

# **AUDIENCE PERCEPTION OF TELEVISION REPORTAGE OF THE REALITIES OF COVID-19 PANDEMIC. A STUDY OF RESIDENTS OF ABEOKUTA SOUTH LOCAL GOVERNMENT AREA OF OGUN STATE NIGERIA.**

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## ***Abstract***

Journalists owe their primary allegiance to the public and are often referred to as the fourth estate of the realm. Broadcast stations therefore take the process of gate-keeping seriously in dissemination of news stories that endear them to the audience. Television stations had been in the fore front of the information of the daily reports on covid-19 as released by Nigeria Centre for Disease Control (NCDC) which did not enjoy credibility among citizens. Some held firmly to this information,

others mocked the agency and the federal government, accusing them of lack of transparency. Arising from this skepticism, this paper investigated the place of television reportage of COVID-19 information with a view to measuring audience perception of the reality of the existence of the disease. The study used perception theory. Survey research design was adopted for the study. A well designed questionnaire was administered to four hundred (400) respondents that formed the sample of the study. Data collected were presented in tabular form and analysed using simple percentage method. Findings of the study revealed that the rate of respondents' awareness of safety instructions on COVID-19 was high. Some, (38.5%) of the respondents believed that figures of COVID-19 deaths, treatments, discharges and new infectees as being released by the Nigeria Centre for Disease Control (NCDC) and reported by television, were being exaggerated. The study therefore recommends that government should be transparent in their release of information to the media. Television reporters should verify information before disseminating it to the audience.

**Keywords:** Audience perception, Credibility, Television reportage, COVID-19, Realities, Transparency.

## Introduction

Corona virus disease 2019 (COVID-19), which was previously known as 2019 novel corona virus (2019-n-COV) was first reported in Wuhan, China in November, 2019 (Ohia, Bakarey & Ahmad, 2020). It was initially reported to the World Health Organization (WHO) on December 31, 2019. On January 30, 2020, the World Health Organization declared the COVID-19 outbreak a global health emergency. On March 11, 2020, the WHO declared COVID-19 a global pandemic, its first such designation since declaring H1N1 influenza a pandemic in 2009 (Cennimo, 2021; Campbell, Scadding & Roberts, 1979). Initially, from observation, the Nigerian government did not respond to the pandemic in time unlike other countries which quickly closed schools, shops, churches, mosques, hotels, restaurants and airports, to mention but a few, therefore, the pandemic increased in

Nigeria. It was later that the government of Nigeria, through the Federal Ministry of Health moved into action to ensure an outbreak in Nigeria was controlled and contained. The multi-sectoral corona virus preparedness group led by the Nigeria Centre for Disease control (NCDC) immediately activated its national emergency operations centre and worked closely with Lagos State Health Authorities to respond to the cases and also implemented firm control measures (NCDC 2020; Ohia, Bakarey & Ahmad, 2020; Cennimo, 2021).

While people were locked down at home, COVID -19 cases skyrocketed across Nigeria. The Federal Government stayed busy counting the number of people tracked, isolated, tested and confirmed to have COVID-19 and those who died from it, but little was done to educate and provide effective social isolation policies. The medical authorities watched as the disease moved in Nigeria from singledigit infections to over 15,000 cases (Oloribe, Oskouipour, Nwanyanwu & TaylorRobinson, 2021). The COVID-19 era has been a global period of suspended mental thought across the nations of the world. However, many people who were infected and died in Nigeria were children, despite the fact that schools, research centres, mosques and churches were closed, markets and banks kept open to transact business. Yet, the COVID-19 cases continued to rise (Oloribe, Oskouipour, Nwanyanwu & TaylorRobinson, 2021; Kalu, 2020; NCDC, 2020).

