Assessment Of Audience Response To Media Campaigns On Covid-19 Pandemic In Bonny Island, Rivers State Nigeria

Nnenna Anthonia Okeh¹, Joseph Oluchukwu Wogu¹, Ozioma Patience Nwokedi¹*

¹Department of Mass Communication, University of Nigeria Nsukka.

Abstract
The focus of this research was to assess the audience response to the mass media campaigns of covid-19 in Bonny Island of Rivers State in Nigeria. It found the level of awareness of the audience on the mass media campaigns of covid-19 in Bonny Island of Rivers State in Nigeria in Nigeria. This study adopted quantitative data collection, that is, survey of the campaign audience. The following research questions were answered; Is the covid-19 media awareness in Bonny Island of Rivers State accessible to the inhabitants of the area? Has the media campaign created all the necessary awareness of covid-19 in Bonny Island of Rivers State? Has the awareness made any positive impact on the health behavior of inhabitants of Bonny Island of Rivers State? The researcher embarked on house to house visit in Bonny Island of Rivers State. Therefore, a total of 156 respondents were used. To arrive at the above sample size, Taro Yamane’s statistics was adopted based on National Population Commission of Nigeria projected figure as at April, 2020, Bonny has a population of 302,000. Questionnaires were administered to each of the respondents visited and their views were obtained. However, out of the total of 156 questionnaires distributed, 141 (90%) questionnaires were correctly completed and returned, while 15 (10%) were not returned. The data collected were segmented into three dimensions of interest; awareness evaluation, effective evaluation and impact evaluation. The data collected answered the three research questions, and the findings from the three research questions answered were also discussed. Therefore, the theoretical framework adopted was Social Distribution of Knowledge model.

Key words: Covid-19, Bonny Island, Rivers State, Nigeria, media campaigns.

Introduction
The cause of the disease was confirmed as a novel corona virus, and the infection spread to many countries worldwide (New Scientist, 2020). The World Health Organization (WHO) declared the virus an international public health emergency on January 31, 2020 (WHO, 2020) and declared as a pandemic.

In Nigeria, the first case of the pandemic was an Italian national who arrived the country on 28th of February, 2020 (Nigeria Centre for Disease Control– NCDC, 2020). The virus has continued to spread in the country. In order to curb the spread of the virus, the Federal Government of Nigeria enforced a lockdown of Lagos state (the epicentre of the pandemic), Ogun State and the Federal Capital Territory (FCT). President Buhari, however, exempted health workers, security personnel, pharmaceutical companies, oil and gas workers, the nation’s food supply chain, media, and other essential service providers from the restrictive measures (Curson, 2020).

Not long afterward, other states relying on Section 8 of Nigeria’s Quarantine Act enabling state-specific laws announced their own versions of preventive and treatment measures to curtail the spread of the Covid-19 pandemic. Citizens were instructed to stay at home, wash their hands regularly, and follow social distancing protocols in order to avoid the risk of infection and transmission. These actions came a little too late, as more states (Bauchi, Edo, Ekiti, FCT, Lagos, Ogun, Oyo, Osun, and Rivers) confirmed Covid-19 index cases and more (NCDC, 2020). In late March 2020, Port Harcourt, the capital city of Rivers State, recorded its first case of Covid-19 as confirmed by the Nigeria Centre for Disease Control (NCDC, 2020). The index case was an Edo State born nineteen-year-old female model, who had just returned from a trip to Europe on March 16. While she was moved to the state isolation center for treatment, efforts were made to trace all the persons she had been in contact with since she returned to Nigeria. The exponential spread of Covid-19 beginning with this index case (for example, the state recorded 127 positive cases on June 20) necessitated the state government to impose stringent preventive protocols, including a one-week twenty-four-hour dusk-to-dawn curfew in Port Harcourt, Nigeria’s oil hub, in early May (Chukwu, 2020). State Governor Nyesom Wike attributed the rise in Covid-19 infections to infected oil workers flown into the state from an offshore oil facility in neighboring Akwa Ibom State in late April by Bristow Helicopters. Before that, Governor Wike had detained some oil workers and two Bristow Helicopter pilots for moving into and around the Port Harcourt metropolis, thereby disobeying the state’s Covid-19 protocols. While the pilots were released through the intervention of the Ministry of Aviation, the oil workers were only released after threats by their umbrella union to embark on a nationwide strike. However, these measures and the dusk-to-dawn curfew imposed by the governor in early May failed to curtail the spread of infections. In spite of the continued spread of infections, restrictions were later relaxed due to their economic effects and citizen pressure in late May.

