

“Residents’ Response to Covid-19 Vaccination in Selected Communities in Enugu State Nigeria”

Chioma Njoku, Kelechukwu Njoku, Chinyere Mbaka, Maduka Nwambam

Mountain Top University, Ibafo, Ogun State.

DOI: <https://dx.doi.org/10.47772/IJRISS.2024.807079>

Received: 16 May 2024; Accepted: 11 June 2024; Published: 05 August 2024

ABSTRACT

The investigation centered on “Residents’ response to Covid-19 vaccination in selected Communities in Enugu State, Nigeria”. The controversy of Covid-19 vaccination made it difficult for the acceptance of the vaccine and residents were thrown into lots of confusions and this hindered the progress intended for the prevention of Covid-19 spread in this region. The general objective looked at residents’ response to Covid-19 vaccination. It is a survey of 150 respondents. The work was anchored on health belief model. The data was analysed using the SPSS 22.5 version. Data was presented on tables and charts showing the relatedness of the variables examined. Result showed there was moderate response to jabs and the death toll compelled many to take the vaccine despite the controversies trailing the vaccine. Many people are afraid of taking the Covid-19 vaccine majorly because the side effects trickling online especially amongst health workers. Despite the media advocacies on the safety of the vaccine, people are still skeptical of the possible side effects of the injection. Most respondents are not willing to get vaccinated even if the government gets involved and makes the injection compulsory.

Keywords: Vaccination, knowledge, Covid- 19, media interventions, health workers.

INTRODUCTION

As the world ended the battle of the pandemic and the world economies continuously taking shapes, many organisations have complied and relaxed the compulsory vaccination. Ironically, millions of Nigerians did not accept the vaccination and the struggle to ensure life returns to normalcy is gradually finding stability in certain regions in Nigeria.

Although, the sad news of Corona-virus with death toll across the globe came with a tsunamic effect on every nation at the first quarter of 2020 halting all economies of the world without any form of signal or foresight from scientists defiling all scientific strength, (WHO, 2020).

It became such a tough phase of human existence as death rates were flooding the media channels at the speed of light. The magnitude of harm with which the corona virus pandemic erupted prompted the world health organisation to declare it a tremendous pandemic in March 11, 2020. The force of the pandemic spread so fast and gained ground thwarting all scientific expertise.

The forceful spread of COVID-19 is probed at the levels of human endeavour owing to its verse nature of causing numerous tsunamic outcomes by all affected humans across the world. Defiling all scientific prowess’s, the whole world is thrown into turmoil by the mere surface of this pandemic. This confusion call

for apportioned sequence and approach which enables the proper documentation of those affected at all levels by the hit of this disease worldwide. This as well calls for strategic approach especially to salvage vulnerable groups at all categories.

Tracing the prototype of China, Wuhan- 2019 together with the South Korea underlying relevance, the catastrophic in record and its spread to Italy and United Nations not leaving out other nations hugely affected, the need to arrest the pandemic becomes the heart beat of all concerned in the cause of making available vaccine to curtail the rate of the spread to the ageing population, those with underlying diseases, e.t.c. The need to provide lasting solution readily comes to mind in order to make provision for proof as regards plans and commitment to end the global threat posed by this diseases.

The turmoil and devastation though cannot be forgotten in a hurry in the history of mankind. Most pathetic is the death toll ranging in millions across borders, World Health Organisation. Although Covid 19 affected almost all continents of the globe, the effects and loss of lives cannot be fathom. However, the climatic conditions played major role in determining what effect the pandemic had on the global scale putting into cognizance the peculiarities of every region, (Climate readings 2021).

The rate at which infected patients died was more traumatic especially among the aged with underlining diseases like; cancer, diabetes, chronic respiratory conditions, acute cough and so on, (CDC 2020). However, the symptoms of the disease were not different irrespective of race or age, (World Atlas 2020). Ironically, the developed Countries had more chunks from the death toll causing more confusion as the efforts to proffer solution proved more difficult in the midst of the traumatic era of the novel pandemic. Although millions of deaths occurred, more of deaths occurred amongst the high profiled individuals all over the world.

