

The Public's Response to the Health Communication Strategies to Prevent the Expansion of Covid 19 in Ethiopia, Focusing on Some Selected Zones of SNNPR

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Abstract

Health communication is crucial for the creation of public awareness about the danger of a pandemic and safety measures. The study is situated in innovation diffusion and neutralization theories because these theories explain how new ideas spread in a society and how individuals normalize moral discomforts and avoid guilty feelings caused by a behavior against the acceptable norm in a society, respectively. Document and text analysis as well as in-depth interview were employed to collect the data. Documents were analyzed and health communication officers were interviewed. Thematic and textual analysis were employed for analysis. The analysis revealed that integrated media and inclusive and participatory communication were the communication strategies employed to alert the public about COVID 19. The public's awareness about Coronavirus increased as a result of the communication. The public's perception and scarcity of logistics were primary challenges. Moreover, the public became negligent in the prevention measures that should be taken due to their lifestyle, culture, and social influence as well as low economic status. As a result, they made themselves vulnerable to the risk of COVID 19. Since the public put themselves in risky situations, ardent and persuasive messages should be designed. Subsequently, the communication should consider changing beyond cognitive skills to bring behavior change.

Keywords: COVID19, Coronavirus, Gamo Zone, Health Communication, Negligence, Ethiopia

Introduction

The Essence of Communication

This study aims at investigating and explaining the health communication strategies employed in South Nations and Nationalities and Peoples Region (SNNPR) during the outbreak of COVID 19 pandemic in Ethiopia. When Coronavirus outbreak occurred in Wuhan Region, China, WHO declared as it is a global pandemic. Different endeavors had been made to communicate about the characteristics, symptoms, means of transmissions, and prevention mechanisms of the pandemic on the media in a fragmented manner. This way of communication confused the public and created panic.

Recognizing the inevitability of the danger, carefully planned health communication should have been designed to increase public's awareness and readiness to protect themselves from the danger of COVID 19 in advance. Except the mainstream media reporting about global prevalence of new cases, and death toll of COVID 19, consistent and planned health communication that could aware the public was almost nonexistent before the virus had been discovered in Ethiopia, particularly in SNNPR.

The nervous media reporting characterized by an endless stream of information obsessed with absolute number, exploiting the lack of trust in the health care infrastructure, and magnifying the fear of collapsing system is fueling fear (Caduff, 2020). This situation urges the public to look for information form alternative sources mainly from online streaming. Africanews.com also reported that Ethiopia has the highest coronavirus related search according to the data from global search engine giant Google (Mumbere, 2020). This illustrated that the situation demanded the essence of planned, strategic, and consistent health communication.

Communication is a process of transmitting, exchanging and sharing information to create mutual understanding for desired action between communicators (Priya, 2009; Halavais, 2004). It also plays vital role in creating awareness in the public. Communication needs to be planned and strategic in order to bring the expected change of behavior based on mutual understanding between the sender and receiver. In this study, sender referred to the Ministry of Health in general and SNNPR Health Office in particular and receiver denoted the addressees living in the region.

The following three important points determine the success of communication (Lapinski, 2009). First, communication does not take place in a social vacuum. Second, discrepancies between messages disseminated and received are expected. Third, communication is a dynamic process in which sources and receivers of information continuously interchange roles (Lapinski, 2009). Hence, it is crucial to consider various contexts in which communication takes place such as social, economic, and cultural. Moreover, Different obstructions affect the smooth transmission of messages, so communication should be designed to overpass the obstructions to make communication effective. What is more, communication is an active and cyclic process. Therefore, these points have to be taken into due consideration while scheming communication strategies in general and health communication strategies in particular.

Health Communication

Health communication is the study and application of a strategy for the generation, creation, and dissemination of health-related information, health-related interactions among individual, social actors and institutions, and their effects on different public, i.e., including individuals, community groups, and institutions which ultimately facilitate the processes in the prevention and treatment of diseases (Viswanath, 2008; Langdon-Neuner, 2011).

Healthcare information can be disseminated through various ways of communication; such as: interpersonal communication, health journalism, TV and electronic communication (Sullivan and et al, 2003; Lapinski, 2009; Bernhardt, 2014). Choosing the right medium for the right audience is crucial to achieve the goals of communication. Sound and effective health communication strategy should be based on an overarching vision of what is needed to be achieved regarding a particular health issue.

