The main thrust of this study was to explore the efficacy of films in instigating behavioral change in campaigns against COVID-19 in Nigeria. Specifically, the study sought to establish the critical role that films play in promoting the key messages of COVID-19 health campaigns and to explicate the approach in which the films used in anti-COVID-19 health campaigns contribute to behavioral change among the population with a view to reducing further incidence of COVID-19. Cultivation Theory and Health Belief Model provided the theoretical underpinning to this study. To achieve the set objectives, the study adopted a qualitative research design where thematic (content) analysis and critical discourse analysis were deployed to review and discuss the prevalent COVID-19 preventive and containment themes, appeals, and strategies embedded in the films used in anti-COVID-19 campaigns. The study focused on three categories of films: anti-COVID-19 documentary films; short feature films; and animated films for kids endorsed by the World Health Organization (WHO), Nigeria Centre for Disease Control (NCDC), and the Nigeria Ministry of Health under the aegis of the Presidential Task Force (PTF) on COVID-19. Each of these categories was reviewed, encompassing a total of nine films —three from each category. A thematic analytical review of some of the films deployed in the COVID-19 health campaigns revealed that the films were loaded with health-related themes, appeals, and strategies that, when considered holistically, aimed at influencing or changing people’s behavior with a view to containing and reducing the risk for further incidence of the disease.

**Keywords:** films, health campaigns, COVID-19, film-containment spiral, reduction, incidence.
Since the emergence of coronavirus disease (COVID-19) in China and its subsequent spread to other regions of the world, the need to communicate its nature, mode of transmission, symptoms, control, and containment measures has been on the increase. The perceived need to communicate COVID-19 and its embodiment is informed by the responsibility and trust bestowed on the mass media to survey the society, identify, and correlate emerging health issues. Through the surveillance and correlation functions of the mass media in this regard, awareness, through the provision of requisite information, is created so that adequate knowledge about the disease can be built. The quality and quantity of information needed to create sufficient awareness, consequently, affect the quality and quantity of knowledge built on and acquired about the disease. This, in turn, affects the nature of reactionary behavior(s) expected of the public at the wake of the dreaded COVID-19.

Considering the need to propagate the health messages shrouding COVID-19 in order to inform and forewarn the public about its ravaging effects so as to influence or coerce desired health behavioral actions as envisaged by concerned health organizations, the screen media are solely depended upon. The dependency on the screen media is not merely for the purpose of ‘providing information’ but is deeply concerned with the need to explore and exploit the audio-visual, mimetic, and animated dimensions of the mediated health messages to educate the mind and change the perception of the public about the disease in all its ramifications. The intent of such mediated-education is to create public exposure on the nitty-gritty of the disease using sound bites, voice overs, narrations, moving images, actualities, pictograms, fictional and non-fictional characters, animated infographics, and other cinematographic elements in order to create figment of imagination or reality about the disease.

By exploring these options, the motive is to communicate the disease beyond mere words but by livable experiences impressed on the minds of the audience by the relay of descriptive images backed up by explanatory voices. As the audience see and hear from those concerned, either from health experts or from victims of the disease or merely see the portrayal of index cases of the disease, an illusion of reality is created while inundating the public with safety and precautionary guidelines to make an informed personal decisions about safeguarding their state of health (whether in private or in public space). Thus, dependency on the screen media is to teach the public, through audio-visual presentation of ideas, the different ways of conducting themselves in order to bring about the health-related changes that are needed to improve the society (McPhail, 2009).

The critical roles of the screen media in enabling the public gain sufficient knowledge about COVID-19 are overtly stressed and complicated owing to the emergence of composite variants of coronavirus disease and the uncertainty as to which screen media tools, resources or apparati can tackle the complexities shrouding the health issue headlong. As this calls for strict health protocols in diagnostics among health experts, greater concerns are on how health promoters can effectively promote the disease without leading the public astray or arousing unnecessary curiosity, anxiety or fear that could lead to a state of ‘information-quagmire’. Here underlie the essence for creative media selection given the
preponderance of audience segmentation, media divide, information gaps, demographic, and psychographic disparities that persist in the society.

The foregoing calls for a robust screen media that have the profundity to bridge the communication gaps occasioned by the complexities inherent in audience’s demographic, psychographic, linguistic, and psychosocial variables. To be able to do the foregoing, the screen media one should have in mind should be universal in approach by seeking to blast the barriers to ignorance, uncertainties, and inadequacies that shroud and interfere with how health-related media messages about COVID-19 are assessed and evaluated by the public.

The question this concern raises is what screen medium can do the magic? What emphatic messages, and message strategy would the screen medium of choice amplify? How inclusive can the medium reach wide spectrum or segment of the public? What uniqueness will the screen medium bring to bear in its message delivery?

In addressing these critical concerns, the communication, behavioral change, and entertainment-education potentials of films as potent screen media for health promotion are instrumental. Although there exist other media of mass communication that can be used effectively to deliver health messages in the society, filmmakers have sought to use film as an ideal medium of expression (Ojiambo-Hongo et al., 2017). This is as a result of the fact that films have surpassed all other media in their power to express health issues in society (Rabiger, 2003). Films, using specialized forms of entertainment, have the potentials to package and project the realities of human existence to the society (Lucas et al., 2020).

By virtue of their audio-visual illustrativeness, motion appeal, persistence of vision, narration/storytelling, sound/sound effects, and the peculiarity of dialogue they bring into projecting social realities, films are, nonetheless, potent screen media for health communication. Using films in health campaigns ensure that the campaigns are undertaken with visual, aural, emotive, and aesthetic vividness. Films, utilized in health campaigns, aim at enlightening the audience on specific health themes, subjects or issues (Lucas et al., 2020). Audience reached by films used in health campaigns benefit from localized contents that highlight the social determinants of health issues by engaging narrative formats (Sowa et al., 2018). It is in the light of leveraging on their potentials that films can be said to have the potency to project, purvey or present COVID-19 issues in a more convincing and believable manner. If still pictures could tell a million story, then, motion pictures with accompanying narration and ambiance sound could tell a lot more.

