

Imperatives of Negotiation in Managing Covid-19 Vaccination Hesitancy in Nigeria

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Abstract

Purpose:

The paradoxical hesitancy to COVID-19 vaccination amidst the spread of the pandemic, especially the deadly Delta Variant, has remained a source of worry to the global community. Despite assurances of the safety and efficacy of the vaccines and the jabs being publicly administered on top of the Nigerian political hierarchy, COVID-19 vaccination has remained controversial in Nigeria. It appears that citizens' apprehensions about the side effects of the vaccines are yet to be overcome.

Methodology:

This study investigated the grounds for Nigerian citizens' hesitancy to COVID-19 vaccination. The study asked: What factors underlie Nigerian citizens' hesitancy to COVID-19 vaccination? The quantitative study combined Social Cognitive and Diffusion of Innovations theories as theoretical cornerstones. A survey research design was adopted to study a population of 84 004 084, from which a sample size of 384 respondents was drawn.

Findings:

The study's findings showed that the reported side effects of COVID-19 vaccines and citizens' distrust of the Nigerian government and health system led to COVID-19 vaccination hesitancy in Nigeria. NAFDAC's warning of fake COVID-19 vaccines being circulated in Nigeria was also found to be a factor that underlies hesitancy to vaccination.

Implication:

The study recommended, among other things, that national and international health authorities should address apprehensions generated by the reported side effects of COVID-19 vaccines. It was also recommended that Nigerian political leaders should rise to bridge citizens' distrust in the government.

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INTRODUCTION

Like other countries of the global community hit by the COVID-19 pandemic, the Nigerian authorities embraced vaccination and non-pharmaceutical measures to contain the spread of the deadly pandemic. Vaccination was considered the most appropriate pharmaceutical solution by the World Health Organisation (WHO) following the absence of a known cure for COVID-19. The first phase of COVID-19 vaccination in Nigeria was flagged off with the administration of the AstraZeneca vaccine on Nigerian health workers in March 2021 (WHO AFRICA, 2021). President Mohammadu Buhari and Vice President Yemi Osinbajo received the first dose of COVID-19 vaccines on live television on March 6, 2021 (Adebawale, 2021; Wahab, 2021; Oluwafemi, 2021). Public vaccination of the President and Vice President was to demonstrate the safety and efficacy of the vaccines. It was to assure eligible Nigerian citizens that COVID-19 vaccines were safe and efficacious to contain the spread of the pandemic.

At the State level, many State governors and political appointees received the first dose of COVID-19 vaccines in public. Some traditional and religious leaders also demonstrated faith in COVID-19 vaccines by receiving the jabs in public. The Nigerian media played an essential role in promoting the acceptance of COVID-19 vaccination in Nigeria. Many media stations hosted health workers who vaccinated eligible media workers, especially reporters at a high risk of contracting COVID-19 due to their news gathering function. They sought

partnerships for mass vaccination in the country. As critical stakeholders in public policy communication, partnership with the mass media was crucial to set a national agenda for broader acceptance of COVID-19 vaccination by eligible Nigerian citizens.

The second phase of COVID-19 vaccination in Nigeria was flagged off in August 2021 with the arrival of Johnson and Johnson and Moderna vaccines. As was the situation during the first vaccination phase, the second phase has remained controversial in Nigeria. There appear to be apprehensions about COVID-19 vaccination by many eligible Nigerian citizens.

The Nigerian government is considering mandatory immunization to reduce vaccine reluctance for COVID-19. The Executive Director of the National Primary Health Care Development Agency (NPHCDA), Dr. Faisal Shuaib, disclosed that the Federal Government might sanction eligible Nigerians who refuse COVID-19 vaccination when the vaccines have been made equitably available. Dr. Shuaib stated that the Federal Government might apply the basic rule of law to engender compulsory vaccination in Nigeria (Ojerinde et al., 2021; Muanya et al., 2021).