Communication strategy is a well-planned series of actions aimed at achieving certain objectives using communication methods, techniques, and approaches to solve problems at the grassroots level (Kamlongera, 2004, p. 8). The strategy should be integrated, have a long-term focus, be responsive to individual behavior changes need, and should maximize the potential for change on a broader societal level (O'Sullivan, 2003).

In order to make health communication effective, it must be strategic, timely and effective (Bernhardt, 2014), and should also emphasize on sharing of information that influence individuals or communities

and motivate the target audience to bring long lasting as well as sustainable change of behavior through easily understandable means of communication (Schiavo, 2007). Hence, coordination and collaboration among various stakeholders are the key components that make health communication effective (Frieden, 2014).

Health Policy and the Practice of Health Communication in Ethiopia

Ethiopia is characterized by a predominantly rural and impoverished population with limited access to clean water, housing, sanitation, food, health care, health infrastructure, and lack of human power and resources in the health sector (Nejmudin Kedir Bilal, 2011). Authorities in the Ministry of Health have made tremendous efforts to change situations and to implement a health policy, which can address health problems (Kott, 2016). The health extension program which intended to produce large number of health workers has helped in producing health workers who could provide basic health services at local level and diffuse health education in the community (GHWA, 2006).

As stated in MoH Policy Document, the government of Ethiopia formulates a health policy that aims at increasing access to all population with primitive, preventive, essential curative, and rehabilitative health services (Ministry of Health, 2015). Anne Kott described that Communication for Health should be an Integrated Campaign Platform (ICP) which provides a trusted, recognizable, and credible platform to build on communication interventions, and messages should be coherent and coordinated through multiple channels (Kott, 2016).

In 2003, the health extension program has been implemented aiming at reaching the poor and delivering preventive and basic curative high-impact interventions to Ethiopians. The role of health education is the core component of the health policy. Health extension workers played significant role to change basic health situation. Health extension workers have used various types of communications (Nejmudin Kedir Bilal, 2011; Haimanot, 2013; Abajobir, 2015 & Yibeltal Assefa, 2019). The health policy of Ethiopia has focused on prevention. To realize this, authorities in the Ministry of health in Ethiopia employed a strategy of educating and assigning health extension workers at grassroots level in order to expand and make basic health services accessible for all. These health extension workers were also part of the health communication and campaign in combating the expansion of COVID 19 in the country particularly in SNNPR where this study was situated.

Statement of the problem

The outbreak of COVID 19 demanded new solutions. Since the nature of the virus was not well studied and identified, it took a while to develop a vaccine. Hence, communication of the safety and precautionary measures was the only way to keep the public safe from the imminent danger of COVID 19. Therefore, this study aims at investigating the communication strategies used to develop the public's awareness.

The present coronavirus pandemic was first traced back to 1960s when Tyrrell and Bynoe found a virus named B814. It was found in human embryonic tracheal organ cultures obtained from the respiratory tract of an adult woman (McIntosh, 2005). Coronavirus, currently, caused serious problems on human race all over the world regardless of any difference. It caused sober destruction on economic activities and social cohesions. The situation also urged governments to enact unprecedented containment and lockdowns (Selva, 2020).

The researcher observed that the society was in ambiguous and panic situation about the nature of the COVID 19 immediately after the government officially announced that the virus was found in Ethiopia. Since then, different kinds of opinions and messages about COVID 19 had been spread in the society. The flourishing of communication and media technology offered abundant access to information easily to the public and this information overload left the public in confusion.

The researcher assumed that the panic and ambiguities were created because of lack of clear, consistent, and strategic communication about COVID 19. Communication goes beyond producing message; it includes understanding what moves the listener, and to be able to do that, the listener's points of reference, their culture, their values, their ways of relating to the world as well as their interest and reason (Ooi, 2009; Parsons, 2013). According to World Health Organization's (WHO) recommendation, communication should be accessible, actionable, credible & trusted, relevant, timely, and understandable to be effective (WHO).

