

#### Research Article

# An Assessment of the Acceptability of Street Vendors to Covid-19 Prevention Campaigns in Lagos State

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## ABSTRACT

Apart from the apparent gap in vaccine availability between developing and developed countries, another possible unintended cause of in-equality in addressing Covid-19 needs is the reception and willingness of people accept vaccination. Creating meaningful engagement which will create a desired change in the receiver (the public) is indeed another herculean task. Reception is however a function of many determinants which may hasten or delay the adoption of messages for behavioral change. This study assessed the acceptability of non-registered street vendors to Covid-19 prevention campaigns in Lagos State. The study adopted a cross-sectional study design in a population of 100 street vendors from 4 motor parks across 2 Local Governments in Lagos State. Simple random sampling and purposive sampling method of selection was used and analysis was done using STATA version 15. The study found out that the respondents were aware about Covid-19 messages (91.5%) and they heard these messages from multiple media. 62.8% of the respondents were able to recall some of the Cobid-19 which was not commensurable with behavior as vaccination rate was only 18.1% for 1st dose and 8.5% for 2-time vaccination respectively. The study therefore recommended the need for targeted campaigns to address information gaps around importance of safety protocols especially vaccination uptake. Emphasis should also be made on interpersonal media such as words of mouth and community outreaches to complement social and electronic media in order to reach more vendors and similar people in communities.

Keywords: Vaccination; Covid-19; Vendor; Campaigns; Media

## INTRODUCTION

More than ever before, the events of emerging diseases which have affected populations at local, regional and global levels have shown the need for a robust public health plan that give priority to preventive measures and proactive risk communication. How else would we describe the situation of the world since 2019 with the emergence of a virus which has affected life from all aspects; medical, social, economic and even spiritual? But that is just one part of the puzzle! The other equally important dilemma is the infodemic which has been associated with this virus with information overload across online and even offline conversations. As such, policy leaders and stakeholders at local and international spaces have been brought together by intent or otherwise to address these information gaps with different conspiration theories. One important tool that has been used to engage the public is Covid-19 health prevention campaigns. A health campaign is a type of media campaign which attempts to promote awareness about a topical issue of public health importance and proffer interventions available through the use of health education.

Before now, messages have been developed as core of campaigns to public health menaces like smoking, cancer and reduction of physical activity as well as changing behaviors of caregivers in reportage or reminders [1] These messages have been taken to the intended audiences through many channels; word of mouth, posters, then radio and television; and in recent years, through digital technology of social media and

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search engines [2]. The recent pandemic which has affected all the continents is not any different. For an ongoing pandemic with different variants and vulnerabilities, public campaigns have been developed to create awareness, educate on safety protocols and encourage vaccination against the viral diseases. Campaigns using pretested messages have been run at the different levels of care; global, regional, National and States respectively (W.H.O) 2022 [3,4].

In Nigeria, the Ministry of Health's Primary Health Development Agency (NPHCDA) and its States Agencies in collaboration with the Nigerian Centre for Diseases and Control (NCDC) have been involved in campaigns in order to manage community transmission [5]. From reiterating the fact that Covid-19 is real to adherence to regular hand washing, use of face masks and physical distancing and effectiveness of vaccines; campaigns have been carried out through social media, bulletins, press releases, television and radio to track daily statistics of Covid-19 cases and give updates on vaccination centers as part of their vaccination campaigns (Nigeria Health Watch, 2021) (NCDC, 2020) [6]. Developing messages for engagement is however one side of the coin, creating meaningful engagement which will create a desired change in the receiver (the public) is indeed another herculean task. Reception is however a function of many determinants which may hasten or delay the adoption of messages for behavioral change. Covid-19 prevention campaigns have therefore become a mainstay potential to modify beliefs, change behavior and minimize hesitancy about the Covid-19 vaccination exercise. Developing campaign messages is however one feat, creating conversations that create engagement and positive adoption of the message. Therefore, message development is as important as message reception [7].

However, as important as the components of communication for health mentioned above may seem, the message and medium will be worthwhile if the receiver of the message internalizes the message as intended by the sender. The internalization is what is reflected as the message reception which determines the reaction and behavioral change if any towards the campaign message. As such, the dynamics of determinants that allow reception of messages may portray a significance that defines the reaction to the public health messages, the conversations that follow and the eventual decisions.