So many plausible factors betray films as resourceful media for the promotion of COVID-19 health campaigns. Of consequence is the fact that films can be replayed, repeated, paused, and continued at will till the audience internalize the health-related contents purveyed. This is where films edge television broadcasting which is structurally notorious for presenting contents that are fleeting, ephemeral, and time bound.

When used for the promotion of health issues pertaining to coronavirus disease, films stand out from other mass media. Films, more than the other media of communication, are centered around storytelling and the creation of
striking and memorable (health) narratives that draw people’s attention to see them, often repeatedly (Straubhaar et al., 2014). A synergistic interplay of film’s structural, instrumental, and relatively unique features give COVID-19 health-related issues, narratives, and emerging health developments a new visibility and irresistible attention.

In communicating health concerns, films intensify, clarify, and enhance the audience’s experience to the topic of discourse by blending their unique structural features which Zettl (2011) refers to as sight, sound, and motion with the dramatic elemental such as action, consequence, theme, plot, narration, sequence, environment, characters, and characterization. The structural features of films synergistically interplay with dramatic elements in such a way that the health-related messages projected strive to keep the audience entertained, informed, educated, and exposed to existing health realities in view of eliciting desired reactions, behaviors or attitudinal change. In this regard, the utility of films as instruments for health communication is not value-free.

Another dimension to this discourse is that COVID-19, when promoted through films, can be propagated, projected, relayed, and accessed in a multi-mediated platforms that are within the reach of the audience. This is to say that films used in COVID-19 campaigns can be produced and watched independent of television through supported-screen devices. This presupposes that films can be produced and stored in Digital Video Discs (DVDs), external computer hard drives, personal computers (PCs), video cassettes, flash drives, etc. They can also be uploaded, shared, streamed, and downloaded on the Internet, vlogs, YouTube channels, Netflix, and social media platforms. COVID-19 films can also be premiered and shown on cinemas for the public to watch. Television broadcasting stations can also transmit COVID-19 films for the audience to watch. Radio stations can as well, produce or leverage on the audio version of the screened COVID-19 films for broadcast. So, the channel or platforms for transmitting or relaying COVID-19 films are enormous.

At the backdrop of health promoters’ media selection approach lies the reasons for deploying films in COVID-19 campaigns. The proliferation of short feature films, film documentaries, and animated films to conceptualize and frame COVID-19 as a pandemic that, apart from being dreaded, must be contained by enforcing standard health and safety guidelines in order to prevent its spread and reduce the possibility of further incidence.

In this regard, it is public knowledge that health promoters, in attempting to roll out campaigns against COVID-19 in Nigeria, have produced short films which carries health and safety protocols, guidelines, and containment measures considered necessary to reducing the spread of the disease. The films are engaged in the campaigns with the hope that the public, after exposure to them, would gain sufficient knowledge about the disease, change their attitude, and practice the ideals so projected in order to safeguard their health.

Whether films used in COVID-19 campaigns have lived up to these expectations are subject of empirical inquiry and critical discourse analysis. This uncertainty and gap in evidence have prompted the questions: what critical role do films play in promoting the ideals of COVID-19 health campaigns? Have films,
given their potentials in projecting COVID-19 safety protocols and containment measures, been fully optimized in combating and reducing further incidence of COVID-19?

THEORETICAL FRAMEWORK

The Cultivation Theory

The ground work to Cultivation Theory which started off as The Cultivation Analysis or The Cultivation Hypothesis was laid by George Gerbner in 1973. Subsequent improvements and contributions were made on the theory by George Gerbner, Larry Gross, Jackson-Beeck, Jefferies-Fox, Nancy Signorielli, Michael Morgan and James Shanahan, from the late 1970s to 2000s. The theory intersperses the broad fields of communication and sociology by examining the lasting effects of exposure to screen media or televised films (Nabi and Riddle, 2008).

The central tenet of the theory particularly stresses that people who are regularly exposed to screened or televised contents for long periods of time are more likely to perceive or take for reality the televised contents’ social realities as they watch, which in turn affect their attitudes and behaviors (Nabi and Riddle, 2008). Putting the highlight of the theory more succinctly, McQuail (2010, p. 498) corroborates that “those who watch increasing amounts of television are predicted to show increasing divergence of perceptions of reality away from the known picture of the social world and towards the ‘television’ picture of the world”. McQuail (2010) says that the underlying process in the theory is that of ‘acculturation’ which he takes to mean a process where people gradually come to accept the view of the world as portrayed on televised films (dedicated to COVID-19 campaigns) as true representation of reality and adapt their hopes (on preventive measures), fears (of contracting the disease) and understanding (of the symptoms, nature, transmission routes, precautionary measures, etc.) accordingly.

Linking the core tenet of The Cultivation Theory to the position of this study, the preponderance is that the more an individual spends time watching COVID-19 films, the more he/she would act out, exhibit or cultivate the approved healthy lifestyles or health behaviors projected through the films. So, the possibility of the individual aligning his/her health behavior or attitude in conformity to the health and safety precautionary measures propagated by the films. At the core of this position is the view that the more time people spend ‘living’ in COVID-19 film world, the more likely they are to believe social reality aligns with reality portrayed on the COVID-19 film (Riddle, 2009).