Before long, attention shifted to Bonny Island, a small oil-host community, where mysterious deaths and hospitalizations suddenly began to surge: more than ten deaths occurred and 500 people were hospitalized within two weeks (Chukwu, 2020). Bonny Island is located at the southern edge of Rivers State on the Atlantic coast of the Niger Delta, Nigeria. It hosts the liquefied Natural Gas Company, NLNG, Shell Petroleum Development Company, Saipem, Agip Oil Company etc. Bonny Island is a natural harbour, with 34 villages, and over eight
fishing settlements. The main occupation of the people is fishing (Pepple, I.I. et al, 2020). Bonny has a population of 302,000 according to projected figure as at April, 2020, National Population Commission (Pepple, et al, 2020). This study is centered on the assessment of audience response to media campaigns on covid-19 pandemic in Bonny Island of Rivers State.

Objective
This study was aimed at assessing the audience response to Covid-19 campaigns in Bonny Island of Rivers State Nigeria. In order to accomplish this goal, the researcher:

- Identified the level of awareness of covid-19 media campaigns among the inhabitants of Bonny Island of Rivers State
- Discovered the effectiveness of covid-19 media campaigns to the inhabitants of the Bonny Island of Rivers State
- Outlined the positive impact of covid-19 campaigns on the health behavior of the inhabitants of Bonny Island of Rivers State.

Research Questions

- Is the covid-19 media awareness in Bonny Island of Rivers State accessible to the inhabitants of the area?
- Has the media campaign created all the necessary awareness of covid-19 in Bonny Island of Rivers State?
- Has the awareness made any positive impact on the health behavior of inhabitants of Bonny Island of Rivers State?

Significant of the study
This study will enable Federal Ministry of Health, NCDC, WHO, and other relevant agencies concerned with controlling covid-19 pandemic in Bonny Island of Rivers State to improve in the areas of media awareness creation. The study also reveals the level of audience perception of the media as an instrument for awareness creation in terms of health related issues.

Scope of the study
This study covers all the 75 communities in Bonny Island of Rivers State which are the areas that experienced the mysterious death due to covid-19 in May 2020. The study is centered on the assessment of audience response to media campaigns on covid-19 pandemic in Bonny Island of Rivers State Nigeria.

Statement of the problem
Due to the significance of health to the overall performance of everybody, public health has over the years, become an issue of priority to nations across the globe. To tackle health concerns, governments have often resorted to the use of communication campaigns to reach out to the people, with the aim of influencing them into carrying out desired healthy practices. These campaigns are carried out through several channels of communication, such as interpersonal channels and the mass mediated channels. The mass media have, however, gained popularity because of their ability to reach a vast majority of people within a short time.
In Nigeria, government and other relevant agencies have invested a lot on public health campaigns through the media.

Is the covid-19 media awareness in Bonny Island of Rivers State accessible to the inhabitants of the area? Has the media campaign created all the necessary awareness of covid-19 in Bonny Island of Rivers State? Has the awareness made any positive impact on the health behavior of inhabitants of Bonny Island of Rivers State? These have remained concern, and this study was carried out to provide some answers.

Literature Review
According to WHO, (2020) and Guan, et al, (2019), the novel Corona virus disease 2019 (COVID-19) was first identified in Wuhan China in December 2019 and has rapidly spread to almost every region of the world. The disease is caused by a new and severe type of Corona virus known as severe acute respiratory syndrome corona virus 2 (SARS-CoV-2). The infection has no immediate treatment and vaccine, and it has according to World Health Organization become a worldwide pandemic causing significant morbidity and mortality. However, Worldometers, (2020) revealed that there are 1,603,428 confirmed cases, 356,440 recoveries from the illness and 95,714 deaths worldwide as of April 9, 2020. Where as on February 27, 2020, an Italian citizen became the index case for covid-19 in Nigeria and as at April 9, 2020, there were 288 laboratory-confirmed cases of covid-19 in Nigeria with 51 discharges and 7 deaths (Nigeria Centre for Disease Control, NCDC, 2020). Nevertheless, the onset of covid-19 sent waves of panic across Nigeria, like in every other country. Due to globalization, the health risk of communicable diseases could be pandemic (Amzat et al. 2020). During the first 30 days of covid-19 in Nigeria, the disease distribution was elitist. The majority of those who tested positive were returnees from abroad (Amzat et al. 2020; NCDC, 2020).