Also, the Edo State Government had threatened compulsory COVID-19 vaccination ahead of the flag-off of the second vaccination phase in the State. The State Government threatened to restrict unvaccinated citizens from public places that witness large gatherings, such as worship centers, event centers, and government offices and departments (Bello, 2021; News Agency of Nigeria, 2021). The controversial compulsory COVID-19 vaccination policy in Edo State has been trailed by protests and litigations by some social rights groups. On August 31, 2021, a Port Harcourt High Court restrained the Edo State government from the proposed compulsory COVID-19 vaccination in the State (Agency Reporter, 2021; Enogholase & Aliu, 2021; Olabimtan, 2021).

The paradoxical refusal of COVID-19 vaccination amidst devastations caused by the pandemic assumes a global dimension. Across Europe, America, and parts of Africa, citizens' hesitancy to COVID-19 vaccination is widely reported. COVID-19 vaccination hesitancy is mainly due to reported side effects of the vaccines, which have been acknowledged by the World Health Organisation (WHO) and are said to be expected and recoverable. Notwithstanding controversies regarding COVID-19 vaccine side effects, some countries have recorded a high vaccination rate. For instance, by September 2021, Portugal had recorded a complete vaccination of over 85% of its eligible citizens (Harlen & Alberti, 2021). According to the head of Portugal's Covid-19 Vaccination Task Force, Vice Admiral Henrique de Gouveia e Melo, the country achieved the vaccination feat by adopting a stakeholder collaborative approach, which involved the engagement of Mathematicians, health experts, analysts, and strategic experts from the country's Army, Air Force, and Navy. Vice Admiral Melo further disclosed that Portugal achieved vaccination by keeping politics outside the exercise (Nunes, 2021).

The controversies over COVID-19 vaccination in Nigeria present the relevance of negotiating the quagmire. It is not only due to the continuous spread of the pandemic with increasing cases and related deaths but also due to avoidable crises that may result from forceful vaccination. Thus, the burden of managing COVID-19 vaccination hesitancy towards containing the spread of the pandemic in Nigeria serves as the motivation for this study.

Statement of the Problem. With the devastating impacts of the COVID-19 pandemic on Nigeria's economic and health systems, eligible citizens were expected to embrace vaccination with open arms. Public vaccination of President Mohammadu Buhari, Vice-President Yemi Osinbajo, and other notable personalities was also expected to raise Nigerian citizens' confidence in the safety and efficacy of COVID-19 vaccines despite the acknowledgment of probable side effects. These assurances have yet to overcome the clouds of apprehensions, suspicions, and rumors built around COVID-19 vaccination. It is the monstrous cloud of controversy surrounding COVID-19 vaccination in Nigeria that serves as motivation for this study. Thus, the problem of the study can be summarised in the following question: What factors underlie COVID-19 vaccination hesitancy in Nigeria despite the assurances of the safety and efficacy of the vaccines by local and international health authorities?

Operational Definition of Terms. The following terms were defined as they pertained to this study and not their lexical meanings. COVID-19 Vaccination entails the ongoing vaccination of eligible citizens to contain the spread of the COVID-19 pandemic. The first phase of COVID-19 vaccination in Nigeria began in March 2021 with the introduction of AstraZeneca vaccines. The second vaccination phase was flagged off in August 2021 with the arrival of Johnson and Johnson and Moderna vaccines.

COVID-19 Vaccination Hesitancy: This is the refusal of COVID-19 vaccines by eligible Nigerian citizens. COVID-19 vaccination hesitancy is reported around Nigeria, forcing the government to contemplate the enforcement of compulsory vaccination.

Eligible Nigerian Citizens: These are Nigerian citizens who are expected to receive COVID-19 vaccines. The Federal Ministry of Health and affiliate COVID-19 management authorities define eligible Nigerian citizens for vaccination as adults between 18 and 60 years old.

Public Policy Communication: This communication model aims to diffuse a social phenomenon. Communication is directed at motivating citizens to embrace and participate in innovation. Public policy communication integrates isolated communication media, such as mass media, new media, media, and interpersonal networks, to diffuse innovation.

Stakeholders: Stakeholders are individuals and groups that are affected by the COVID-19 vaccination exercise in Nigeria. Some COVID-19 vaccination stakeholders are eligible Nigerian citizens, the Nigerian government, and Nigerian health authorities.