Consequently, the more televised COVID-19 films that people consume, the more their perceptions about social reality change (Gerbner, 1987; Morgan and Shanahan, 2010). This is instrumental considering the fact that a significant part of Cultivation Theory is resonance which focuses on creating pseudo-realities parallel with everyday life (Nevzat, 2018).
The theory fits into the framework of discourse analysis palpable in this study by resonating the notion of televised COVID-19 film as the most pervasive and constant learning system or medium for health communication. As televised COVID-19 film serves the role of a storyteller in our society about the ravages of COVID-19 and its containment measures, the contents of the film not only impact on individual’s ideologies but also influences society as a whole as the fundamental manifestation of the mainstream culture (Stacks et al., 2015).

THE HEALTH BELIEF MODEL

The Health Belief Model was developed by Irwin Rosenstock, Godfrey Hochbaum, Stephen Kegeles and Howard Leventhal in the 1950s. In 1988, the model was modified to incorporate emerging evidence within the field of psychology about the role of self-efficacy in decision-making and behavior (Glanz et al., 2008; Glanz and Bishop, 2010).

The Health Belief Model (HBM) is a psycho-social health behavior change model. It was developed to explicate and predict health-related behavior (Siddiqui et al., 2016). Core proposition of the model is the notion that to avoid contracting sickness or disease, certain health actions could prevent the condition for which people consider the possibility of being at a risk (Glanz et al., 2008).

The HBM presupposes that people’s beliefs about health problems, perceived benefits of action and barriers to action, and self-efficacy explain engagement or lack of engagement in health-promoted behavior and that a stimulus (called cues to action) triggers the health-promoted behavior (Rosenstock, 1974). The model is diagrammatically explicated in Figure 1.

Figure I. Health Belief Model

Source: Rosenstock, Hochbaum, Kegeles, and Leventhal.
Inherent in the HBM are the following theoretical constructs considered sacrosanct in changing people’s behavior in view of prevailing health emergencies, circumstances or situations:

1. **Perceived susceptibility.** This has to do with the self-evaluation or self-assessment that individuals make of themselves concerning their possibility of being vulnerable or at risk of contracting disease/sickness. This suggests the probability of individuals being victim of a disease/sickness. The proponents of the model predicts that individuals who stand a greater chance of being a victim of a health problem will engage in approved health behavior that will relatively help in reducing their risk of contracting a disease/sickness or developing a health problem. But individuals who believes that they stand no chance of developing a health problem or contracting a disease/sickness are more likely to engage in unapproved, unhealthy or risky health behaviors or habits.

2. **Perceived severity.** This concerns individuals’ assessment or perception of the consequence, dangers, and devastating impacts that come with developing a health problem. Hence, individuals who perceive a given health problem to be more severe and devastating are likely to engage in health-related actions, behaviors or habits to reduce the risk of developing the health problem compared to individuals who do not.

3. **Perceived benefits.** This connotes the rewards, benefits or aggrandizements that come with taking an approved health action or exhibiting approved health behavior/habit in the face of prevailing health circumstance, emergency or situation.

4. **Perceived barriers.** These constitute stumbling blocks and other mitigating factors that hinder individuals from taking approved health-related action in view of reducing the risk of developing a health problem.

5. **Modifying variables.** This presupposes that certain demographic (age, gender, occupation, religion, income level, etc.), structural (knowledge and prior contact with a disease), psychosocial (social status, social class, peer group, etc.) and psychographic (worldviews, values and lifestyles, etc.) variables inherent in individuals affect how they perceive the disease and the attendant seriousness attached to containing the disease.

6. **Cues to action.** Cues to action are the stimuli or triggers that propel or prompt individuals’ engagement in approved health behaviors. Cues to action can be internal or external, intrinsic or extrinsic and implicit or explicit (Carpenter, 2010).

7. **Self-efficacy.** This is individuals’ perception of their ability/competence to perform or carry out an approved health behavior.

In connection with the bearing of this study, the HBM model presupposes that in the campaign to contain or prevent further incidence of COVID-19, the individuals, through the projection/portrayal of COVID-19 safety and precautionary measures through films, would evaluate their perceived susceptibility, severity of the disease as well as the benefits that come with compliance to the health and
safety measures. Their chance of contracting the disease, the devastating impact of the disease on their health and the rewards that come with practicing an approved health behavior advanced in the film would influence their adoption of the approved health behavior stipulated as the only way to staying safe and alive. With such benefits, they would try their best to overcome the barriers to attaining safe health which could be risky and unhealthy behaviors and those necessitated as a result of the modifying demographic, structural, psychosocial, and psychographic variables inherent in the individual. Coronavirus disease precautionary measures contained in films could serve as cues to action where actions pertaining to prevention of COVID-19 could be triggered. From such triggers, the individuals could then assess their ability to comply with the health behaviors projected through the films they are exposed to.

LITERATURE REVIEW

Film and Health Communication

Health communication can hardly be pigeonholed. Reading one million scholars would likely reveal one million scholarly pontifications on what it should be and what it should not. For the sake of contextualizing health communication within the perspective of this study, it should be seen as the totality of efforts put in place for the sharing or exchanging of health-related ideas, knowledge or experience between health promoters and the concerned people in the society. It is a health-based, health-topical, and health-themed meaning-sharing encounter between health promoters and the public. The intention foisting such meaning-sharing encounter is to equip the public with requisite knowledge-base through the provision of requisite information with which desired health-related actions can be based.

In this kind of communication, the source is intentional in improving the health situation or condition of the receivers. In doing so, the source has to share ideas, feelings, experiences, and worldviews with the intent to alter the initial discordant behavior of the receivers so as to enable them (receivers) to shift their grounds and take desired action in line with what is communicated. Communicating health, in this context, is aimed not only at promoting health behaviors and attitudes of a target population but more about sustaining those behaviors and attitudes over a period of time (Bora, 2020).