Since the outbreak of Coronavirus, communication was used as a major tool in order to educate the public and increase their awareness about coronavirus transmission, prevention, and treatment using various ways in a fragmented manner. The researcher had doubts about the planning, consistency and strategy of the communication strategies employed in Ethiopia. Thus, the researcher was inspired to

investigate the communication strategy in Ethiopia at the regional level with special emphasis on some selected zones of SNNPR.

Objectives of the Study

General objective of the study

The main objective of the study was to investigate and explain the health communication strategies designed and implemented to deter the expansion of COVID 19 in Ethiopia by focusing on some selected zones of South Nation and Nationalities People Regions (SNNPR).

Specific Objectives

The study addresses the following specific objectives:-

- To explore the communication strategies employed to communicate about COVID 19 in SNNPR, Ethiopia;
- To assess the consistency, clarity, understandability, and contextualization of the messages of health communication;
- To figure out the challenges of health communication strategies implemented to communicate about COVID 19 in SNPPR, Ethiopia.

Research Methods

Qualitative Method

The study employs qualitative research methods. Crucial information that would help to investigate and explain how health communication was designed and implemented in the region was collected through in-depth interview from health communication officers. Furthermore, online media texts were collected to examine the understandability and clarity of messages. On top of documents that were meant to guide the communication process were also referred to. The information explained the situation and could not be quantified; as a result, the qualitative research method was used.

Population of the study and Sampling Procedures

Health communication experts in the region were the general population of the study. Nevertheless, health communication experts in Gamo, Gofa and Wolayita Zones health office communication were

the sample population of the study because the study was delimited to the selected zones of SNNPR. All the communication officers, nine altogether, in the selected zones health office were incorporated in the sampling frame of the study because their number was quite limited and convenient.

Purposive Sampling Methods

Health communication officers whose main duty is communicating and educating about health situation were selected purposefully because they have the required information on how the health communication about COVID 19 was taking place. Such sampling is purposive sampling (Louis Cohen, 2000; Clark, 2018). The number of the health office workers actively engaging in the communication section were nine, and they all participated during the interview session.

Data Collection Tools

In-depth Interview

In-depth interview was conducted with health office communication officers in the Southern Nation Nationalities and People Region Health office. In-depth interviewing is important in understanding the lived experience of other people and the meaning they make of that experience (Seidman, 2006). So, all health office communication officers participated in the in-depth interview.

The interview questions were semi structured to help the researcher retain some control over the direction and content to be discussed, and to make participants free to elaborate or take the interview in new but related directions (Cook, 2008; Bryman, 2012). Including the Head of Communication Department of SNNPR Health Office, nine focal person who worked in health office as communication officers participated in in-depth interview. All communication experts from the selected zones were interviewed on how their respective offices led health communication to raise public awareness about COVID 19 and the challenges faced in the process.

Document Analysis

Furthermore, different documents, such as: publications, media productions and other tools or mechanisms designed (online billboard) to communicate about COVID 19 with the public were collected and examined. In this frame, documents are viewed as conduits of communication between, say, a writer and a reader- that contain meaningful messages (Prior, 2008). Documents that were prepared to guide the communication process regarding COVID 19 were also referred to. The

documents referred to assess how the overall communication at national and regional levels was directed. Moreover, the online media texts were collected from the official websites and official Facebook page of the Region's and Zones' Health Office to examine the language appropriateness and other attributions like the usage of the right media and persons for sending messages that could enhance the successful transmission of the message. The outdoor advertisements were also assessed for their height, color, and location appropriacy in transmitting the anticipated message to the public. For this research's purpose, media contents that were generated in different ways; such as, photographic image, film, television program, advertisement, or piece of music are also regarded as a text (Ballinger, 2008; Franklin, 2013).

Method of Data Analysis

Thematic analysis

The data collected using in-depth interview and media contents were sorted out according to their nature. Qualitative data is categorical data, as they can be classified into categories (Singh, 2007). Thus, data collected via in-depth interview were transcribed first and then organized and categorized in accordance with the themes which were consistent with the objectives of the study in order to analyze thematically.

Content Analysis

Content analysis is the intellectual process of categorizing qualitative textual data into clusters of similar entities, or conceptual categories, to identify consistent patterns and relationships between variables or themes (Julien, 2008). Content analysis is an approach to analysis of documents and text, which seeks to quantify content into, meaningful and predetermined (in line with the objectives of the study) categories in a coherent way (Hanington, 2012). Hence, the contents of online and media texts that conveyed health information to the public were collected and coded categorized systematically to substantiate the thematic analysis.

