



ROLE OF SOCIAL MARKETING IN AVERTING HARMFUL TRADITIONAL PRACTICES CONCERNING COVID-19 PANDEMIC

Agnes Edem Bassey (Ph.D.)¹, Ezekiel Maurice (Ph.D.)², Ben Odigbo (Ph.D.)³

Abdullahi Samuel⁴, Goodluck Ndubuisi Iwuchukwu⁵ and Ene Faith Agbo⁶

¹Department of Marketing, Faculty of Management Sciences, University of Calabar, Calabar, Nigeria.

Email: agnesbassey@unical.edu.ng; agnesbassey15@gmail.com; Tel.: +2348052820967

²Department of Marketing, Faculty of Management Sciences, University of Calabar, Calabar, Nigeria.

Email: oluebube2784@yahoo.com

³Department of Marketing, Faculty of Management Sciences, University of Calabar, Calabar, Nigeria.

Email: bodigbo@yahoo.com

⁴Department of Business Management, Faculty of Management Sciences, University of Calabar, Calabar, Nigeria.

Email: b2sammy@yahoo.com

⁵Department of Marketing, Faculty of Management Sciences, University of Calabar, Calabar, Nigeria.

Email: goodluckiwuchukwu@yahoo.com

⁶Department of Mass Communication, University of Calabar, Calabar.

Email: faithagbo@unical.edu.ng

Cite this article:

Agnes E. B., Ezekiel M., Ben O., Abdullahi S., Goodluck N. I., Ene F. A. (2024), Role of Social Marketing in Averting Harmful Traditional Practices Concerning Covid-19 Pandemic. African Journal of Social Sciences and Humanities Research 7(2), 110-120. DOI: 10.52589/AJSSHR-XRNEYCVA

Manuscript History

Received: 25 Jan 2024

Accepted: 12 Mar 2024

Published: 3 Apr 2024

Copyright © 2024 The Author(s). This is an Open Access article distributed under the terms of Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International (CC BY-NC-ND 4.0), which permits anyone to share, use, reproduce and redistribute in any medium, provided the original author and source are credited.

ABSTRACT: *The study investigates using social marketing tools to avert harmful traditional practices concerning the COVID-19 pandemic in Cross River State, Nigeria. Some of these practices were religiosity, where the majority of people prefer going to pray in church instead of taking COVID-19 preventive measures, and food taboos, where certain foods, such as excess salt intake, were also believed to be the best. 367 respondents were sampled from a population of 3,798. After distributing the questionnaire, 329 were found usable, and analysis was done using simple linear regression. The results showed that combining social marketing tools was insignificant in averting harmful religious practices concerning COVID-19. Instead, a personalized communication approach, which is an aspect of social marketing (promotion) should be adopted to sensitize religious leaders to correct false impressions about religiosity and food aiming to improve health, the environment, and society at large.*

KEYWORDS: Social marketing, harmful religious practices, and COVID-19



Background of the study

Social marketing became popular in 1970 when Kotler and Zaltman conceived different ideas of utilising the traditional marketing variables that were used to sell goods and services to sell ideas and behaviours (Weinreich, 2013). The concept of social marketing is very fundamental to every society. In Nigeria, particularly in recent times, social marketing has taken various steps like talking to people one-on-one through health magazines, the internet, and social media platforms (Behjat, 2014) about exhibiting positive behaviour and creating an enabling health environment to discourage harmful practices and prevent COVID-19. Lefebvre (2011), as cited in Weinreich (2013), sees social marketing as the application of marketing techniques to improve social change for the betterment of public health and society at large. In other words, it is the adoption of traditional marketing tools for creating and communicating values that influences the behavioural perception of an individual and society positively. Kotler and Lee (2011) believe that a combination of the 4Ps (product, price, place, and promotion) is critical to solving social marketing problems, unlike commercial marketing, which can be employed differently. In addition, Lefebvre (2013) observes that in all settings, social marketing offerings must be crafted around the 4Ps.