Stakeholder Relations Perspectives: This is the application of public relations approaches in managing a situation, especially a controversial situation. Stakeholder relations perspectives embrace negotiation or dialogue in managing stakeholder conflicts rather than applying force. The process exploits the power of communication to reach a compromise. It recognizes the conditions underlying a conflict or crisis that must be resolved to establish lasting solutions and genuine stakeholder cooperation.

Literature Review. The study's argument was hinged on Social Cognitive and Diffusion of Innovations theories. Other related concepts were reviewed to highlight the focus of the study.

Social Cognitive Theory. Albert Bandura propounded the Social Cognitive theory in the 1960's (DeFleur, 2010). The theory is concerned with factors that underlie human behavior about accepting and adopting a new idea. Adopting new forms of behavior does not occur in isolation, but it is a consequence of certain interacting factors that influence humans. It opposes the notion that individuals could perform new activities by chance.

According to Bandura (1989), the social cognitive theory describes a dynamic (ongoing) process in which several factors interact and influence each other, provoking the individual to undertake an action or inaction. Such factors include personal (instincts, drive, traits, and other motivational forces), environmental (events, happenings, hazards, and changes), and social (cultural orientations). These factors interact and affect how individuals perceive social phenomena. Thus, DeFleur (2010) describes the social cognitive philosophy as essential to understanding how people acquire new ways and respond to their environment. People's actions are often governed by reason, including apprehensions. These reasons form the basis upon which individuals adopt or disregard new ideas. Lerner (1982) argues that inner forces neither drive people nor shape their actions by the environment. Instead, these factors interact with each other and exert some influence on the individual, which results in the motivation to participate in a social cause or otherwise (Bandura, 1989).

The problem with development messages, such as COVID-19 vaccination, is not just in disseminating the message but the effort required to stir motivation, which stimulates the sense of urgency to behave as required. According to Lin et al. (2003), the purpose of the dissemination of messages targeted at changing people's attitudes does not only consist in the presentation of the message through a medium but also "presenting compelling arguments that convey a sense of urgency for action while making the proposed action irresistible" (p.12). What makes a message irresistible is the sense of urgency it conveys. However, this sense of urgency, which results in adopting new ideas, does not come in isolation. It is the function of understanding the extent of damage or other consequences that could unavoidably result from negligence. It is the step that beckons to stimulate mass COVID-19 vaccination in Nigeria. It demonstrates the implications of vaccination and hesitancy through knowledge sharing rather than the application of force, which may continue to warrant resistance.

Diffusion of Innovations Theory. The postulation of Diffusion of Innovations is credited to Everett Rogers in his book Diffusion of Innovations in 1962 (Baran & Davis, 2009). Diffusion of innovations interrogates how an idea (innovation) diffuses and spreads through a target population over time to gain acceptance. The theory interrogates the circumstances underlying the situation where different people embrace and adopt new ideas in different ways and at different times. The diffusion paradigm is based on differences in variables, such as differences in people's psychological frame, cognition, perceptual differences, environment, association, and worldview (Miller, 2002). Following the differences that resonate in people's disposition towards social

phenomena, Okorie and Ekwamu (2012) state that to possibly communicate solutions to social problems, awareness of people's perception and attitude towards social phenomena should be certified to ensure the realization of the intended benefits of a policy.

The preceding argument presents that the availability of a new idea may translate into something other than its adoption and use by members of the target population. It may be challenging and more accessible to adopt a new idea if certain factors reduce the perceived impact of its changes. Rolling, Ascroft, and Chege (1976), cited in Nwanmereni and Ochonogor (2020), observe that:

Diffusion is usually seen as a god-sent autonomous process that assures the trickle-down of income and welfare-generating ideas and guarantees their distribution among members of a population. Until the 1970s, there was some evidence of this expectation that the diffusion process could distribute the benefits of new technology, breaking economic growth. However, instead of traditional tribe members and isolated villagers as the primary audience for diffusion programs, we have masses whose lack of opportunities, rather than their resistance to change, seems to be the major bottleneck to development.

