Social Marketing and Public Health: A Day after Covid-19 Pandemic in Nigeria

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Abstract: **Covid-19 previously known as 2019-nCoV was first reported in Wuhan, China in December 2019 and soon after more than 100,000 cases were reported in more than 100 countries. Nigeria had its first index case in February 28, 2020 and increasing number of cases everyday and a current case fatality ratio of 0.03 as at 13 April, 2020. Slow rate of spread was achieved under severe constraint until recently. There is urgent need to fix the missing gaps and explore available collective measures and interventions to address the Covid-19 Pandemic**

I. INTRODUCTION

According to World Health Organization (WHO,2020) coronaviruses are a group of viruses belonging to the family of coronaviridae, which infect both animals and humans. Human coronaviruses can cause mild disease similar to a common cold, while others cause more severe disease. A new coronavirus that previously has not been identified to humans emerged in Wuhan, China in December 2019. Signs and symptoms include respiratory symptoms, fever, cough and shortness of breath. In more severe cases, infection can cause pneumonia, severe respiratory syndrome and sometimes death. WHO works closely with global experts, governments and partners to rapidly expand scientific knowledge on this new virus and to provide timely device on measures to protect people's health and prevent the spread of this outbreak.

Covid-19 pandemic is not only a medical experience but a social and emotional experience that affect the lives of the people. Social marketing is used to ameliorate the stigmatization of the patients and to give direction on prevention and control of the pandemic (Adepoju, 2020).

II. LITERATURE REVIEW

Features of Social Marketing

Social marketing is a program-planning process that applies commercial concepts and techniques to promote voluntary behavior change (Andreasen, 1995; Kotler, Roberto & Lee, 2002). It facilitates the acceptance, rejection, modification, abandonment or maintenance of particular behavior (Kotler, Roberto & Lee, 2002) by groups of individuals, often referred to as target audience. The target audience of social marketing is the consumers and the policy makers who influence policy making in addressing the broader social and environmental determinants of health (Donovan & Henley, 2003; Siegel & Doner, 1998). Social marketing includes the analysis of the social consequences of public health policies and activities in monitoring and evaluating frequency of infection (Hastings & Siren, 2003) which includes Covid-19 Pandemic..

Social Marketing and Public Health

It is observed that throughout human history, the major health problems affecting individuals occur at the levels of their communities, their countries or even the entire world (such as Covid-19 pandemic, Ebola (Congo), Zaka (Brazil), Lassa fever (Lassa), and Bird Flu (Asia). These are channeled through social marketing towards the prevention and control of transmittable diseases, the improvement of the physical environment, the quality and supply of water and food, the provision of medical care and the relief of disability and destitution. Emphasis placed on each of these problems are closely related (Rosen, 1993; vide Cheng, H., Kotler, P & NR.).

Public Health has the following features (Windslow, 1920):

(i) It uses prevention as a prime intervention strategy (such as the prevention of illness, deaths, hospital admissions, days lost from schools or work or consumption of unnecessary human or fiscal resources).

(ii) It is grounded in a broad array of sciences (including epidemiology, biological sciences, biostatistics, economics, psychology, anthropology and sociology)

(iii) It has the philosophy of social justice as its central pillar (so the knowledge obtained about how to ensure a healthy population must be extended equally to all groups in any society)

(iv) It is linked with government and public policy (which have strong impact on many public health activities carried out by non-profit organizations and the private sector (as cited in Merson, Black & Mills, 2006)

Social marketing for public Health

Social marketing has become part of home domain in solving public health problems and it will continue to play major roles in public health-some of which are:

i. Reduction of index case risk behavior and community infection
ii. Prevention of teen smoking
iii. Fighting child abuse
iv. Increasing utilization of public health services;
v. Combating various chronic diseases,
vi. Human trafficking and slavery, and

vii. Promoting family planning - breast feeding, good nutrition, physical exercise, contraceptive use, infant weaning foods, childhood immunization and oral rehydration therapy (Coreil, Bryant & Henderson, 2001).

Of all these, this study is concerned primarily with the Covid-19 pandemic prevention, control and other opportunistic infections associated with the pandemic.