Results and Discussion

The collected data through interview, texts from online media, and documents were triangulated and presented in this section.

In May 2020, Ethiopia's Ministry of Health developed COVID Communication Protocol and disseminated to the regional health offices to guide health communication regarding COVID 19. The document elaborated about message development, messages dissemination, monitor and control of information, language use and the evaluation procedures. The ultimate goal of the health communication was to empower individuals, families, and communities to adopt preventive and health seeking behavior to keep the public safe from COVID 19 (Mo Health, 2020). The health communication protocol offered regional health offices to design health communication according to their context. "We follow the national communication protocol to develop the messages to be communicated about COVID 19. We are autonomous to contextualize the messages according to the existing situation in our area. We have planned who to participate and where to focus." (Melakmu Dara) Moreover, National Communication Protocol for COVID 19, National COVID-19 Communication Response Strategy (NCCRS) (June 2020), National Public Health Emergency Operating Center COVID-19 Emergency Preparedness and Response Minimum standards for quarantine, isolation and treatment centers in Ethiopia (March, 2020) and Arba Minch Town Administration Health Office Public Health Emergency Operation Center documents were also accessed to investigate how health communication regarding COVID 19 is guided and accomplished in SNNPR.

The National Communication Protocol for COVID 19 document clearly states that any information regarding COVID 19 should be communicated by a person or professional who took trainings about COVID 19 to avoid confusions. This document also directed regional health offices to implement inclusive, participatory, and persuasive health communication regarding COVID 19 in order to create mutual understanding. As recommended by Schiavo and Gamhewage, communication practitioners, or other public health professionals need to be trusted and respected by their intended audiences (Schiavo, 2007; Gamhewage, 2013).

Integrated Media a Strategy for Health Communication

The objective of this study is to investigate and explain the health communication strategies employed to raise the public's awareness to prevent the expansion of Coronavirus in South Nations Nationalities

and People Regions. Using various media integration was the main strategy employed to address the issue and to reach different groups of the public.

Media integration was the main strategy of the health communication by the ministry of health and regional health bureau. Health communication officers in the regional health bureau made endeavors to make communication easier and understandable to the society, as per recommended in the National Communication Protocol for COVID 19. In the residential areas, the researcher observed activities they made and also learned during in depth interview from informants that health communication experts integrated various media together in order to reach various groups of societies. They used various media, i.e., traditional, print, mainstream, and online media to reach all social groups. “We use various ways of media to reach the public. We use health extension workers, the broadcast media Debub branch is here [in Arba Minch Town], we also use all the broadcasting languages to communicate with the public about COVID.” (Interviewee Three)

Moreover, influential and respected people in the community participated in information dissemination process about COVID 19. Realizing the power of integrated media use, the health office used all types of media diffused information.

We use integrated media to reach the public according to the information need of the public and the context. We use banners that contain different message of prevention such as: steps of hand wishing, how to use face mask, and keeping physical distance. We also urge organizations to convey short messages about COVID 19 while they make their own announcements in the town and Woreda. Furthermore, we also did public announcement moving through the town by car. We always try to integrate different ways of communication. (Interviewee One)

The office made the messages as simple as possible for the public to understand. The languages used were appropriate to the society. Native languages in the areas were used in the print and broadcast media to transmit messages about COVID 19. “We use Fana FM and Wegata (the FM radio in Wolayita) to communicate messages and make live discussions with the public about COVID 19.” (Interviewee eight)

In local and national broadcast media, native languages had been used significantly by the health office communication experts to transmit messages about corona virus as one health communication officer

described. “We use all the languages that Arba Minch FM radio station broadcasts. Arba Minch FM radio station broadcasts in twelve languages including Gamotho. We convey messages in all the languages. These days, we have taken 50% of the broadcasting time to broadcast messages about COVID.” (Interviewee One)

The document recommended the use of simple, understandable, inclusive, and coordinated communication and languages. Furthermore, the document directed to make the communication clear and accurate to avoid unexpected communication crisis (Mo Health, 2020).