Introducing an intervention to solve a social problem requires immediate and continuous adoption and application assessment. Incorporating a social intervention may translate into more than adoption and acceptance by the target population. It also means an innovation must be advantageous and devoid of adverse consequences for the target audience. DeFleur (2010) identifies relative advantage as a critical component that enhances the adoption of an innovation. He observes that the target audience may resist any innovation that is disadvantageous. It is the seeming situation of COVID-19 vaccination in Nigeria, where the suspicion of the side effects of the vaccines poses a challenge to mass vaccination. The diffusion paradigm is foundational in managing skepticism surrounding COVID-19 vaccination in Nigeria.

Defining COVID-19 Vaccination Project Stakeholders. Policy stakeholders are individuals or groups who can assert legal claims of ownership or other forms of stake in a policy (Kotler et al., 2012). According to Heath (2005), stakeholders can be located within and outside a social or organic system. In the prosecution of Nigeria's COVID-19 vaccination project, identification of the interests of stakeholders, such as the government, local and international health authorities, ethnic and regional traditional authorities, opinion leaders, eligible Nigerian citizens, religious organizations, civil society organizations, and other partners is crucial to achieving success. The list of project stakeholders has been expanded to include future generations, non-human species (animals), and the natural environment (Heath, 2005; Kotler et al., 2012). The inclusion of future generations, animals, and the natural environment in the list of project stakeholders is based on the importance of preserving the earth and its support system. It accounts for the World Commission on Environment and Development's definition of sustainable development as development that meets the needs of the present generation of the earth's inhabitants without compromising the well-being or welfare of future generations (Asadu, 2009).

Wheeler and Sillanpaa (1997), cited in Kotler et al. (2012), have categorized project stakeholders into primary and secondary stakeholder groups and social and non-social stakeholder groups. Primary social stakeholders concerning COVID-19 vaccination include eligible Nigerian citizens, the Presidential Task Force on COVID-19, the government, and local and international health agencies. Secondary social stakeholders include regulatory authorities (NAFDAC), civil society organizations, civic institutions, pressure agitators, the mass media, and academic commentators. On the non-social divide, Wheeler and Sillanpaa (1997) identify primary non-social stakeholders as the natural environment, future generations, and non-human species (animals). Secondary non-social classification involves environmental interest groups, such as Friends of the Earth and Greenpeace, and animal welfare organizations, such as People for the Ethical Treatment of Animals (PETA).

The twist with stakeholder relations lies in the urgency with which a non-core stakeholder group, such as a civil society organization, can assume the status of a core stakeholder. It occurs due to the urgency of the claim asserted by a stakeholder on the leadership of a social or organic system. In other words, a secondary non-social stakeholder can assume the place of a primary stakeholder due to the urgency it requires to respond to the claim or agitation of the group. Kotler et al. (2012) state that a secondary stakeholder group, for instance, can quickly become a primary or core stakeholder when the urgency of a claim takes precedence over the legitimacy of such a claim. For instance, the urgency required to manage protests against compulsory vaccination moves in Edo State made the civil society organizations that led the protests primary stakeholders. It means that it does not matter the legitimacy of a claim asserted by a stakeholder. It is because the urgency of attention it requires to deal with or

respond to such a claim can override the claim's legitimacy on a typical day. The implication of the urgency of a claim that a group can assert is that the leadership of a social or organic system must respond appropriately to the urgency of a claim.

Nigerian Citizens' Perception of Covid-19 Vaccination. Perception can be defined as the different ways different individuals and groups think about or understand a phenomenon. What this means is that different individuals or people can perceive a particular idea in different ways. McCombs and Shaw (1972) define perception as how people perceive and interpret a particular idea based on differences in psychological makeup, ideological construct, worldview, environment, exposure, and other variables (Ndimele & Innocent, 2006). People with similar exposure or experience are likely to perceive and interpret a particular phenomenon similarly.

Some social scientists do not agree that individuals with a similar experience or exposure could be consensual in their perception of a given phenomenon. The argument is that different individuals have different psychological constructs, which serve as a defense mechanism that filters information to affect people's unique view of phenomena. Baran and Davis (2009) thus define perception as a selective process that underlies the interpretations people accord a given phenomenon. To this end, two persons can perceive a given idea unlike despite the likeness of their experience or training. Perception accounts for differences in Nigerian citizens' views of the COVID-19 pandemic and vaccination. It also seemingly accounts for the difference in COVID-19 vaccination stance by different State governments in Nigeria.