Social marketing and behavioral change

In social marketing, promotion refers to the behavioral options that compete with public health recommendations and services, e.g. social distancing versus crowding, basic hygiene versus lack of hygiene, sex with condom versus sex without condom or breast feeding versus bottle feeding (Hastings, 2003a). The social marketers aim at developing a sustainable competitive advantage that maximizes their products attractiveness to consumers (Hastings, 2003a) for behavioral change in order to win the hearts and souls for healthier public health behavior change for Covid-19 infected.

Management Strategy of Social Marketing Mix

Management strategy for social marketing mix refers to decision about the conception of a product, price, place (distribution), and promotion and additional 4Ps as exemplified as public, partnership, policy and purse sting (Ndubuisi & Obi, 2020). *Product* may be tangible or intangible (medicine, testing, counseling, consulting); *price* such as money or intangibles (time, effort, risk, stigmatization, embarrassment, disapproval by the consumer); *place* denotes distribution system - including the clinics, testing and counseling centers, isolation and quarantine centers, ware house, trucks, sales force and retail outlets where it is sold or places where it is given out for free. *Promotion* consists of the integrated use of advertising public relations, media advocacy, personal selling and entertainment vehicles, demonstrations, jingles and talk shops.

Other forms of social marketing mix are public, partnership, policy and purse sting. *Public* includes external and internal audiences. While external audience includes the target audience, secondary audience, policy makers, and gate keepers, the internal publics are those who are involved in some way with either approval or implementation of the program. In respect of Covid-19 Pandemic, we have Presidential Task Force (PTF), Nigerian Centre for Disease Control (NCDC), Ancillary Units, Non-governmental Agencies and Public Spirited individuals

For *partnership,* the concept of social marketing is one of team work. Social and health issues are often a complex agency, so complex that one agency can't make a dent by itself. It needs to team up with other organizations in the community to really be effective.

Often, *policy* change is needed and media advocacy programs can be an effective complement to a social marketing program but this is difficult to sustain unless the environment they are in supports the change.

Social marketing program develops *purse sting* that provide sources such as foundations, government grants and crowd funding or donations. This adds another dimension to the strategy development of funding (Weinreich, 2013).

III. METHODOLOGY

Operation of PTF on Covid-19 Pandemic

The Presidential Task Force (PTF), Fig. 1 is a driving force behind the prevention, control and management of Covid-19 pandemic spread. It is the highest policy making body of the pandemic. Other coordinating bodies such as Federal Ministry of health (FMOH) and National Centre for Disease Control (NCDC) are on the line duty for fashioning ideas based on scientific and informed results for the PTF to queue in. Non-governmental Organizations (NGOs) and private sector are not left out in the helm of affairs of the pandemic in the process of modulation of policy and implementation.
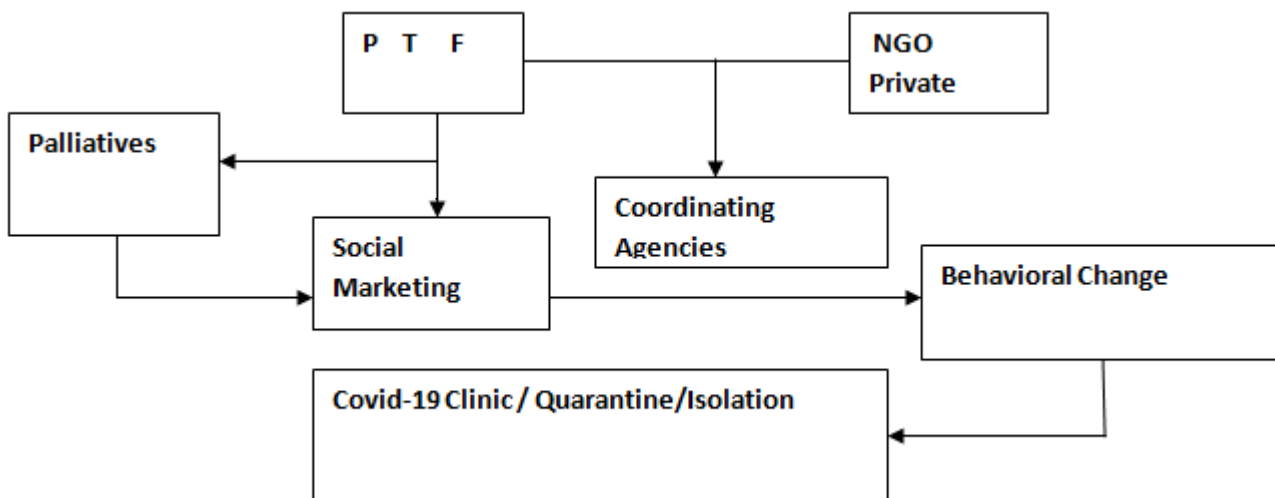