However, corona virus disease (covid-19) has affected the global community resulting in 31,343,430 Confirmed cases globally and 965,250 deaths as of September 22, 2020 (JHU, 2020). The three most-infected countries globally are USA, India, and Brazil, with 6,858,010; 5,562,663 and 4,558,040 confirmed cases, respectively. These cases of covid-19 led to 199,886; 137,272; and 88,935 deaths in USA, Brazil, and India respectively. WHO categorized Nigeria as one of the 13 high-risk African countries with respect to the spread of COVID-19. Nigeria is also among the vulnerable African nations, given the weak state of the healthcare system (Marbot, 2020). In January 2020, it was already declared by the World Health Organization (WHO) as a public health emergency of international concern (WHO, 2020). Two months later (i.e., in March 2020), it had already developed to a pandemic.

In Nigeria, on February 27, 2020, an Italian citizen became the index case for Covid-19 in Nigeria and as at April 9, 2020, there were 288 laboratory-confirmed cases of Covid-19 in Nigeria with 51 discharges and 7 deaths (Nigeria Centre for Disease Control, NCDC, 2020). To prevent further spread of the virus, civil societies and government agencies embarked on enlightenment campaigns for good hygiene and social distancing. Temperature screening was conducted at airports and those returning from countries with numerous confirmed cases of Covid-19 were implored to self-isolate. The NCDC in association with State governments also began tracing, and tracking of possible victims and their contacts (NCDC, 2020). Messages
on the Covid-19 infection were equally translated into local languages to reach the general Nigerian population. The NCDC uses a communication campaign with the theme, take responsibility on social media for a Nigerian audience (Amzat et al. 2020; NCDC, 2020). This is to emphasize the role of the individual both in the prevention of Covid-19 and the social upkeep of their health while the pandemic lasts. However, the extent to which public health education has influenced positive behavioral changes among Nigerians remain vague. Many people and faith-based organizations have continued to defy the directives on social distancing and public gatherings by organizing social events, while some worship centers also conducted congregational services. Some of the challenges to the implementation of the contact-tracing strategy include lack of support and cooperation from the returnees who reportedly filled fake contact addresses and incorrect phone numbers in the forms at the point of entry (News Agency of Nigeria, 2020). Another vital response was a lockdown to prevent community transmission of Covid-19. There was a lockdown in two states; Lagos and Ogun, and the FCT for four weeks effective from March 30, 2020, with restrictions on inter-state travels throughout the country (Muanya et al., 2020).

On March 18, 2020, the Lagos State government suspended all gatherings above fifty people for four weeks and ordered all lower and middle level public officers to stay-at-home (Ewodage, 2020). Similarly, the Federal government, on March 30, 2020 introduced various containment strategies such as closing of the national borders and airspace, schools, worship centers and other public places, canceling of mass gathering events and placing the Federal Capital Territory, Lagos and Ogun states on lock down for an initial period of fourteen days (Radio Nigeria, 2020). Covid-19 testing laboratories were set up in Lagos, Abuja and Irrua in Edo State while State governments opened isolation centre and imposed dawn to dust curfews in their territories.

The covid-19 disease is characterized by various symptoms, appearing during a range from 2 to 14 days after exposure. Though 97.5% of patients develop symptoms within approximately 11–12 days after infection (McMichael, et al 2020), the virus seems to spread through droplet transmission (Gandhi, et al 2020) as well as fecal-oral transmission (Hindson, 2020) with symptoms ranging from very mild to very severe (Gandhi, et al, 2020), while certain people infected may not experience any symptoms at all (Ong et al., 2020).