Using films to promote health campaigns creates unimaginable impressions in the minds of the public in ways that other media fail. Films are embodiments of art forms, an omnibus of language, educational resources, relaxed methods for delivering information, and vehicles for social marketing (Bora, 2020). Films, beyond being communication media that rely heavily on the illusion of motion, narration/storytelling, audio-visual illustrativeness, plot, sound/sound effects, panorama, scenes, character, dialogue, elements of conflict, theme, and environment, are media that can be supplanted in other supportive media such as television, the Internet, social media, DVD, flash drive, personal computers,
vlogs, mobile phones, and other specialized screen and visually-supportive gadgets. This means that it can be produced, packaged, distributed or consumed through screen media. In this light, Nkana (2006, p. 125) refer to film as “a collaborative medium”. This presupposes that there is a dependency on film by (other) screen media to propagate COVID-19 health campaigns vice versa.

Taking the aforementioned attributes of films seriously, there is no gainsaying the fact that films can be utilized to deliver effectively on the substance of health communication. This position is predicated upon the notion that films are media for enlightenment, entertainment, leisure, show business, and has now taken several dimensions (Nkana, 2006). These ‘several dimensions’ of film-use include being a tool for health communication; instrument for sensitization; vehicle for mass mobilization; resources for awareness; information; and knowledge as well as manipulative/persuasive window for attitudinal and behavioral change.

Going by their ‘info-edutainment’ power, films, as used in health communication campaigns, serve the public with information and education while entertaining them in the process. As the attention of the audience is arrested and sustained through the entertaining elements of film contents, manipulation/persuasion subliminally take place using the play approach that the audience gradually alter or change their behavior/attitude subconsciously. This takes place without recourse to the use of naked force. The audience’s health consciousness and mentality are cultivated in line with the film contents that they are exposed to overtime. This happens in such a way that they want to ‘live’ the kind of safe lifestyles advocated or projected through the films.

As a consequence on the relaxed, detailed, leisurized, entertaining, featurized, narrative, storytelling, thematic, and scenic approaches films bring into health communication campaigns, films have become the most unique of other media in communicating health. Worthy of note is the fact that films treat health issues in greater details. Films personalize the health issues advanced by revolving them around characters.

With the invocation of dramatic conflict, the cause and effect climax of the health issues are established and the audience take cues or relief from the denouement provided. The denouement is always a supposition of an improved health behavior/attitude which is suggested to be attainable if the audience take a stand with the health ideals projected. With such sublime white propaganda, the audience can be manipulated into taking an informed health decision specified by the health promoters. All these make films potent media for health communication.

**Film Dependency and the Anti-COVID-19 Health Campaigns**

Films have been heavily utilized in the anti-COVID-19 health campaigns. From documentary films, short feature films to animated films, the exploitation of films to explicate, inform, educate, and mobilize the public about the disease in order to change behavior of the public by encouraging compliance is boundless.

Films are yielding resources in the hands of health promoters, sponsors, institutions or organizations in facilitating health campaigns embarked upon
to elucidate the consciousness of the public to the ravaging effects of COVID-19 so as to engender an improved health behavior. To this end, films have been used to package and project health and safety protocols specified by approved/recognized health organizations such as the World Health Organization (WHO), Nigerian Centre for Disease Control (NCDC), national and regional ministries of health, and pro-health Non-Governmental Organizations (NGOs) to sensitize the public on the containment and preventive measures against COVID-19.

At the other end, the public depends heavily on films to be informed, educated, and sensitized about COVID-19. The dependency on films in this regard is borne out of the deliberate need to be abreast of the latest developments or emerging issues concerning the disease. Dependency on film in this instance is driven by the need to know.

Hence, the dependency on films in COVID-19 health campaigns is two ways: dependency to create (encode) COVID-19 messages and dependency to consume (decode) COVID-19 contents. Thus, the intents to inform, educate, mobilize, sensitize, and encourage compliance with COVID-19 messages rest on one end of the dependency pendulum while the intents to be informed, educated, mobilized, sensitized and encouraged to comply with COVID-19 messages rest on the other. Both intents are intentional and deliberate. But the intent of the health promoters (source) to inform, educate, mobilize, sensitize, and encourage compliance exert considerable influence on the public’s (receivers’) intent to be informed, educated, mobilized, sensitized, and encouraged. The former lay the groundwork for the influence on the latter to take root. Films are at the heart of both intents. The author illustrates this idea diagrammatically in Figure 2.

**Figure 2. COVID-19 Film-Dependency Model**

Implicit in the COVID-19 Film-Dependency Model developed by the author is the presumption that in COVID-19 health campaigns, films are heavily depended upon to encode and decode COVID-19 health messages. The dependency is both ended or both ways specifying the roles of the source (health promoters) and those of the receivers (the public) in encoding and decoding COVID-19 health messages. The model illustrates that health promoters exploit the potentials of films in encoding COVID-19 health messages with the sole intents to inform, sensitize, mobilize, educate, and encourage compliance to COVID-19 health and safety protocols or preventive measures. The COVID-19 health messages encoded are further decoded by the public who explore the COVID-19 films for
the intents to be informed, sensitized, mobilized, and educated about COVID-19 as well as to be encouraged/manipulated to comply with the preventive measures pertaining to the disease.

OBJECTIVES OF THE STUDY

The main thrust of this paper is to attempt a critical discourse on how films could be optimized in combating and reducing further incidence of COVID-19 in Nigeria. Specifically, the study sought to:

1. demystify the key containment/prevention themes embedded in the films used in COVID-19 health campaigns;
2. unearth the emotive health appeals that are embedded in the containment/preventive messages of films used in COVID-19 campaigns;
3. ascertain the critical roles of COVID-19 films in reducing further incidence of COVID-19; and to
4. explicate the COVID-19 films’ approaches aimed at combating or reducing further incidence of COVID-19.

METHODOLOGY

This study gathered data from two main sources: the primary source and the secondary source. The primary source of data for the study was empirically obtained by coding the contents of the films using the coding sheet. The secondary sources of data were obtained through extant literatures published in books, journals, periodicals, websites, web portals as necessitated by search engines and the Internet.