The COVID-19 pandemic is a global issue that started as a child's play in the year 2019 and is now hurting the lives of many and causing heartaches. Omaka-Amari *et al.* (2020) assert that the novel coronavirus has become an important health issue ravaging the entire world with numerous health and economic implications. COVID-19 was first discovered in the city of Wuhan in China City, and since then, the World Health Organisation has declared the outbreak a public health emergency of international concern on January 30 2020 and a pandemic on March 11 2020 (World Health Organisation, 2020). The most common symptoms include fever, cough, and so on. Less common symptoms are sore throats, headaches, and so on; serious symptoms are chest pain, difficulty breathing, and so on (World Health Organisation, 2021). This caused many individuals and organisations, both locally and internationally, to put measures in place to prevent the widespread spread of this deadly virus. For example, the Australian Association of Social Workers, along with health professionals, has been on the frontlines of the pandemic response, connecting clients with a wide range of health and social supports and services to address the devastating impacts of COVID-19. In Nigeria, for example, the government was triggered to put in place extreme actions to ensure the eradication of COVID-19 with the immediate activation of the country's National Emergency Operation Centre to level 3 by the multi-sectoral coronavirus preparedness group led by the Nigeria Center for Disease Control (Omaka-Amari *et al.*, 2020). In Cross River State, a lot of measures have been put in place, such as constant information via various media and regular practice (comprising always and most times), the use of face masks, face shields, gloves, hand hygiene, and so on (Omoronyia, *et al.*, 2020).

In today's society, and one with its ever-expanding diversity, it is of critical importance that social marketers develop more than technical skills to handle behavioural change. Davidhizar (2004), as cited in Lowdermilk and Perry (2007), points out that to ensure the eradication of harmful traditional practices, social agents should acclimate themselves to the core culture of the target audience. Therefore, this study was directed at examining the extent to which social marketing variables such as product, place, price and promotion can be used to prevent COVID-19 in Cross River State, Nigeria.



Since the inception of the COVID-19 pandemic in the year 2019, a lot of families have been affected in diverse ways, such as death, poverty as a result of total lockdown, and several health issues. Globally, World Health Organisation data showed that there have been 231,703,120 confirmed cases of COVID-19, including 4,746,620 deaths (World Health Organisation, 2021). Vaccine doses have been given, yet the disease is still in progress. John Hopkins University Centre for Systems Science and Engineering (2021) COVID-19 data repository showed that there are 204,000 cases and 2,677 deaths of COVID-19 in Nigeria, and 576 cases and 23 deaths in Cross River State. Despite a series of measures put in place by the government, such as vaccination, distribution of hand sanitiser, nose masks, disinfectants, and so on, there are still incidences of COVID-19, and this is because a lot of people have been reluctant to adhere to the protocols put in place by the government due to one form of traditional practice, such as the level of spirituality and traditional belief system. And this will continually thwart the efforts of the government if necessary actions are not taken to correct these behaviours. It is in the context of these odd developments that this research seeks to know: how can social marketing be used to correct these harmful practices in Cross River State?

Objectives of the study

The broad objective of the study was to examine the role of social marketing in averting harmful traditional practices concerning the COVID-19 pandemic in Cross River State, Nigeria.

The specific objective was to:

Determine the effect of social marketing in averting harmful traditional practices concerning the COVID-19 pandemic in Cross River State, Nigeria. Research questions

The following research questions guided the study:

To what extent is social marketing effective in averting harmful traditional practices concerning to COVID-19 pandemic in Cross River State Nigeria?

Research Hypothesis

HO₁: Social marketing is not significantly effective in averting harmful traditional practices concerning the COVID-19 pandemic in Cross River State Nigeria.

