

Discourse Strategies of Negotiating Scam in COVID-19 Vaccine Discourse

Ruth Karachi Benson Oji
Institute of Humanities, Pan-Atlantic University, Lagos

Abstract

In the global effort to combat COVID-19, governments developed vaccines to safeguard their populations and enhance immunity. Despite these efforts, a significant portion of the public perceived the vaccination campaign as a harmful scam rather than a protective measure. This study investigates the discourse strategies employed by commenters on two Facebook posts from the Nigeria Centre for Disease Control (NCDC) and UNICEF Nigeria. Analysing 4,000 Facebook comments through Hyland's stance and engagement theory, the research sheds light on the specific linguistic angles scholars have explored in COVID-19 discourse, particularly focusing on vaccine-related linguistic studies. The findings reveal that the stance taken by many Nigerians against vaccine dissemination is influenced by factors such as anger over looted palliatives during the lockdown, religious beliefs, and unverified reports fueled by media conspiracy theories. The study concludes by highlighting the need for proactive measures by key stakeholders to sensitise the Nigerian population and avert potential crises.

Keywords: COVID-19; Respondents' comments; Stance and engagement; Vaccines; Nigeria

1. Introduction

Coronavirus disease (COVID-19) is a global pandemic that has significantly impacted people of all ages, socio-economic status, gender, and race. It is a crisis that has prompted a collective reliance on the policies and actions implemented by governments worldwide to mitigate the lethal effects of the virus (Qiu et al., 2020). The emergence of confirmed cases of COVID-19 dates back to December 2019, with countries like China being among the early affected regions. However, it was not until February 27, 2020, that Nigeria reported its first case of Covid-19 (Nigerian Centre for Disease Control [NCDC], 2020). In response to the escalating situation, many states in the federation issued stay-at-home orders by March 20, 2020. Subsequently, on March 23, 2020, Nigeria took more stringent measures by closing all its borders and implementing total lockdown orders in the Federal Capital Territory, Abuja, as well as in two key states, Lagos and Ogun (Unuabonah and Oyeboade, 2021). Other cases arose, and by July 8, 2020, Nigeria had 46,140 confirmed cases of Covid-19 with 942 fatalities.

Despite the high rate of confirmed cases in Nigeria, many individuals did not believe that the pandemic was real, let alone see the need to take safety precautions by vaccination. The beliefs held by Nigerians about COVID-19 extend beyond the immediate health crisis and contribute significantly to the broader challenges associated with the pandemic. According to Olapegba et al. (2020), these beliefs are influenced by cultural, religious, and socio-political factors. Chukwuorji and Iorfa (2020) note that superstitious beliefs have largely shaped the perception of most Nigerians regarding the source and cause of COVID-19. Wonodi et al. (2022) also assert that Nigerians grappled with highly disruptive vaccine hesitancy and refusal resulting from negative rumours and loss of public confidence. These factors contribute to the

formation of perceptions and attitudes that influence how individuals interpret information, make decisions, and ultimately behave in response to the pandemic.

The advent of New Media, particularly social media, has emerged as a powerful tool through which Nigerians express their opinions and views on important issues that affect them. The rapid spread of information, whether accurate or not, amplifies the complexities of public perception. Notably, expressions of doubt, scepticism, and, at times, outright denial of the virus's existence have become prominent features of the online discourse among Nigerians. Social media platforms like Facebook serve as dynamic spaces where Nigerians express opinions, share information, and discuss COVID-19. The rapid transmission of information through these channels makes the New Media a veritable force in shaping public narratives, beliefs, and attitudes related to the pandemic. The decentralised nature of the New Media allows for the expression of a wide spectrum of perspectives, ranging from scientifically informed discussions to unfounded conspiracy theories (Smith & Johnson, 2020). As such, the New Media landscape becomes a reflection of societal beliefs and an influential force that reinforces or challenges these beliefs.

Although scholars such as Unuabonah and Oyebode (2021) have adopted a multimodal discourse approach to study COVID-19 memes as political protests in Nigeria, Atansuyi (2022) has also explored a discourse analysis of online newspaper reportage of the news about COVID-19 using Van Dijk's discourse analysis parameters and J. Austin's speech acts concepts. There are also pragmatics-based studies that have examined speech acts and conversational implicatures employed in online discussions about the virus, revealing indirectness, ambiguity, and manipulation to promote scepticism and doubt. (e.g., Owolabi & Opeyemi, 2021; Adebayo & Ogunsanwo, 2022). Stylistic studies have also focused on the linguistic features employed in misinformation narratives to analyse their persuasive impact on audiences. (e.g., Ochonogor & Nwaozuzu, 2020; Ayeni & Olojede, 2022) and discourse analytical-based studies which have analysed the power dynamics and ideological forces shaping online discourse surrounding the virus, highlighting the role of social media algorithms, political agendas, and cultural contexts in perpetuating misinformation. (e.g., Ogbodo & Okolo, 2021; Okolocha & Odigbo, 2022). However, an interrogation of the virus as a scam among Nigerians is yet to receive adequate scholarly attention. To address this gap in scholarship, this study examines discourse strategies of negotiating scams in COVID-19 vaccine discourse with a view to exploring the stance and attitudes of individuals and what these reveal about the language of COVID-19 discourse.

