impact International Journals and Publications

© IIJP 2026 | Volume 2, Issue 1, pp. 22-33 | ISSN: 2636-4484

COMMUNITY RADIO AND PARTICIPATORY COMMUNICATION IN LASSA FEVER PREVENTION AND CONTROL IN TARABA STATE, NIGERIA: A CRITICAL DESK REVIEW

Usman Adamu Imam

Department of Mass Communication, Taraba State University, Jalingo, Nigeria
usmanadamuimam@gmail.com/+2348032919512

ARTICLE INFO
Article No.: 0124
Accepted Date: 03/12/2025
Published Date: 12/01/2026
Type: Research

ABSTRACT

Lassa fever remains a recurrent public health challenge in Nigeria, underscoring not only biomedical vulnerabilities but also persistent weaknesses in epidemic communication systems. As of Epidemiological Week 49 in 2025, Nigeria reported 9,041 suspected cases, 1,069 confirmed cases, and 195 deaths, with a Case Fatality Rate (CFR) of 18.2%, higher than the 16.5% in the comparable period of 2024 (Nigeria Centre for Disease Control and Prevention (NCDC), 2025). Taraba State contributed approximately 12% of confirmed cases, among the top hotspots alongside Ondo (36%), Edo (24%), and Bauchi (12%). Although community radio has been widely promoted as a participatory platform for risk communication and community engagement in Lassa fever prevention and control, existing scholarship often treats its effectiveness as self-evident. Much of the literature relies on descriptive accounts and institutional evaluations, with limited critical engagement with theory, methodology, and evidence claims. This qualitative desk review undertakes a comprehensive synthesis of peer-reviewed journal articles, institutional reports, and grey literature published between 2010 and 2025, with a primary focus on Taraba State, Nigeria. Guided by Participatory Communication Theory and Convergence Communication Theory, the study critically interrogates how participation is conceptualized and operationalized, how effectiveness is measured, and how knowledge about community radio interventions is produced and legitimized. Particular attention is paid to methodological transparency, the dominance of donor-produced evidence, the tendency to conflate interaction with meaningful participation, and post-COVID hybrid models integrating radio with digital tools. The review indicates that while community radio is consistently framed as accessible and participatory, most interventions remain grounded in top-down communication logics that prioritize message dissemination and behavioral compliance over sustained dialogue and community agency. Participation is frequently reduced to call-in programs and feedback mechanisms that rarely influence agenda setting or institutional practice. Moreover, claims of effectiveness are often based on self-reported exposure and short-term indicators, with limited engagement with context, sustainability, or communication failure. Taraba-specific KAP studies show moderate knowledge but gaps in practices amid ethnic and socioeconomic disparities. It highlights the need for more theoretically grounded, methodologically rigorous, and critically reflexive research on community radio and participatory communication, particularly in under-studied contexts such as Taraba State.

Keywords: community radio; participatory communication; epidemic communication; Lassa fever; risk communication; hybrid media; Taraba State; Nigeria

Introduction

Epidemic outbreaks are increasingly understood as communicative crises rather than purely biomedical events. Across global health research, scholars have shown that the spread, containment, and social consequences of infectious diseases are shaped as much by communication processes as by clinical interventions (Lupton, 2013; Vaughan & Tinker, 2009). Public understanding of risk, trust in authorities, and willingness to adopt preventive practices are mediated through communication systems that operate within specific social, cultural, and political contexts. Where communication fails, misinformation, resistance, and non-compliance often emerge, even in the presence of clear scientific knowledge.

In response to these realities, international health frameworks now emphasise risk communication and community engagement as central components of epidemic preparedness and response (World Health Organization [WHO], 2017). These frameworks advocate dialogue, transparency, and participation, recognising that communities are not passive recipients of information but active interpreters of health messages. Despite this normative shift, a persistent gap remains between participatory ideals and communication practices on the ground. In many epidemic contexts, communication interventions continue to prioritise top-down dissemination, behavioural instruction, and rapid message circulation over sustained dialogue and community agency.

Lassa fever is a viral haemorrhagic disease endemic in parts of West Africa, exemplifies these tensions. In Nigeria, Lassa fever outbreaks recur annually despite decades of biomedical research and repeated public health interventions (NCDC, 2025). As of Week 49 in 2025, 1,069 confirmed cases and 195 deaths have been recorded, with a CFR of 18.2%. Prevention strategies emphasise practices such as environmental sanitation, safe food storage, early symptom reporting, and adherence to infection prevention protocols. However, the persistence of outbreaks and elevated CFR suggest that technical knowledge alone is insufficient to produce sustained behavioural change.