Perception serves as a sensory stimulus that underlines an individual's idiosyncrasies. It is why perception is a crucial factor that the Nigerian government and health authorities must consider in implementing the COVID-19 vaccination project. Perception can result in the success or failure of the project. Procurement of vaccines may not translate into vaccination acceptance. It is precautionary to understand Nigerian citizens' perception of COVID-19 since citizen perception of the pandemic can affect vaccination. It also means that Nigerian citizens' perception of the government can support or undermine the realization of COVID-19 vaccination implementation.

Negotiating Controversial COVID-19 Vaccination. Negotiation is synonymous with terms such as dialogue and bargaining in corporate communication. According to Griffin and Moorhead (2007), negotiation involves the process by which two or more parties try to reach an agreement on an issue even though they have different opinions. It is a formal setting where disputants try to settle their differences (Miller, 2006). What this means is that negotiation involves discussions between groups in a conflict. In other words, negotiation is not a coercive process. Galvin and Terrell (2001) thus define negotiation as "a formal problem-solving process in which people voluntarily discuss their differences, work out a settlement, and come to an agreement" (p. 233).

The crucial element that precedes and proceeds negotiation is compromise. It is because parties involved in a conflict must accept the process first and foremost before negotiation can take effect. Breit (2004) and Hames (2012) state that negotiation involves a formal process by which interdependent groups in a conflict determine how to work together. It means that there is always a compelling condition that constrains interdependent parties to negotiate. The burden that constrains negotiation in COVID-19 vaccination in Nigeria is the spread of the COVID-19 pandemic, especially the deadly Delta Variant, despite citizens' hesitancy to vaccination. The avoidable crisis that may result from forceful vaccination also beckons stakeholders to negotiate the COVID-19 vaccination project in Nigeria. McQuarrie (2003) argues that apart from the impacts of a prolonged conflict on a social or organic system, the danger of escalation of conflict underscores the place of dialogue. Breit (2007) observes that negotiation is instructive when the leadership of a social or organic system understands that the cycle of stakeholders' resistance to a phenomenon can only be addressed through genuine stakeholders' cooperation.

Singh (2008) has identified the characteristics of negotiation as follows: (1) there are two or more parties; (2) there is a conflict of needs and desires between two or more parties; (3) the parties negotiate by choice; and (4) when we negotiate, we expect a give and take process that is fundamental to the definition of negotiation itself (p. 132). The interpretation is that negotiation is not a combative process. It is a give-and-take exercise. That is, negotiation thrives through compromise. Galvin and Terrell (2001) state that negotiation allows disputants to state what they want, state their feelings, advance reasons for their differences, understand the plight of the other person or group, plan to resolve a conflict, and choose an option for continuous collaboration and progress. Ududo (2009) argues that negotiation should provide an atmosphere that encourages frank expression of people's views on a phenomenon. It is the democratic atmosphere that is required to engender mass COVID-19 vaccination in

Nigeria. Genuine stakeholder engagement, instead of forceful vaccination, may allow the Nigerian government and health authorities to set aside the apprehensions that underlie citizens' hesitancy to COVID-19 vaccination.

METHODS

The nature of this study necessitated the adoption of a survey research design. The survey is the study of the characteristics of a sample, which can be attributed to the larger population from which the sample was drawn (Ihejirika & Omego, 2011; Wimmer & Dominick, 2011). The population of the study was 84, 004, 084. It is the official figure of registered voters in Nigeria, which was adopted as the population of the study is the population of adult citizens of Nigeria (Independent et al. Commission, 2019). The distribution of registered voters in Nigeria's six geo-political zones is presented as follows:

- North- East: 20, 158, 100 (24%)
- South-West: 16, 292, 212 (19%)
- North-Central: 13, 366, 070 (16%)
- South-South: 12, 841, 279 (15%)
- North-East: 11, 289, 293 (14%) and
- South- East: 10, 057, 130 (12%)

A combination of registered voters in the six geo-political zones put the study population at 84 004 084. From this population, a sample size of 384 respondents was drawn based on the sampling system of Keyton (2001).