What is more, the region’s health communication office used the online platform to reach digitally literate group of the society. The office used websites and official social media accounts. Health professionals also marched on the main streets and squares of towns holding slogans that alerted the public. “The office uses social media mainly Facebook and Telegram to reach the public. We share real time information and update new cases, daily recoveries, and death tolls. We also organize march on the main streets, squares, and marketplaces to alert the public.” (Interviewee seven)

Health office involved influential people, artists, politicians, authorities, in educating the public about



Figure 2 Health Professionals’ March

the transmission and prevention methods of COVID 19. “We attempted to coordinate various media to reinforce one by the other. Moreover, respected people, influential, businessmen , and religious leaders have participated in disseminating information about corona virus” (Interviewee six). Another health communication expert also added how the health office communication experts involve

influential people in the health communication process. “We make social institutions’ such as አድር አቆብ (*’adara and ’aqubā*) leaders involve in the communication process to educate the public about the transmission, means of prevention, and symptoms of COVID 19. We also instruct what to do if someone has showed the symptoms of COVID 19.” (Interviewee four)

Schiavo (2007) explained that health communication programs evolve from what communication experts had originally devised due to the input and participation of key opinion leaders, patient groups, professional associations, policymakers, audience members, and other key stakeholders. Theory of Innovation Diffusion also elaborates the necessity of the participation of influential people in diffusing new concepts among the general public. As Rogers 2005 (cited in Dearing and Kim 2008) defines, diffusion is the process in which an innovation is communicated through certain channels overtime among the members of a social system. Theory of Innovation Diffusion is a multifaceted perspective about social change in which people, innovations, and media environment affect how rapid change occurs (Dearing and Kim, 2008). According to Rogers (cited in Dearing and Kim, 2008) innovation is anything the adopters perceive as new.

In diffusing new ideas in the society, opinion leaders play significant role. “Opinion leaders” literally lead the formation of attitudes, public knowledge, and opinions. These group help the people to form opinions on various issues and matters (Weimann, 2008). The health office communication experts considered the role and importance of opinion leaders’ participation in the communication process.

Furthermore, fliers, brochures, leaflet, were also used to disseminate alerting information about COVID 19 until it was decided to stop by the office:- “We have recently prohibited the distribution of printed materials to the public because it leads people to have physical contact. Since physical contact creates high risk of spreading the virus, the office has ordered experts to use other alternatives media to avoid physical contact” (Interviewee five).



Figure 2 Flier used to convey message about COVID

The Use of Online and Alternative Media to Communicate about COVID 19

The health office used the online media to convey messages, and two hundred sixty Facebooks posts, and ten news stories about COVID 19 were collected from SNNPR Health Office official website and social media accounts, mainly the Facebook.



Figure 3 Pictures used during the online campaign

The Facebook posts were real time information about daily new cases, recoveries, and death tolls mainly in the region as well as at national level. Moreover, messages that promoted the use of facemask, hand washing, and keeping physical distance were frequently released online. Online

campaigns, on Facebook and on twitter, was also organized with the motto, “ምክንያት አልሆንም” (*məkənəyatə `äləhonəmə*) meaning “I won’t be a cause!” in which the messages focused on alerting the public about the prevention mechanisms.

The campaign mainly focused on informing the public, but the situation was demanding more than providing information. In campaign, knowledge alone is not enough; people’s attitude, perceptions of norms, motivation and an ability to understand the desired behavior are key to initiate observable change. The campaign, therefore, needs to consider more than knowledge (Banks, 2007; MAP, 2008).

In addition, COVID related national and international news that aimed at educating, warning, and alerting the public were also released on the region’s health bureau websites and official Facebook account. Moreover, information that described the transmission, prevention, and nature of coronavirus was also frequently dispatched on the official social media account of the health office. Thirty-nine pictorial messages were collected. Yet, all the pictures were one and the same and were taken from similar sources, i.e., from the Ministry of Health and Institute of Public Health. The infographs would have been important if they were contextualized. However, as informants described during the interview session, lack of well-trained communication expert was one of the challenges the office faced in the process of communication if not, the pictures required serious adaptation to the countryside residents, in particular.