Scope of the study

The study embraced a critical appraisal of Social marketing in averting harmful traditional practices concerning COVID-19 pandemic in Cross River State Nigeria. Three Local Government Areas were selected from the Southern Senatorial districts in Cross River State. They include Calabar South, Calabar Municipal, and Akpabuyo respectively. Respondents were church members of selected churches and both the modern and traditional health workers between January and September 2021.



LITERATURE/ THEORETICAL UNDERPINNING

The study was guided by the Health Belief model propounded by Irwin M. Rosenstock, Godfrey M. Hochbaum, S. Stephen Kegel, and Howard Leventhal at the U.S. Public Health Service in 1950. This theory explains the reasons behind people's abstinence from preventive medicines, and the target audience's perception of developing a particular health condition.

A major drawback of this theory is the fact that it tries to envisage general public health-outcome by differentiating and giving reasons for individual beliefs and attitudes. Nevertheless, it does not take into consideration other externalities that affect health activities. It describes concepts that talk about behavioural change without giving an indebt explanation of how they are expected to relate.

The theory is significant to the study because it defines health behaviour by exposing and providing people with information that promotes awareness and reminders. It is a step-by-step process employed to influence positive behaviour especially to people who are prone or expose to any harmful health outcome.

Concept of social marketing

Successful social marketing programs require proficient and well-talented marketing professionals. It is not enough for one to say " I am a social marketer". Social marketing creates a platform for the explanation of unhealthy behaviour and the reasons to quit such behaviour. Lefebvre (2011) observes that social marketing is seen as a welcoming idea if it result in changes in organisations' operational procedures, approaches to policy development, and allocation of resources for improving public health. In other words, he defined social marketing as the application of marketing principles and techniques to foster social change and improvement.

Three approaches to social marketing in changing any form of behaviour according to Douglas-Whited (2013) include: The Upstream Approach, mid-stream, and downstream approach.

The upstream approach uses guidelines or regulations to influence societal behaviour change. Kotler (2011) notes that the upstream approach refers to technological innovations, scientific discoveries, improved infrastructures, economic pressures, especially changes in the corporate business practice.

The mid-stream approach is a way in which family members, church leaders, friends, neighbors, and so on tries to influence others in the target community to pattern their lifestyles. Douglas-White (2013), explains that the mid-stream approach attempts to reach individuals who can influence others in the target community, including family members, co-workers, or friends.

The downstream approach addresses barriers and benefits on the individual level (Douglas-White, 2013). Downstream social marketers focus on decreasing individual risky behaviour and increasing timely testing, for example, taking covid-19 vaccine will reduce the risk of being affected by the virus. Successful social marketing must be able to influence individual desire lifestyle. Thus, the adoption of the downstream approach will greatly impact and influence individual behavioural change towards harmful religious practices.



Social marketing mix

Cheng, Kotler, and Lee (2009) believed that the four (4) social marketing Ps cannot be developed in isolation, but that the synergy of the 4Ps is what truly makes a successful social marketing campaign possible. Traditionally, the social marketing mix consists of; Product, Price, Place and Promotion. Although, there is the extended mix which are; Policy, Partnership, and Purse strings. But this study focused more on the traditional 4Ps.

Product

To a social marketer, a behaviour change can be achieved through series of facilitating products including physical goods or services consisting of ideas, practices, and in some cases, tangible objects, or a combination of all the three (Weinreich 2007).

Price

Social marketing price is not all about monetary value but it goes beyond that. It is the sum of all the different costs that a person puts up to adopt a new behaviour. Dann and Dann (2011) define price to consist of more than the financial elements involved in the purchase and use of products in social marketing. They include;

Psychic costs: it is the mental cost of having to change behaviour. **Time costs:** the amount of time required to undertake behaviour. **Energy costs:** is the cost the target audience associates with adopting the new behaviour (Kotler & Lee, 2011). In other words, social marketing cost here has to do with the individual monetary and non-monetary involvement.