The informal sector represents a significant population in Nigeria. It is estimated that over 80% of working people are employed in the informal sector ((ILO), 2018). In Lagos State, the informal economies employ about 5.5 million which is about three quarters of the State's labor force [8]. Although some of the labor force within this sector are registered with local or State and National authorities and are well recognized as trade union groups; some however are not with informal trading done mainly for survival. Registered informal trading groups such as Artisans associations, National Road Transport and Union Workers, Market associations are usually included in community development programs for electoral votes, education and distribution of relief campaigns and have access to information and programs by authorities. It will therefore suffice to say that the reception and adoption of public health messages of these informal but recognized traders may be different from the lower cadres who are largely un-documented for. Some of such unregistered traders are the street vendors

and hawkers. This study will give an insight to the reception of street vendors to Covid-19 vaccination messaging and the implications of reception to Covid-19 vaccination exercise in Lagos, Nigeria.

#### **MATERIALS AND METHODS**

The main objective of this study is

- To ascertain the medium/media of information which provided information about Covid-19 prevention to street vendors
- To assess the perception of street vendors to messages gotten from the Covid-19 prevention campaign
- To assess the current behavior of the street vendors towards information about Covid-19 prevention from the sources
- To ascertain the possible influence of social demographics on recall of messages gotten from Covid-19 campaign.

#### **Study Design**

This study is a descriptive survey using cross-sectional design to find out the reception of street vendors to Covid-19 prevention campaigns in Lagos State. The study population is the population of vendors at 4 motor parks in 2 selected Local Government in Lagos State. The 4 motor parks are; Allen, Ikeja, Ikorodu garage and Igbogbo motor parks respectively. The 4 motor parks were selected using simple random sampling. Based on previous study on street vendors which cited a prevalence of 37.1% and used 42 street vendors [9].

The data collection instrument that was utilized for this study was the pre-tested semi structured interviewer administered questionnaire. This instrument was chosen in order to allow for the short attention span of the target population who ordinarily may not be able to sit still to fill questionnaires and who may not also be literate enough to do so. Data was coded and analyzed using the STATA version 15 and presented in tables.

#### RESULTS

**Table 1** below shows socio-demographic characteristics of participants. A total of 94 respondents who took part in the study with more than three-quarter (77.7%) being female while less than a quarter (22.3%) were males. About 31% of the respondents were below the age of twenty, 7.4% were within the age range of 30-34 and 35-39 years. More than half (61.7%) of the respondents were Christians and at least six (6) in ten (10) respondents (62.8%) had completed secondary education and only a few 2 (2.1%) had no formal education.

 Table 1: Socio-Demographics Characteristics of the Respondents

Variable	Frequency (n=94)	Percentage	
	Gender		
Female	73	77.7	
Male	21	22.3	
	Age Range		
Less than 20	29	30.9	
20-24	21	22.3	

25-29	17	18.1
30-34	7	7.4
35-39	7	7.4
40 and above	13	13.8
	Religion	
Christianity	58	61.7
Islam	34	36.2
Traditional	2	2.1
	Level of Education	
No formal education	2	2.1
Primary	12	12.8
Secondary	59	62.8
Tertiary	21	22.3

**Table 2** below showed that most of the participants (91.5%) mentioned that they have heard about the messages about prevention from Covid-19 in the past one year. Concerning the sources of the information which could be one or more; about 78.7% of them said they heard about Covid-19 prevention through words of mouth; 77.7% got information from radio; 74.5% mentioned television as a source of information, 62.8% named social media as a source of information; while information through community outreaches recorded the lowest number with 47.9% below the 50% average, respectively.