The study adopts the qualitative research design. The qualitative content analysis and critical discourse analysis (CDA) were adopted in this study to review, x-ray and discuss the prevalent COVID-19 preventive and containment themes, appeals, and strategies embodied in the films used in the campaign. The qualitative content analysis was considered very relevant to this study because it is a widely-used qualitative research method that is instrumental in studying manifest health issues or themes (Hsieh and Shannon, 2005). Qualitative content analysis, as used in this study, is not preoccupied with counting words or extracting objective content from texts but an examination of meanings, themes, and patterns that may be manifest or latent in audio-visual materials like films to the extent that the understanding of social health reality in a subjective but scientific manner is made possible (Shava et al., 2021).

Using the CDA, the researcher attempted text analysis (description), processing analysis (interpretation) and social analysis (explanation) to COVID-19 messages provided in form of on-screen texts, subtitles, spoken words, infographics, pictograms, and communication-actions in the films used in the campaigns in order to provide mutual explanations to how they relate to behavior change so
that further incidence of the disease is contained with. This approach is strongly
guided by Fairclough’s (1995) model for CDA which comprises three-pronged
mutually-related approaches to discourse viz.: the object of analysis (including
verbal, visual or verbal and visual texts in the films); the methods of which the
object is produced and received (audio-visual recording and viewing) by human
subjects and the socio-historical conditions which govern these processes (Janks,
1997). In doing this, insights from extant literatures are placed in a discursive
perspective to the primary data gathered from the qualitative content analysis
of the films.

Three categories of COVID-19 films as purposively reviewed by the researcher
formed the bases for critical discourse. The three categories of films reviewed were
code-named anti-COVID-19: “documentary films”; “short feature films”; and
“animated films for kids” endorsed by the World Health Organization (WHO),
Nigeria Centre for Disease Control (NCDC), and the Nigeria Ministry of Health
under the aegis of the Presidential Task Force (PTF) on COVID-19. Three anti-
COVID-19 films that fall within the code names mentioned above were reviewed
in each of the COVID-19 film categories making the total number of COVID-19
films that were reviewed nine.

Other secondary sources of data such as books and journal articles have been
consulted to ascertain how films are optimized to combat further incidence of
COVID-19. The resultant data are discussed under four major frames of discourse
analysis which hinge on the critical roles of films in COVID-19 campaigns; the
key anti-COVID-19 preventive or containment messages projected through films
used in the campaigns; the major appeals embodied in COVID-19 messages as
projected through films; and the key strategies/approaches embedded in the
films which aimed at behavior change and reducing the further incidence of
COVID-19.

RESULTS AND DISCUSSION

A thematic and analytical review of the films deployed in the COVID-19
health campaigns reveal that the films are loaded with health-related themes,
appeals, and strategies that when considered holistically aimed at containing
and reducing the risk for further incidence of the disease. From the tones of the
messages alongside the themes, appeals, to strategies embedded in the films,
the critical roles of the films as used in the campaigns were established. This
section attempts a critical discourse on the foregoing with a view to achieving
the objectives of the study as follows:

**Discourse Paradigm One**

*What are the key containment/prevention themes embedded in the films used
in COVID-19 health campaigns?*

The films used in the campaign against COVID-19 are loaded with health-
related themes that are aimed at addressing the spread of the disease. These
themes are projected in form of containment or preventive health messages that advocate what measures to adopt in staying healthy and alive at the surge and spike in incidence of coronavirus disease. The COVID-19 containment messages projected through the films are set of personal sanitation and respiratory hygiene guidelines or modalities stipulated by the World Health Organization (WHO) as standard health practices to be followed in view of preventing and containing the spread of coronavirus disease (COVID-19). These messages are safety guides to aid improved health behavior among the public when adopted.

Though the guidelines or modalities have been moderated and translated into various formats and languages to suit local conditions in respective countries of the world, the key themes of the messages of COVID-19 films in Nigeria as reviewed are anchored on the following health and safety measures:

1. **Personal sanitation.** This thematic preoccupation comprises frequent hand washing using rushing tap with soap or use of alcohol-based hand sanitizers and cleaning of frequently-touched objects and surfaces with disinfectants or alcohol-based solutions. These health tips are projected in the films to be very necessary in situations where an individual had visited public places and had made contacts with other people and material objects. Also, applicable in this instance is a situation where one receives visitors into one living space.

2. **Respiratory/Personal hygiene.** This comprises covering the mouth and nose with flexed elbow or tissue when coughing or sneezing and properly disposing used tissues. Avoiding the touching of face (eyes, nose, and mouth) with dirty hands. Also, considered relevant under this theme is avoiding speaking or listening to people at a close range where droplets of saliva or nasal fluids may escape to one’s eyes, nose or mouth which puts one in danger of contracting the disease.

3. **Social distancing.** This theme is anchored on the need for an individual to avoid handshakes, hugs, and unnecessary close physical contacts in public or crowded places. The COVID-19 films reviewed specified three meters spacing when in public spaces to avoid the risk of contracting or spreading the disease.

4. **Self-protection.** This theme suggests that one should practice the habit of wearing nose/mouth mask and hand gloves in public or crowded places. Also, sacrosanct in this theme is the need to deliberately disinfect the hand with hand sanitizers when contacts with people or with risky surfaces have been established.

5. **Self-health-analysis.** This theme implies that recommended self-appraisal or self-evaluation measures should be carried out by oneself to ascertain if one has contracted the coronavirus disease. Symptoms outlined in the films for one to check out for include: having fever with a temperature of 39 degrees and above, dry coughing, difficulty in breathing or shortness of breath, shivering, body pain, headache, sore throat, loss of taste/smell, diarrhea, catarrh and/or fatigue. Anyone who develops symptoms that meet the case description is advised to consult a doctor for further diagnosis to
know what line of action to take. The essence for self-health-analysis is to detect and contain with the disease at an early stage if one contracts it.