Place

The role of place in social marketing is very substantial. A place can be likened to a place where the target audience heard about a campaign message, where they are carrying out a negative behaviour or a place where their negative behaviour can be changed. The absence of social marketing place can make or mar a campaign message. This is because social marketing activities cannot take place in a space or an isolation. Where the main social product is an idea, the movement of that idea to the market has to be examined in the marketing mix (Dann&Dann, 2011). The social marketing place should be more convenient, pleasant, and conducive as possible for the target audience to easily perform the behaviour.

Promotion

Promotion refers to those communication messages, materials, channels, and activities that are effectively directed towards the target audience as a way of promoting the benefit for the behavioural change (Turning Point, (2005). A campaign is considered social marketing and not social advertising when the program adopts and focused on the traditional mix of social marketing in addition to other strategic marketing tools Dann & Dann (2011). Social marketing promotional messages are based and inspired by what you want your target audience to do. That is, pointing out the positive and negative aspects of a message (Kotler et al, 2011).

In other words, Social marketing promotion will strife better in achieving desired behavioural change if it is carried out through word-of-mouth using a medium such as town criers, church Leaders, town hall meetings, and so on (Dan and Dan, 2011).



Differences between social and commercial marketing

Essentially, social marketing focuses on doing well for the benefit of the individual and society; commercial's marketing emphasis is money-based.

A social marketing program is sponsored by taxes and donations; commercial marketing is being sponsored by financial outlay/ investment. A social marketing campaign is geared towards controversial behaviour; commercial marketing on the other hand is aimed at tangible and intangible products. Social marketing performance is difficult to measure; commercial marketing outcome is that of profit. The result of social marketing campaign is to influence the individual for the benefit of society; while commercial marketing influences the public for the benefit of the marketer.

Social marketing Intervention concerning COVID-19 pandemic

In the process of trying to adjust individual or group behaviour in regards to COVID-19 prevention, some basic requirements must be put into consideration as suggested by (UNICEF, 2020); the use of mass media must be broadened. This will aid in providing timely information to communities about the latest happenings on covid 19 related cases; Online opportunities should be created where individuals will share their experiences and concerns, communicate with their peers, and also access sources of support; Contemporary health organisations should partner with local health practitioners especially people with disabilities to give them first-hand information about COVID-19 prevention; Establish safe, trusted, and confidential channels for children, including adolescents, to report violence, exploitation and abuse as it relates to the COVID-19 pandemic.

Lee (2020) further states the following components of a strategic social marketing campaign and principles for success: Priority Audience Segments; Desired behaviours; Audience Insights; Barriers, Desired Benefits and; Marketing Intervention Tools to Help Citizen Behaviour Change: Product Strategies Price Strategies Place Strategies and Promotional Strategies.

Table 1: Social Marketing Mix COVID-19 Intervention Strategies

<p><i>Product</i></p> <p>Facemask Face shield Hand sanitizer Water Soap Vaccines Test kits Services by social change agents</p>	<p><i>Place</i></p> <p>Reducing the number of people in crowded areas Sitting space of not less than 6 meter Keeping hand sanitizer in all public places Health Centers Church location</p>
<p><i>Price</i></p> <p>Fines for bridging covid-19 protocols Money spent by the government for a changed behaviour Time spent to change a harmful behaviour</p>	<p><i>Promotion</i></p> <p>Poster/Radio/TV Programmes Press conference Zoom Billboard Radio/TV programmes Church programs</p>



Traditional Practices in the COVID-19 Pandemic Era

Despite series of campaigns programs, it is observed that many people are still involved in one form of traditional practices or the other. Traditional practices are explained in the (Tide's news online, 2015) as generally and culturally relative and some of which may have a positive or negative effect on the society. In Cross River State Nigeria for instance, many people still resort to some harmful practices such as religious beliefs, and food observance such excess salt intake, herbal concoction and so on which has resulted in giving rise to COVID-19 cases. This is caused by lack of education, level of spirituality, ignorance, family pressure among others, which have made a lot of people passively accept the conditions of life that are meted to them in the name of culture and traditions(Ugal et al., 2012).