Figure 4 Messages to alert the public about COVID

The region’s health office website was filled by its PR department news. All the stories focused on what the health office had been doing in deterring socioeconomic impacts and the expansion of

COVID 19. The region’s health office as well as respective zone health bureaus together with stakeholders rigorously worked on collecting resources such as foodstuffs and cleaning materials to support the needy. Accumulation and distribution of collected resources was the primary task of the health office bureau, especially in the first months of the outbreak, rather than working on health communication.

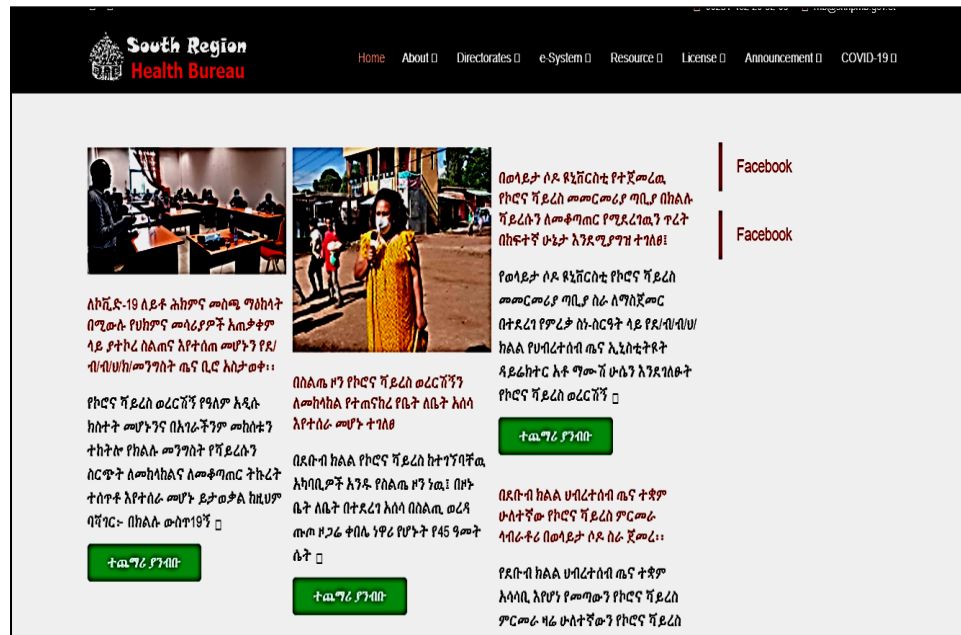


Figure 5 Snapshot of the SNNPR Health office Website in the first days of the Outbreak

Banners and billboards were also used to reach the public. Banners consisted of text and pictorial messages about COVID 19’s transmission, symptoms, and prevention mechanisms and were hanged at public spaces. Business organizations, like hotels and public service providers, were also ordered to hang banners consisting of messages about the transmission, symptoms, and prevention mechanisms of COVID 19.

However, the billboard and banner were not up to the recommended standard. As Achieng described, banner messages must be clear, concise, and attractive; above all banners’ messages should be easily digested in 2- 4 seconds and as clutter free as possible (Achieng, 2009). The banners and billboards hanged at different public areas were full of texts and very short in height. Some of the colors were dull and not attention grabbing. Siddiqui (2016) stated that size of the banners, location of the post,

and the contents are very important. Some the banners were hanged on the walls and were not easily visible.



Figure 6 Banner and Billboards used to communicate about COVID 19

The health bureau communication office implemented integrated media health communication strategy. Interpersonal communication, the traditional, mainstream, and online media had been used to reach different social groups as integrated media use for health communication had been recommended. Well-coordinated and efficient communication strategy help stakeholders to define risks, identify hazards, assess weakness, and promote community resilience by increasing the capacities to cope with difficulties (Moreno, Fuentes-Lara, & Navarro, 2020).

Obstructions for the Implemented Health Communication strategies

One of the objectives of the study was to identify challenges for the communication strategies implemented in the region. Accordingly, major challenges were identified and described below. As informants explained lack of well-trained communication professionals, scarcity of logistics, public negligence and neutralizing the risk and public’s perception were challenges the health communication officers explained.