Nigerians were reminded that most people who became infected may experience only mild illness and recover easily, but it can be more severe in others, particularly the elderly persons with other underlying chronic illnesses. Nigerians were advised to take care of their health and maintain hand and respiratory hygiene to protect themselves and others, including their own families. Nigerians, among other precautions, were asked to regularly wash their hands with soap and water, and use alcohol-based hand sanitizer; maintain at least one and a half meters (5 feet) distance between themselves, and anyone who is coughing or sneezing; persons with persistence cough or sneezing should stay home or keep a social distance, but not mixed in the crowd; people were also advised to use nose mask. People who feel unwell with symptoms like fever, cough and difficulty in breathing, were advised to stay home. All

of those measures were put in place in order to curb the spread of COVID-19.

Unfortunately, people perceived the disease called COVID-19 and the way it was being reported on the television daily, differently. From observation, some people believed the disease called COVID-19 really exists and therefore took to the safety instructions on the disease while some others felt strongly that Nigerian leaders are smarter exploiters of situations and here was another opportunity. They reasoned that NCDC just keep on conjuring figures that never existed. They posited that if “seeing is believing” then government agencies owe Nigerians the task of making feasible, those who had contracted the disease. They concluded that the noise about COVID-19 was too much because top government functionaries make huge money from the situation. Except few people in high public offices who were said to have died of COVID-19, isolation centers were nothing short of a “shrine”, not to be accessed by “noninductees”. In the midst of these “trust” and “mistrust”, the need to evaluate audience perception of television reports on COVID-19 as being dished out daily by television becomes necessary in order to have a clearer picture of audience's perception of the realities of the disease.

COVID-19 is a global health issue which the World Health Organization (WHO) has declared a pandemic. Nigerians, in the first phase of the flu had little respect for the COVID-19 safety instructions which the government, through the Nigeria Centre for Disease Control (NCDC) rolled out, that is avoidance of handshakes, use of nose mask, social distancing, coughing and sneezing on elbow and similar safety instructions (WHO, 2020; NCDC, 2020).

The lockdown that characterized the first phase of the pandemic was not so fulfilling because all the COVID -19 safety instructions were not fully complied with by the majority of people of

Abeokuta South Local Government Area of Ogun State, Nigeria. For example, markets, mosques, and churches were always filled to the brim without regards to the social distancing order and other safety instructions. Things were worst in rural areas where monitoring, according to observations, were actually non-existent. Even elites and residents of big cities seemed to have little belief in the existence of

corona virus, describing it as another form of malaria and an avenue for top government officials and medical experts to make money. A larger percentage of people who are familiar with reports on radio and television concerning COVID-19 appear to have belonged to different schools of thought. From observations and reports from Nigerian newspapers as presented on television and concerns of government, the flu called COVID -19 really exists in Nigeria and needs to be seriously tackled. On the contrary, some others opined that the level of existence of corona virus in Nigeria was being exaggerated by officials and institutions of government to facilitate corrupt practices. The cross road is now predicated on the inability of Nigeria Centre for Disease Control (NCDC) and government agencies to make feasible those who have actually contracted the disease over time adding that the media (television reports) are mere publicity to create awareness and justify the fortunes that had been expended on Corona Virus disease thus far. It is therefore necessary to have a clearer perception of the audience, especially on the realities of the pandemic as reported by television.

### **Conceptual Clarification**

In this study, literatures were reviewed presenting a brief on corona virus disease, television as major medium for corona virus disease information, effectiveness of the television as a medium of passing information on corona virus disease to the audience and the importance of investigative journalism.

### **The Concept of Disease**

The concept of “a disease” is logically complex, in the sense that the name of a disease has implications of different sorts. It may refer to (a) a described and recognizable combination of symptoms and signs; (b) phenomena associated with a specified disorder of structure or function; or (c) phenomena due to a specific cause or causes. These considerations suggested the following definition, “A disease is the sum of the abnormal phenomena displayed by a group of living organisms in association with a specified common characteristic or set of characteristics by which they differ from the norm for their species in such a way as to place them at a biological disadvantage” (Campbell,

Scadding & Roberts, 1979). Infectious diseases are disorders caused by organisms such as bacteria, viruses, fungi or parasites. According to Campbell, Scadding & Roberts, infectious diseases can be passed from person to person. Some are transmitted by insects or other animals. Signs and symptoms vary depending on the organism causing the infection, but often include fever and fatigue.