Table 2: Awareness of Covid-19 Vaccination Messages n=94

Variable	Frequency	Percentage				
Heard of Covid-19 vaccination message in the last one year						
Yes	86	91.5				
No	8	8.5				
Sources of C	Covid-19 vaccination	information				
Radio	73	77.7				
Television	70	74.5				
Social media	59	62.8				
Community outreach	45	47.9				
Internet	59	62.8				
Word of mouth	74	78.7				
Reasons for choosing the sources						
Experience of the source	66	70.2				
I trust their messages	75	79.8				
Closeness to the source	35	37.2				
Knowledge of source about Covid-19	64	68.1				
Knowledge of source about pregnancy issues	24	25.5				
I enjoy their style of messaging	69	73.4				
Type of social media information was gotten						
Facebook	59	62.8				
WhatsApp	41	43.6				
Instagram	3	3.2				

On reasons for choosing the source of information; 79.8% of the participants said they chose their sources because of their

trust in the messages from the source; 73.4% said they preferred their chosen source because of their style of messaging; 70.2% loved the source because of their experience; 68% preferred their chosen source because of the knowledge of the source. A lower percentage said they preferred their chosen source because of their knowledge about safety measures while the least percentage was from participants who said they chose their preferred source because of their closeness to the source. Out of the 62.8% of the total respondents that chose social media as a source of information; 62.8% of this group mentioned they have sought for information on Covid-19 prevention through Facebook; 43.6% mentioned that they sought information from Whats-app while a tiny group of 3.2% said they sought for information on Instagram. There was a multiple selection of choices by some respondents.

On the contents that make up the message, respondents gave their opinion on the Covid-19 prevention messages they had listened to; 75.5% of the respondents felt that the message they listened to were clear and easy to understand while 9.6% of respondents felt the messages were not clear. Also, 56.4% of respondents felt that the message was easy to understand, while 26.6% said the prevention messages they have listened to were not easy to understand. Half (50%) of the respondents said the messages were straight to the message; while 27.7% of respondents felt that the messages were not straight to the point. In an opposite twist, a lower percentage of the respondents (36.2%) felt that the messages were entertaining; compared to a higher 41.5% who said they did not find the Covid-19 prevention messages entertaining.

The opinion of how educational the Covid-19 messages were in giving Covid-19 safety information was however higher as 47.9% of the respondents said the messages were educative compared to 29.8% who did not agree that the messages were educative and did not give them the safety information they needed. On style of delivery, a higher 55.3% of respondents liked the languages used for the Covid-19 prevention messages while 11.7% of respondents mentioned that they did not like the message. In the same vein, a higher percentage of respondents (62.8%) liked the channels through which the messages were passed while 31.9% did not like the channels of dissemination of the messages.

Message recall, when asked if they could recall some of the messages; 62.8% of respondents said they could still recall some of the messages from Covid-19 campaigns while 31.9% replied in the affirmative. Out of the respondents that could recall; only 7.4% could recall the message that Covid-19 is real; an impressive percentage could recall at least 2 of the 3 safety messages of hand washing, wearing of face masks and physical distancing; while the importance of vaccination could only be recalled by only 4.3% of the respondents. For the inability to recall messages; 5.3% of them gave reasons for non-recall to be because they do not believe in Covid-19; 2.1% said it was because they did not have the time while an equal percentage said they were simply not interested in recalling the messages; another 5.3% did not give any reason for their inability to recall the messages they said they listened to (Table 3).

 Table 4 below describes reaction to the Covid-19 vaccination

 information; 52.1% of respondents said they gathered more in

formation; a higher 78.7% said they discussed the information with someone else; only 4.3% of respondents said they called the numbers on the screen or poster; 24.5% of respondents said they registered on the NAPHDCA website; while an equal percentage of 24.5% said they went to health center for registration;40.4% of respondents made online reactions of sharing, liking or forwarding messages about vaccination; while 17% of respondents said they have referred other persons to the health facility.

Table 3: Perception about Covid-19	Vaccination Messages n=94
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Variable	Yes	%	No	%
Oninion about the	Covid-19	nreventio	n messag	/0 AS
	74		0	0.0
Clear	71	75.5	9	9.6
Easy to understand	53	56.4	25	26.6
Easy to relate with	42	44.7	34	36.2
It made me to see the importance of vaccination	29	30.9	49	52.1
Straight to the point	47	50	26	27.7
Entertaining	34	36.2	39	41.5
Educative	45	47.9	Z٥	∠9.ŏ
Gives me the full informa- tion that I need	34	36.2	33	35.1
I like the language used to pass the message	52	55.3	11	11.7
I like the channel used to pass the message	59	62.8	30	31.9
Can recall s	ome Cov	id-19 mess	ages	
Yes	59	62.8		
No	35	37.2		
If yes, what key messag- es can you recall Safety protocols (Hand washing, facemasks, and social distancing)	48	51.1		
Covid-19 is real	7	7.4		
Vaccination	4	4.3		
If no, reasons fo	or not reca	alling the n	nessages	
l do not believe there's covid-19	5	5.3		
I do not have time	2	2.1		
Not interested	2	2.1		
Nothing	5	5.3		