Fig.1: Operation of Covid-19 Pandemic

Social Marketing Process

According to Weinreich (2013), the health communications field has been rapidly changing. It has evolved from a dimensional reliance on public service announcements to a more sophisticated approach which draws from successful management techniques used by commercial marketers, termed "social marketing". Rather than dictating the way that information is to be conveyed from the top-down, public health professionals are learning to listen down-up to the needs and desires of the target audience themselves and building the program from there.. This focus on the consumer involves in-depth research and constant re-evaluation together from the very corner stone of social marketing process. Figure 2 illustrates research, monitoring and evaluation of social marketing with the consumers as target audience in public health.
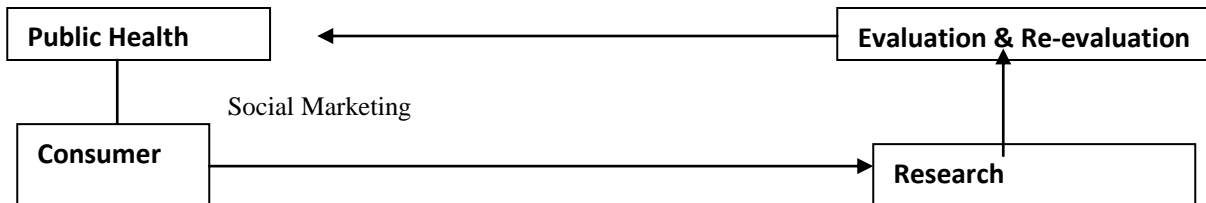

Fig 2: Social Marketing Process

In normal marketing (Fig. 2), information is dictated from the top-down but in the case of social marketing, the health professionals learn to listen to the target audience in order to understand their behaviors and influences and to be able to build up campaigns for positive changes (Kotler & Altman, 1971). The changes are subject to research, evaluation and re-evaluatin for adaption and proper usage (Weinreich, 2013).

Social marketing is a game changer in changing the behavior of individuals and society for the benefit of all. The advocacy for personal hygiene, hand washing, facemask wearing, greeting gesture, social distancing, cough etiquette and other social behavioral changes are in the port-folio of social marketing. All these are made good with social marketing mix of product, place, price, promotion, public, policy, partnership and purse sting through policy making and implementation. With this pandemic, social marketing scientists have the view that our social life style will not be the same for a long time to come.

Covid-19 Surveillance in Africa

The Global Outbreak Alert and Response Network (GOARN) is launched to promote the knowledge and understanding of Covid-19 under the title "GOARN Covid-19 Knowledge hub."The hub is designed as a central repository of quality public health information, guidance, tools and webinar which can be accessed for at any point. (WHO, 2020a).

Regional Office for Africa in Brazzaville, Congo reported that the number of covid-19 cases increased to over 222,000 with more than 101,000 recoveries and 6,000 deaths. Accordingly, South Africa, Nigeria and Algeria had the highest reported cases on the continent with South Africa having 61,927cases and1,354 deaths, followed by Nigeria with 14,554 confirmed cases and 751 deaths (WHO, 2020a). The same report had it that Lesotho, Seychelles and Gambia had the lowest confirmed cases in the region in the following order; four confirmed cases with zero death, 11 reported cases and zero death and 28 confirmed cases with no death respectively.

The UN agency (2020a) reported stigma and discrimination against health workers and the infected and that it is a big challenge to covid-19 response. It concluded, "The fight against coronavirus needs science, and not stigma".