This study adopts Hyland's (2005) stance and engagement theory, a robust framework for analysing the discourse strategies employed in expressing doubt, scepticism, or denial about the virus, offering insights that contribute to the broader understanding of public perceptions of the COVID-19 pandemic. This approach deepens our understanding of public perceptions and provides insights that can inform targeted interventions by public health authorities and policymakers. This will enable us to unpack the discourse strategies used to construct and disseminate these narratives and the social and political contexts that shape their reception.

2. The Roles of Issuing Bodies Engagement through Social Media

UNICEF Nigeria and the Nigeria Centre for Disease Control (NCDC) have consistently posted information online through several media spaces, such as on their websites and Facebook, to enlighten the populace on the COVID-19 pandemic. On the one hand, the NCDC is primarily Nigeria's national public health institute, given the mandate to promptly identify and respond to outbreaks of infectious diseases and other health emergencies. NCDC (2017-2021) aims to 'protect the health of Nigerians through evidence-based prevention, integrated disease surveillance and response activities, using a one health approach, guided by research and led by a skilled workforce.' Among other core functions, they are expected to support States in response to small outbreaks and champion action against larger disease outbreaks. In this vein, the NCDC has been at the forefront of engaging with the international community on COVID-19. Consequently, the NCDC has been giving daily updates on the number of COVID-19 cases in the country (state by state) and sharing enlightenment on the vaccine provision for citizens. On the other hand, UNICEF Nigeria aims to promote the rights of children in order to help them attain their potential in life. They work with the Nigerian government to respond to emergencies like those in northeast Nigeria. Water, sanitation and hygiene are the crucial components of their work. Because healthcare and education of children and women are at their front burner, they are very much involved in promoting enlightenment for the Nigerian populace so that children and adults can be protected from the menace of the COVID-19 pandemic. Both bodies have, through their websites and social media pages, precisely Facebook, drawn the attention of the Nigerian citizenry and the world to updates on the current happenings of COVID-19. This study focuses on their updates and respondents' views of their posts. Out of their numerous posts on the sites, this study is interested in those related to the vaccination exercise in the country, with a view to ascertaining how people linguistically perceive the exercise and what actions concerning the vaccination are being taken to stem the tide of the virus, if any. This is pertinent as it helps show whether people perceive and construct the virus as real or imagined, scam or normal.

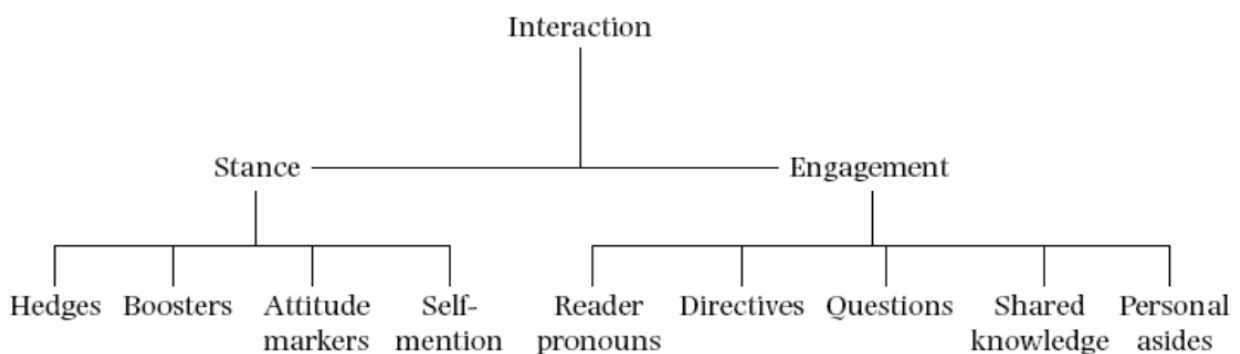


FIGURE 1. Key resources of academic interaction

3. Theoretical Framework

The framework for this study is Hyland's (2005) stance and engagement theory. According to Hyland (2005:176), stance expresses a textual 'voice' or community-recognised personality. Stance can be seen as an attitudinal dimension and includes features that refer to how speakers or writers present themselves and convey their judgements, opinions, and commitments about a particular topic. According to Biber and Finegan (1989:124), stance is 'the lexical and grammatical expression of attitudes, feelings, judgements or commitment concerning the propositional content of a message.' Specific word choices are made to convey such judgements and opinions. Hyland (2005) proposes a framework for explaining the connection between writers and readers. He believes that the objective of writing is not simply to create texts or to describe an external world but also to develop and negotiate social relationships with the readers. According to this model, interaction in writing consists mainly of two fundamental components: Stance and engagement.

