

THE EFFECTS OF TELEVISION AND RADIO COMMERCIALS ON BEHAVIOR AND ATTITUDE CHANGES TOWARDS THE CAMPAIGN AGAINST THE SPREAD OF HIV/AIDS

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ABSTRACT

Background: The role of information has not been over looked in Nigeria. Information on AIDS is disseminated through various information media such as newspapers, magazines, radio and television. Symposia and conferences have also been organized for the purpose of creating awareness and an attempt to change public attitude.

Aim: This study was aimed at ascertaining the effect of television and radio commercials on behaviour and attitude changes towards the campaign against the spread of HIV/AIDS, using residents of Nsukka urban.

Methods: This study employed a cross sectional, household survey using interviewer administered questionnaires. A mixture of cluster and systematic random techniques were employed. Nsukka was grouped into 10 clusters based on geographical locations as established by a map designed by Nsukka Graduates Association. Six sections or clusters were randomly selected from the ten clusters using a random sampling technique. In each section, the first house in each street was identified, followed by systematic sampling of the next three houses. A total of 637 persons were met in the exercise after covering the selected clusters. All respondents were assured of confidentiality and anonymity. The survey was carried out from August to December, 2009. Data were entered into the Statistical Package for Social Sciences (SPSS, version 14) and descriptive analysis conducted. Responses were reported as percentages.

Results: Most of the respondents studied were youth and students. All the participants had either radio or television or both. More than 60% of respondents rated the quality of the campaign as excellent and effective. The Areas of prevention or control which the campaigns focused on (in their decreasing order) were unprotected sex, having multiple sexual partners (infidelity), abstinence, transfusion of infected blood, and sharing of sharp objects. The respondent agreed that knowing HIV/AIDS status (>70%) and stopping stigmatization (>80%) could help the campaign against spread of HIV/AIDS. Lack of government commitment, corruption, lack of sexuality education in family, peer group pressure and traditional norms and practices were rated by more than 70% of the respondents as barriers to the campaign against spread of HIV/AIDS.

Conclusion: In conclusion, television and radio commercials were found to have positive effects on behaviour and attitude of residents of Nsukka urban towards campaign against spread of HIV/AIDS.

Key words: attitude, behaviour, campaign, HIV/AIDS, information, Nigeria, radio, television

Introduction

In view of the impact of HIV/AIDS, various efforts worldwide have been initiated and emphasized towards attitude change among the general public. According to World Health Organization (WHO)^[1], the most effective means in the fight for a change of attitude towards HIV/AIDS depends to a great extent on the manipulation of information. The role

of information has not been over looked in Nigeria.

Information on AIDS is disseminated through various information media such as newspapers, magazines, radio and television. Symposia and conferences have also been organized for the purpose of creating awareness and an attempt to change public attitude.

Since the first case of the disease was reported in Nigeria, serious effort has continued to be made to halt or drastically reduce the spread of HIV. Many government and non-government organizations have continued to commit huge amount of human and material resources towards the eradication of the

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disease. One major area of the programme for the eradication of the disease is through awareness campaigns on the prevalence, dangers and prevention of the disease. Journalists play a key role in shaping our pictures of the world as they go about their daily task of selecting and reporting the news. The mass media sets agenda virtually in all aspects of life. So it is the role of the mass media to set agenda on major societal issues. Media campaign refers to a situation in which a number of media are used to achieve a persuasive or informational purpose with a chosen population. Campaigns are often concerned with directing, reinforcing and activating existing tendencies towards socially approved objectives like voting, buying goods, raising money for good causes, achieving better health and safety. The scope for novelty of effect or major change is thus often intrinsically limited and the media are employed to assist other institutional forces².

The most important aspect of the communication is to study its effect on the socio-political or cultural mobilization of the people. Many media communication effects are going on in the society and we are at the same time, acquiring a body of useful knowledge. The practice of publicity in Nigeria has become universally recognized as a potent force in our scheme of living. However, publicity means information with a news value, which is designed to advance the interest of persons or groups. There is need for HIV/AIDS prevention programmes to protect human right and human dignity. Discrimination and stigmatization against people living with HIV/AIDS undermined public health and must be avoided.

Campaign against the spread of AIDS all over the world has led to various researches on the origin of AIDS, the extent of its spread, and the mortality rate of the disease, how the disease is spread or transmitted and how it is not transmitted. In order

for the audience to positively conform and change their attitude in a rational manner, a lot of education has to be acquired by them.

It is not easy to measure the impact of mass communication because of other influential factors. Thus, it is difficult trying to evaluate the effects of advertising campaign against the spread of HIV/AIDS in television. Based on this fact, it is most likely that prevention of HIV/AIDS spread through television and radio campaign may not achieve the desired results on the masses because of the uncertainty of the quality of information being delivered to them. However, advertisement on AIDS campaigns through television and radio has been one of the ways of communicating to the masses to know about the methods of preventing HIV/AIDS spread. It is under this background that this study is undertaken to find out effect of the television and radio commercials on behavior and attitude changes towards the campaigns against the spread of HIV/AIDS.

METHODS

This study employed a cross sectional, household survey conducted to identify effect of the television commercials on behaviour and attitude changes towards the campaigns against the spread of HIV/AIDS in Nsukka, a semi-urban city in South-Eastern Nigeria. Nsukka is a university town of University of Nigeria Nsukka. Nsukka local government area has a population of three hundred and nine thousand, six hundred and thirty three (309,633)³.