The most common symptoms include fever, cough, dyspnea, myalgia, and fatigue (Wang, et al, 2019). Other symptoms are anorexia, nausea, and diarrhea (Huang, et al., 2020). Additionally, it is reported that just before or soon after the symptom onset, people that have been affected by the virus have high nasopharyngeal viral levels that fall over the course of approximately one week (Lescure, et al 2020). One of the fundamental problems in combating the spread of the SARS-CoV-2 virus and, thus, the COVID-19 disease is that pre-symptomatic and asymptomatic people are infectious. A 40% to 50% of the cases are attributed to transmission from asymptomatic or pre-symptomatic individuals (Lokuge, et al 2020). Age is considered a risk factor of Covid-19, especially for individuals above 65 years old. At the same time, cardiovascular problems, chronic lung disease, hypertension, diabetes, and obesity are also connected with a high risk of being infected by the SARS-CoV-2 virus Goyal, et al 2020). On the other hand, while young people are not classified at direct risk of COVID-19 mortality, they are considered as virus transmission-risk associated, in the sense that in most cases, they
are asymptomatic but are a potential spread source of the SARS-CoV-2 virus. Therefore, it becomes of crucial significance to know whether young people are informed of the symptoms of Covid-19 since humanity is faced with this long-lasting pandemic. These young individuals might be called to deal with a severe health condition due to the SARS-CoV-2 virus regarding friends, relatives, or even themselves. It is imperative to ensure that young people are fully conscious of the disease’s symptoms, in case they spot them in relatives or friends. If this situation appears, they will be able to support them before the problem is beyond their control, while they might be the ones who have infected them in the first place (WHO, 2020).

**Theoretical Framework**

This work adopted the Social Distribution of Knowledge model. Social distribution of knowledge “deals with one widely expected and major media effect and their capacity to inform and keep informed a large-scale of society in a manner consistent with the needs of a modern economy and a participant democratic process” (McQuail, 2009).

On the other hand, some Nigerians due to superstitions and ignorance of the science behind the infection prefer only to pray (even violating the social distancing rule by attending churches or mosques during the lockdown) and use anointing oils, talisman, herbs or rituals (Abati, 2020) to prevent contracting and spreading the virus. Some also used social media platforms (e.g. Whatsapp, Twitter, Facebook and Instagram) to spread fear, project fake news concerning the source of the virus, promote prejudice against China, incite panic buying, proffer fake cures and undermine medical advice, deliberately or ignorantly (Hassan, 2020). They opined that lockdown, self-isolation and social distancing are Non-African solutions to the pandemic (Abati, 2020).

The mass media, through the awareness campaigns has the capacity to convince the audience on the need to adhere to all the covid-19 guidelines in order to avoid contacting the virus. This will go a long way in convening the people of Bonny Island of Rivers State to believe that the mysterious death that occurred in the area was due to covid-19 and they should also try as much as possible to keep social distancing, wash hands always, use hand sanitizer and also to wear face mask always. And these will help to curtail the spread of covid-19 in Bonny Island of Rivers State and beyond.

The media through the awareness campaigns has been able to convenience reasonable number of the people of Bonny Island of Rivers State on how to curtail the spread of covid-19 pandemic.

**Research Design**

This work adopts survey design and used questionnaire for data collection. According to Creswell (2018), “survey designs are procedures in quantitative in which investigators administer a survey or questionnaire to a sample or to the entire population of people in order to describe the attitudes, opinions, behaviour or characteristics of people”.

Seventy five (75) communities of Bonny Island were all represented. The seventy five communities are as follow: Adamakiri, Agbala, Akpakpasu, Alaasiakiri, Amanadama, Angalabie, Asaramatoru, Atabakiri, Bartholomy, Beregade, Biemekiri, Bilemekiri, Binye, Birayekiri, Boloba, Bonny, Bony-Onwon, Charuama, Crutoru, Dokubotorugha, Eferewari,
Fakpa, Febiri, Gbolokiri, Georgekiri, Green, Greenkiri, Ibiribiri, Ijanikwe, Inawanacha, Iwoama, Iwoama-Kuruama, Jackmay, Kalabima, Kuruama, Kuruma, Ligakiri, Magbegbekiri, Mbikiri, Mbisu, Namabie, Nenekin, Nwachu, Obetene, Ogbomumo, Ogbuluama, Ogidigba, Ogumabie, Okolobie, Okoloma-Iwoma, Okolomable, Okpomadapa, Oloma, Olomabia, Omubiokolo, Onwonwokiri, Opiriifan, Opo, Oporkiri, Opukiri, Orutoru, Otokolomabie, Otukpo, Otutunbi, Owaopiri, Owuopili, Perside, Pondomakiri, Samai, Samgama, Sampite, Sombiekiri, Tumbikulu, Wasakiri and Wastom communities.