6. **Proactive health response.** This theme is predicated on the need to call medical response team when sick, showing symptoms or meeting the case definition of COVID-19. This also presupposes self-quarantining when one is exposed to COVID-19-proned events, occasions or circumstances and must have established physical contacts with victims of the disease.

7. **Vaccination.** This theme stresses the need for one to visit approved health centers to be administered jabs of COVID-19 vaccines so as to reduce one’s risk of contracting and spreading the disease as well as reducing the risk of dying with the disease.

8. **Improved nutrition, diet, and medication.** Using this theme, the idea the films seem to stress is that if an individual improved his/her nutrition, diet, and medication with the recommended immune-boosting food supplements and drugs that COVID-19 will not have effect on the individual.

These thematic messages projected through the films suggest how the disease can be contained at the individual and group levels whether in private or public spaces so as to reduce further incidence of COVID-19. When followed, the films suggest that the disease can be contained and its further incidence, drastically reduced.

**DISCOURSE PARADIGM TWO**

*What are the emotive health appeals embedded in the containment/preventive messages in films used in COVID-19 campaigns?*

The COVID-19 health-related messages purveyed, portrayed or projected through the films come with some emotive health appeals. These appeals are adopted in COVID-19 films so as to strike a responsive chord at the back of the minds of the viewers in order to push them to take considerable actions intended by the health promoters. The emotive appeals embedded in the films aim to condition the mind of the viewers to adopt an improved health behavior that has consequence on the reduction of further incidence of COVID-19.

The following are some of the emotive appeals embedded in the COVID-19 films content analyzed:

1. **Fear appeal.** Fear appeal is conditioned on the premise that the lives of the people in the society are in danger and that chances of survival are in jeopardy once one contract COVID-19. To buttress the need for an improved health behavior as prerequisites to staying safe from contracting the disease, frightful images of events and circumstances such as overwhelming health institutions, helpless situations of COVID-19 victims, Government’s panicky in terms of paucity of resources, overstretched health workers, etc. pertaining to the effect of COVID-19 are portrayed in the films to enforce compliance to the safety protocols projected. Using the fear appeal, the viewer’s minds and perceptions are manipulated to see COVID-19 as a dangerous disease.
that must be dreaded and whose scourge must be avoided by all means. At the end, the viewers are left with no choice but to take cognizance and subsequently, comply with the health stipulations, specified by health promoters as the only means to staying safe and alive.

2. **Safety appeal.** This appeal comes on the heels of the concern that if all safety precautions are followed to the letters, the viewers' health condition would be safeguarded. Hence, this subtly informs the need to stay safe by complying with all conditions made to such effects. This implies that the safety of one's health is hinged on how best one complies with the health and safety messages, regulations, precautions, measures or action plans suggested by health promoters/sponsors via the films.

3. **Care appeal.** This appeal suggests that if individuals care about their loved ones or relatives, they should keep them safe by practicing the health behaviors advocated via the films. Hence, the individuals should protect themselves from COVID-19 for the sake of safeguarding their relatives. This appeal suggests that one should not endanger the lives of his/her relatives by practicing health behavior that are portrayed in the films as inimical to the containment of the disease. However, one should self-quarantine when one is convinced of being exposed to or when the symptoms show clear signs of the disease.

4. **Consequence appeal.** This appeal suggests that there are severe negative consequences for failing to practice the health behavior stipulated by health promoters/sponsors through the dedicated films. From public health disaster, economic misfortune, social disorientation, to eventual death, the consequences for ignoring COVID-19 precautionary measures/protocols are enormous.

5. **Action appeal.** COVID-19 films employed this kind of appeal to cause the viewers to make considerable action plans that are stipulated in order to safeguard their health. Hence, the films made subtle appeals to their viewers to take seriously actions such as washing of hands, getting vaccinated, practicing respiratory hygiene, diagnosis, calling emergency lines in the face of grave circumstance, physical distancing, wearing of nose/ mouth mask, etc. These actions, as specified through the messages of the films, are considered sacrosanct in reducing further incidence of the disease.

6. **Fantasy and reassurance appeal.** The fantasy and reassurance appeals are emotional statements portrayed through COVID-19 films to titillate the minds of the viewers that life can return to normalcy or status quo ante if all health and safety conditions are met. In this regard, the viewers are persuaded to do everything within their powers never to drop guard or compromise their stand in the fight against COVID-19.

**Discourse Paradigm Three**

What are the critical roles of COVID-19 films in reducing further incidence of COVID-19?

An analysis of the COVID-19 films under-studied revealed the critical roles that those films play in campaigning for the prevention, containment, and
reduction in further incidence of the disease. The following are some of the critical roles that the films analyzed play in the health campaigns geared towards combating COVID-19:

1. **Awareness/sensitization.** The health-related messages pertaining to COVID-19 and how it can be contained as projected through the films analyzed were basically projected to create awareness, among the populace, about the existence of the disease. The essence for creating awareness about the disease was to awaken the consciousness and sensibilities of the public to the ravaging effects of the disease. In this regard, the consciousness of the public was stimulated with knowledge-based expositions on the nature, symptoms, and dangers of the disease as well as how it can be controlled, contained, and future incidence, reduced. The films’ critical role in creating awareness is predicated upon the premise that as the public has the right to know, “societal concerns form the backbone of film stories” (Ojiambo-Hongo et al., 2017, p. 53). Hence, films, as expressive media of mass communication, have the free mandate of the public to let them know about socially-relevant issue such as COVID-19.