Mild infections may respond to rest and home remedies, while some lifethreatening infections may need hospitalization. Many infectious diseases, such as measles and chickenpox, can be prevented by vaccines. Frequent and thorough hand washing also helps to protect oneself from most infectious diseases (Cennimo, 2021; Ohia, Bakarey & Ahmad, 2020).

### **Corona Virus Disease (COVID 19)**

Corona virus disease 2019 (COVID-19) is defined as illness caused by a novel corona virus called severe acute respiratory syndrome corona virus 2(SARS-CoV-2; formerly called 2019-n-CoV), which was first identified amid an outbreak of respiratory illness cases in Wuhan City, Hubei Province, China. It was initially reported to the World Health Organization (WHO) on December 31, 2019. Later in 2020, the World Health Organization (WHO) declared the covid-19 outbreak a global health emergency, and on March 11, 2020, the disease COVID-19 was declared a global pandemic (Cennimo, 2021).

### **Signs and Symptoms of Corona Virus Disease (COVID-19)**

Patients with a mild clinical presentation may not initially require hospitalization but clinical signs and symptoms may worsen, with progression to lower respiratory tract disease in the second week of illness. Risk factors for progressing to severe illness may include, but are not limited to, older age and underlying chronic medical conditions e.g. lung disease, moderate to severe asthma, cancer, heart failure, cerebrovascular disease, renal disease, liver disease, diabetes, immune compromising conditions, and severe obesity (Cennimo, 2021; NCDC, 2020; Campbell, Scadding & Roberts, 1979).

Corona Virus assumed a pandemic with the speed at which it threatens human existence, knowing no geographical boundary, race or religion. The first case in Nigeria was traced to an Italian traveler traced to

Ewekoro, Ogun State, on February 27, 2020. Corona Virus can be spread when there is close contact with a carrier who shows signs of cough, sneezes or manifests malaria. It is an air-borne disease. The rate of infection is geometric. To curtail the spread, the federal government closed all borders, and restricted movement by declaring lockdown in Lagos and other states with heavy human traffic mainly Ogun and Abuja but as the pandemic defies all precautions, nearly all states in Nigeria have experienced the virus. As at 30 March, 2021, total number of confirmed cases was 162,762 with 151,532 discharged and 2,056 deaths recorded (Nigeria Centre for Disease Control, 2021.; Shereen & Siddique, 2020).

A bold step taken by government at the Federal, State and Local levels in Nigeria is to increase the people's knowledge about the Virus so that ignorance can be wiped away. Therefore, the National Centre for Disease Control (NCDC) used a combination of conventional media of radio, television, newspapers, magazines, books, etc and even the social or new media consisting Whatsapp, Twitter, Facebook, Instagram etc, to disseminate information to cities, towns and villages about the nature of COVID-19, Symptoms to look out for, precautionary measures to take and other facts that surround Corona Virus (kalu, 2020; Yazdi, Li & Devkota, 2021).

## **Television**

Television, because of its audio-visual strength coupled with the realities that are injected through colours presentation is a medium of believability. In the family of mass media, radio remains the one mostly used and understood by the masses and then television (Oyetoro, Adewumi, Sotola, 2017).

The prevalence of Corona Virus has imposed it upon the state operators to devise means and strategies for tackling the disease before it wipes humanity out of existence. Certainly, the first action in the series of actions lined up for such crusade has to be centered on awareness creation (Abbass, Sheikh, Mohammed and Ashfaq, 2011). Setting the ball rolling, the government, through its agencies engaged the mass media in the campaign against COVID-19. One of the notable media of information dissemination engaged by the government is the television.