 Table 4: Behavioral change towards Covid-19 Vaccination Messages

 n=94

Variable	Yes		No	
	Number	%	Number	%
Actions taken in react	ion to the C	ovid-19	) messages	
Gather more information about covid-19 vaccination	49	52.1	39	41.5
Told another person about the message	74	78.7	14	14.9

Called the numbers on the screen or poster	4	4.3	82	87.2	
Registered on the NAPHCDA website	23	24.5	64	68.1	
Gone to the health center for registration	23	24.5	23	24.5	
Shared, liked and/or forward- ed some of these messages	38	40.4	49	52.1	
Referred other persons to the health facility for covid-19 messages	16	17	72	76.6	
Ever taken Covid-19 vaccine					

Yes	28	29.8
No	66	70.2
Vace	cine stag	e
First and second dose	8	8.5
First dose	17	18.1
Reasons for	not takin	g vaccine
I am afraid of the side effects	30	31.9
I do not trust the vaccine	47	50
I do not trust the process	36	38.3
I am not yet convinced	30	31.9
Reports from those who have taken	12	12.8
My loved ones dissuaded me from going for vaccination	13	13.8
The time to get vaccinated is too long	11	11.7

On the actual vaccination, 26.6% of respondents reported that they had had at least one dose of Covid-19 vaccination out of which 8.5% had gotten the 1st and 2nd doses while 18.1% had only had their 1st dose of vaccination. For the respondents who had not taken their vaccines; 31.9% of them gave the reason of fear against side effects; 50% of the respondents mentioned lack of trust for the vaccine while 38.3% mentioned that they did not trusty the process of vaccination; 31.9% of respondents said they were not yet convince about the vaccine while 12.8% of respondents mentioned that the report of side effects from those who have taken were their barriers. Another 13.8% gave the reason of informal influence against going for vaccination while 11.7% complained about the long waiting time for vaccination.

**Table 5** below shows the factors associated with recalling Covid-19 messages includes age, education level, Motor Park, heard of Covid-19 vaccination and taken vaccine. It was found that those aged less than 20 years are less likely to recall Covid-19 messages when compared with those that are 20 years and above. Also, more female (52.9%) had a higher proportion recall than male and those who had secondary education had the highest (54.2%) and about one-third (32.2%) of those with tertiary education were able to recall Covid-19 messages. Close to one-third (30.5%) of the participants from Igbogbo and Ikorodu motor parks and a quarter in Allen, 27.1% in GRA recalled the messages. Almost all participants (96.6%) have heard of Covid-19 vaccination however, only 40.7% has ever taken vaccine.

Table 5: Factors associated with recalling of COVID 19 messages

Variablo	Yes (%)	No (%)	Total (%)	Chi-	P-valuo		
Variable	(n=59)	(n=35)	(n=94)	Square	F-value		
Age							
Less than 20	12(20.3)	17(48.6)	29(30.9)	17.133	0.004*		
20-24	12(20.3)	9(25.7)	21(22.3)				
25-29	15(25.4)	2(5.7)	17(18.1)				
30-34	7(11.9)	0(0.0)	7(7.4)				
35-39	3(5.1)	4(11.4)	7(7.4)				
40 and	10(16.9)	3(8.6)	13(13.8)				
		Ger	nder				
Female	43(72.9)	31(88.6)	74(78.7)	3.229	0.072		
Male	16(27.1)	4(11.4)	20(21.3)				
		Level of e	education				
No formal educa- tion	1(1.7)	1(2.9)	2(2.1)	8.976	0.030*		
Primary	7(11.9)	5(14.3)	12(12.8)				
Second- ary	32(54.2)	27(77.1)	59(62.8)				
Tertiary	19(32.2)	2(5.7)	21(22.3)				
		Moto	r Park				
Allen	15(25.4)	21(60.0)	36(38.3)	11.386	0.010*		
G.R. A	16(27.1)	4(11.4)	14(14.9)				
lkorodu Garage	18(30.5)	6(17.1)	20(21.3)				
Igbogbo	18(30.5)	6(17.1)	24(25.5)				
Heard o	of Covid-19	vaccination	n message i	n the last o	ne year		
Yes	57(96.6)	29(82.9)	86(91.5)	5.336	0.021*		
No	2(3.4)	6(17.1)	8(8.5)				
Ever taken Covid-19 vaccine							
Yes	24(40.7)	4(11.4)	28(29.8)	8.986	0.003*		
No	35(59.3)	31(88.6)	66(70.2)				
*Fishers signifi- cant level at p<0.05	Factors	Factors	Factors	Factors	Factors		