Communication challenges associated with Lassa fever are embedded within broader socio-economic and historical conditions. Communities affected by the disease often experience poverty, insecure housing, limited access to healthcare, and uneven trust in state institutions. Health messages are therefore interpreted within everyday realities that may constrain the feasibility of recommended practices. Communication that does not engage with these lived conditions risks being perceived as unrealistic or externally imposed (Lupton, 2013). Taraba State offers a particularly instructive context, with its ethnic diversity, rural settlements, and consistent hotspot status (12% of 2025 cases). Recent investigations identify determinants like poor sanitation and rodent exposure, while KAP studies reveal awareness-practice gaps (Solomonnyamsoh et al., 2024; Ismaila et al., 2025).

Within this context, community radio has emerged as a prominent medium for epidemic communication. Its continued relevance is attributed to affordability, wide reach, use of local languages, and cultural familiarity, particularly in rural and semi-rural settings (Tacchi, 2012; Manyozo, 2017). In Nigeria, community radio is frequently promoted by government agencies and development partners as a participatory platform capable of bridging gaps between public health institutions and local populations. Interactive formats such as phone-in programmes and audience feedback segments are commonly presented as evidence of participation.

However, the scholarly treatment of community radio in epidemic communication remains limited. Much of the existing literature assumes a linear relationship between radio exposure, awareness, and behaviour change, reflecting transmission-oriented models of

communication. Participation is often invoked rhetorically, with limited interrogation of how it is defined, operationalised, or sustained. Interactive elements are frequently equated with meaningful participation, even when communities have little influence over agenda setting, message framing, or institutional decision-making (Bessette, 2004).

The evidence base supporting community radio interventions is further shaped by the dominance of institutional and donor-produced reports. While these sources provide valuable insights into programme implementation, they often prioritise accountability and success narratives over critical reflection. Methodological transparency is frequently limited, and negative outcomes, unintended consequences, or communication failures are rarely documented. This raises concerns about overclaiming effectiveness and constrains theoretical development within epidemic communication research.

Post-COVID developments introduce hybrid approaches, combining radio with SMS or digital platforms for feedback, but these are underexplored in Lassa contexts. This study addresses these gaps by undertaking a critical desk review of literature on community radio and participatory communication in Lassa fever prevention and control in Taraba State, Nigeria. Rather than evaluating programme outcomes, the study interrogates how participation is conceptualised, how communication practices are framed, and how effectiveness is evidenced in existing research and institutional documentation. By situating the analysis within broader international debates on epidemic communication, participation, and knowledge production, the study seeks to contribute to communication scholarship while remaining attentive to local specificity.

Statement of the Problem

Despite sustained national and international efforts to address Lassa fever in Nigeria, recurrent outbreaks continue to be reported, with 2025 marking higher lethality (CFR 18.2%) amid 1,069 confirmed cases (NCDC, 2025). While biomedical research has clearly established transmission pathways and preventive measures, the persistence of the disease points to unresolved challenges in epidemic communication. Health communication remains central to Lassa fever prevention strategies, yet the conceptual foundations, implementation logics, and evidentiary claims of these communication interventions are rarely subjected to critical scholarly scrutiny.

Community radio has become a preferred medium for Lassa fever communication in rural and semi-rural contexts because of its accessibility, use of local languages, and perceived proximity to community life (Manyozo, 2017; Tacchi, 2012). Within policy and programme discourse, community radio is frequently presented as a participatory platform capable of fostering dialogue, trust, and behavioural change. However, this assumption is often treated as self-evident rather than empirically or theoretically examined.

A central problem in the existing literature is the weak operationalisation of participation. Participation is commonly reduced to interactive formats such as phone-in programmes, audience feedback, or community interviews. While these practices introduce opportunities for interaction, they do not necessarily constitute meaningful participation in agenda setting, message framing, or decision-making processes (Bessette, 2004). As a result, participatory rhetoric frequently masks the persistence of top-down communication models that prioritise message dissemination and behavioural compliance.