As seen in Figure 1, stance consists of four major components: hedges, boosters, attitude markers, and self-mentions (p.178). These elements deal with writer-oriented features of the interaction. In other words, through stance features, writers express all personal and professional attitudes toward what is said, as well as their commitment to the reliability of the presented propositions, and they also determine the degree to which they are projected into the text. Hedges assist the writer in withholding complete commitment to a proposition, emphasising subjectivity, and presenting information as an opinion rather than credited fact. Hedges "imply that a statement is based on plausible reasoning rather than certain knowledge" (Hyland, 2005, p.179). Hedges also assist writers in claim-making and allow them to create a discursive space "where readers can dispute their interpretations" (p.179). Examples of hedges are presented in the text below, taken from Hyland (2005):

Our results suggest that rapid freeze and thaw rates during artificial experiments in the laboratory may cause artifactual formation of embolism. Such experiments may not quantitatively represent the amount of embolism that is formed during winter freezing in nature. In the chaparral at least, low temperature episodes usually result in gradual freeze-thaw events (p.179).

As Hyland states, boosters allow writers to express certainty, marking both involvement with the topic and solidarity with the audience. Unlike hedges, which introduce uncertainty, boosters help writers convey ideas with assurance, narrowing the diversity of opinions rather than expanding it. As both hedges and boosters balance objective information and create space for subjective evaluation and interpersonal negotiation, they aid writers in gaining acceptance for their claims (Hyland, 2005). Instances of boosters are provided in the paragraph below:

This brings us into conflict with Currie's account, for static images surely cannot trigger our capacity to recognise movement. If that were so, we would see the image as itself moving. With a few interesting exceptions, we obviously do not see a static image as moving[...] This, too, creates problems, for it suggests that we have a recognitional capacity for instants, and this seems highly dubious. (p. 179)

Attitude markers reveal the writer's affective rather than epistemic stance towards propositions. Writers convey emotions such as surprise, agreement, importance, frustration, and more through the use of attitude verbs, sentence adverbs, and adjectives (Hyland, 2005). Self-mention refers to the use of first possessive adjectives and person pronouns to present propositional, affective and interpersonal information in the text (Hyland, 2005:180). To adopt a specific stance and disciplinary-situated authorial identity, writers consciously decide on the presence or absence of explicit author reference (Hyland, 2005). As seen in the text below, the author emphasises their contribution to the field to seek agreement:

I argue that their treatment is superficial because, despite appearances, it relies solely on a sociological, as opposed to an ethical, orientation to develop a response (Hyland, 2005:181)

According to Hyland (2005), reader pronouns, personal asides, appeals to shared knowledge, directives, and questions are the five main elements of engagement (p. 182). Reader pronouns are the clearest way through which a writer can acknowledge the reader's presence. Personal asides help writers address readers directly by interrupting the argument to offer a comment on what has been said. Appeals to shared knowledge refer to the presence of explicit markers where readers are asked to recognise something as familiar or accepted. Directives are used to instruct the reader to perform an action or to see things as determined by the writer. Finally, questions offer dialogic involvement, invite engagement, and lead the readers to the writer's viewpoint.

Engagement, according to Hyland (2005:176), is "an alignment dimension where writers acknowledge and connect to others, recognising the presence of their readers, pulling them along with their argument, focusing their attention, acknowledging their uncertainties, including them as discourse participants, and guiding them to interpretations. Hyland acknowledges that stance and engagement overlap; they are two sides of a coin and contribute to the interpersonal aspect of discourse. The four elements of engagement as identified by Hyland include reader- pronouns, Directives, Questions, Shared knowledge, Personal asides. In relation to the data for this study, the reader is able to read a news item and present to fellow online interactants their perception of the COVID-19 vaccine being administered to the Nigerian populace.

4. Methods

The data for this study were retrieved from the Facebook accounts of NCDC and UNICEF Nigeria. The selection of Facebook accounts for this study is underpinned by the pivotal roles of NCDC and UNICEF in communicating crucial information about COVID-19 vaccines in Nigeria. As the national public health institute, NCDC holds authority in coordinating responses to health emergencies, making its posts a significant source of government-endorsed information. UNICEF, a global organisation focused on children's rights, broadens the study's scope by addressing vaccine-related issues concerning the well-being of children. The organisations' substantial reach ensures a comprehensive analysis of public sentiments by

examining comments on their Facebook posts. Both accounts provided information urging citizens to accept vaccines, which health workers were dispensing. Facebook, with approximately 2.9 billion global users and 27,670,000 users in Nigeria as of March 2020, serves as a valuable tool for communicating health issues to the populace, offering an opportunity to analyse interactants' stance and mode of engagement on the raised issues. This makes it a veritable tool for communicating health issues to the populace, and it allows for deriving interactants' stance and modes of engagement on the issues raised. The text corpus for this study consists of 4,000 comments, constituting 245,480 words on two posts by the NCDC and UNICEF Nigeria on COVID-19 vaccine dissemination, in August 2021. This year marked the commencement of the disbursement of the vaccines to Nigerians, and this has met with mixed reactions even among members of the same family. The analysis of data was guided by Hyland's stance and engagement theory of interaction. Emphasis is placed on the elements of stance and engagement in the data. 'COM', meaning 'comments', are used to capture participants' individual comments; however, only 27 samples from the corpus are utilised in the analysis. The samples are representative of the larger data.