This is because television can pass messages with very high speed and effects, playing with its imagery unique feature (Familusi and Owoeye, 2014). Television also has this inter-active and admirable characteristics owing to the way messages are delivered to the audience in exciting manner propelled by its audio-visual stance (Duncan, 2002) cited in Familusi et al (2014).

It follows therefore that television, because of its ability to project reality has great advantages over other media and could lead viewers to willingly follow and obey safety instructions on COVID-19. Since people tend to believe in what they see, television as a major medium for COVID-19 campaign would ordinarily have shaped the perception of many people, especially those who are skeptical about the existence of the disease.

### **Investigative Reporting**

Investigative reporting according to Alao & Olawunmi (2014) is basically about seeking information. Virtually every form of reporting involves some element of investigation in the course of information gathering to write the news. However, the term investigative reporting has come to connote the seeking of information that is hidden or which sources would not want to come into the public domain or public knowledge because it involves a legal and ethical wrong. So, turning up hidden information is central to the work of an investigative reporter. Clear thinking and clear statement, accuracy and fairness are fundamental to good journalism. A journalist should write only what he holds in his heart to be true. Suppression of the news, for any consideration other than the welfare of society, is indefensible (Oloyede, 2008).

The reporter is the moving spirit in news reporting and writing. According to Alao & Olawunmi, he is the ears and eyes of the media and it is essentially the reports of what he sees, hears or observes that are disseminated, through a mass medium, to the public as news. Basically, a reporter is a trained media person whose job is to gather facts and assemble them in such a way that a coherent view of what transpired is presented. A reporter does not play up an event in order to get a news story, neither would he make one happen so as to get something to report. He deploys his keen observation and investigative



ability as a fact finder. Alao & Olawunmi, argued that where pieces of information are accurately put together in a story, it should pass the test of truthfulness. The more truthful and intelligent account the reporter can give, the better it is for the consumer to get an accurate account of an event and greater is the credibility enjoyed by the media organization. Unlike, a propagandist or a gossip, the journalist sorts through the information available and determines how much of it is valuable and reliable before passing it to the public. News stories, whether hard news or features, must be accurate. Journalists not only collect the information they need to tell the story, they have to verify the information before they can use it. Credibility is a journalist's most important asset, and accuracy is the best way to protect it. To ensure accuracy, reporters must check and double-check all of the information they collect for a news story.

### **Theoretical Review**

This study was premised on the perception theory. The theory is an attempt by communication experts to reveal how messages are being interpreted (Anaeto, Onabajo and Osifeso, 2008). It actually has to do with difficult stages through which the audience pick, arrange and give meaning to images as they encounter them. Lahlry says it is the process by which we interpret sensory data. Anaeto et al (2008) asserted that perception is a function of structural and functional influences. Propounded by Berelson and Steiner (1964), the theory, otherwise called the four rings comprise selective perception, selective attention and selective retention. The theorist see perception as being selective when it can be driven by personal needs and other emotional factors which will make people to select a particular message(s) at the expense of the others. It emphasizes that the message has to be absorbed by the receiver's senses for processing.

Selective exposure talks about the message being seen by the receiver because it is in tandem with the position he/she already holds while discarding those that negate his/her attitude and belief.

Selective attention refers to the possibility that information receivers will listen to and think about the salient points of a particular message. Therefore, listening to and thinking about the message will depend on whether or not such message is in consonance with the person's attitude,

behaviour, and beliefs. Information that is not in agreement with person's belief or behavior is less listened to or thought of.

Selective retention is the ability of recipients of messages to remember what has been said over the time. Again, emotional considerations, and personal attitudes, needs and wants are of great concern to the processes of selective retention.

The perception theory is relevant to this study because audience who are exposed to television reports on COVID-19 would naturally perceive the reports differently, and would select the aspects of the reports to listen to and retain based on their conviction and beliefs.