2. **Info-edutainment.** This is a triadic role suggesting the criticality of the films analyzed as media of information, education, and entertainment in communicating COVID-19 experience. In the campaign against COVID-19, the films reviewed have been critical in providing useful information about the disease in a more descriptive, elaborate, and visually-illustrative manner that knowledge (a product of education) is built almost effortlessly and in a relaxed style.

   The accompaniment of the films’ aesthetic elements such as sound, sound effects, ambiance sound, source connected or disconnected sound, visuals, motions, space, narration, and time sequence or series bring out the entertaining dimension to the informal education that the films institutionalize on COVID-19 subject-matter. In the process, as the films’ audiences enjoy watching the films as a form of entertainment, they are also exposed to the needs and anxieties of the society in a relaxed manner (Ojiambo-Hongo et al., 2017).

   This role is what is referred to as Entertainment-Education strategy popularized by Arvind Singhal and Everett Rogers in 1999 and 2003. According to the scholars, the Entertainment-Education Strategy is the process whereby message sources such as health campaign promoters purposely design and implement a media message to both entertain and educate the audience members in order to increase audience members’ knowledge about an educational issue, create favorable attitudes, and change overt behavior (Singhal and Rogers, 1999; Singhal et al., 2003). The information, education, and entertainment roles are synergized and fused into a unified whole that one can hardly separate them apart without distorting the meaning implied by the health promoters or sponsors. This can be considered as the info-edutainment (information, education, and entertainment) role. This idea is represented in a model presented in Figure 3.
Implicit in the COVID-19 *Info-Edutainment* Message Blend Model is the presupposition that films’ contents pertaining to COVID-19 serve tripartite roles of informing, educating, and entertaining the public. These roles blend and interplay with each other that they are seemingly inseparable and mutually-dependent on each other. They blend and interplay in a cyclic, dynamic, and processual manner that their interfacing effects become a recurring friction.

Critical in this discourse is the entertaining angle or approach adopted in COVID-19 films to get the audience relaxed for the information and education intents of the source to sink in. The model suggests that people absorb information and learn better and faster in a relaxed (entertained) approach as against the regimentation, anxieties, short attention spans, and pressures evident in formal educational settings.

By blending or fusing information, education with entertainment functions into one experience, the attention of the audience is arrested and sustained throughout the course of exposure to the films. In such encounter, films can deliver the substance of anti-COVID-19 health messages effortlessly. They do this by attempting to entertain the viewers while subliminally, driving the information and education intents of health promoters in their subconscious so as to yield behavioral change objectives of COVID-19 campaigns. The message seems relaxed but forceful in driving-in the ideals of the health promoters/sponsors into the faculties of the viewers that they began to exhibit what they watch/view without knowing. The strong point occasioned by this fusion is the employment of entertainment elements such as music, drama, animation, or motion pictures to promote health care messages that are relaxed, entertaining, and less intrusive with the intent to subliminally educate, inform, and encourage behavior change among the public (Ashong, 2021).
3. **Documentary.** The films used in COVID-19 campaign have served documentary purposes by ‘documenting’ and chronicling the activities of health workers, the devastating state of the disease on public health institutions, the nature of the disease, expected behavior for containing and reducing further incidence. The documentary role that the COVID-19 films analyzed played has proven that films are reflectors of the daily life of society, by packaging, archiving, and projecting to the audience, content that is reflective of day-to-day events (Chile and Targema, 2018). This effort is geared towards providing the viewers with contents to base their opinions, exhibit their reactions and exercise their actions plans in safeguarding personal and public health.

4. **Crusading and mobilization.** Pushing, encouraging, and advising viewers of what line of action to take and how such action can be taken formed part of the critical roles that films used in anti-COVID-19 campaigns play. In this instance, it is commonplace for the viewers to be instructed, advised or urged to: maintain sound personal hygiene by ensuring to wash their hands or use (alcohol-based) hand sanitizers as and when necessary; use nose/mouth mask; get tested when showing signs of the disease; improve diets; maintain approved health behaviors when outdoors and, to get vaccinated. Films used in anti-COVID-19 campaigns are tailored to champion causes, ideologies, and philosophies that engender the containment and reduction of incidence of COVID-19.

5. **Propaganda and persuasion.** Films used in anti-COVID-19 campaigns serve propaganda purposes. In this regard, they are tools used to manipulate or persuade the viewers to change their perception, decision, stand, worldview, behavior or attitude that compromises the prevention, containment, and reduction in future incidence of COVID-19. Though the health-related messages were approved by authorized health organizations, institutions, and ministries, they only tend to present the state of the disease from the perspectives of the health promoters or sponsors with the intent to influence, persuade or manipulate behavior in line with their intended/desired intents and motives.

6. **Participatory.** The films used in anti-COVID-19 campaigns have enabled film producers who were not necessarily health promoters, sponsors, propagandist or conspirationists, to participate in the discourse of stemming the tide pertaining to the spread of COVID-19. By participating, film producers, using the instrumentality of their filmic creations, bring unique stories in their remote locations and cultures to bear on what people are doing or should do to flatten the COVID-19 curves. To this effect, filmmakers employ films as suitable media through which they explore health-related concerns about their societies (Ojiambo-Hongo *et al*., 2017).

Independent films producers, in this instance, tell unique stories about cultural, religious or social practices put in place or should be put in place in staying healthy and alive while preventing, containing or diagnosing COVID-19. At the other end, the viewer’s also participate in the discourse with their emotions and intellects by improvising or following approved
homemade therapies or locally-made recipes which are within their reach and which are projected in the films in combating the disease.

7. **Advocacy.** Films used in anti-COVID-19 campaigns canvassed for the stop in the spread of the disease. Films advocate for the prevention of COVID-19 by projecting or advancing specified health behaviors considered sacrosanct to the containment and reduction in incidence of the disease. This they do by advising the public to adhere strictly to the safety and precautionary measures advised by approved health authorities. Also resonated in the anti-COVID-19 films is the need for mass vaccination. This discourse corroborates Rabiger’s (2003) position on films as conduit or channels for venting socially-relevant ideas and expressions.