The multi-stage sampling procedure was adopted to administer copies of the questionnaire to the sample. The first stage introduced the cluster sampling technique, which was used to divide Nigeria's six geo-political zones into clusters. The second stage introduced a proportionate sampling system, which enabled the allocation of samples to different clusters based on their percentage representation in the overall population of the study. Thus, Nigeria's six geo-political zones received samples: North-West: 92 samples; South-West: 73 samples; North Central: 61 samples; South-South: 57 samples; North East: 54 samples; and South East: 47 samples. A convenience sampling technique was used to reach the sample. Six research assistants were briefly trained and used to administer and retrieve copies of the questionnaire. Data were presented in tables using simple percentages.

RESULTS AND DISCUSSION

Data were presented in statistical tables using percentages.

Table 1. Nigerian Citizens' Perception of Covid-19

S/N	Questionnaire Items	No. of Respondents	Percentage
1.	What is your perception of the COVID-19 pandemic?		
	The pandemic is real and still spreading in Nigeria.	336	87%
	Nigeria is now covid-19 free.	19	5%
	Covid-19 never came to Nigeria.	29	8%
	Total	384	100%
2.	I believe it is COVID-19 in Nigeria because I have seen an infected person.	Agreed 39	10%
		Disagreed 345	90%
	Total	384	100%
3.	I believe COVID-19 never came to Nigeria because I have yet met an infected person.	Agreed 43	11%
		Disagreed 341	89%
	Total	384	100%
4.	I know a neighbor/friend/colleague/ relative who contracted COVID-19.	Agreed 68	18%
		Disagreed 316	82%
	Total	384	100%

The presentation in Table 1 shows that many Nigerian citizens were aware of the spread of COVID-19 in the country. It is based on 87% of respondents who acknowledged the spread of COVID-19 in Nigeria.

Table 2. Eligible Nigerian Citizens' Acceptance of Covid-19 Vaccination

S/N	Questionnaire Items	No. of Respondents		Percentage
5.	I am willing to get vaccinated when the vaccines are equitably available.	Agreed	28	7%
		Disagreed	356	93%
	Total		384	100%
6.	I have received the first dose of covid-19 vaccine.	Agreed	9	2%
		Disagreed	375	98%
	Total		384	100%
7.	I have received first and second doses of covid-19 vaccine.	Agreed	0	0
		Disagreed	384	100%
	Total		384	100%

Data presented in Table 2 show that many eligible Nigerian citizens needed to be more open to COVID-19 vaccination. This report is based on 93% of respondents opposed vaccination, even when COVID-19 vaccines become equitably available in Nigeria. The presentation in the same table also shows that 98% of respondents were yet to receive the first dose of covid-19 vaccine.

Table 3. Factors that underlie Covid-19 Vaccination Hesitancy in Nigeria

S/N	Questionnaire Items	No. of Respondents		Percentage
8.	I am hesitant to COVID-19 vaccination because:			
	. There is no COVID-19 in Nigeria.		0	0
	. Due to reported side effects of the vaccines.		235	61%
	. NAFDAC's warning of fake COVID-19 vaccines in circulation in Nigeria.		39	11%
	. Unavailability of a vaccination center around my community/workplace.		0	0
	. Nigeria is now safe from covid-19.		0	0
	. Absence of commitment by Nigerian health authorities to respond to vaccine side effects.		28	7%
	. I have no trust in the Nigerian government and health system.			
	Total		82	21%
			384	100%

Table 3 shows that the reported side effects of COVID-19 vaccines and citizens' distrust of the Nigerian government and health system led to COVID-19 vaccination hesitancy in Nigeria. This report is based on 61% and 21% responses obtained by items 9(b) and 9(g), respectively. Data in the same table also show that warning of the circulation of fake COVID-19 vaccines by the National Agency for Food and Drug Administration and Control (NAFDAC) and the response of Nigerian health authorities to COVID-19 side effects were other factors that underlie Nigerian citizens' hesitancy to covid-19 vaccination. It is based on 11% and 7% of responses obtained by items 9(c) and 9(f).