Overview Situation in Nigeria

Of the 2,170 reported cases of Covid-19, 238 new cases were recorded by 18 states on May 01, 2020 of which Kano, 92; Lagos, 36, and Federal Capital Territory, 30 recorded the highest number of new cases. Of the confirmed cases, 351 were discharged with 68 deaths. Across the country, confirmed cases were 351 with 68 deaths while 16,588 tests were carried out by 34 states and FCT with at least one confirmed case reported. A breakdown analysis of the cases showed 71 per cent of confirmed cases were from three states (Lagos, FCT and Kano), 68 per cent of the cases were male while 31 – 40 years age group were the most affected. Additionally, 51 per cent of the cases did not have any epidemiologic link indicating an increase in community transmission (UNICEF, 2020). Currently, the case fatality ratio of Covid-19 Pandemic infection in Nigeria is 0.03 (i.e 0.3% of total confirmed cases) (Ohia,Bakarey & Ahmad, 2020).

Covid-19 Prevention and Control

The Director-General of WHO (2020), Dr. Tedros has cautioned that the world has a long way to go and that this virus will be with us for a long time. He added, "The world cannot go back to the way things were. There must be a "new normal" – "a world that is healthier, safer and better prepared". WHO has also published guidance document which addresses Human Rights as key to the Covid-19 Response. This document highlights the importance of integrating a human rights-based approach into the Covid-19 response and highlights key considerations in relation to addressing stigma and discrimination, prevention of violence against women, support for vulnerable populations, quarantine

and restrictive measures, and shortages and equipment as cited in Uchejeso & Obiora (2020)

As contained in Uchejeso & Obiora (2020), WHO (2009) developed hand hygiene and personal hygiene for health care workers and general public towards disease prevention and control (Mathur, 2011). Further in the same content, hand hygiene is a very important aspect of personal hygiene to all health workers, patients, patients' relatives, thereby preventing healthcare associated infections (Olaniru,Nedolisa, Song, Alla, Oyero, et al 2019).

Hand hygiene education became a beneficial intervention (Allison & Rebecca , 2008) that could assist Nigerians reduce disease burden that could follow a health emergency like Covid-19 pandemic. Continuing, Uchejesu & Obiora (2020) has established that time for vigorous hand hygiene and personal hygiene education and practice is now for all levels of Nigerian population as Covid-19 has no discrimination between the rich and the poor, medical and nonmedical, military and paramilitary, and employed and unemployed.

Covid-19 Palliative

Almajiri Children: According to UNICEF (2014), the Almajiris constitute 9.5 million of the country's children within the ages of 3-14. They are itinerant kids sent by their parents from far and near to Quranic teachers to mentor them through their religious knowledge across the Northern Region of the country. Most time, they are left to fend for themselves and they survive through street begging and scavenging. This group is not captured in the Social Register.

Safeguarding Frontline Medics: The risk of contaminating frontline respondents which including fatality was not adequately addressed. Mitigating the risks of infections and deaths through the provision of personal protection equipments (PPEs) for all frontline workers was not easily available.

Strategy for Lockdowns and Curfews: There is the continuous debate as to the viability of a continuous lockdown. Although by WHO and NCDC recommendations, a lockdown, as a way of enforcing social distancing, is the most viable way of curbing the spread of the virus. However, there is need to be sensitive to how average Nigerians, especially those whose livelihood depends on daily earnings will continue to survive without starving at some point due to the inevitable economic hardship. .

Access to Medicine and Essential Services: Corporate bodies – international and local and governments have donated generously medicines, medicares, hygiene components and PPEs to PTF to fight Covid-19 pandemic. While recognizing the importance of curbing the spread of the virus, access to food and non-food essential services (like medicines) are made available to segments of the population of have not to cushion the effect of the lockdown.

Transparency and Accountability: Billions of Naira has been donated to the Nigerian government to combat the pandemic, curb the spread of the virus, and alleviate people's sufferings. These funds are expected to be used in procuring medical equipment and supplies (ventilators, test kits, surveillance-enabled ambulances, PPEs, etc), as well as to set up and furnish COVID-19 screening, testing, isolation, and treatment Centers. Aside donations, the government has allocated funds for this purpose.