The qualitative analysis uses more of the features of Hyland's Stance and engagement with a little amendment. While the elements of engagement are fully deployed for analysis, the elements of stance are moderated in order to accommodate lexical choices and labels that reflect mostly negative stances by interactants. The comments are based on two major Facebook posts by the Nigeria Centre for Disease Control (NCDC) and UNICEF Nigeria on the COVID-19 vaccines being dispensed to citizens. The posts are as follows:

16TH AUGUST NCDC 1K COMMENTS

Today, our DG, Dr Chikwe Ihekweazu joined the Presidential Steering Committee on COVID-19, Federal Ministry of Health Nigeria and National Primary Health Care Development Agency in the flag off ceremony of the phase 2 COVID-19 vaccination.

"The next step of this exercise - the distribution to the public, depends on healthcare workers. Nigerians should work collaboratively and support the healthcare workers to ensure the safe delivery of the vaccines."

- Dr Chikwe Ihekweazu in his goodwill message.

17TH AUGUST UNICEF 3K COMMENTS

The #COVID19 Delta variant is a mutation of the SARS-CoV-2 virus that causes #COVID19, and it is more contagious. The best way to limit the transmission is for everyone to #TakeResponsibility and get the vaccine now that it's available. Also, remember to continue to follow existing advice on preventing the spread of the virus, including physical distancing, wearing masks, regular handwashing and keeping indoor areas well-ventilated.

#TogetherAgainstCovid19

#VaccinesWork

5. Analysis and Discussion of Findings

This section teases out the strategies deployed by interactants to project their stance on the COVID-19 vaccination provided by the Nigerian government for free and the engagement elements used to situate the stances and seek solidarity with other commenters. Their comments are categorised as COM, and subheadings are used to isolate the strategies deployed. Several stances taken by the commenters are noted, and the linguistic tools of stance and engagement used to instantiate them are described. In the data, the following stances were observed: Demonisation of COVID-19 vaccines, vocalizing the side effects of the vaccine, discrediting the potency of the vaccine, rebuking the role of social actors, and articulating pressing social issues. Below, I review the stances one after the other in line with the data.

(i) Demonisation of COVID-19 vaccines

The demonisation of Covid-19 vaccines is portrayed by participants through the use of directives, pronouns, and appeal to shared knowledge. For many of them, their cherished religious belief is that the vaccines are related to the long-awaited Biblical anti-Christ and acceptance of them into the body is tantamount to receiving the mark of the Wild Beast prophesied to come in the end time, which is believed to be now.

COM 1:

Please do not take any vaccine, it is indirectly mark of the beast (666)!!!!!!

To show their position on the vaccination discourse, respondents to the post employ the use of directives, which is an aspect of engagement. This is in line with Hyland's (2005) thrust that directives aid discussants in proposing acts that they want other readers to engage in. Some of such activities include textual, physical and cognitive acts. In order to achieve these acts, the use of imperatives is rife in communicating them. In the data, we find that this element of engagement abound. In 1, the directive is premised on the belief that the vaccine is 'indirectly the mark of the beast (666)' – a Biblical belief of some impending catastrophe on the human race. Here, there is more than an instruction to engage in physical acts; there is also a deployment of textual acts to metadiscoursally guide other members of the community through reasons not to take the vaccine. By referencing the mark of the wild beast, the writer assumes that knowledgeable people would refrain from the impending doom. In this case of the vaccine discourse, we find participants giving many reasons and endeavouring to appeal to people's reasoning to get them not to take the vaccine despite its supposedly laudable benefits. Religious reasons are proffered the most. This is captured in the COMs 2-7 and collectively explained thereafter.

COM 2:

Let's not take this as a joke; the truth is that the vaccine kills. It was confirmed that those that took one dose and stop will go below within one year while those that took both first and second phases will go down below in three years' time. Did the Bible not tell you about saving your life and losing it and losing your life and saving it? Be wise.

COM 3:

This vaccine is from a demonic world; it's only Satan that gives something free, but later, you will pay for it. Jesus blood is OK for me and my family.

COM 4:

Satanic agents only know how to kill; they don't know how to save lives. Say no to their evil vaccine.

COM 5:

Activating zombies for the next phase.

COM 6:

Please, it is the mark of the beast 666. The end is near. Do not collect...

COM 7:

Nigerian citizens shine your eyes, be wise. Think fast, cooperate among yourselves. This vaccines are not meant for us. Stop accepting the mark of the beast (666) in the name of vaccine my people. Very soon, you all will remember my statement.

By activating a mental image of zombies and making a connection with the Biblically prophesied wild beast and its mark – 666 – the participants here cognitively assert their position as to why all must refuse the vaccine. For those of the Christian faith, as depicted by the participant in COM 2, it is a shared knowledge that a time would come when there would be an effort by the devil to indoctrinate people by having them get the mark. Some believe the mark will be through westernised infractions such as the vaccine, so they warn others to steer clear. Should people think about the implications of accepting to be given the 'mark' via the vaccine, they would reject it completely. This discourse strategy posits the stance of the writers and shows how they strategically endeavour to engage the reading audience and win them over in their line of reasoning. As Hyland (2005) notes, this discourse strategy is dangerous because it gets people to believe in a reasoning that prevents them from taking the vaccine that could be a lifesaver.

