 2020). The Chairman of the Presidential Task Force on COVID-19, Boss Mustapha stated that national response continues to face several challenges for many reasons such as inadequate infrastructure, manpower shortage, global shortage of essential testing kits, strain on the economy, among others. He, however, acknowledged that the greatest challenges are human resistance to change, stigmatisation, mental health, skepticism, culture, religious belief, and rising incidents of domestic violence (Adebowale, 2020).

# **Implications**

One implication of the study is health communication. By this, health communication practices must now engender the factors that shape an individual's decision to seek healthcare. This is to ensure that professionals are able to make appropriate recommendations on promoting health seeking behaviours instead of options that the patients may not be comfortable with. For health communication professionals, this will also aid them to deploy the right medium or research instruments in research planning. In this regard, the NCDC Director once stated, "I don't know what else we can do to push the message. I think people just have to look at countries like Italy, Mexico, and Brazil to understand the potential impacts of the virus" (Adepoju, 2020b). A report stated that "Nigerians maybe particularly vulnerable not because they are uniquely gullible, but because of weak communications between the government and the governed, high reverence for miracle healing and a dilapidated healthcare system" (HURIDAC, 2020, p.48)

Public reactions also have implications on public health. This has reflected in non-compliance, non-adherence, and noncooperation as regards the laid down protocols and rules such as use of face masks, social distancing, frequent washing of hands, among others. This non-compliance also has implications on the surge in the cases. For example, the number of reported cases was low during the lockdown as compared to when the lockdown was lifted in spite of the laid down rules and regulations to check the spread of the virus (Kazeem, 2020). Lastly, the study has implication on the management of future epidemic and pandemic as a result of public reaction. This may affect future early warning response to such pandemic and may as well jeopardize stakeholders' efforts. For example, in spite of the enforcement mechanism, many people have refused to act responsibly and adjust to the new ways of doing things or observing all established COVID-19 response protocols.

#### Conclusion

This study has shown how the corona virus emerged in Nigeria, responses, and public reactions as well as the implications for Abeokuta in Ogun State, Nigeria. It also revealed the factors that shaped public reactions to include cultural beliefs, politicisation of issues, religiousity, fake news, government distrust and doubledealings as well as international influence and conspiracy theory. The implication of these reactions has manifested in public health, health communication practices and management of future pandemics. The study recommends that government must at all times ensure good governance, good management of information so as to gain public trust. The political elites must also desist from playing politics with national issues. Government must also partner with traditional and religious institutions because while traditional institutions are closer to the people, religion plays very important roles in Abeokuta and the country at large. Relevant government agencies such as the National Orientation Agency (NOA) must also make contents that reflect and appeal to the culture of indigenous population. Law enforcement agencies must also make sure that anyone who flouts existing health laws or medical restrictions is penalised. The article recommends that, among others things, stakeholders in public health and health communication should consider the aforesaid factors for future management of infectious diseases.

### References

Aborisade, S. (2020, August 28). Nasarawa youths force residents to remove face masks-NOA. *Punch*. https://punchng.com/nasarawa-youths-force-residents-to-remove-face-masks-noa/

Adebowale, N. (2020, June 18). SGF lists Nigeria's challenges to tackling COVID-19—SGF" *Premium Times*. https://www.premiumtimesng.com/news/more-news/398420-sgf-lists-nigerias-challenges-to-tackling-covid-19-sgf.html

Adebulu, T. (2020 July 5). Cross River doctors declare indefinite strike over 'abandoned COVID-19 patients. *The Cable.* https://www.thecable.ng/breaking-cross-river-doctors-declare-indefinite-strike-accuse-govt-of-abandoning-covid-19-patients