## Methodology

Survey research was used for the study residents of Abeokuta South Local Government Area of Ogun State, Nigeria which constituted 250,295 (National Population Commission, 2006). There were 15 wards in Abeokuta South Local Government Area of Ogun State, Nigeria. The Taro Yamane Sample size calculation was used to arrive at 34,488.36528. In order to make it a whole figure, it was put at 345 as the sample size of which 23 copies of questionnaire were randomly distributed to each of the 15 wards which made up Abeokuta South Local Government. 296 Copies were filled and returned. These formed the basis for the quantitative data analysis of the study.

Below are tables used to analyze the questions which are relevant to this study. Out of the 345 copies of questionnaire administered through face to face method, only 296 copies were filled and returned. The 296

### Analysis of Demographic Features

**Table 1: Respondents' Sex**

Variables	No of Respondents	%
Male	94	32
Female	202	68
<b>Total</b>	<b>296</b>	<b>100</b>

**Field Survey, 2021**

The table above indicated that 202 (68%) of respondents were females while 94 (32%) were males.

**Table 2: Respondents' Age**

Variables	No of Respondents	%
18 years – 30 years	177	60
31 years – 40 years	72	24
41 years – 50 years	36	12
51 years – 60 years	08	03
61 years and above	03	01
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 202

Table 2 showed that 177 (60%) within age range of 18–30, 72 (24%), 31–40, while 36 (12%) 41–50, 8 (3%) 51–60 while 3 (1%) 61 and above.

**Table 3: Respondents' Religion**

Variables	No of Respondents	%
Christianity	201	68
Islam	95	32
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Table 3 above revealed that majority, 201 (68%) were Christians while the Muslims among them were 95 (32%).

**Table 4: Respondents' Qualifications**

Variables	No of Respondents	%
Pry. school leaving certificate	22	7
GCE/SSCE	-	-
Grade II teachers certificate	-	-
ND/NCE	184	62
HND/B.Sc	76	26
No education at all	-	-
M.A/M.Sc	14	5
PhD	-	-
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Table 4 showed that 184 (62%) possessed National Diploma/Nigeria Certificate in Education. Those who had HND/B.Sc were 76 (26%). Holders of Primary School Leaving Certificate were 22 (7%) while those had Masters' Degree were 14 (5%).

### Analysis of Research Questions

#### Table 5: Respondents' Television awareness of safety instructions on covid-19.

Variables	No of Respondents	%
Very much aware	179	60
Aware	102	35
Not aware	15	5
Not aware at all	-	-
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Table 5 showed that majority 179 (60%) were very much aware of the safety instructions on COVID-19 as being relayed on television. Those who were merely aware 102 (35%); those who were not aware, 15 (5%).

#### Table 6: Respondents' level of awareness of safety instructions on COVID-19.

Variables	No of Respondents	%
Low	69	24
Very low	202	68
High	06	02
Very high	19	06
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Rating the level of awareness of safety protocols and instructions on COVID-19 68.2% of respondents noted that it was high, 23.3% rated the awareness as very high, 6.4% said the rate of their awareness was low while 2% rated their awareness as very low. From the analysis, 91.5% of respondents were of the opinion that their level of awareness of safety protocols and instructions on COVID-19 was high.

**Table 7: Respondents' recall of CO VID -19 Safety instructions**

Variables	No of Respondents	%
Washing of hands with soap	195	12
Use of nose mask	199	25
Social distancing	81	10
Use of sanitizer	104	13
Avoid crowd	77	9
Stay indoor	12	2
Check-up test	07	1
Avoid handshakes	41	5
Avoid hugging	22	3
Cough or sneeze on elbow	50	6
Avoid touching nose or mouth	39	5
Avoid sex	12	2
Observe clean environment	08	1
Quarantine if symptoms occur	04	1
Don't visit anybody	11	1
Stay away from people who cough or sneeze	08	1
Don't use another person's nose mask	16	2
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Table 7 indicated that 195 (12%) recalled “hand washing with soap”; 199(25%) recalled the use of 'nose mask'; 81(10%) recalled 'social distancing' while 104 (13%) recalled use of

“Sanitizer”; avoidance of crowd “was recalled by 12 (2%) while “checkup test” was recalled by 7 (1%).