Lack of well-trained communication professionals

Lack of well-trained communication professionals was the primary challenge. “We do not have adequate communication experts in our office. We only have one communication personnel who support our communication activities from Arba Minch University. Hence, we faced serious challenges in communicating effectively” (Interviewee One).

The delay of the Communication Protocol created confusions about the use of terminologies during public announcement. During the public announcement, officials used terms like, “the virus originated from China”, “China virus”, “horrific virus”, “terrifying virus”, “deadly virus” and “Killer virus” to describe coronavirus, which was labeled wrong in the Communication Protocol, later.

Knowledge gap about COVID became obstacle for health communication experts. Since COVID 19 was a new phenomenon for medical experts, giving accurate explanations about the nature and characteristics of the virus was challenging for health professional, especially in the first days of the outbreak. “Lack of trainings regarding COVID is a challenge for us. As a result, we cannot prepare communication materials. We use the technology [the internet] to get information and update ourselves. WHO website is our source of communication materials” (Interviewee two).

Logistics Scarcity and Public Negligence

Scarcity of logistic was mentioned as a challenge for the communication activities. The situation was demanding to travel to remote areas to support communication experts. However, in order to conduct effective campaign and education shortage of resources was a problem for the offices.

We have shortage of demonstration materials. We are expected to show how to use facemask, hand sanitizer and hand washing steps while explaining. Yet, we cannot demonstrate because we don't have the materials. In addition, the situation demands frequent travelling to different places to assist and supervise, but we have shortage of vehicles to travel. (Interviewee two)

The public became negligent to the office's messages. The goal of communication was to bring about behavior change of the public. However, it would not be easy to change the public's behavior. The public understood the spreading and prevention ways of coronavirus. Nevertheless, the public remained negligent. “The negligence of the is beyond what we speak. People are very much careless. It is difficult to say the public do not have the information, especially the youths, when we travel to different places, we see the youths are very much negligent” (Interviewee five).

Public negligence was a serious challenge frequently raised during in-depth interview. “The public did not bring behavior change to the expected level. There is a change, but the change is not up to the expected level. This has become a serious challenge” (Interviewee One).

The health office experts discussed their assumptions for the public's negligence. The public believed that they could not protect themselves and some thought COVID was a disease for the developed countries. "People assumed that COVID 19 is a disease for the well-to-dos and developed nations. Some also think COVID 19 is nonexistent, and they do not care about it. Some also believe God will keep them safe" (Interviewee two). The researcher also learned the public's belief about COVID in various circumstances.

Hence, the public used different techniques of rationalization for their dissonant acts in which theory of neutralization describes the situation. Frequent experience of deviant behavior makes people internalize guilt feelings. In order to avoid guilty feelings and moral discomfort, people use a variety of excuses and justifications which is explained by theory of Neutralization (Davis, 2014; MARUNA, 2005). Neutralization, in turn, enables drift. Neutralization (Drift) Theory explains a temporary period of irresponsibility or an episodic relief from moral constraint. Whenever someone deviates from the norm and culture of a society, he/ she rationalizes the deeds to get moral relief unless deviation is stopped. However, the experience of drift does not "cause" delinquency in the positivist sense, but rather drift makes delinquency possible (MARUNA, 2005).

According to Neutralization Theory, social groups cognitively deal with risky situation using different techniques to avoid blames and guilty feeling (Helvoort, 2019; Peretti-Watel, 2003). Techniques of neutralization are used in order to 'protect [...] the individual from self-blame and the blame of others after the act (Matza, 1957). Hence, the public predominantly used neutralizing technique to rationalize their negligence. The public believes that it is impossible to apply strict covid protection protocols because of the influence of culture and lifestyle. According to this technique, people go against the anticipated norms due to circumstances that are beyond their capacity and control.

Moreover, the public rationalized their negligence using Petti-Wattle's, (2003) neutralization techniques. Some described COVID 19 is a disease for the western countries which is scapegoating technique. Others believe that God protects them, and corona virus wouldn't make any harm to them as neutralizing technique of self-confidence. The public also uses techniques of comparison between risks, in which they compare the danger of COVID 19 disaster in the western countries with the limited effect in Ethiopia and they consider it normal. The public attempted to avoid blames and guilty feelings

using various techniques of neutralization. As a result, the public has remained vulnerable to risk of COVID 19 because Neutralization or drift does not “cause” dissonance in the positive sense, but rather drift makes delinquency possible (MARUNA, 2005).