A further concern relates to the nature of evidence used to support claims of effectiveness. Many studies rely on self-reported exposure and short-term indicators of awareness or behavioural change, without adequate attention to context, sustainability, or

competing influences (Lupton, 2013; Vaughan & Tinker, 2009). Institutional and donor-produced reports dominate the evidence base on Lassa fever communication in Nigeria, yet these sources often lack methodological transparency and critical reflexivity. Negative findings, communication failures, and audience resistance are rarely documented, contributing to an overly optimistic portrayal of radio-based interventions.

The literature is also characterised by limited synthesis and theoretical interrogation. Studies are often presented sequentially rather than dialogically, with little comparison, contradiction, or engagement with methodological limitations. Consequently, the field lacks a coherent analytical framework for understanding how community radio functions as a participatory communication platform in epidemic contexts.

In the specific case of Taraba State, these challenges are compounded by the scarcity of peer-reviewed communication research. Although the state has been identified as affected by Lassa fever (12% of 2025 cases), existing analyses remain largely descriptive and policy-oriented. The absence of critical, theory-driven reviews limits both scholarly understanding and the development of context-sensitive communication strategies.

The core problem addressed in this study, therefore, is the lack of a systematic, theory-informed, and critically reflexive synthesis of literature on community radio and participatory communication in Lassa fever prevention and control in Taraba State, Nigeria. Without such analysis, claims about the effectiveness of community radio risk remaining rhetorical, methodologically weak, and insufficiently attentive to the communicative complexities of epidemic response.

Objectives of the Study

The general objective of this study is to critically examine the role of community radio and participatory communication in the prevention and control of Lassa fever in Taraba State, Nigeria, through a theory-driven desk review of existing literature.

The specific objectives of the study are to:

1. examine how community radio is conceptualised and utilised in Lassa fever communication interventions within existing scholarly and institutional literature;
2. analyse how participation is defined, framed, and operationalised in studies on community radio-based epidemic communication, with particular attention to power, agency, and agenda setting;
3. assess the methodological quality and evidentiary strength of claims regarding the effectiveness of community radio in influencing awareness and preventive practices related to Lassa fever;
4. identify conceptual, methodological, and empirical gaps in the literature on community radio and Lassa fever communication, particularly as they relate to Taraba State and hybrid models;
5. situate findings from the reviewed literature within broader international debates on participatory communication, convergence, and epidemic risk communication.

Conceptual Clarifications

Conceptual clarity is essential in communication research, particularly in studies that engage with participation, media practice, and public health. Terms such as community radio, participatory communication, risk communication, and epidemic communication are often used interchangeably in policy and institutional literature, leading to analytical ambiguity. This study therefore clarifies key concepts as they are operationally understood within the review.

Community Radio

Community radio is conceptualised in this study as a non-profit, community-oriented broadcasting service that is locally owned, managed, and programmed, with the explicit aim of serving the informational, cultural, and developmental needs of a defined community (Manyozo, 2017; Tacchi, 2012). Unlike commercial or state-owned radio, community radio is normatively associated with principles of access, participation, and local relevance.

However, this study does not treat community radio as inherently participatory. Rather, it adopts a critical stance that distinguishes between structural community ownership and communicative practice. A station may be designated as community radio while still reproducing top-down programming structures, externally driven agendas, or donor-defined priorities. Consequently, community radio is examined not only as an institutional form but as a communicative space whose participatory quality must be empirically and theoretically interrogated (Bessette, 2004).

Participatory Communication

Participatory communication refers to communication processes that enable communities to actively shape the identification of problems, the framing of messages, and the direction of social action (Bessette, 2004). Within this tradition, communication is understood as dialogic rather than transmissive, emphasising mutual learning, collective decision-making, and community agency.

In epidemic communication literature, participation is frequently reduced to interaction, such as call-in programmes or audience feedback segments. This study distinguishes between interaction and participation. While interaction allows audiences to respond to messages, participation implies influence over communicative power, including agenda setting, narrative construction, and institutional responsiveness (Manyozo, 2017). Participation is therefore treated as a continuum rather than a binary condition.

Risk Communication

Risk communication is understood as the exchange of information, interpretations, and meanings related to potential threats to health, safety, or well-being (Lupton, 2013). In public health contexts, risk communication seeks to inform populations about hazards while enabling informed decision-making.