- Adepoju, P. (2020a). Nigeria responds to COVID-19: First case detected in sub-Saharan Africa. *Nature Medicine*, 26(4), 444-448.
- Adepoju, P. (2020b, July 17). Politics gets in the way of Nigeria's COVID-19 response. *Inside Development*.https://www.devex.com/news/politics-gets-in-the-way-of-nigeria-s-covid-19-response-97720
- Al Husseini, D.I. (2011). The implications of religious beliefs on medical and patient care. MA dissertation, University of Pennsylvania.
- Al Jazeera (2020 June 3). Corona virus: Travel restrictions, border shutdowns by country.
- Asakitikpi A. E. (2007). An Interrogation of diarrhoea concept among Yoruba women in Ibadan metropolis, Nigeria. *Nordic Journal of African Studies*, 16(1), 54-74.
- Awolalu, J.O. (1976). What is African traditional religion? *Studies in Comparative Religion*, 10 (2),1-10. http://studiesincomparativereligion.com/uploads/ArticlePDFs/268.pdf
- Ayinla, R. (2020 March 30). FG postpones lockdown on Ogun to Friday. Business Day, https://businessday.ng/uncategorized/article/fg-postpones-lockdown-on-ogun-to-friday/
- Bandura, A. (1977). Social learning theory. Englewood Cliffs, NJ: Prentice Hall.
- Basden, G.T (1921). Among the Ibos of Nigeria. London: Seeley Service and Co Ltd.
- Biryabarema, E. & Smith A. (2020, May 4). President queries Tanzania coronavirus kits after goat test. *Reuters*. https://www.reuters.com/article/health-coronavirus-tanzania/president-questions-tanzania-coronavirus-kits-after-goat-test-idUSL8N2CL0DY
- Buhari M. (2020, March 29). Address by H.E. Muhammadu Buhari, president of the federal republic of Nigeria on the COVID-19 pandemic Sunday 29th March, 2020. CNBC Africa. https://www.cnbcafrica.com/coronavirus/2020/03/29/covid-19-lagos-fct-ogunstate-to-go-into-lockdown/
- Busari, S. & Adebayo, B. (2020 March 23). Nigeria records chloroquine poisoning after Trump endorses it for corona virus treatment. *CNN*.
- Campbell J. & Mccaslin J. (2020, April 28). How Nigeria has responded to COVID-19 so far. Council on Foreign relations.
- Carico, R., Sheppard J., & Thomas, B (2020). Community pharmacists and communication in the time of COVID-19: Applying the health belief model. *Research in Social & Administrative Pharmacy*, 1-5.
- CDC (2020, updated May 13). Symptoms. https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html

- Colonial Reports-Annual. (1904). Southern Nigeria. Report for 1903. London: His Majesty's Stationery Office
- Colonial Reports-Annual. (1923). Nigeria: Report for 1922. London: His Majesty's Stationery Office
- Colonial Reports-Annual. (1924). Nigeria: Report for 1923. London: His Majesty's Stationery Office
- Darko, I. N. (2009). Ghanaian indigenous health practices: The use of herbs. M.Sc dissertation, University of Toronto.
- Egbunike, N. (2020 May 15). Nigerian pastor spreads COVID-19 conspiracies and disinformation. Global Voices. https:// globalvoices.org/2020/05/15/nigerian-pastor-spreads-covid-19conspiracies-and-disinformation/
- Erlingsson, C. & Brysiewicz, P. (2017). A hands-on guide to doing content analysis. African Journal of Emergency Medicine, 7, 93-99
- Global Voices (2020, May 15). Nigerian pastor spreads COVID-19 conspiracies and disinformation: Oyakhilome has been all kinds of messy this COVID-19 season. https://globalvoices.org/2020/05/15/ nigerian-pastor-spreads-covid-19-conspiracies-and-disinformation/
- Heiby, E. & Carlson, J (1986). The health compliance model. Journal of Compliance in Heath Care, 1, 135-154.
- HURIDAC (2020. HURIDAC rule of law project: Human rights perspective of COVID-19 pandemic in West Africa. Abuja: HURIDAC. https://www.huridac.org/uploads/3/4/7/9/34798400/ human rights perspective of covid-19 pandemic in west africa report.pdf
- Idang G.E. (2015). African culture and values. Phronimon 16 (2), 97-111. http://www.scielo.org.za/pdf/phronimon/v16n2/06.pdf
- Iriekpen, D. (2020, April 26). A law good for the goose but not the gander. This Day.
- Janz, N.K & Becker, M.H. (1984). The health belief model: A decade later. Health Education Quarterly, 11(1), 1-47.
- Kaplan, R. & Simon, H. (1990). Compliance in medical care: Reconsideration of self-predictions. Annals of Behavioural Medicine, 12, 66-71.
- Kazeem, Y. (2020 May 4). Nigeria is easing its coronavirus lockdown at what could be the worst possible time. Quartz Africa. https:// qz.com/africa/1850491/nigeria-lifts-coronavirus-lockdown-amidrising-cases/
- Lambo, A.T. (1963). African traditional beliefs: Concepts of health and medical practice. A lecture delivered at the Philosophical Society, University College, Ibadan, 24 October 1962. Ibadan: Ibadan University Press.
- Lauver, D. (1992). A theory of care-seeking behaviour. IMAGE: Journal of Nursing Scholarship, 24 (4), 281-288