## DISCUSSION

The aim of this research was to assess the reception of street vendors to Covid-19 prevention campaign messages in Lagos Nigeria. For the age as a variable under social demographics, respondents were asked to mention the age categories that their exact ages as a precautionary measure to avoid resentment in a target audience whose would ordinarily prefer not to be disturbed. Majority of respondents however fell below the age of 20 which is low when compared to the study by (lorfa SK., 2021) [10] across Nigeria where a mean age of 27.43 years was recorded among the respondents. Majority of respondents were also female (77.7%) which is similar to research on street vendors in Ile-Ife, South west Nigeria where the results also documented a 94% majority for women during the survey of urban street food sellers in Lagos. Interestingly, respondents had an impressive record of education against the odds of illiteracy or minimal education as about 62.8% of respondents had at least a secondary education. majority of the respondents reported a secondary level of education as the highest level attained as opposed to the documented notion that majority had no formal education or minimal at the very least.

This study is premised on 2 theoretical positions; the health belief model and the elaboration likelihood model. The models were selected based on their focus on the internal thought processes that occur in receivers following the receipt of information from public health campaigns. The health belief model helps to provide insights on perceived risks and severity of the health issue of discourse (Covid-19 as a case study in this study). According to this model, respondents' perception to how susceptible they are, how severe the Covid-19 disease is, the barriers to having it and the assumed benefits would determine the behavior of the respondents to vaccination.

The elaboration likelihood model as a persuasion model then explains the cognitive processes that determine the different reactions that are reflected as perception. For Covid-19 disease, respondents would receive campaign messages and prioritize it based on different social factors which then lead to 2 possible pathways. A deep-thinking pathway that allows respondents to invest more efforts at keeping safe from the diseases such as keeping to safety protocols, vaccination etc. If based on background exposure, respondents instead chose to react to the messages halfheartedly and thus pass the superficial heuristic pathway, and then behavior to Covid-19 safety information will be taken with a pinch of salt. These 2 models will be used to corroborate findings from some of the research questions listed above.

Findings from this study revealed that a high percentage of the respondents had access to the Covid-19 campaign messages through one or more media in the last one year. Though respondents mentioned more than one source for their preferred media to seek Covid-19 information, majority however chose interpersonal conversations (word of mouth) then radio, then television, then social media and community outreach in decreasing order. This is different from the findings from the study by Obasanmi, 2021 [11] which reported that the rural dwellers surveyed sought online/social media. Then radio and then informal networks (friends). A possibly explanation for the predominance of interpersonal conversation may be attributed to the nature of motor parks which is a community based public sphere for conversations while the vendors await their customers. Unfortunately, the lower percentage for community outreach when compared to the aforementioned showed that the public conversations have not been fully disrupted by policy makers to redirect informal conversations through words of mouth to become an asset to spread correct information. Furthermore, the findings on social media as being a veritable tool to show significant interest of the public in social media stories.

On the multiple-choice questions to ascertain their reasons for choice of medium/medium; reasons cited were; trust in the

medium/media, messaging style, experience of the source, knowledge of the source were the most chosen options in descending order. Narrowing down the type of social media used, all the respondents in this category mentioned that they have sought for information on Facebook, WhatsApp/SMS imaging response and a tiny percentage mentioned Instagram as a medium that they would use to get Covid-19 campaign messages.

Respondents gave their perception on the campaign messages; messages were clear and easy to understand, and entertaining, some of the respondents however disagreed on this. The opinion of how educational the Covid-19 messages were in giving Covid-19 safety information was met with a higher agreement though a smaller percentage of respondents said that they did not think the messages gave them needed information about Covid-19. While an above average of the respondents mentioned that they liked the language used in delivering the message through the media; a smaller percentage mentioned that they did not like the style of delivery of the messages. This shows the variance that of perception that people exhibit when making a choice.