(ii) Vocalising the side effects of the vaccine

Commenters sometimes took their stance by emphasising the vaccine's side effects. This led to their communicating to others via their comments that the virus is unreal and, thus, no need for the vaccination exercise exists. The vaccines are described as dangerous and harmful, and people are urged to avoid them. Additionally, nurses dispensing the vaccines are accused of being tools in the hands of the government to cause harm to the populace, and individuals submitting to the vaccination exercise are insulted for doing so. Several strategies, such as the use of pronouns, are utilised to drive home these points and reflect the stance taken by the commenters.

Hyland notes that writers make a ‘conscious choice’ to take on a specific stance and ‘disciplinary-situated authorial identity’ (2005: 181), which leads to their use of the first-person singular pronoun ‘I’ or ‘We’. Such self-mention tends towards instantiating a position of authority and projecting personal belief, considering the matter at hand. Therefore, using pronouns gives way to different constructions that reveal the true position and intention of the writer of a comment. In the COMs, several such stances promoted by the use of pronouns abound.

COM 8:

I am supposed to have taken my second dose, but fear of videos we watch online could not allow me to take it.

This commenter uses the first-person singular pronoun to begin her reason for distrust of the second vaccination dispensation. A number of videos making the rounds online suggest that it is harmful to take the vaccines. This participant, therefore, takes an authorial stance to identify herself as one who would no longer partake in the exercise. In the next COM, we see a similar usage.

COM 9:

Please be careful. I just watched the video of those that took it. When they put object at the spot where they were injected, it magneted the objects. If you need the video, I will send it to you.

This commenter urges other respondents to be careful. Using the first-person singular pronoun, he asserts that he had seen the so-called video and even offers to make it available to any who wishes to have it. This proposition is such that tends to juxtapose a position and make it legitimate. In other words, the position of the commenter is to be seen as real. COM 10 has the commenter using the pronoun to buttress a personal reality in order to contribute to the discourse and convince others that the vaccines are dangerous.

COM 10:

I took the first dose and I’m still feeling pains, headache, and at times I’m weak. But you see this second one, I won’t take it.

Here, the commenter alludes to the pains and uneasiness being experienced as the reason for not going to take the second dose of the vaccine. Recounting such personal experience through the first-person singular pronoun ‘I’ indicates the writer’s clear-cut position – that of not taking the second dose. This may motivate others to refrain from taking the vaccines since they may not want to experience the side effects that this commenter had. In the next COM, the commenter refers to personal experience to validate her position.

COM 11:

I knew of someone who had taken the vaccine but was still infected with the virus.
So, who is deceiving who?

That this commenter knows someone who died even though vaccinated leads her to believe that the vaccination exercise is meaningless and deceptive. So, she asks, ‘Who is deceiving who?’ To her mind, there is a lot of deceit going on with the vaccination exercise. Her use of the first-person singular pronoun in positioning the discourse seems to validate her reason and stance to any other reader of the post. There is also the use of the first, second- and third-person plural pronouns in motivating meaning and showing stance in the vaccine discourse. When people use such pronouns, Hyland (2005) posits, they do so to show solidarity and provoke dialogue that conveys togetherness by the people. The following COMs show how this was articulated in the comments:

COM 12:

We can’t be fooled. Anyone saying the vaccine is safe should take all his or her family members to be vaccinated. How can you take a vaccine and still be wearing masks, washing hands, and observing social distance?

Here, the commenter writes as though he were speaking for himself and all other Nigerians. Using the first-person plural pronoun ‘we’, he presupposes that every other Nigerian is with him in his quest to disregard the vaccine. He supplies further reasons for insisting that ‘we’ cannot be fooled. He does not understand how people can be vaccinated against a virus and yet be made to take other non-pharmaceutical measures like hand washing, use of face masks, and observe social distancing. This usage posits a call for solidarity along the lines of reasoning presented by the writer. There is a similar use as shown in COMs 13-15.

COM 13:

All this nonsense should be stopped. We should not use our hands and invite problem that doesn’t exist.

COM 14:

Big lie, the vaccine doesn’t stop one who is vaccinated from contracting the virus; it doesn’t protect nothing, you’ll still have to wear NOSE or facemask. What the heck is that? Coronavirus is a lying scheme.

COM 15:

Upon the warning, Oga, you still allowed this nurse give you the injection? You have tried very well. Don’t come here to weep!

For COM 13, the first-person plural pronoun ‘we’ is used to express his view and voice his concern over what he terms ‘nonsense’. The vaccines are likened to nonsense, meaning they are ineffectual and ought not to be administered to the public. His use of the pronoun indicates that he views it as a collective responsibility for all Nigerians to avert the danger. This shows

his stance on the issue and how he wants others to perceive it, too. COM 14 uses the plural pronoun “you” in an all-inclusive sense to depict what is still required of everyone despite being vaccinated; hence, he calls the virus ‘a lying scheme’. In COM 15, the interlocutor directly addresses a single individual shown on the post to be receiving the vaccine. He reprimands him for his action of accepting the vaccine and issues a directive that he should not ‘come here to weep’ after the effects of the vaccine take a toll on him.