Experts opined Covid-19 had the power of destroying the immune systems of patients at the speed of light by hijacking the respiratory systems rendering breathing impossible, (WHO, 2020). Other characteristics of the virus ranges from loss of appetite, sense of smell, chronic cold, chronic cough, etc and its potential of sniffing life out at the speed of light. In some families, the pandemic wiped off the entire lineage whereas, in others, some family members were fortunate to survive. Sadly, the developed world was most affected as millions of lives were lost during the peak of the outbreak. The degree to which China spread the virus to the globe is still shocking to scientists. Although the outbreak first started in mainland china as its incidence was initially documented in Wuhan, Hubei city in February 26, 2019.

The initial pathogen isolated was traced to its novelty and subsequently was traced to its genetic inclination common with the SARS pandemic of 2003 with severe attributes of acute respiratory symptoms. Although experts say the disease is traceable to bats as seen in the Middle East respiratory syndrome owing to its similar respiratory syndromic attributes, Unfortunately, since the outbreak of the pandemic in late 2019, about 116,135, 492 cases have being hospitalized across the globe with death toll of 2,581,976 affecting about 223 Countries worldwide, World Health Organisation (2021).

Sadly, the acute nature of Covid-19 and the speed with which it spreads makes it difficult for patients to survive particularly amongst the older people and those with underlying disease. The disease spreads through saliva droplets and mucus droplets from an infected person who is not properly protected. Ironically, the symptoms of the disease ranges from high fever, dry cough, tiredness, headache, sore throats, diarrhea, loss of taste or smell, a rash on the skin, chronic respiratory disorder, lost of taste and appetite and host of others, Centre for disease prevention and Control, (2021).

Besides all the health implications of Covid-19 are the economic down turn caused by the grinding of international markets by the pandemic. The most affected economies of the world came as a result of the pandemic effects making almost 80 Countries of world to plunge into artificial inflation. The enormous

consequences of the pandemic cannot be recounted as almost every nation is still battling to catch a good grasp of life, World Bank (2021).

RESULTS

Table 1: Demographic Information of Respondents

		Frequency	Percentage
Age (in years)	17-27	106	26.6
	28-37	191	47.9
	38-47	102	25.6
	48 Yrs and above	—	—
Gender	Male	243	60.9
	Female	156	39.1
Religion	Christianity	377	94.5
	Islam	22	5.5
Qualification	SSCE	—	—
	B.Sc	106	26.6
	M.Sc	231	57.9
	Ph.D	62	15.5
Occupation	Working Class	106	26.6
	Business Person	64	16.0
	Unemployed	41	10.3
	Student	188	47.1

Respondents Level of Exposure to Media Messages on Covid19 Vaccine Safety in Enugu State, Nigeria