As a final variable for perception towards Covid-19 messages; a higher-than-average number of the respondents said they could recall some of the Covid-19 key messages they have been exposed too in the past one year. The key messages that were recalled were at least 2 of the standard safety precaution protocols. Only 4.3% of the respondents could recall the need for vaccination as a key message. A lower percentage yet significant percentage (31.9%) however said they could not recall the messages citing reasons such as; disbelief in the existence of Covid-19. not having enough time to recall any message and lack of interest in recalling the messages. This shows that there is still a level of rejection of message despite campaign efforts at different levels.

Respondents mentioned the actions they have carried out following the information gotten through Covid-19 campaign as follows; discussion with someone else carried the highest value which may further buttress the importance of word of mouth and interpersonal communication. Respondents also mentioned gathering more information, registering on the vaccination website, shared and liked messages about Covid-19 online. A lower proportion of the respondents however went further by visiting the health center for vaccination and referring other persons. Though, a below average 26.6% of respondents reported that they have had at least one vaccine dosage, this shows that some of the messages provided through campaigns have actually been adopted to evoke behavioral change. This showed that the information about Covid-19 had considerable deep thinking and invested efforts to gaining more understanding about Covid-19. Some of the reasons for not partaking in the vaccination exercise were; lack of trust in the vaccine, lack of trust in the process, and fear of side effects from the vaccine. It may therefore be safe to say that the respondents as explained in health belief model appeared to acknowledge the severity of the disease at different levels. It is also noteworthy that while some group (those who have had the vaccine) appeared to follow the more active, deep seated cognitive process of investing in their well-being; some others did not even trust the process at all thus attaching a heuristic

superficial importance if at all hence not ready to take the vaccine. This finding therefore buttresses the position of health behaviors as highlighted by the elaborate likelihood model. The findings from the participants with positive response to campaign messages from health expert is therefore somewhat similar to the online survey where a prominent expert in the US was dominant in evoking behavioral change [12]. This study did not however ask for the specific role models that contributed to the adoption of better health behaviors.

On the last research question, the following significance was obtained using the chi-square inferential method where p, at p<0.05 assumed to be the significant The ages of the respondents had significance influence on their ability to recall the messages at p-value of 0.004; just as the level of education, listening to Covid-19 prevention message in the past one year, and a positive history of receiving Covid-19 vaccination had significant influence in the ability to recall messages which have been listened with p-values of (0.03, 0.021, 0.003) respectively. This is similar to the community-based survey in Gwagwalada area of FCT where knowledge of Covid-19, and awareness about Covid-19 preventive measures were strongly associated with educational status and place of residence. From the statistics above, it would suffice to say that a relationship exists between some of the demographic factors and the ability of the respondents to recall messages earlier gotten from identified sources.

#### Recommendation

From the earlier gaps identified during the literature search and the observations from the findings of this study; the following recommendations are proposed:

- There should be the development of targeted campaigns to address information gaps in Covid-19 authenticity, importance of vaccination and vaccination uptake disseminated using innovative interpersonal engagement followed by a mix of traditional and online media.
- More emphasis should be on importance of vaccination and its uptake since the hesitancy level is still very high.
- Communicators should work with health professionals to identify how the different health behaviors can be met with targeted messages aimed at improving central cognitive effort which makes individuals to make better Covid-19 preventive decisions
- There is a need for emphasis on more community-based outreach that allows for engagement of people who are more at risk because of the need to survive such as the street vendors.

#### CONCLUSION

The study concludes that reception towards the Covid-19 campaign messages showed that there was good awareness about Covid-19, the awareness was not synonymous with positive perception and positive behavior to key messages of safety measures and vaccination among all the participants. The findings from the study are consistent with the positions of human behavior proposed by the scholars through the health belief and elaborate likelihood model positions of the health belief and elaboration likelihood model. While the study shows an above average rate for recall of safety measures by the participants, it however shows an abysmally low recall of importance of vaccination as well as uptake of vaccine in the ongoing nationwide vaccination exercise. It was also concluded that there is a significant relationship between education, residence and recall of messages.

## ACKNOWLEDGEMENT

None

## **CONFLICT OF INTEREST**

None

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