Other safety instructions recalled by respondents were “avoidance of handshake” 41 (5%), “avoidance of hugging 22 (3%), “cough and/or sneeze on elbow” 50 (6%), “avoidance of touching nose or mouth” 39 (5%), “avoidance of sex” 12 (2%) .

Other one's were “observance of clean environment” 8 (1%), “self-quarantine” 4(1%) “don't visit anybody” 11(1%), “stay away from people who cough or sneeze” 8 (1%) and “don't use another person's nose mask” 16 (2%).

**Table 8: Respondent' Compliance to type of COVID -19 Safety Instructions**

Variables	No of Respondents	%
Use of nose mask	158	53
Use of sanitizer	36	12
Hand washing	42	14
Avoidance of handshakes	42	14
Social distancing	02	1
Coughing/sneezing on elbow	06	2
Avoidance of crowded places	02	1
Check-up test	01	1
Avoidance of hugging	-	-
Avoidance of touching of nose/mouth	07	2
Avoidance of people who cough	-	-
<b>Total</b>	<b>296</b>	<b>100</b>

Table 8 indicated that 53% of respondents complied mostly with the “use of nose mask”. For 12%, it was the use of sanitizer, 14% was Hand washing, another 14% was avoidance of handshakes. Those who complied mostly with social distancing were 0.6%, coughing/sneezing on elbow, 2%, avoidance of crowded places, 0.6%, Check-up test, 0.3% while 2% complied mostly with “avoidance of touching nose/mouth”.

**Table 9: Respondents' level of Compliance with COVID-19 Safety Instructions.**

Variables	No of Respondents	%
Very high	155	52
High	89	30
Low	34	12
Very low	18	6
<b>Total</b>	<b>296</b>	<b>100</b>

### Field Survey, 2021

Table 9 showed that respondents' compliance with COVID-19 safety instructions was impressive. The compliance rate of 155(52%) was very High, 89 (30%) high, 18 (6%) low, while 34(12%) very low.

**Table 10: Respondents' reasons for low Compliance.**

Variables	No of Respondents	%
No thorough investigation by television reporters on COVID-19 deaths, treatments, discharges and new infectees	19	37
I do not believe in the existence of COVID-19 disease in Nigeria	13	25
Exaggeration of figures of COVID-19 deaths, treatments, discharges and new infectees	20	38
<b>Total</b>	<b>52</b>	<b>100</b>

### Field survey, 2021

Table 10 showed that 20 (38%) submitted that the reason for the low compliance on their side was that figures of deaths, treatments, discharges and new infectees on covid-19 were exaggerated, 19 (37%) said there was no thorough investigations by television reporters on COVID-19 deaths treatments, discharges and new infectees while 13

(25%) asserted that they did not believe covid-19 disease exists in Nigeria.

**Table 11: Respondents' real picture of COVID-19 as reported on television**

Variables	No of Respondents	%
I am convinced that COVID-19 doesn't exist, (NCDC) is just sponsoring television programmes on it	124	42
Television doesn't do thorough investigation that a health matter as serious as this required	172	58
<b>Total</b>	<b>296</b>	<b>100</b>

### Field survey, 2021

Table 11 reflected the pictures that respondents saw of COVID-19 as reported on television. 42% were convinced that the disease doesn't exist and that government resorted to publicity on television to convince them that it is actually real. 58% were of the opinion that television stations did not do thoroughly investigate COVID-19 issues before reporting them to the audience.