(iii) Discrediting the potency of the vaccine

Participants make use of questions to discredit the potency of the COVID-19 vaccine. Because it is assumed that the government and other major stakeholders are reading the comments, participants in the discourse ask both direct and indirect questions of a rhetorical nature to express their opinions. The questions are mostly directed at the government, without expecting a response. All of the comments highlight the basis for the stance taken by the commenters – unverified reports and inadequate knowledge of how the vaccines work and their relatedness to the use of face masks. The COMs that follow – 16-22 – illustrate this:

COM 16:

My question is, if the vaccine will stop the spread, why then are you still wearing your facemask?

COM 17:

You nurses that are giving vaccine to people, devil is really using you to accomplish his agenda. And you people that are receiving the vaccine, you guys are the problem. Haven’t you heard about the effects of the vaccine on people? Are you out of your mind?

COM 18:

Please, just one question: Why do we still have cases of people who are fully vaccinated coming down with Covid-19? Is the vaccination not working, or what is really happening?

COM 19:

It’s like you’re tired of living. Why not drink sniper? They are almost the same thing and have the same function.

COM 20:

The vaccine you’re taking now is it for the Covid-19 or the Delta variant? If it’s effective like you claim, then what’s the essence of continued mask wearing? Deception at work. How can you say it’s safe when the vaccine producers signed documents clearly stating that the long-term effect is not currently known and they would not be held liable for any negative effect of it? Can you board an aeroplane and the pilot announces before take-off that “we’re not sure of the current state of the engines of this aircraft, but relax the flight will be safe and effective; however,

if anything happens, the airline won't be liable"? Now I'm sure you would smile and relax after that news.

COM 21:

Oh my gosh...your question just made my day. How on earth are they going to believe such a deception? I am just sorry for anyone that has been vaccinated. They should be ready for any disaster from now on.

COM 22:

If it is safe, then why does it magnet metals?

In COMs 16 and 20, the commenters do not see the correlation between taking the vaccines and still needing to wear a face mask; hence the questions that follow to help other readers reason why they should not take the vaccine. COM 17 metaphorically paints the nurses as 'Devil's advocates' since they are 'out of their mind' for vaccinating people with the deadly vaccine. The use of the metaphor "Devil is really using you" portrays nurses as unwitting agents of malevolent forces, framing the act of administering vaccines as aligned with a nefarious agenda. This serves to legitimise the commenter's scepticism by associating healthcare workers with negative intentions. By framing nurses as tools of the devil and questioning the sanity of vaccine recipients, the comment actively discourages vaccine acceptance.

COMs 18 and 21 regard the vaccination exercise as a deception and cannot fathom why fully vaccinated persons still come down with the virus. COM 18 raises a significant question about the efficacy of vaccines, particularly in light of cases where fully vaccinated individuals still contract COVID-19. The tone of the question is inquisitive, seeking clarification on a perceived inconsistency in the success of vaccination efforts.

COM 19 equates the vaccine with 'sniper' – an insecticide sold in Nigeria – and recommends that people who want to die should simply drink it rather than take the vaccine. It conveys a deeply concerning sentiment by suggesting a drastic and harmful alternative to getting vaccinated. Moreover, the rhetorical question, "Why not drink sniper?" questions the motives of individuals choosing vaccination, implying that such a decision is irrational or self-destructive. COM 22 makes a question based on an unverified report making the rounds that the vaccinated spot on the body magnets metals. Such questioning strategies used by the various commenters depict their framing of the exercise and why they are opposed to it.

(iv) Rebuking the role of social actors (government and health officials)

A considerable number of commenters took the stance of rejecting the vaccine based on their anger with the Nigerian government over the palliatives looted during the compulsory COVID-19 lockdown. Throughout that period, numerous citizens complained about not receiving any shared palliatives despite the government's daily announcements claiming widespread distribution across Nigeria. In reality, many people went hungry and received no palliative assistance. This led to angry reactions from citizens, who, in turn, broke into some warehouses allegedly used to hoard public palliatives. They then seized the supplies without restraint. Many comments in the COVID-19 vaccination exercise indicated that individuals were still extremely

upset over the incident. They believed the government showed no interest in its citizenry and only intended to deceive them. The following comments depict this.

There is also a high level of engagement in the vaccine discourse based on an appeal to shared knowledge. The writer uses a reader-oriented strategy to give the reader a shared understanding of a position. In COMs 23-26, commenters appeal to shared knowledge to counter the government's seeming goodwill in wanting to facilitate healthcare for the citizens.

COM 23:

Wicked people, if you had shared the palliative this fast, Nigeria would've been a better place. So sorry for the people taking this vaccine. Till then, you will know what you have done to yourselves.