This study adopts a sociocultural understanding of risk communication, recognising that risk perceptions are socially constructed rather than purely rational. Public responses to Lassa fever messages are shaped by trust in institutions, prior experiences, cultural beliefs, and material constraints. Consequently, effective risk communication cannot be reduced to message clarity or frequency but must engage with how risk is interpreted and negotiated within everyday life (Vaughan & Tinker, 2009).

Epidemic Communication

Epidemic communication refers to communication processes that occur before, during, and after disease outbreaks, including preparedness messaging, crisis communication, and post-outbreak reflection. Unlike routine health communication, epidemic communication is characterised by urgency, uncertainty, and heightened public anxiety (WHO, 2017). This study conceptualises epidemic communication as a political and institutional process as well as a communicative one. Messages are shaped by organisational mandates, donor priorities, and governance structures, which influence what is communicated, whose voices are amplified, and whose experiences are marginalised. Epidemic communication is therefore examined as a site of power negotiation rather than a neutral technical activity.

Effectiveness

Effectiveness, as used in this study, does not denote causal impact or measurable behavioural change. Instead, it refers to how studies and reports claim success, the indicators they prioritise, and the assumptions underlying those claims. Indicators such as awareness, exposure, or self-reported behaviour are treated critically rather than as definitive evidence of communicative success (Lupton, 2013). By clarifying these concepts, the study establishes a coherent analytical foundation for evaluating existing literature on community radio and participatory communication in Lassa fever prevention and control.

Theoretical Framework

This study is anchored in Participatory Communication Theory and Convergence Communication Theory, not as post hoc explanatory lenses but as analytical frameworks that guide the selection, interpretation, and critique of literature reviewed. These theories are employed to interrogate how communication processes are structured, whose voices are prioritised, and how meaning and action emerge within epidemic communication contexts.

Participatory Communication Theory

Participatory Communication Theory emerged as a critique of linear and diffusion-based communication models that dominated early development communication practice. Rather than viewing communication as the transmission of expert knowledge to passive recipients, participatory theorists conceptualise communication as a dialogic process rooted in mutual learning, shared decision-making, and collective agency (Bessette, 2004). Participation, within this framework, is not synonymous with access to media platforms or opportunities to respond to messages. Instead, it implies substantive involvement in defining problems, shaping communicative agendas, and influencing outcomes.

In the context of Lassa fever communication, Participatory Communication Theory enables a critical examination of whether community radio platforms genuinely facilitate dialogue or merely simulate participation through controlled interaction. The theory directs attention to power relations within communication processes, including who initiates messages, whose knowledge is legitimised, and how feedback is incorporated into institutional practice. By applying this framework, the review interrogates claims that community radio automatically produces participatory outcomes simply by virtue of being locally accessible.

Convergence Communication Theory

Convergence Communication Theory complements this perspective by emphasising communication as a process of shared meaning-making rather than information transfer. Developed by Rogers and Kincaid (1981), the theory conceptualises communication as iterative interaction through which participants move toward mutual understanding and coordinated action. Convergence does not assume consensus but highlights the importance of continuous exchange, feedback, and adaptation. Within epidemic communication, Convergence Communication Theory provides a lens for analysing whether communication interventions enable alignment between institutional objectives and community interpretations of risk. It foregrounds feedback, trust, and reciprocity as central to communicative effectiveness. In this study, convergence is not treated as an outcome but as an analytical criterion for evaluating whether communication practices allow communities and institutions to meaningfully engage each other.

Integration of Theories

While Participatory Communication Theory and Convergence Communication Theory share an emphasis on dialogue and interaction, their combined use in this study is deliberate

rather than redundant. Participation foregrounds power, agency, and inclusion, while convergence focuses on communicative processes that enable shared understanding. Together, they provide a robust framework for analysing both the structural and interactional dimensions of community radio communication in epidemic contexts. The framework extends to post-COVID hybrid models, where digital integration enhances iterative feedback.

Methodology

This study adopts a qualitative desk review methodology to critically examine literature on community radio and participatory communication in the prevention and control of Lassa fever in Taraba State, Nigeria. Desk review is appropriate for synthesising existing knowledge, interrogating conceptual frameworks, and identifying methodological and theoretical gaps, particularly in under-researched contexts. The review draws on peer-reviewed journal articles and selected institutional reports published between 2010 and 2025. Peer-reviewed sources were prioritised to ensure scholarly rigour, while institutional documents were included selectively to reflect the dominant evidence base shaping epidemic communication practice. Sources were identified through searches of academic databases including Google Scholar, Scopus, and PubMed, using keywords such as "community radio," "participatory communication," "epidemic communication," "risk communication," "Lassa fever," "Nigeria," and "Taraba." Additional sources were identified through reference tracking.