1. How would you rate the media messages on Covid19 vaccine that you have?

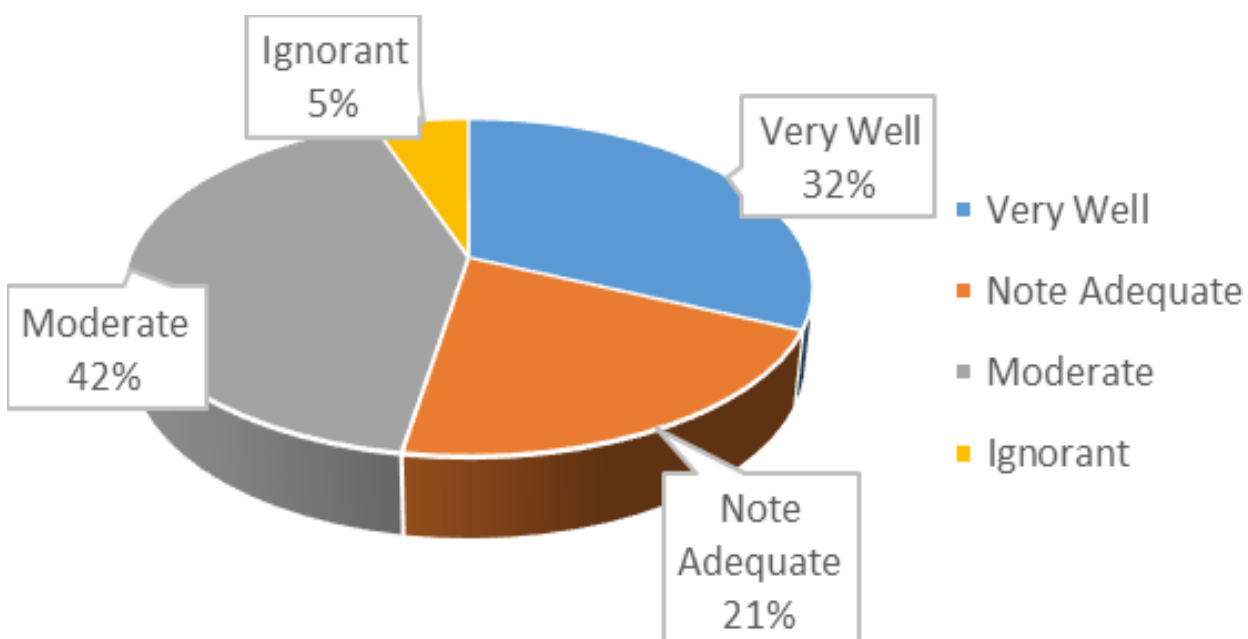


Fig. 1: Pie chart showing Respondents' rating of media messages on Covid19 Vaccine safety.

2. What risks of Covid19 vaccine threatens you most?

Table 2: Frequency and Percentages of Respondents’ responses on risks of Covid19 vaccine

SN	Responses	Frequency	Percentage
1	Death complications	99	24.8
2	slow recovery	259	64.9
3	No hospital incentives	41	10.3
	Total	399	100.0%

3. How frequent do you get messages on Covid19 vaccine?

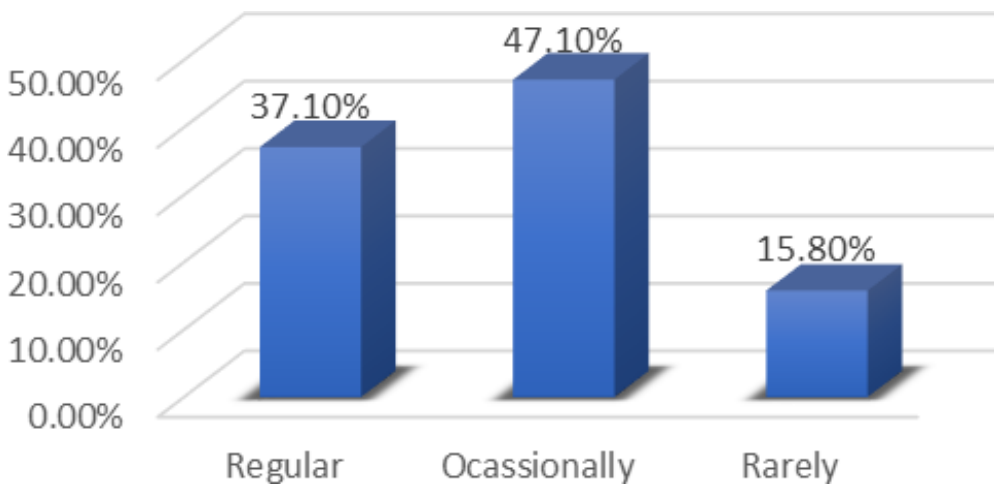


Fig. 2: Bar Chart showing the frequency of media messages on Covid19 Vaccine safety