The representatives were randomly selected. Three people each were selected from Bonny, Bony-Onwon, Greenkiri, Opo, Otutunbi, and Omubiokolo, while two people each were selected from the remaining sixty nine communities. In addition, secondary data was generated from relevant published and accessible materials in public and private libraries such as books, government publications, conference and workshop papers, Newspapers and Magazines, and internet materials etc.

Population of study
The study population included all the residents of the 75 communities selected. Bonny has a population of 302,000 projected figure as at April, 2020, National Population Commission of Nigeria (Pepple et al., 2020). This was done so because “population of study or universe study as it is synonymously called includes all the elements of concern in the given study” (Okoro, 2001:8), and the class of people listed are the elements that will be used in this study.

Sample size and sampling technique
The sample was determined using Taro Yamane sampling method. Yamane (1967) provides a stratified formula to calculate sample sizes. The statistical formula is:

$$n = \frac{N}{1 + N(e)^2}$$

n = Sample size
N = Population size under study
I = Unity in value (always constant)
e = Estimated standard error margin of 0.08
n = 302,000

$$1 + 302,000 (0.08)^2$$
$$= 302,000$$

$$1 + 302,000 (0.0064)$$
$$= 302,000$$

$$1 + 1932.8$$
$$= 302,000$$

1933.8
$$= 156.169$$
To arrive at the above sample size, Taro Yamane’s statistics was adopted based on (Pepple et al., 2020) that the population projection of Bonny Island of Rivers State as at April 2020 is 302,000.

Therefore, the sample size was approximately 156. This sample size was a fair representation of the entire population of Bonny Island of Rivers State. This calculation was done using an error limit of 0.08.

Data presentation and analysis

Table one: Questionnaire administration and return

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Returned Questionnaire</td>
<td>145</td>
<td>93%</td>
</tr>
<tr>
<td>Non-returned Questionnaire</td>
<td>11</td>
<td>7%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>156</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

From the above Table 1, a total of one hundred and fifty six (156) questionnaires were administered to the inhabitants of Bonny Island of Rivers State, one hundred and forty five (145) 97% were returned while eleven (11) 7% were not returned.

Table two: Distribution of respondents by sex

<table>
<thead>
<tr>
<th>Sex</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>61</td>
<td>42%</td>
</tr>
<tr>
<td>Female</td>
<td>84</td>
<td>58%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>145</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Table 2 shows that sixty one (61) respondents representing 42% of the sample population were male while eighty four (84) respondents, representing 58% of the population were female.

Table three: Distribution of respondents by age

<table>
<thead>
<tr>
<th>Age</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>20-25</td>
<td>24</td>
<td>16%</td>
</tr>
<tr>
<td>26-30</td>
<td>22</td>
<td>15%</td>
</tr>
<tr>
<td>31-35</td>
<td>30</td>
<td>21%</td>
</tr>
<tr>
<td>36-40</td>
<td>27</td>
<td>19%</td>
</tr>
<tr>
<td>41 and above</td>
<td>42</td>
<td>29%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>145</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Table 3 shows that twenty four (24) representing 16% of the sample population were between the age bracket of 20 – 25 years while twenty two (22) respondents each representing
15% of the ages 26 – 30 years and thirty (30) 21% are in the age bracket of 31 – 35 years, also twenty seven (27) respondents representing 19% of the population were between the age limit of 36 – 40 years and forty two (42) respondents representing 29% were within the age limit of 41 and above.

Table four: Marital status distribution

<table>
<thead>
<tr>
<th>Marital status</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>45</td>
<td>31%</td>
</tr>
<tr>
<td>Married</td>
<td>53</td>
<td>37%</td>
</tr>
<tr>
<td>Divorced</td>
<td>15</td>
<td>10%</td>
</tr>
<tr>
<td>Widow/widower</td>
<td>32</td>
<td>22%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>145</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Table 4 above shows that forty five (45) respondents, representing 31% of the sample population were single, fifty three (53) respondents representing 37% of the population were married while only fifteen (15) respondents representing 10% of the population were divorced as well as thirty two (32) respondents representing 22% of the population were either widows or widowers.