Harmful religious practices concerning COVID-19

Religious practices are not scriptural and it stands as a hindrance to the actualization of the millennium goal MDG 5 which improves health in Nigeria, (Adeusi, Adeleke & Ebere, 2014). To facilitate the pursuit of the goal, they observed that religious practices in designated societies that do not keep to health protocols must be exposed to more awareness programs. Pargament, (1997) as cited in Rumun, (2014), defines religion broadly as "the search for significance in ways related to the sacred, encompassing both the personal and social, traditional and non-traditional forms. Harmful religious practices could be identified as superstitious beliefs, level of spirituality and so on that poses threat to one's health. It is also seen as the elements of culture and religion entrenched in social and mental factors that determine the extent to which people engage in health behaviours. This could either be harmful or beneficial for them to attain their state of being (Adeusi et al, 2014). Generally, it means that the elements of culture and religion are implicated in the factors that determine the extent to which individuals will engage in certain health behaviours. Kwarteng (2016) posits that in Ghana many pregnant women bath and drink "*Holy water*" for protection against the evil spirit, believing that the use of medication or modern medical services is a sign of weakness of faith, in Cross River State, many Christians wear religious apron which they refer to as protection against covid-19. Recent observation shows that some groups within the church's position on not using modern medicines, health care services, and contraceptives are mostly rejected since it is believed God wants mankind to multiply and replenish the world (IRIN, 2009) as cited in (Kwarteng, 2016). This may mean that such groups are less likely to patronize modern healthcare services primarily because of their religious beliefs and teachings. There is what is known as prayer houses where pregnant women go for antenatal care. The majority of these pregnant women have made up their minds to accept anything that comes their way by visiting various prayer houses as God will and purpose at the detriment of losing their lives, previous commissioner for primary health care Doctor Beta Edu in an interview with Hit FM Crew on Radio in June 2016 explain that the Department of Primary Health care in the State would continue to carry out advocacy programs to sensitize residents against these odd practices to curb Maternal Mortality Rate.



METHODOLOGY

The exploratory and cross-sectional survey method was adopted for the study. This reason is that, enables the researcher to explore harmful religious practices in Cross River State. The study was carried out in Akpabuyo (848), Calabar municipal (720), and Calabar south (2,230) local government areas in cross river state. The population of the study comprised church members of notable churches like the redeemed Christian church of God, the Chosen church, Mountain of fire, modern and traditional health workers of selected centers between January and September 2021, amounting to 3798. Thereafter, Taro Yamane's formula was applied to determine the sample, which was 362, but at the end, 329 was correctly filled and returned. The main instrument for data collection was the five-point Likert scale (1 = SD, 2 = D, 3 = UND, 4 = A, and 5 = SA) questionnaire type. It comprised two sections: section a, which consists of statements relating to the objectives, and section b, which consists of respondents' personal information and descriptive statistics. The Multiple linear regression analytical tool was then used to test the hypothesis.

RESULTS/ FINDINGS

Table 2 Model Summary

Model	R	R Square	Adjusted R Square	Std. error of the Estimate
1	.163 ^a	.037	.015	3.175

a. Predictors: (Constant), Product, Place, Price, Promotion

Table 3 Anova

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	89.624	4	22.406	2.223	.066 ^b
	Residual	3265.938	324	10.080		
	Total	3355.562	328			

a. Dependent Variable: Harmful Religious Practices (COVID-19 prevention)

a. Predictors: (Constant), Product, Place, Price, Promotion

Table 4 Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	9.460	.837		11.296	.000
	Product	.162	.100	.113	1.623	.106
	Place	-.096	.064	-.094	-1.504	.134
	Price	.002	.098	.001	.015	.988
	Promotion	.136	.083	.107	1.629	.104