COM 24:

They refused to bring food during the time of Covid-19. Now they are bringing vaccines for Coronavirus. Beware and wise up, Biafrans.

COM 25:

They're quick to deliver vaccines even to the most remote villages without roads, but at least one packet of indomie in the form of palliative did not reach these communities. They know how to share irrelevant things to the masses. God is the judge.

COM 26:

The same way you shared our palliative, still share the vaccine within yourselves. Anyone that comes, let the presidency taste it before it gets down to others.

As shown in the COMs above, it was public knowledge that food and other palliative were hoarded, hence the call to the government to hoard the vaccine because the understanding is that the government would never voluntarily share anything good with its citizens. In COM 23, the participant accuses the government of being "wicked" and employs an appeal to shared knowledge by referencing the government's alleged failure to distribute palliatives during the time of COVID-19. The phrase "if you had shared the palliative this fast" implies a shared understanding among readers about the government's past actions, creating skepticism regarding its current vaccine distribution efforts. Furthermore, the participants make use of questions as strategies to rebuke the role of both the Nigerian government and health officials

COM 27:

Do our leaders care?

COM 28:

You people are funny. When they brought food items it was being hid in various places and when it's vaccine now you can offer it to people????? ABI, keep it to yourself and enjoy the treatment alone. I'm saved by the blood of Jesus Christ.

COM 29:

The nose mask you are wearing, is it for your menstrual flow? Are u menstruating from your nose, or is it still for the same COVID-19 you took the vaccine for? Thunder from above will fire all of you.

Commenters' use of rhetorical questions in COMs 27-29 to a non-present audience shows the reason for their stance – belief that the government as leaders do not care, else why would they hide food at such a dire time people needed it the most, and why should people believe that they have their best interests at heart with the vaccines being distributed so freely? The use of directives is another element used by commenters.

COM 30

Please distribute it to your family members and scammers.

COM 31:

Go and store the vaccine in Warehouse for your children's children since you know to store palliative. We don't need it, we dash you.

COM 32:

Palliative was denied to the people, so why is this show of concern now? Better keep the vaccine just like palliative.

COM 33:

My dear, don't mind them. Use it and cook all your food, and even when you want to drink water or wine, make sure you insert it before drinking.

Referring to the government as scammers, COM 30 directs that the government distribute the vaccine to their families. There is the belief that the vaccine exercise is just a scam from the government to inflict harm on them since nothing good can be given to the populace for free. 31 and 32 follow a similar pattern, urging the government to keep the vaccine as it did keep the palliatives meant to have been distributed to the poor masses during the lockdown. 33 unabashedly directs a physical act to the government, instructing them to 'use it and cook all your food and even when you want to drink water or wine, make sure you insert it before drinking'. Such a pointed directive reveals the interactant's affective attitude to the vaccine issue, leading to what the government should do.

(v) Articulating pressing social issues

Commenters expressed concern over what they deemed bigger issues besieging the country. For many of them, problems such as hunger, herdsmen attacks on villagers, and kidnapping for ransom are areas needing urgent attention rather than the attention placed on dispensing of the vaccination. Coupled with the anger over the looted palliatives and insincerity of the government, some commenters noted how they feel that government should focus on security matters and ensure that citizens are happy.

COM 34:

People are dying of hunger, and you're bringing in vaccine. THUNDER WILL FIRE YOU AND THAT VACCINE.

COM 35:

This is not true.

That's what are you people using to destroy people's lives.

It's not good at all.

We are not seeing food to eat and you people are talking about vaccine. May Corona kill all of you there!

To indicate how pained they are, COMs 34 and 35 resort to using negative lexical choices to express their dismay for the exercise. For them, 'people are dying of hunger' and 'not seeing food to eat' and those are more pressing issues than asking people to take the vaccine. This is not unconnected to their level of exposure to how important the vaccine is to their health. Further negative lexical choices are adopted also, wishing the government bad – 'thunder will fire you and that vaccine', and 'may Corona kill of you there'. Such a terrible wish depicts the underlying intent of the commenters.

COM 36:

Things are getting out of hand in this country called Nigeria. These ones are here taking vaccines. Is it not person that is alive that do contract disease?

According to this commenter, one has to be alive before the talk about contracting a disease would seem viable. In other words, Many Nigerians are as good as dead, going by the hardships currently being experienced, hence COVID-19 is not a problem to worry much about.

COM 37:

The high cost of items in Nigeria is deadlier than the virus; let the government solve our economic problems, not vaccine. Hunger variants is killing people,

COM 38:

There is no version of Coronavirus that passes banditry, herdsmen, Boko-Haram, and bad government, whether Delta variant, nation variant, or world version. GOD is my VACCINE 1&2.

COM 39:

Please, the highest killer in this country is insecurities and hunger. Make una do something about economy and killermen, kidnappers, and BH. Stop all this nonsense because of money you guys are making. Doctors are going on strike because of hunger. They are not well paid, but you buy vaccines and pay the cost. Yet you are the one wearing a nose mask.