4. How would you score media commitment to Covid19 vaccine messages?

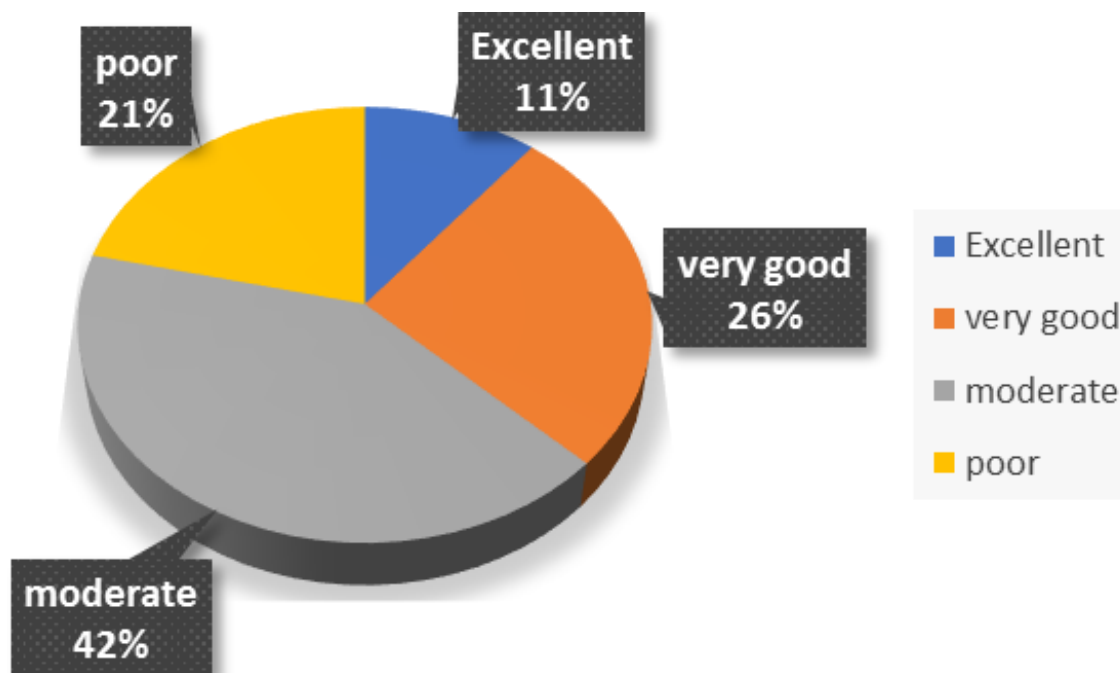


Fig. 3: Pie chart showing media commitment to Covid19 Vaccine messages.

5. What media platform do you get Covid19 vaccine more?

Table 3: Percentages of respondents on media platform Covid19 vaccine messages are gotten

SN	Responses	Frequency	Percentage
1	Radio	105	26.3
2	TV	87	21.8
3	Social media	141	35.3
4	Friends and Family	66	16.5
	Total	399	100.0%

6. Do you think media messages on Covid19 vaccine is very assuring and convincing as regards human safety?

Table 4: Percentages of respondents on whether media messages on Covid19 vaccine is very assuring and convincing as regards human safety

SN	Responses	Frequency	Percentage
1	Yes	104	26.1
2	No	169	42.4
3	Moderate	104	26.1
4	Poor	22	5.5
	Total	399	100.0%

7. Do you think medical personnels in Nigeria are well equipped to handle patients while injecting them with the Covid-19 vaccine?