Research Question 1: How do Nigerian citizens perceive the COVID-19 pandemic? Determining Nigerian citizens' perception of the COVID-19 pandemic is foundational since the acceptance or otherwise of vaccination depends on the perception of the pandemic. Research question 1 investigated Nigerian citizens' perception of the COVID-19 pandemic. The presentation in Table 1 indicated that many Nigerians were aware of the spread of the pandemic in Nigeria. This report is based on 87% of respondents who acknowledged the spread of COVID-19 in Nigeria.

Ordinarily, citizens' acknowledgment of the spread of COVID-19 should constrain mass and voluntary vaccination to eradicate the pandemic from the Nigerian territory. It is not the case, suggesting that Nigerian citizens' acknowledgment of the spread of the COVID-19 pandemic in the country is yet to result in the expected action of accepting vaccination to contain the spread of the pandemic. Bandura (1989) articulated the Social Cognitive theory, which suggests that an individual's knowledge or awareness of a phenomenon may not directly translate into participation in that phenomenon. It is due to several factors that provoke action or inaction in individuals. Bandura (1989) observes that people's actions are governed by reason, including apprehensions, which represent cognitive disequilibrium. This cognitive disequilibrium is taken off the way, citizens' participation in social action and the expected benefits of such an action may be recovered. It is the seeming situation of COVID-19 vaccination in Nigeria, where citizens' acknowledgment of the spread of the pandemic is yet to result in the appetency to get vaccinated.

Research Question 2: What is the level of acceptance of COVID-19 vaccination in Nigeria? With assurances of the safety and efficacy of COVID-19 vaccines by local and international health authorities and public vaccination of the highest echelon of Nigeria's political leadership, particularly President Mohammadu Buhari and Vice-President Yemi Osinbajo accelerated COVID-19 vaccination was anticipated. Thus, research question 2 investigated eligible Nigerian citizens' acceptance of COVID-19 vaccination. Data presentation in Table 2 showed that many eligible citizens were hesitant to COVID-19 vaccination. This report is based on 93% of respondents hesitating to covid-19 vaccination.

Eligible Nigerian citizens' hesitancy to COVID-19 vaccination in the face of the continuous spread of the rampaging pandemic, especially the Delta variant and probable fourth wave, indicates the need for stakeholders' collaboration and articulating interpretative messages by relevant stakeholders. Interpretative messages are required to overcome the cloud of apprehensions surrounding COVID-19 vaccination. Lin, Bragley, and Koops (2003) state that messages that affect people's opinions about a social phenomenon should provide compelling arguments that convey a sense of urgency for action. The scholars aver that a message is made irresistible when the target population is sufficiently introduced to the consequences of indifference to an idea. It is practicable since introspecting one's views about the consequences of indifference to a phenomenon eliminates sentiments and builds citizens' trust in social action.

Achieving Nigerian citizens' confidence to participate in COVID-19 vaccination lays the foundation for stakeholder relations perspectives in driving the exercise. The trust serves as the springboard for citizen participation in social action. The absence of trust resonates in citizen apathy to social processes, such as COVID-19 vaccination. Thus, Henrique de Gouveia O Melo, Head of Portugal's Covid-19 Vaccination Task Force, identifies group collaboration, the elimination of political distrust, and persuasive management of anti-vaccination sentiments as critical steps to encourage mass vaccination in countries hit by covid-19 pandemic (Harlen & Alberti, 2021; Nunes, 2021). Introducing processes that should engender eligible Nigerian citizens' trust in COVID-19 vaccination through stakeholder collaboration and eliminating leadership distrust is better than introducing compulsory vaccination, which may be ridden with resistance as witnessed around the globe.