Table 5: Educational Qualification Distribution

<table>
<thead>
<tr>
<th>Qualification respondents</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSCE</td>
<td>12</td>
<td>9%</td>
</tr>
<tr>
<td>NCE/OND/HND</td>
<td>27</td>
<td>18%</td>
</tr>
<tr>
<td>B.A./BSc/B.ENG/BED</td>
<td>72</td>
<td>50%</td>
</tr>
<tr>
<td>MSC/PhD</td>
<td>34</td>
<td>23%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>145</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

Table 5 shows that twelve (12) respondents representing 9% of the sample population were SSCE holders, twenty seven (27) respondents representing 18% were NCE/OND/HND certificate holders; seventy two (72) respondents representing 50% were holders of B.A./BSc/B.ENG/BED degrees, while thirty four (34) respondents representing 23% were MSC certificate holders and only ten (10) respondents representing 3.33% of the population were MSC/PhD holders.

Table 6: Assessment of the accessibility of covid-19 media awareness in Bonny Island of Rivers State to the inhabitants of the area

<table>
<thead>
<tr>
<th>Media respondents</th>
<th>awareness</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aware</td>
<td></td>
<td>124</td>
<td>86%</td>
</tr>
<tr>
<td>Not aware</td>
<td></td>
<td>21</td>
<td>14%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>145</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
Table 6 shows that one hundred and twenty four (124) respondents representing 86% of the sample population are aware of covid-19 media awareness in Bonny Island of Rivers State while the remaining twenty one (21) respondents representing 14% are not aware.

Table 7: Assessment of the effectiveness of covid-19 media campaign in Bonny Island of Rivers State

<table>
<thead>
<tr>
<th>Media awareness effectiveness</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very effective</td>
<td>70</td>
<td>48%</td>
</tr>
<tr>
<td>Effective</td>
<td>48</td>
<td>33%</td>
</tr>
<tr>
<td>Not effective</td>
<td>27</td>
<td>18%</td>
</tr>
<tr>
<td>Total</td>
<td>145</td>
<td>100%</td>
</tr>
</tbody>
</table>

The table 7 above shows that seventy (70) respondents representing 48% of the sample population consented to the fact that covid-19 media campaign in Bonny Island of Rivers State were very effective, forty eight (48) respondents representing 33% of the population accepted that the programmes were effective while only twenty seven (27) respondents representing 27% of the population said that the ongoing covid-19 media campaign in Bonny Island of Rivers State is not effective.

Table 8: Assessment of the impact of covid-19 media campaign on the health behavior of inhabitants of Bonny Island of Rivers State

<table>
<thead>
<tr>
<th>Answer</th>
<th>No of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>118</td>
<td>81%</td>
</tr>
<tr>
<td>No</td>
<td>27</td>
<td>19%</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 8 shows that one hundred and eighteen (118) respondents representing 81% of the sample population accepted that covid-19 media campaign on the health behavior of inhabitants of Bonny Island of Rivers State has impact on them while the remaining twenty seven (27) respondents representing 19% of the population said that they don’t feel the impact of the covid-19 media campaign.

Discussions of the Findings

After an exhaustive data analysis, the findings are summarized as follows: The research question one properly answered through the analysis of some data from the returned questionnaire. The result of the data analysis indicates that there is high level of awareness of covid-19 media campaigns in Bonny Island of Rivers State, but more still need to be done in terms of awareness creation. One hundred and twenty four (124) respondents representing 86% of the sample population are aware of covid19 media awareness in Bonny Island of Rivers State while the remaining twenty one (21) respondents representing 14% are not aware.

The research question two properly answered through the analysis of some data from the returned questionnaire. The result of the data analysis in table 7 shows that seventy (70)
respondents representing 48% of the sample population consented to the fact that covid-19 media campaign in Bonny Island of Rivers State were very effective, forty eight (48) respondents representing 33% of the population accepted that the programmes were effective while only twenty seven (27) respondents representing 27% of the population said that the ongoing covid-19 media campaign in Bonny Island of Rivers State is not effective.

The research question three properly answered through the analysis of some data from the returned questionnaire. The result of the data analysis in table 8 indicates that one hundred and eighteen (118) respondents representing 81% of the sample population accepted that covid-19 media campaign on the health behavior of inhabitants of Bonny Island of Rivers State has impact on them while the remaining twenty seven (27) respondents representing 19% of the population said that they do not feel the impact of the covid-19 media campaign. Majority of the respondents consented that through the ongoing covid-19 media campaign in Bonny Island of Rivers State, there is now a health behavior modification in terms of regular hand washing, social distancing, wearing of face mask among others in the area while some of the inhabitants still do not attend to all these covid-19 protocols.