a. Dependent Variable: Harmful Religious Practices



Table 2, 3, and 4 shows result of Multiple Linear Regression analysis of the composite effect of social marketing variables and harmful religious practices on COVID-19 prevention which indicates that there is no significant joint effect of social marketing product, place, price, and promotion on harmful religious practices where $F= 2.223$, $P > 0.05$, this is due to extraneous factors such as, one's faith, level of spirituality, religion and so on. Table 3 and 4 further explain the F statistics indicating a weak model prediction strength ($R^2 = .037$, $p > 0.05$). Table 4 shows that, there is no significant individual relationship between the roles of social marketing in averting harmful traditional practices concerning COVID-19 pandemic in Cross River State, Nigeria. Where ($b_1 = 0.162$, $b_2 = -.096$, $b_3 = .002$, $b_4 = .136$). The Beta values of the social marketing variables were all very low .113(product), $-.094$ (place), $.001$ (price), $.107$ (promotion) indicating their inability in explaining the dependent variable (harmful religious practices) and confirming its insignificance.

DISCUSSION

Hypothesis reveals that the level of individual spirituality of faith and religion to a large extent have a part to play in whether social marketing variables are effective in averting COVID-19. Persuading people to use a face mask, hand sanitizer, or visit health care centers for vaccines or any covid-19 related case was an issue at the time of the study. And the reason for this is basically as a result of their level of spirituality and belief. For example, Adeusi et al, (2014), gathered that "some Christians believe that labor pain can be viewed as part of God's plan for mankind having disobeyed God's instructions after creation; hence, they refuse pain relief medications during pregnancy, which invariably hinder effective health care services and delivery, and these are what non-Christians would refer to as the way God wants it to be". The reason why the significance level for each of the social marketing variables is above 0.05 is because of respondents' level of faith and religion, and church doctrine. This view is supported by (Rumun, 2014) who opine that "Christian Science teaches a reliance on God for healing, rather than on medicine or surgery. She further states that; a Christian's faith and religious practice will be influenced by the tradition of the church to which they belong as well as their relationship with God. For example, a Roman catholic receive Holy communion and sacrament of the sick, Jehovah's Witnesses have religious views that taking blood into one's body is morally wrong and is therefore prohibited, deeper life does not believe in contraception or family planning unless the woman's health is at risk" a female Muslim cannot be examined medically without her husband or female counterpart. Hence, a Social marketing campaign should be carried out to sensitize Christian leaders to correct these misconceptions and influence people on how to reduce visitation of prayer houses there is a need for them to visit health centers. The study also found out that that to be able to correct harmful religious practices the social marketing variables should not be held constant, but individual belief and religion should come first such as level of faith, church doctrine, and so on.

IMPLICATION TO RESEARCH AND PRACTICE

Based on the above findings the study recommended that a social marketing campaign should seek out personalized ways of sensitizing the leaders of various religious groups to be able to



change and correct the false impression people have on spirituality, religion, and doctrines which may be harmful to their health and the society at large.

CONCLUSION

Our health is a global priority and harmful traditional practice like our belief system in our immediate community has given rise to covid-19 cases. Therefore, the study investigated how a social marketing variable is significant in enlightening people on the side effect of this practice to ameliorate the pandemic and also prevent injuries.

FUTURE RESEARCH

Future studies should be carried out after series of social marketing sensitization programmes has been directed at various religious and traditional leaders stressing on the dangers of practicing harmful traditional practices of whatsoever kind. Again, studies should also be carried out with emphasis on the extended marketing mix that is, policy, partnership, and purse strings.