Research Question 3: What factors influence Nigerian citizens' hesitancy to covid-19 vaccination? Determining the factors that underlie COVID-19 vaccination hesitancy in Nigeria is foundational to articulating practical measures that should engender mass vaccination. The presentation in Table 3 showed that the reported side effects of COVID-19 vaccines were Nigeria's leading cause of hesitancy. It is based on 61% of respondents who were hesitant to COVID-19 vaccination due to the reported side effects of the vaccines. Data presented in the same table also indicated that citizens' lack of trust in Nigeria's political leadership and health system and NAFDAC's warning of fake COVID-19 vaccines in circulation in Nigeria were other factors that underlie eligible Nigerian citizens' hesitancy to COVID-19 vaccination. It is based on 21% and 11% of respondents who distrusted

the Nigerian political leadership and health system and worried about NAFDAC's warning of fake COVID-19 vaccines being circulated in Nigeria.

Undoubtedly, people's hesitancy toward an innovation is heightened by establishing risks or dangers associated with the innovation. Thus, DeFleur (2010) identifies relative advantage as a critical element that underlies citizens' adoption or otherwise of an innovation. He argues that no matter how compelling a development message may be, the association of risks with the product or idea being marketed remains a potent cog to adoption. In the case of COVID-19 vaccination, not only is the acknowledgment of vaccine side effects by the World Health Organisation (WHO) and local health authorities entropic to mass vaccination but also NAFDAC's acknowledgment of fake vaccines being circulated in Nigeria and the seemingly callous attitude of the Nigerian health authority to vaccine side effects are sufficient grounds for hesitancy. COVID-19 hesitancy may continue to expose Nigerian citizens to the rampaging pandemic until the factors that underlie hesitancy are accorded due attention and addressed.

CONCLUSION

Despite Nigerian citizens' acknowledgment of the spread of the COVID-19 pandemic, vaccination has substantial hesitancy. The reported side effects of COVID-19 vaccines are the leading cause of eligible Nigerian citizens' hesitancy to vaccination. Other factors contributing to Nigerian citizens' hesitancy to get COVID-19 vaccinated were NAFDAC's warning of fake vaccines being circulated in Nigeria and distrust of Nigerian political leadership and the healthcare system. It is necessary to create policies that address the causes of people's reluctance to get the COVID-19 vaccine to stop the pandemic's ongoing expansion in Nigeria.

As it is practical in some countries with high vaccination rates, such as Portugal, there is a need for identification and collaboration with critical stakeholders to lead advocacy for mass vaccination in Nigeria instead of crisis-prone compulsory vaccination.

Recommendations. For amicable resolution of Nigerian citizens' hesitancy to COVID-19 vaccination, the following suggestions may be helpful:

1. There is an urgent need to deal with confusion about the side effects of COVID-19 vaccines. It is not enough to acknowledge the probable side effects of COVID-19 vaccines. National and international health authorities should rise to assure eligible Nigerian citizens that vaccine side effects are normal and recoverable.
2. Given the acknowledgment of COVID-19 vaccine side effects, the Nigerian health authorities should provide accessible designated centers where vaccinated persons with side effects can access immediate medical attention. Such referral centers should be very close to the public, and medical attention should be seamless. COVID-19 side effects should not be treated in a manner that seems to be the burden of affected individuals.
3. Like the testimonies of survivors of the pandemic, the telecast of the successful management of COVID-19 side effects will raise citizens' confidence that vaccine side effects can be successfully treated. People who recovered from vaccine side effects should be motivated to testify to encourage the public that probable COVID-19 side effects are normal and recoverable.
4. There is a need to identify and collaborate with critical stakeholders to diffuse COVID-19 vaccination in Nigeria. Stakeholders, such as the mass media, religious organizations, civil society groups, and opinion leaders, will help to diffuse COVID-19 vaccination in Nigeria.
5. The National Agency for Food and Drug Administration and Control (NAFDAC) should uphold its mandate of certifying vaccine efficacy and safety of COVID-19 vaccines and other products. The agency should not assign the certification of COVID-19 vaccines to Nigerian citizens. The confusion arising from the agency's acknowledgment of the circulation of fake COVID-19 vaccines in Nigeria should be squarely addressed to raise citizens' confidence in the safety and efficacy of the vaccines.
6. It is imperative to bridge Nigerian citizens' distrust in the country's political leadership. Leadership communication on people-oriented social actions may continue to suffer setbacks due to citizens' distrust of leadership.

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