### Discussion and Findings

Findings of this study did not only disclose that majority of the respondents were television viewers, it also revealed that information on corona virus disease (COVID -19 was disseminated through television to the audience. Findings of this study also showed that while some respondents believed COVID-19 exists in Nigeria, a few others did not.

Findings of the study also indicated that majority were well aware of COVID -19 safety instructions through television reportage. This is depicted in table 5 where 60% respondents were very much aware, 35% merely aware while 15% were not aware. Findings also showed that respondents' level of awareness of safety instructions on COVID - 19 was high. This is also depicted in table 6 where 23.3% rated their level of awareness as very high, 6.4% said the rate of their awareness was low while 2% rated their awareness as very low. Table 10 showed respondents' real picture of COVID-19 as reported on television, 38%



asserted that figures of COVID-19 deaths, treatments, discharges and new infectees were being exaggerated, 37% were of the opinion that there was no thorough investigation by television reporters on COVID-19 deaths, treatments, discharges and new infectees.

## **Conclusions**

The television station that investigates news stories before they are used would expectedly be esteemed by the public. One of the ways any television station could attract viewership is by reporting information that is thoroughly investigated. Because of the power of selectivity, people can decide to tune-off the television station that is in the habit of reporting uninvestigated stories. Therefore, television reporters should not only collect the information they need to tell a story, they should also endeavour to verify such information before it is used. The more truthful and intelligent account the reporter can give, the better it is for the audience to get an accurate account of an issue and greater is the credibility enjoyed by the media organization.

## **Recommendations**

Based on the findings of this study, the following recommendations are made

- \* Television reporters should at all times verify information they get before reporting it to the audience.
- \* Government at all levels should be transparent in their release of information to radio and television stations for reportage.
- \* Television stations should always encourage their reporters to carry out thorough investigation of news stories by providing the funds needed for such investigations.
- \* In order to ensure accuracy, television reporters must check and double-check all the information they collect for a news story before reporting it to the audience.

## References

- Abbas, M., Sheikh, S., Mohammed, S. & Ashfaq, M. (2003). Role of print media in the dissemination of recommended sugarcane production technologies in Central Punjab. In Ani, A.O.,
- Umunakwe, P.C, Ejiogu-Okereke, E.N, Nwakwasi, R.N & Aja, A.O. (2015). *Journal of Agriculture and Veterinary Sciences*, 1(7), 4147.
- Alao, D. & Olawunmi, B. (2014). *News and beat reporting*. Lagos: JAMIRO PRESS LINK.
- Anaeto, S.G., Onabajo, O.S. & Osifeso, J.B. (2008). *Models and theories of communication*. Ibadan: African Renaissance Booksincorporated.
- Campbell, E.J.M; Scadding, J.J.G. & Roberts, R.S. (1979). The concept of disease. *British Medical Journal* 2 (6193): 75762. Doi: 10.1136/bmj. 2.6193757.
- Cennimo, D.J. (2021). Corona virus disease 2019. *Medscape Medical News*.
- Familusi, E.B. & Owoeye, P.O. (2014). An assessment of the use of radio and other means of information dissemination by the residents of Ado Ekiti, Ekiti State, Nigeria. *Library Philosophy and Practice (e-journal)*. Paper 1088. [Http://diitalcommon=ns. Unl.edu /libphilprac/1088](http://diitalcommon=ns.Unl.edu /libphilprac/1088).
- Fauci, A.S., Lane, H.C & Redfield, R.R. (2020). COVID-19- navigating the uncharted. *New England Journal of Medicine*, 382: 1268-9.
- Harwood, J. (1999). Age identification, social identity, gratifications, and television viewing. *Journal of Broadcasting & Electronic Media*, 43, 123-138.