- Mayo Clinic. (2020, August 7). Corona virus disease 2019 (COVID-19).https://www.mayoclinic.org/diseases-conditions/coronavirus/symptoms-causes/syc-20479963
- Mustapha, A (2005). Ethnic minority groups in Nigeria: Current situation and major problems. Working paper, Commission on Human Rights
- NCDC. (2020, February 28). First case of corona virus disease confirmed in Nigeria, 28 February 2020. https://ncdc.gov.ng/news/227/first-case-of-corona-virus-disease-confirmed-in-nigeria
- Nnoli, O. (1978). *Ethnic politics in Nigeria*. Enugu: Fourth Dimension. Nwaorgu, O.G.F. (2003). Ethnic suspicion in Nigerian politics. In M. Dukor (Ed.), *Philosophy and politics: Discourse on values, politics and power in Africa* (pp.122-133). Lagos: Malthouse.
- Nwaorgu, O.G.F. (2013). Anomalies of the Nigerian federalism. *Canadian Social Sciences*, 9 (4), 116-125.
- Odunsi, W. (2020, May 15). Corona virus: I'm confused, we were given malaria drugs—Dokpesi [VIDEO]. *Daily Post*. https://dailypost.ng/2020/05/15/coronavirus-im-confused-we-were-given-malaria-drugs-dokpesi-video/
- Offiong, A.V. (2020, June 3). COVID-19: When a governor believes it's a hoax and ordinary flu. https://gga.org/covid-19-when-a-governor-believes-its-a-hoax-and-ordinary-flu/
- Oludare, I. (2020 March 1). Corona virus: Disease won't affect my church members- pastor Adeboye. *Daily Trust*
- Onyeji, E. & Adebowale, N. (2020, July 7). Nigerian govt warns against COVID-19 'politics' in Cross Rivers, Kogi. *Premium Times*. https://www.premiumtimesng.com/news/top-news/401588-nigerian-govt-warns-against-covid-19-politics-in-cross-rivers-kogi.html
- Orji, R., Vassileva, J., & Mandryk, R., (2012). Towards an effective health Interventions Design: An extension of the health belief model. *Online J Public Health Information*, 4 (3).
- Osaghae, E.E. & Suberu, R.T. (2005). A history of identities, violence, and stability in Nigeria. CRISE Working paper 6. United Kingdom.
- Page, M. T. (2018, July 17). A new taxonomy for corruption in Nigeria" Carnegie Endowment for International Peace. https://carnegieendowment.org/2018/07/17/new-taxonomy-for-corruption-in-nigeria-pub-76811
- PEFS. (2001). *Ethnic map of Nigeria* 7 Vols. Ibadan: Programme on Ethnic and Federal Studies, University of Ibadan
- Salaudeen, A. (2020, March 27). Government, banks and wealthy individuals contribute billions to fight corona virus in Nigeria. *CNN*.
- Thompson, O.O., Nwaorgu, O.G.F., Afolabi, A.S., Aduradola, R.R., Odozor, U.S & Ademola, E.O. (2019). The implication of fake

- news, hate speech and government responses in Nigeria, 2015-2019. *Journal of Communication and Media Research*, 11 (2), 159-171.
- WaterAid. (2020). Tackling COVID-19 in Nigeria. https://www.wateraid.org/ng/covid-19
- Western House of Assembly (1953). Summary of proceedings. 27 January, National Archives Ibadan.
- WHO. (2020a, April 17). Q & A on coronaviruses (COVID-19): What are the symptoms of COVID-19?https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses
- WHO. (2020b, April 23). Corona virus disease 2019 (COVID-19) situation report 94. WHO.