**Discourse Paradigm Four**

*What are the COVID-19 films’ approaches aimed at combating or reducing further incidence of COVID-19?*

The films being deployed in the campaign against COVID-19 were aimed at meeting the expectation of health promoters, communicators or sponsors. To all intents and purposes, they tend to provide cues or aid in enabling the public form approved health behaviors necessary to containing the disease. Hence, the contents of the COVID-19 films analyzed were targeted at the affective domain (or emotional state) of the audience in view of instigating emotional responses/reactions to the health ideals portrayed in the films. It is intended that as the audience watch the films, they should, as a consequence, conform to or align their subsequent health behaviors with the health and safety measures or guidelines stipulated in the films.

To the extent that the foregoing is possible or achievable, films used in the COVID-19 campaigns presumably have aimed to influence the health behaviors of individuals in the public towards observing standard protocols for the containment of COVID-19. As individuals in the public exhibit film-promoted health behaviors in view of safeguarding their personal health, the safety of public health is guaranteed in the process. The logic is that when an individual who is exposed to COVID-19 films observes the safety protocols promoted through the films and makes an attempt to protect him/herself from contracting or spreading the disease, the transmission process is stagnated and further incidence is reduced or stalled. This presupposes ‘each one, saves one’ kind of situation.

The imagery the foregoing scenario creates can be considered as COVID-19 film-containment spiral. The film-containment spiral involves multi-stage behavioral approaches undertaken by individuals in the public in view of reducing further spread of the disease. Critical in the COVID-19 film-containment spiral is the logical idea that it takes an individual’s post-film-exposure health habit for the disease to either spread or be contained. Thus, to reduce further incidence of the disease, it is sacrosanct for an individual’s post-film-exposure habits to be in line with the containment measures and safety protocols projected through COVID-19 films.

Hence, the COVID-19 film-containment spiral spins from the point of individual’s exposure to health messages contained in COVID-19 films to
the point of practicing the anti-COVID-19 containment or preventive health messages in view of ensuring the safety of an individual’s personal health and then to the point of safeguarding public health. This idea is represented in the model presented in Figure 4.

**Figure 4. COVID-19 Film Containment Spiral**

![COVID-19 Film Containment Spiral Diagram](source: The author)

Evident in the COVID-19 Film Containment Spiral is the idea that an individual gains exposure to the COVID-19 containment measures projected through films used in the campaigns. Upon gaining exposure to the health and safety measures projected through the films, the ideals of the films reach the individual’s affective (emotional) state. Given the appeals adopted by the health promoters or communicators, the individual then react to the health messages considerably by thinking and reflecting on the approved health standard behaviors to exhibit in view of staying safe (or staying alive if he/she has contracted the disease). It is at such point that the individual makes an informed and well-reasoned decision to comply with the projected health measures. Such decision leads the individual to exhibit or practice the health measures which are projected as approved standard behaviors in containing the disease. Upon practicing the projected health measures, the individual is presumably exhibiting an ‘improved health behavior’. The ‘improved health behavior’ will, first and foremost, safeguard the personal health of the individual who exhibit the ‘improved health behavior’ against COVID-19. The spiral then moves on to the public sphere where collective individuals exhibit the ‘improved health behavior’ to safeguard public health. The containment spiral presupposes that it takes an individual who habitually exhibits or practice approved health measures projected through films used in anti-COVID-19 campaigns to stop the spread as well as reducing further spike or incidence of the disease.
CONCLUSION

In combating, containing or reducing further incidence of COVID-19, films as harnessed in the health campaign process provided useful cues with which to base concerted actions. From being exposed to health and safety measures, guidelines, protocols to approved standard health behaviors, the critical roles of films in helping to reduce the ravaging effects of COVID-19 are boundless and no less profound.

Very critical and profound in films’ approach in reducing the spread of COVID-19 is the psychological and physiological conditioning of individuals’ emotions, mindsets, mentality, exhibitory habits, and physical behaviors to align with the health ideals and themes being projected. The conditioning is rooted in the position that unless an individual does as it is projected through the films, personal and public health safety are deluded.

As consequences of non-compliance to COVID-19 safety measures are purveyed through films used in the campaign process, individuals in the society are exposed to their fate should they behave or act discordantly. In the long run, as the individuals crave to stay safe and alive, their emotions, mindsets, mentality, habits, and behaviors are massaged in conformity to the COVID-19 safety measures projected through the films.

LIMITATIONS OF THE RESEARCH

Considering the fact that it has been over three years since the COVID-19 pandemic hit the world, the findings of this study would have been timelier if they had been published earlier. Notwithstanding the time lag between COVID-19 onslaught and the publication of this research, the findings of this research are valid revelations on how the pandemic was communicated using the film as a potent audio-visual medium.

However, as there are emerging variants and sub-variants of COVID-19 over time such as Omicron, Delta, Alpha, SARS-CoV-2, etc. future researchers that have vested interest in studies pertaining to the utility of film in reducing further incidence of pandemic disease such as COVID-19 can embark on further researches. The findings of such studies, when placed in perspective to the findings in this study, will provide a comparative time perspective in assessing whether or not there have been changes in the way COVID-19 precautionary measures are communicated through films over time.

Ubong Andem Obong is a doctoral candidate in the Faculty of Communication and Media Studies, University of Uyo, Nigeria. As an assistant lecturer at the Faculty of Communication and Media Studies, Taraba State University, Jalingo, Nigeria, he teaches broadcasting, behavioral change communication, emerging media studies, and critical discourse in film and creative screen productions. He is the principal investigator and lead exponent
References


Ojiambo-Hongo, Evelyn; Mugubi, John, and Nyaole, Rosemary (2017). The gender