IV. CONCLUSION AND RECOMMENDATION

The application of social marketing approach has made the products and facilities for Covid-19 pandemic available and affordable, utilizing commercial marketing techniques while linking it to communications campaign geared to sustainable behavior change. In response to the pandemic, social marketing program has inculcated in the public social behavior change in social lives of Nigerians. This approach has been expanded by PTF to incorporate other essential health products and facilities and has become an important component of efforts to improve national health in prevention, control and managing Covid-19 Pandemic. However, there are some inconsistencies that hinder the goals of Social Marketing and Public Health in tackling Covid-19 Pandemic in Nigeria.

Social Register: It is observed that Social Register does not cover a high proportion of Nigerians that are below the poverty line. Such people – the homeless, IDPs, street scavengers, and almajiris are not found in the Social Register. In the era of lockdown, these people are riskiest to Covid-19 pandemic. Hence, there is every need for the Social Register to be very inclusive.

Composition of Presidential Task Force: Concerns have been expressed as to the composition of the PTF, considering how it has not been fully representative of some key groups that can bring in perspectives and advance issues relating to their areas of expertise in shaping scope, components, and implementation of response actions. There is need for expansion of the composition of the PTF to be more inclusive.

Openness and Accountability: Funds and materials are donated by corporate and individual bodies, philanthropists and associations. Recognizing that these funds do not require legislative approvals before disbursement, the need for transparency and accountability cannot be overemphasized, not only in ensuring that it is used for its primary purpose, but also to reduce possible corruption. Less has also been heard about the utilization of in-kind supports, such as medical equipment, testing kits, PPEs, palliative materials contributed by well-meaning people so as to ensure they are not pilfered or sold for personal gains.

Enforcement of Security and Safety: Also, there have been reports of extortions and collection of bribes to break the lockdown or curfews, thus endangering people's lives through the continued spread of the disease. The troubling trend of armed robbery, gang violence, threats and harassment of

people (especially in Lagos State and the FCT) has led some members of different communities to form ad-hoc vigilante groups as a measure to protect themselves, their families, and members of their community, which, if not controlled, may lead to reprisal attacks, tilting towards more violence.

Protection of sexual Vulnerable: While sexual and gender-based violence (SGBV) has increased during the lockdown, victims are unable to move around to seek refuge or help, and they are constrained in providing help. There is also the issue of inter sectional issues that are experienced by women, which is further exacerbated by crises such as this. This is not peculiar to Nigeria, as statistics from several countries have shown increase in gender-based violence (GBV) during this Covid-19 Pandemic era. Recognizing this troubling trend, the UN Secretary General has specifically flagged it, while some UN bodies, INGOS, and CSOs have been pushing for a gender lens to the pandemic.

Need for Streamlining and Uniformity of Operation: There is absence of a minimum standard of operations on how each isolation and treatment facility must be structured, furnished, and managed. This also extends to the issue of the PTF not covering all states, as priority is given to only States on lockdown. There is also the issue of lack of a minimum to develop a Standard Operating Procedure (SOP) that maps and systematizes processes and procedures for carrying out response actions. This should include protocols on the minimum standard for setting up Testing, Isolation, and Treatment Centers. The SOP becomes a minimum standard set at the federal level, and adopted by each state, as a way to ensure uniformity, consistenc**y** and accreditation.

Need for Lockdown with Human Face: Lockdown and Curfews are very essential for prevention and control of Covid-19 Pandemic. This should be implemented with human face by accompanying relative palliatives. This is especially so considering the socio-economic effects of lockdowns and curfews on about 65 per cent Nigerians who work in the informal sector – barbers, mechanics, hairdressers, bricklayers, farmers, etc – members of the society who already live below poverty line, and those considered the poorest of the poor. More so, due to the forced evictions in some communities, some have been rendered homeless and thereby limiting their ability to self protection against the virus. .

Implementation of Medic Incentives: These are front line "Foot Soldiers" fighting the invisible war of Covid-19 Pandemic. The risk they face is immensurable; many have died in the course of their duty and their families are not immune from infection contacted by the front line workers. The verbal promise is not enough; the incentives, allowances,

remunerations and insurance cover should be gazetted and implemented**.**

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