6. Linguistic Implications of the Negotiation of Scam Stance in COVID-19 Vaccine Discourse

This study found that the provision on the social media page for commenters to express their views makes it possible for individuals from different walks of life to find common ground on the issue of the vaccination discourse. Participants were observed interacting with each other and collectively taking a position against the government's handling of the COVID-19 vaccine distribution. Their stances on the issues were unequivocally communicated through various engagement elements. Many expressed extreme annoyance over the government's presumed mishandling of palliatives during the 2020 lockdown. Additionally, comments were made reflecting stances based on unverified reports regarding the alleged deadly effects of the vaccine, resulting in some negative comments. At times, commenters would propose ideas about the vaccine's perceived malevolence and the West's intentions towards Africans, finding agreement from some participants. Others raised questions about the vaccine's authenticity, only to be rebuffed by those strongly convinced of inherent harm in taking the vaccine. In fact, for most commenters, the existence of COVID-19 was denied.

Another set of commenters engaged in dialogues highlighting pressing issues in Nigeria—such as hunger, unrest from herdsmen attacks and kidnapping, and the high cost of living. They asserted that these issues demand immediate attention, dismissing the significance of vaccine distribution. To reinforce their perspective, participants employed negative labels, portraying the Nigerian government and the Western world as uncaring and perpetrators of evil. Commenters also conveyed their stances through pronouns—first-person singular, second-person singular and plural, and third-person singular and plural. Utilising the first person singular subjective pronoun 'I,' participants asserted their stance with authority, expressing their unwillingness to accept the vaccine. The second person singular was directed at specific individuals shown in the post receiving vaccines, and commenters took a stance of anger and pity toward them for agreeing to receive the vaccine, even though they asserted it had no harmful effects. Participants collectively directed their stance at the government using the second-person plural pronoun. Using the third-person plural pronoun allowed commenters to distance themselves from the government and the vaccine exercise.

Additionally, commenters used personal asides to express their views and engage with others. They briefly interrupted the discussion to offer their perspective, often referencing shared background information. The topic of looted palliatives served as a significant reference point, allowing commenters to substantiate their belief that the government, having hoarded palliatives, cannot be trusted to distribute vaccines with clear intentions. This shared knowledge likely fostered a sense of solidarity among participants in forming their collective stance against the government.

Furthermore, questions were employed to navigate meanings in the vaccine discourse, with commenters posing numerous rhetorical questions for fellow participants or the government. These questions reinforced their reasons for rejecting the vaccine, whether it was the first or second dose. The data also revealed the use of directives to express stance and promote engagement in the vaccine discourse. Commenters referenced textual acts by quoting or citing information about COVID-19 vaccines, physical acts by strongly suggesting

government actions and advising those unvaccinated, and cognitive acts by engaging readers and commenters in logical reasoning against vaccine uptake. Through prompting consideration of reported adverse effects and questioning the need for continued mask-wearing if vaccines do not prevent virus transmission, commenters used cognitive acts to establish their positions on COVID-19 vaccine distribution. Overall, they perceive COVID-19 and vaccines as a deceptive scheme that people should not be deceived by.

If effective strategies are not identified to mitigate attitudes undermining vaccination campaigns, it could significantly impact global health (Simione et al., 2021). With ongoing global challenges from COVID-19, vaccination emerges as a crucial preventive measure (Knobel et al., 2021). Studies indicate that vaccine-related conspiracy theories notably reduce vaccination intentions, and COVID-19-related conspiracies negatively affect health behaviors (Yang et al., 2021). Despite efforts by doctors to dispel myths (Cassata, 2021), research suggests that endorsing one conspiracy theory predicts endorsement of others (Stein, 2021). As no effective COVID-19 treatment exists, the focus remains on developing a safe vaccine. Exposure to anti-vaccine propaganda drives hesitancy, influencing parental intentions to vaccinate (Grimes, 2021; Basch et al., 2021). Vaccine hesitancy spans a continuum from acceptance to refusal, with cautious individuals in between (Simione et al., 2021). Hesitation reflects caution, not neglect, emphasising the need for media literacy to counter unverifiable and biased information consumption. Promoting public awareness can address misinformation about COVID-19 vaccination, curbing the infodemic's rapid spread. Understanding people's behaviour towards theories is essential for setting accurate records.

7. Conclusion

This study, utilising Hyland's (2005) Stance theory, explores the stances and communication strategies in online COVID-19 discourse in Nigeria. The findings indicate that religious beliefs, anger over looted palliatives, and unverified reports shape commenters' positions. Commenters employ techniques like directives, personal asides, questioning, and appeal to shared knowledge to engage others. To address the potential crisis of vaccine hesitancy for future outbreaks, the study recommends immediate sensitisation programs focusing on reorientation, trust-building, and addressing issues of insecurity and economic hardship raised by commenters. The proposed interventions, grounded in the study's insights, offer a practical guide for policymakers and stakeholders to navigate challenges in digital vaccine discourse, contributing to public health communication amid a global pandemic. This study significantly enriches our understanding of COVID-19 discourse by unveiling the rhetorical strategies in online interactions, particularly highlighting the influences of religious beliefs and socio-economic factors on vaccine hesitancy.

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