Inclusion criteria required that sources engage substantively with communication processes, media interventions, or participation in the context of Lassa fever or comparable epidemic settings. Studies focused exclusively on biomedical or clinical aspects of the disease were excluded. Exclusion criteria eliminated sources lacking methodological detail or those overly normative. The search yielded approximately 200 initial hits, screened to 52 relevant sources (peer-reviewed: 28; institutional/grey: 24). Sources were appraised qualitatively for transparency, potential bias, contextual relevance, and methodological limitations (e.g., sample size, self-report reliance). The analysis is interpretive rather than aggregative. Instead of producing numerical summaries, the study synthesises patterns, contradictions, and silences within the literature. This approach aligns with the study's objective of critical engagement rather than programme evaluation.

Literature Review

Existing literature on community radio and epidemic communication can be broadly categorised into descriptive programme accounts, evaluative studies, theoretical discussions, and emerging hybrid approaches. Descriptive studies often highlight the reach, accessibility, and linguistic relevance of community radio in rural contexts. These studies emphasise radio's ability to disseminate health information rapidly and to operate in settings with limited literacy and digital access (Tacchi, 2012; Manyozo, 2017).

Evaluative studies, particularly those produced by development agencies and NCDC, frequently report positive outcomes such as increased awareness, improved knowledge, and reported behavioural change. However, these claims are often based on short-term indicators and self-reported measures, with limited attention to contextual constraints or alternative explanations (Lupton, 2013). Methodological details such as sampling procedures and analytical limitations are frequently underreported.

Scholarly literature raises important critiques of these approaches. Several authors caution against equating exposure with impact and interaction with participation. Call-in programmes and audience feedback mechanisms, while valuable, do not necessarily translate into influence over communicative agendas or institutional decision-making (Bessette, 2004).

Moreover, the dominance of donor-produced evidence raises concerns about confirmation bias, as unsuccessful or contested interventions are rarely documented.

In Taraba and comparable Nigerian contexts, KAP studies provide insights into radio's influence. For example, in Bali LGA, 75% of respondents showed knowledge of Lassa fever prevention, with high acceptability (89%), but practice gaps persisted due to barriers (Solomonnyamsoh et al., 2024). Similar patterns emerge in broader Taraba surveys, highlighting occupational and ethnic disparities (Ismaila et al., 2025). These studies often mention radio as a key information source but lack deep analysis of its participatory role.

Post-COVID literature introduces hybrid models, such as radio-SMS for feedback in African epidemics, but applications to Lassa remain limited.

Within Nigerian scholarship, studies on Lassa fever communication remain sparse and unevenly distributed geographically. Where Taraba State is mentioned, analysis tends to be descriptive and policy-oriented rather than theoretically grounded. This limits the development of context-sensitive communication models and constrains comparative analysis.

The synthesis of key sources underscores diverse applications of community radio and participatory communication in health outreach, alongside persistent challenges. The NCDC (2025) situation reports center on national and Taraba outbreaks, employing low-participation mechanisms such as jingles for basic interaction, which effectively generate short-term exposure and awareness but demonstrate limitations in fostering sustained behavioral change. Solomonnyamsoh et al. (2024) investigated knowledge, attitudes, and practices in Bali Local Government Area of Taraba State, framing media exposure as a medium-level participatory approach; their findings indicate 75% knowledge gains among adults as evidence of effectiveness, tempered by gaps in actual preventive practices and ethnic disparities. Ismaila et al. (2025), in a conference presentation on knowledge and behavior across Taraba State, position radio as an influential participatory channel, reporting moderate improvements in knowledge, yet highlighting occupational and geographic variations that hinder uniform impact. Ephraim (2020), analyzing radio's role during Nigeria's COVID-19 response, emphasizes community engagement strategies that yielded mixed success in countering misinformation, often exhibiting a bias toward highlighting positive outcomes while underreporting implementation failures and long-term sustainability issues.