The public Perception about Corona

How the public perceive Coronavirus was another challenge for the successful transmission of the messages and health education. Even though messages meant to alert the public transmitted abundantly in various media outlets, the public remained in the state of dissonance. Thus, health communication experts kept on alerting the public to stay safe. Yet, the public still perceived that corona virus was non-existent and undermined its danger.

The public undermines the virus [coronavirus]. The risk communication, which is calm, knowledge based and timely communication, does not work in our situation. Such communication requires literate society that understands the essence and fundamentals of communication. If we make the messages a little terrifying, the public will go to the other extreme and may abstain themselves from their activities. We do not have the intention to change our strategy. We persistently do the same communication (Interviewee One).

The public’s perception towards isolation and treatment centers was also serious problem for health professionals. The public perceived isolation and treatment centers as a detention center. Hence, people would not be happy to stay in the isolation centers. A member of the operation team described as follows, “People do not have clear understanding about isolation centers and considered them as detention centers. Hence, people are terrified and shocked when they are told as COVID positive and taken to the isolation centers” (Interviewee three).

The public’s perception about the centers caused serious problems. People used any opportunity to escape from the centers. Beyond that, a woman who had showed the possible symptoms of COVID was taken into the isolation center until her test result was known. She was not willing to be taken to the isolation center from the beginning. She committed suicide in her room, even, before she knew her test result. It was unfortunate; her sample’s examination result was negative. The incident was very depressing and became a lesson for the operation team to establish mental health unit in isolation and treatment centers, then. “. . . what happened at that time was really saddening and heart breaking to

the health professionals and the people working in the center. However, we took great lesson and established a mental health unit in the treatment and isolation centers after that incident” (Interviewee One).

Conclusions

From the data analyzed and discussions made, the following conclusion have been made. Integrated media has been applied as a major health communication strategy to develop the public’s awareness about COVID 19’s ways of transmission, prevention, and treatment in Ethiopia, particularly in the selected zones of SNNPR where the study predominantly focused. This has assisted in developing the public’s consciousness about coronavirus’s ways of transmission, prevention, and treatment.

All kinds of media, i.e., the traditional, mainstream, and online media, as well as the public spheres; such as: *’adara* and *’aquba* and religious institutions where people gathered for social causes and the leaders who are called opinion leaders have participated in the communication process. Opinion leaders have assisted the process of diffusing health information. One to one communication, mainstream media both print and broadcast media as well as the online media have been integrated to reinforces the messages transmitted.

The Info graphs and billboards used to communicate need to be contextualized and the design and colors should have been appealing and attention grabbing to the public. They need to be hanged in a free space with the appropriate height to be visible from every direction.

The public perception and negligence to the messages communicated as well as neutralizing the risky situation have become challenges for efforts the health office made in communicating about COVID 19. The public have neutralized their insolent behavior using different techniques of neutralization which deviant groups of a society used to avoid blames and guilty feelings. Moreover, scarcity of well qualified communication personnel and shortage of logistic have challenged the employed health communication strategies.

Stakeholders from different organizations coordinated to act together. They have collected foodstuff, cleaning materials such as soap, hand sanitizers, and facemasks in order to protect the society from socio-economic impact of COVID 19 when restriction was set. The coordination has assisted the

health communication workers to disseminate messages that could alert the public beyond the intended effort of alleviating the socio-economic impact of COVID 19.

Here, the insight is that the collaboration between the social and the state actors should be strengthened and promoted further in order to alleviate other deep-rooted socio-economic problems of the society.

Recommendations

Coordinated and integrated media practice in addressing the information need of different social groups about COVID should continue, persistently.

Social institution leaders, influential people, and authorities should keep on working in collaboration with experts which help to make the communication trustworthy and change people's behavior (Gamhewage, 2013).

The coordination and solidarity are important ways if they continue persistently in order to get out from the socio-economic problems that manacled the society, beyond the COVID' s socio-economic impact.

Since the public remains in the state of denial and rationalize their negligence, it is crucial to design messages that are beyond cognitive level. Diffusing new ideas in a society takes time, so transmitting pertinent health messages should continue.

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