Summary
A member of the family of severe acute respiratory syndrome (SARS) coronavirus-2 (SARS-CoV-2) popularly named COVID-19, first appeared in Wuhan, the capital city of Hubei province of the People's Republic of China in late December 2019. In Nigeria, the first case of the pandemic was an Italian national who arrived the country on 28th of February, 2020 (Nigeria Centre for Disease Control – NCDC, 2020). In late March 2020, Port Harcourt, the capital city of Rivers State, recorded its first case of Covid-19 as confirmed by the Nigeria Centre for Disease Control (NCDC, 2020).

The Governor of Rivers State, Gov Nyeso Wike was not left out in the lockdown process as he placed door o dust curfew in virtually everywhere in the State. At the peak of the pandemic, there were cases of mysterious death in Bonny Island of the State which was attributed to Covid-19.

Bonny Island is located at the southern edge of Rivers State on the Atlantic coast of the Niger Delta, Nigeria. It hosts the liquefied Natural Gas Company, NLNG, shell petroleum Development Company, Saipem, Agip Oil Company etc. Bonny Island is a natural harbour, with 34 villages, and over eight fishing settlements. The main occupation of the people is fishing. Bonny has a population of 302,000 (projected figure as at April, 2020, National Population Commission of Nigeria) (Pepple et al., 2020).

In order to contain the mysterious death in Bonny Island of Rivers State which was attributed to Corona virus, there have been many media campaigns on: Television through drama series, jingles on radio, drama on radio, stage drama, posters, handbills, pamphlets, music, seminars, conferences, event launch, symposium and lectures and so on, organized from time to time mostly by governmental and non-governmental organizations for the purposes of creation of awareness and educating the general public about how covid-19 is transmitted and how to avoid contracting the disease.

The focus of this research was to assess the audience response to the mass media campaigns of covid-19 in Bonny Island of Rivers State in Nigeria. It found the level of
awareness of the audience on the mass media campaigns of covid-19 in Bonny Island of Rivers State in Nigeria. This study adopted quantitative data collection, that is, survey of the campaign audience.

The following research questions were answered; Is the covid-19 media awareness in Bonny Island of Rivers State accessible to the inhabitants of the area? Has the media campaign created all the necessary awareness of covid-19 in Bonny Island of Rivers State? Has the awareness made any positive impact on the health behavior of inhabitants of Bonny Island of Rivers State?

The researcher embarked on house to house visit in Bonny Island of Rivers State. Therefore, a total of 156 respondents were used. To arrive at the above sample size, Taro Yamane’s statistics was adopted based on National Population Commission of Nigeria projected figure as at April, 2020, Bonny has a population of 302,000 (Pepple et al., 2020). Questionnaires were administered to each of the respondents visited and their views were obtained. However, out of the total of 156 questionnaires distributed, 141 (90%) questionnaires were correctly completed and returned, while 15 (10%) were not returned.

The data collected were segmented into three dimensions of interest; awareness evaluation, effective evaluation and impact evaluation. The data collected answered the three research questions, and the findings from the three research questions answered were also discussed. Therefore, the theoretical framework adopted was Social Distribution of Knowledge model.

Conclusion
This study has demonstrated that mass media and interpersonal communications are important mediating channels for the extension of information and campaigns for greater public attention in the covid-19 media campaigns in Bonny Island of Rivers State. This is consistent with the acknowledged role of strategic campaigns through different types of communication.

On the whole, the results constitute an important contribution to our understanding of the role which media awareness campaigns can play in the successful implementation of the covid-19 media campaigns in Bonny Island of Rivers State.

The desirable functions which the program aims at cultivating, can succeed in the behavior change of the inhabitants of Bonny Island of Rivers State, if the campaign planners conscientiously redouble their efforts in giving sustained coverage and publicity of the program activities, having their target audience in mind.

Recommendations
From the findings of the study, the followings were recommended;

The mass media should maintain the tempo of daily awareness programme on Covid19 disease and improve in her efficiency. Other agencies and parastatal, both Governmental Organizations and Non–Governmental Organizations should enhance and sponsor awareness programme of on covid-19 disease in the country.

Government should sponsor seminars and workshops on covid-19 disease outbreak and risks in the country. Government should have the thought of the rural dwellers that are without electronic mass media when selecting medium of communication and as such they
should employ interpersonal communications like use of traditional rulers and town criers to reach every nook and cranny of the target audience for more effective result.

References