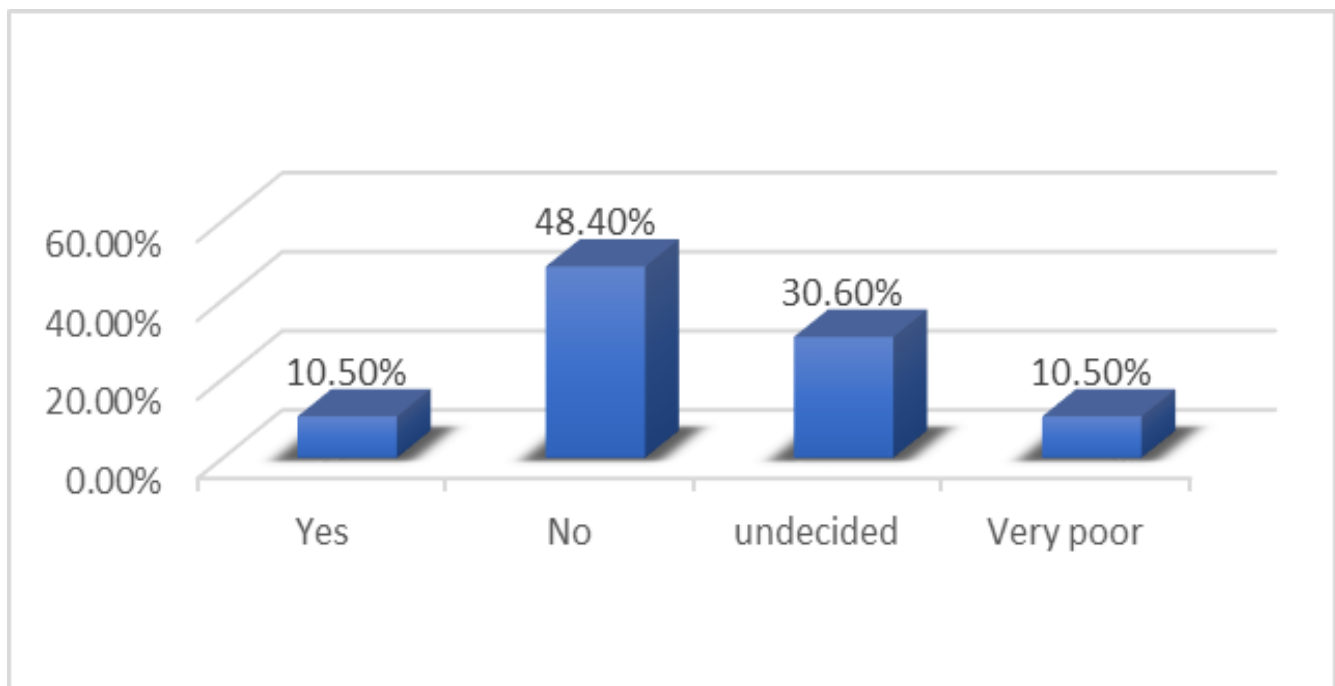


Fig. 4. Bar chart showing the responses of respondents on whether medical personnels in Nigeria are well equipped to handle patients while injecting them with the Covid-19 vaccine

Knowledge On Covid -19 Vaccine Safety

- How much do you know about Covid19 vaccine safety?

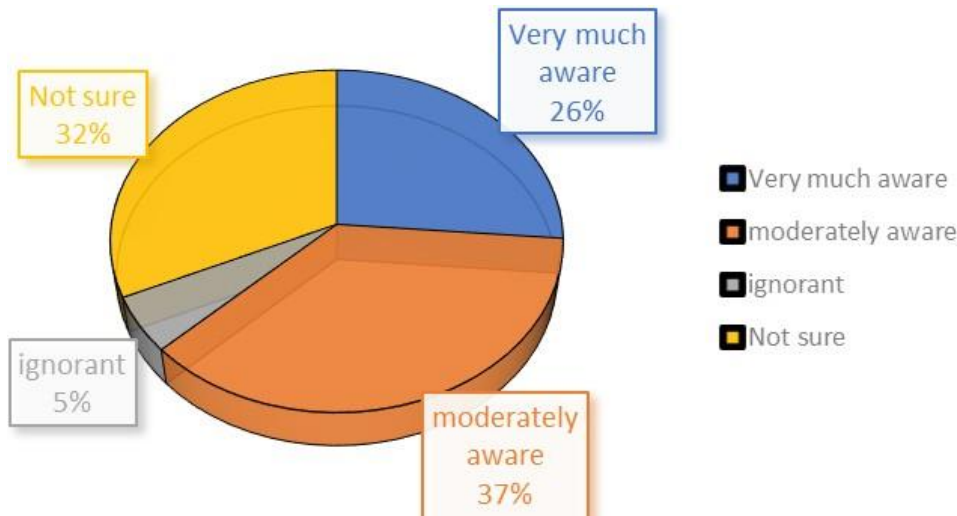


Fig. 5: Pie chart showing respondents' knowledge about Covid19 vaccine safety.

Table 5: Frequency and Percentages of respondents on Covid19 vaccine safety

SN	Statements	Yes		No		Not Sure	
		Freq.	%	Freq.	%	Freq.	%
2	Would you accept Covid19 vaccine?	43	10.8	212	53.1	144	36.1
3	Do you think the timing for the vaccine is apt?	86	21.6	169	42.4	144	36.1
4	Do you think Covid19 vaccine have side effects?	211	52.9	106	26.6	82	20.6
5	Do you think the vaccine have different versions?	190	47.6	118	29.6	91	22.8
6	Do you think government should mandate citizens to be vaccinated?	43	10.8	336	84.2	20	5.0

Attitudes Towards Covid 19 Safety Messages

- Where would you like to be vaccinated?