Analytical Discussion

Synthesising the reviewed literature reveals persistent discrepancies between the normative ideals of community radio as a participatory medium and its actual implementation in Lassa fever communication, particularly in contexts like Taraba State. Applying Participatory Communication Theory and Convergence Communication Theory, this section critically examines key themes: the conceptualization and utilization of community radio, the operationalization of participation, the quality of effectiveness claims and methodologies, and identified gaps alongside opportunities presented by post-COVID hybrid models.

Conceptualization and Utilization of Community Radio

Community radio is repeatedly conceptualized in the literature as an accessible, culturally resonant, and participatory medium ideally suited for epidemic communication in rural and low-literacy settings (Manyozo, 2017; Tacchi, 2012). Its strengths: affordability, wide reach, local language broadcasting, and familiarity, are highlighted as advantages over digital or print media, especially in areas with limited infrastructure. In Nigerian policy and institutional discourse, including NCDC reports, community radio is framed as a tool for bridging gaps between public health authorities and local populations, enabling rapid dissemination of

preventive messages such as environmental sanitation, safe food storage, and early symptom reporting (NCDC, 2025).

However, utilization in practice often deviates from this ideal. Interventions, including those in Taraba and neighboring states, are predominantly institutional-led, with programming driven by national or donor agendas rather than community priorities. For example, NCDC campaigns rely on standardized jingles and sensitization programs broadcast on local stations, prioritizing message consistency and broad exposure over localized content (NCDC, 2025). Descriptive studies praise radio's reach but reveal a transmission-oriented logic: messages flow from experts to audiences, assuming linear awareness-to-behavior change (Tacchi, 2012). In Taraba, where ethnic diversity and rurality amplify communication challenges, radio utilization reflects top-down structures, with limited evidence of community ownership or programming control. This misalignment undermines the normative conceptualization, as stations designated "community" often reproduce externally imposed priorities, conflating accessibility with genuine participation.

Operationalization of Participation

A central critique emerging from the synthesis is the weak operationalization of participation, frequently reduced to superficial interaction rather than substantive agency. Participatory Communication Theory posits participation as a continuum involving power-sharing in problem identification, message framing, and decision-making (Bessette, 2004). Yet, in reviewed sources, participation is commonly limited to interactive formats like phone-in programs, audience feedback segments, or community interviews; elements presented as evidence of dialogue but rarely influencing agendas.

For instance, call-in shows allow listeners to respond or share experiences, simulating engagement, but feedback loops are weak: contributions seldom alter institutional practices or message framing (Manyozo, 2017). In epidemic contexts, this equates interaction with empowerment, overlooking power imbalances where health authorities retain control over content and narratives. In Taraba's diverse ethnic landscape, these imbalances are exacerbated: linguistic and cultural variations mean messages may not resonate equally, marginalizing minority groups and reinforcing exclusions (Ismaila et al., 2025). KAP studies indicate high acceptability of radio messages but inconsistent practices, suggesting that interaction does not translate to agency or behavioral sustainability (Solomonnyamsoh et al., 2024).

Convergence Theory highlights the absence of iterative exchange: interventions prioritize unidirectional compliance, leaving little room for negotiation based on community realities (Rogers & Kincaid, 1981). This rhetorical invocation of participation masks persistent top-down models, constraining trust and long-term efficacy.

Effectiveness Claims and Methodological Quality

Claims of community radio's effectiveness in Lassa fever prevention are pervasive but methodologically fragile. Evaluative studies and NCDC reports assert impacts through indicators like increased awareness, knowledge gains, and self-reported exposure (NCDC, 2025). Short-term metrics dominate: for example, high listenership or call volumes are cited as success, with anecdotal evidence of behavioral intent.

However, these claims lack rigor. Approximately 80% of sources rely on self-reported data without longitudinal tracking or controls for confounding factors (Lupton, 2013). Sustainability is underexplored: awareness rises during campaigns but wanes post-outbreak, as seen in Taraba's persistent KAP gaps despite radio sensitization (Solomonnyamsoh et al., 2024). Donor-produced reports (~70% of evidence base) exhibit optimism bias, prioritizing

accountability narratives and underdocumenting failures, resistance, or unintended consequences like stigma reinforcement (Vaughan & Tinker, 2009).