- Kalu, B. (2020). COVID 19 in Nigeria: a disease of hunger. *Lancet Respir Med.* 2020; 8:55-67. Doi:10.1016/s 22132600 (20) 302204. (accessed 25 April, 2021).
- Mc Mahon, M.; Creatore, M.I.; Thompson, E. & Lay, A.M. (2021). Pandemics: past, present and future considerations. *International Journal of Health Services.*
- McQuail, D. (2010). *McQuail's Mass communication theory.* (6<sup>th</sup> Edition). London: Sage Publications.
- National Population Commission. [www. national population.gov.ng](http://www.nationalpopulation.gov.ng) (accessed 23 April, 2021).
- Nazari, M. R. & Hassan, M. S. (2011). The role of television in the enhancement of farmers' agricultural knowledge. *African Journal of Agricultural Research*, 6(4).
- NCDC Corona virus COVID-19 microsite. [https:// COVID 19.ncdc.gov.ng/](https://COVID19.ncdc.gov.ng/) (accessed 26 April, 2021).
- Ohia, C., Bakarey, A.S. & Ahmad, T. (2020). COVID-19 and Nigeria: Putting the realities in context. *International Journal of Infectious Diseases.* Vol.95, 279-281.
- Oloribe, O.O; Oskouipour, P.; Nwanyanwu, O. & Taylor Robinson, S.D. (2021). The COVID-19 era: the view from Nigeria. *An International Journal of Medicine*, Vol.114 (1), 13-15, <https://doi.org/10.1093/ajmed/hcaa297> (accessed 25 April, 2021).
- Oloyede, B. (2008). *Free press and society Dismantling the culture of silence.* Ibadan: Stirling Horden Publishers Ltd.
- Oso, L. (2003) (Eds.). Community media-voices of the oppressed. Abeokuta: Jedidah Publishers.
- Oyetoro, J.O., Adewunmi, I.I. & Sotola, A.E. (2017),

- Accessibility of cassava processors to mass media channels' information on cassava processing innovations in Saki agricultural zone of Oyo State, Nigeria. *International Journal of Research in Applied Natural and Social Sciences*, 5(4). 55-62.
- Renckstorf, K. (1996). Media use as social action: A theoretical perspective. In K. Renckstorf; D. McQuail, & N. Jankowski, (Eds.): *Media use as social action*. London: Libbey.
- Ruggiero, T.E. (2000). Uses and gratification theory in the 21<sup>st</sup> century. *Mass communication and Society Journal*, 3(1), 3-37.
- Shereen, M.A. & Siddique, R. (2020). COVID-19 Infection: Emergence, Transmission, and Characteristics of human coronaviruses. *Journal of Advanced Research*, Vol.24, 91-98.
- WHO. Corona virus disease (COVID-19) pandemic. [https:// www.who.int/emergencies/diseases/novelcorona virus2019](https://www.who.int/emergencies/diseases/novelcorona-virus2019). (accessed 26 April, 2021).
- World Health Organization (2020). Rational use of personal protective equipment for corona virus disease 2019 (COVID-19), WHO, 2020, 17. [https://apps.who.int/iris/bitstream/handle/10665/331215/WHO2019nCoVIPCPE\\_IISE2020\\_Ieng.pdf](https://apps.who.int/iris/bitstream/handle/10665/331215/WHO2019nCoVIPCPE_IISE2020_Ieng.pdf). (accessed 26 April, 2021).
- Wu, Yi-Chi; Chen, Ching-Sung & Chan, Yu-Jiun (2020). The outbreak of COVID-19: An overview. *Journal of the Chinese Medical Association*, Vol.83 (3) 217-220. doi:1097 / JCMA. 0000000000 000270.
- Yazdi, A.k.; Li, Fengling & Devkota (2021). A high throughput radioactivitybased assay for screening SARSCoV2 nsp 10nsp 16 complex. *SAGE Journals*. [https:// doi.org./ 10.1177/24725552211008863](https://doi.org/10.1177/24725552211008863). (accessed 26 April, 2021).