REFERENCES

- Adeusi, S. O., Adekeye, O. A. & Ebere, L. O. (2014). Predictors of maternal health as perceived by pregnant women. *Journal of Education and Practice*. 5(18), 1735-2222
- Behjat, A. (2014). *5 steps to a successful and effective social marketing campaign*. <http://welink.com/blog>.
- Chenge, H., Kotler, P., & Lee, N.R (2009). *Social marketing for public health: An introduction*. Jones and Bartlette publishers.
- Dann, S. & Dann, S. (2011). Insight and overview of social marketing. Queensland government. *Database of Systematic Review*. <https://doi.org/10.1002/1465185>
- Douglas-Whited, M. A. (2013). *Social Marketing and the 4 P's*. Community Women's Health Education Center. <https://womenshealth.tulane.edu>
- JHU CSSE (2021). *COVID-19 Data Repository by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University*. <https://github.com/CSSEGISandData/COVID-19>
- Kotler, P. & Lee, N. (2011). *Social marketing: Influencing behaviours for good* (4th ed.). Thousand Oaks, CA: Sage Publications.
- Kotler, P. & Lee, R.N. (2012). *Social marketing: influencing behaviours for good* (4th ed.). http://www.socialmarketingservice.com/site/assets/files/1010/socmkt_primer.pf
- Kwarteng, G. (2012). *Religious beliefs, spirituality, and health: Implications for maternal and child mortality in Ghana*. https://www.academia.edu/9404765/Religious_beliefs_Spirituality_and_Health_Implications_for_Maternal_and_Child_mortality_in_Ghana.
- Lee, N., (2020). Reducing the spread of COVID-19: A social marketing perspective. *Social Marketing Quarterly*. 26(3) 259-265.
- Lefebvre, C.R., (2013). *Social marketing and social change*. John Wiley Sons, Inc.



- Lefebvre, R. C. (2011). An integrative model for social marketing. *Journal of Social Marketing*, 1(1),54-72.
- Lowdermilk, L. D. & Perry, E. S. (2007). *Maternity and women's health*. Mosby Inc. an affiliate of Elsevier.
- Omaka-Amari, L.S., Aleke, C.O., Obande-Ogbuinya, N.E., Ngwakwe, p.c., Nwankwo, o., & Afoke, E.N., (2020). Coronavirus (COVID-19) Pandemic in Nigeria: Preventive and Control Challenges within the First Two Months of Outbreak. *African Journal of Reproductive Health*. 24(2), 87.
- Omoronyia, O., Ekpenyong, N., Ukweh, I., Mpama, E., (2020). Knowledge and practice of COVID-19 prevention among community health workers in rural Cross River State, Nigeria: implications for disease control in Africa. *Pan African medical journal*. 37(50).
- Rumun, A.J (2014). Influence of religious beliefs on healthcare practice. *International Journal of Education and Research*, 2, 4.
- Turner, L.W, Hunt, S.B, Dibrezzo, R.& Jones, C. (2004). Design and implementation of an osteoporosis prevention program using health belief model, *American Journal of Health Studies*, 19(2), 115-121.
- Turning Point (2005). *Social marketing primer*. The Robert Wood Johnson Foundation.
- Ugal, D.B., Ushie, B.A, Ushie, M. & Ingwu, J. (2012). Utilization of facilities and maternal birth outcome among urban dwellers of Obudu and Ogoja Local government of Cross River State, Nigeria. *Afro Asian Journal of Social Sciences*, 3 (33), 2229-5313.
- UNICEF, (2020). Unicef's social protection response to covid-19. <https://www.unicef.org/media/84181/file/UNICEF%27s-social-protection-response-to-COVID-19-2020.pdf>
- Weinreich, K.N (2013). *Weinreich communications: change for good*. <http://www.social-marketing.com/whatis.html>
- Weinreich, N.K (2007). *Social marketing at your fingertips: A quick guide to changing the world*. <http://www.social-marketing.com/whatis.html>
- WHO, (2021). *World health organisation coronavirus dash board*. <https://covid19.who.int/>
- Wikipedia, (2016). *Social exchange theory*. Retrieved from: https://en.wikipedia.org/wiki/Social_exchange_theory