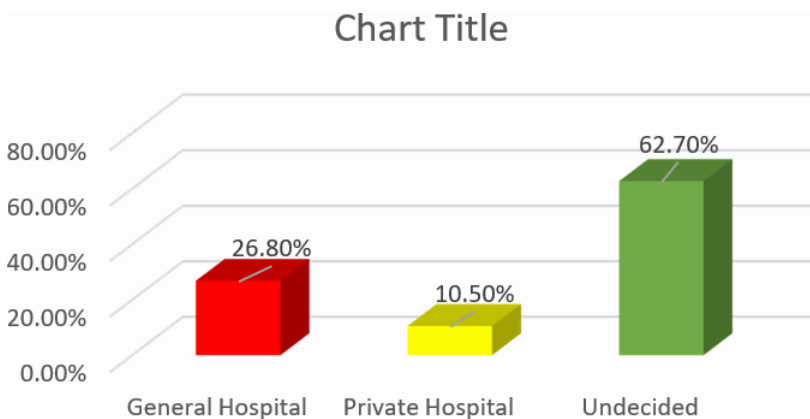


Fig. 6: Bar chart showing where the Covid19 vaccine should be taken.

Table 6: Frequency and Percentages of respondents' attitude towards Covid19 vaccine safety

SN	Statements	Yes		No		Not Sure	
		Freq.	%	Freq.	%	Freq.	%
2	Would you take the vaccine if made compulsory by the government?	64	16.0	253	63.4	82	20.6
3	Would you encourage your family members to be vaccinated?	64	16.0	268	67.2	67	16.8
4	Does Covid19 vaccine have cultural implication?	82	20.6	129	32.3	188	47.1
5	Does your religious belief contradict Covid19 vaccination?	21	5.3	317	79.4	61	15.3
6	Would you like to encourage your friends to take the Covid19 Vaccine?	86	21.6	232	58.1	81	20.3

DISCUSSIONS AND FINDINGS

The result of the study as presented on Table 1 shows the distribution of respondents by age, gender, Religion, educational qualification and occupation. Result shows that majority of the respondents were between the age range of 28-37 representing 47.9%, while those within the age range of 17-27 and 38-47 were represented by 26.6% and 25.6% respectively. Result also shows that 60.9% of the respondents are male while 39.1% are female. Also, result shows that 94.5% of the respondents were Christians while only 5.5% were Muslims. The reason for the high number of Christians is due partly to the area in which the study was carried out which is dominated by Christian religion. On Qualifications, result shows that 26.6% are holders of B.Sc, 57.9% are with M.Sc while 15.5% are Ph.D holders. On Occupation, 26.6% are working class people, 16% are business men and women, 10.3% are unemployed while 47.1% of the respondents are students.

Result in Figure 1 shows the respondents' rating on media messages on Covid19 vaccine safety. Result shows that 42% of the respondents rated the media message on Covid19 vaccine safety as moderate, 32% rated it as very well, 21% rated adequate while only 5% rated ignorant (i.e. having no knowledge of media messages on Covid19 vaccine safety). The finding of the study therefore shows that about 95% of the respondents are exposed media messages on Covid19 vaccine safety in Enugu State.

Result on Table 2 shows that majority of the respondents are threatened on Covid19 vaccine because of slow recovery (64.9%), while 24.8% are threatened because of death complications and 10.3% of the respondents are threatened because of lack of hospital incentives. This implies that the respondents are exposed to media messages on Covid19 Vaccine safety but are threatened by death complications, slow recovery and no hospital incentives.

The result in figure 2 shows that 37.1% of the respondents get media messages on Covid19 vaccine regularly, 47.1% get it occasionally while 15.8% get media messages on Covid19 Vaccine safety rarely. This implies that majority of the respondents are exposed to media messages on Covid19 vaccine safety.