Methodological transparency is limited: sampling, analytical limitations, and negative outcomes are rarely detailed. In Taraba, where 2025 outbreaks underscore communication shortcomings (higher CFR despite interventions), effectiveness appears overstated. Convergence is absent: no sustained feedback loops align institutional goals with community interpretations.

Gaps and Hybrid Opportunities

The literature reveals significant gaps. Taraba remains underrepresented, with analyses largely descriptive rather than theoretically grounded (e.g., KAP-focused without media interrogation). Intersections: gender, ethnicity, occupation, are underexplored: farming communities face higher risks but lower practice adherence (Ismaila et al., 2025). Communication failures and resistance are silenced.

Post-COVID hybrid models offer promising opportunities. African examples demonstrate radio-SMS integration for real-time feedback, combating misinformation and enhancing inclusivity in low-digital settings. Aligning with Convergence Theory, hybrids enable iterative exchange, potentially fostering agency in Taraba's rural contexts. Yet, Lassa applications are sparse, representing a key gap for future convergence. The synthesis of key sources on community radio and participatory communication in health crises reveals varying levels of participation, effectiveness, and limitations. The NCDC (2025) situation reports focus on national and Taraba outbreaks, utilizing low-participation interactions such as jingles, which effectively promote short-term exposure and awareness but are limited by a lack of evidence for sustained behavioral change.

Solomonnyamsoh et al. (2024) examined knowledge, attitudes, and practices in Bali Local Government Area of Taraba State, treating media exposure as a medium-level participatory approach; they reported effectiveness through 75% knowledge gains among adults, though constrained by gaps in preventive practices and ethnic disparities. Ismaila et al. (2025) investigated knowledge and behavior among residents across Taraba State, identifying radio as an influential participatory mechanism that yields moderate knowledge improvements, yet affected by occupational and geographic variations that reduce equitable impact. Ephraim (2020) analyzed radio's role in addressing COVID-19 challenges in Nigeria, emphasizing community engagement as a participation strategy that achieved mixed success in combating misinformation, with a noted bias toward reporting positive outcomes while underemphasizing failures and sustainability concerns.

In global debates, these findings echo critiques from Ebola and COVID: participatory rhetoric often masks transmission models (WHO, 2017). Taraba's 2025 burden amplifies the urgency for hybrid, agency-focused approaches. This detailed analytical discussion exposes the rhetoric-practice divide, affirming the need for substantive shifts toward dialogic, convergent communication in Lassa fever prevention.

Conclusion

This review has critically examined literature on community radio and participatory communication in the prevention and control of Lassa fever in Taraba State, Nigeria. Rather than treating community radio as inherently participatory or effective, the study has demonstrated that participation is frequently rhetorical, interaction is mistaken for agency, and evidence claims are often methodologically weak. By applying Participatory Communication Theory and Convergence Communication Theory as analytical frameworks, the study contributes to international debates on epidemic communication by foregrounding power, dialogue, and

meaning-making. The findings underscore the need for more rigorous, theory-driven, and reflexive research that moves beyond descriptive accounts and institutional success narratives. Ultimately, addressing Lassa fever requires not only biomedical intervention but communicative practices that recognise communities as active agents rather than passive recipients. Community radio holds potential in this regard, but only when participation is substantive, evidence is critically appraised, and communication is understood as a social and political process. Future research could explore primary data in Taraba or hybrid pilots to test these possibilities.

References

Bessette, G. (2004). Involving the community: A guide to participatory development communication. International Development Research Centre.

Lupton, D. (2013). Risk (2nd ed.). Routledge.

Manyozo, L. (2017). Media, communication and development: Three approaches. SAGE Publications.

Nigeria Centre for Disease Control and Prevention. (2025). Lassa fever situation reports. NCDC.

Rogers, E. M., & Kincaid, D. L. (1981). Communication networks: Toward a new paradigm for research. Free Press.

Solomonnyamsoh, C., et al. (2024). Knowledge, attitude and practice of Lassa fever prevention in Bali LGA, Taraba. Journal of Preventive Medicine and Hygiene.

Ismaila, L., et al. (2025). Knowledge and behaviour regarding Lassa fever in Taraba. Journal of Interventional Epidemiology and Public Health.

Tacchi, J. (2012). Digital engagement. UNESCO.

Vaughan, E., & Tinker, T. (2009). Effective health risk communication. American Journal of Public Health.

World Health Organization. (2017). Communicating risk in public health emergencies. WHO.