Result on figure 3 shows that 11% of the respondents rated media commitment to Covid19 vaccine messages as excellent, 26% rated as very good, 42% rated as moderated and 21% rated media commitment to Covid19 vaccine messages as poor. These ratings indicate that the respondents are exposed to media messages on Covid19 vaccine safety.

Result on table 3 shows that 26.3% of the respondents get Covid19 vaccine messages through the radio,

21.8% get through Television (TV), 35.3% get the messages through social media and 16.5% get the messages through friends and family. Given this result, it shows that respondents are exposed to media messages on Covid19 vaccine safety.

The result in figure 4 shows that 48.4% of the respondents disagreed that medical personnels in Nigeria are well equipped to handle patients while injecting them with the Covid-19 vaccine; 30.6% are skeptical, 10.5% of the respondents agreed that medical personnels in Nigeria are well equipped to handle patients while injecting them with the Covid-19 vaccine while 10.5% rated medical personnel as being very poor with regards to whether they are well equipped to handle patients while injecting them with the Covid-19 vaccine. One can concluded from the ratings that the respondents are exposed to media messages on Covid19 safety messages.

The result of the study on figure 5 shows that 26% of the respondents are very much aware of Covid19 vaccine safety and 37% are moderately aware while 32% are not sure of the safety of the vaccine and only 5% of the respondents are ignorant of the safety of the vaccine. This implies that majority of the respondents have knowledge on Covid19 vaccine safety.

The result of the study on Table 5 shows that majority of the respondents (53.1%) rejected the Covid19 vaccine while 36.1% of the respondents are not sure whether they will take the vaccine and only 10.8% of the respondents accepted that they will take Covid19 vaccine. On whether the timing for the Covid19 vaccine is apt, 21.6% said Yes, 42.4% said No while 36.1% are not sure. On whether the Covid19 vaccine have side effect, 52.9% agreed, 26.6% disagreed and only 20.6% are not sure. Also, on whether the Covid19 vaccine have different versions, 47.6% said Yes it has, 29.6% said No it has no different versions and 22.8% are not sure yet. Finally, on whether the government should mandate citizens to be vaccinated, 10.8% agreed, 84.2% disagreed that the government should not mandate citizens to take the vaccine and 5% are not sure. Based on the findings of this study, the indication is that the respondents have little knowledge of Covid19 vaccine safety.

The result on figure 6 shows that 26.8% of the respondents prefer to be vaccinated in the general hospitals, 10.5% prefer private hospitals while about 62.7% of the respondents are somewhat skeptical about the safety of the vaccine and therefore are not sure where to be vaccinated. The finding of the study therefore shows that majority of the respondents have negative attitude towards the safety of Covid19 vaccine.

The result of the study on Table 6 shows that 16% of the agreed to take the vaccine if made compulsory by the government, 63.4% disagreed to take the vaccine if made compulsory, while 20.6% are not sure whether they will take the vaccine if made compulsory by the government. On whether the respondents will encourage their family members to be vaccinated, 16% agreed, 67.2% disagreed, while 16.8% are not sure whether they will encourage their family members to take the vaccine. Result also shows that 20.6% of the respondents agreed that Covid19 vaccine has cultural implications, 32.3% disagreed about on the cultural implication of Covid19 vaccine, while 47.1% of the respondents are not sure about the cultural implication of the vaccine. On whether religious belief of the respondents contradicts Covid19 vaccination 5.3% agreed, 79.4% disagreed and 15.3% are not sure. Lastly, 21.6% of the respondents agreed that they will encourage their friends to take the Covid19 vaccine, 58.1% disagreed on encouraging their friends to take the vaccine while 20.3% of the respondents are not sure whether they will encourage their friends to take the Covid19 vaccine. Based on the findings of this study, the researchers conclude that the respondents have negative attitude and little knowledge of Covid19 vaccine safety.

CONCLUSIONS

In summary, the level of awareness level is moderate and the knowledge level was also moderate. The

authenticity of the Covid-19 vaccine is still in doubt to many people in South East, Nigeria. The fear of the vaccine's side effects is the major concern that hinders many from being vaccinated. Again, respondents in this terrain still perceive Covid-19 as propaganda. Many residents are still afraid of being injected. Many respondents perceive the vaccine as "trial vaccine".

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