All procedures were carried out according to a study protocol approved by the Local Ethics Committee of University of Nigeria Teaching Hospital Enugu.

A mixture of cluster and systematic random technique was employed. Nsukka was grouped into 10 clusters based on geographical locations as established by a map designed by Nsukka Graduates

Association. Six sections or clusters were randomly selected from the ten clusters using a random sampling technique. In each section, the first house in each street was identified, followed by systematic sampling of the next three houses.

Using “Statcalc” function of EPI INFO (Version 6, Centre for Disease Control, USA), it was determined that a sample size of 400 was adequate to detect effect of the television commercials on behaviour and attitude changes towards the campaigns against the spread of HIV/AIDS in this population in range of 10% to 40% with 5% precision and 95% confidence. However, a total of 637 persons were met in the exercise after covering the selected clusters.

The nature and the objectives of the study were explained to the participants who agreed to take part and informed consent was formally obtained. All respondents were assured of confidentiality and

anonymity. No reference to the participant’s identity was made at any stage during data analysis.

The survey was carried out from August to December, 2009. A questionnaire administered through interview was used for the study. It was made up of 2 sections which include respondents’ demographic data and self-reported effect of the television and radio commercials on the campaigns against the spread of HIV/AIDS. The study instrument was face validated by some lecturers of the Department of Clinical Pharmacy and Pharmacy Management, and was pre-tested on 10 households (43 respondents) from sampled population to assess the validity of the instrument from the respondents’ angle.

Data were entered into the Statistical Package for Social Sciences (SPSS, version 14) and descriptive analysis conducted. Responses were reported as percentages.

Table 1: Demographic data of the respondents

RESPONDENTS’ CHARACTERISTICS	Percentage %
Sex	
Male	38.7
Female	61.3
Age	
20-25 yrs	23.3
26-30 yrs	48.7
30-35 yrs	25.3
Above 35 yrs	2.7
Marital	
Single	63.3
Married	36.7
Level of Education	
No formal education	4.3
Primary education	12.6
Secondary education	54.1
Tertiary education	29.0
Occupation	
Student	43.3
Civil servant	29.3
Self employed	14.7
Unemployed	12.7

RESULTS

Most of the respondents studied were female, youth, and students. All the participants had either radio or television or both. More than 60% of respondents rated the quality of the campaign as excellent and effective. The Areas of prevention or control which the campaigns focused on (in their decreasing order) were unprotected sex, having multiple sexual partners (infidelity), abstinence, transfusion of infected blood, and sharing of sharp objects.

The respondent agreed that knowing HIV/AIDS status (>70%) and stopping stigmatization (>80%) could help the campaign against spread of HIV/AIDS. Lack of government commitment, corruption, lack of sexuality education in family, peer group pressure and traditional norms and practices were rated by more than 70% of the respondents as barriers to the campaign against spread of HIV/AIDS.

Table 2: Effects of television and radio commercials on respondents' behaviour and attitude towards campaigns against spread of HIV/AIDS

Questions #	Question	%
Question 1	Do you have television and/or Radio?	
	Yes	100
Question 2	How often do you watch or listen to television or Radio commercials?	
	Very often	64.7
	Often	26.0
	Sometime	8.0
	Never	1.3
Question 3	Have you heard of campaigns against spread of HIV/AIDS from your television or radio?	
	Yes	100.0
Question 4	Do you believe the information about HIV/AIDS	
	Yes	95.3
	No	4.7
Question 5	How often do you watch or listen to HIV/AIDS campaign programme on television or radio?	
	Very often	6.7
	Often	73.3
	Sometimes	18.7
	Never	1.3
Question 6	How would you assess the quality of the campaign against HIV/AIDS?	
	Excellent	61.3
	Very good	23.7
	Good	7.6
	Fair	2.4
	Poor	5.2
* Question 7	Which area of prevention or control against spread of HIV/AIDS does the campaign often focus on?	
	Unprotected sexual intercourse	100.0
	Having multiple sexual partners (infidelity)	86.3
	Abstinence	68.4
	Transfusion of infected blood	29.7
	Sharing of sharp objects	34.9
Question 8	Do you agree that somebody knowing his/her HIV status could prevent spread of HIV?	
	Strongly agree	54.2
	agree	22.7
	undecided	12.5
	disagree	8.2
	Strongly disagree	2.4

Question 9	Do you agree that ‘stop stigmatization’ campaign (that is accepting or associating people with HIV/AIDS socially) could prevent spread of HIV/AIDS?	
	Strongly agree	48.7
	agree	32.6
	undecided	8.4
	disagree	4.5
	Strongly disagree	5.8
Question 10	How effective is the television or radio campaign against spread of HIV/AIDS.	
	Very effective	46.7
	Effective	29.9
	Partially effective	14.8
	Not effective	8.6
*Question 11	Which factors do you think are barriers to campaign against spread of HIV/AIDS	
	Lack of community involvement	72.4
	Use of English language as against local language in conducting the campaigns	56.8
	Fear of stigmatization	67.3
	Lack of will power by the government in providing necessary support to HIV/AIDS patients	54.6
	Misconceptions about HIV/AIDS	43.6
	Lack of equipment for HIV/AIDS screening in primary health centers	62.5
	Corruption by the government and nongovernmental agents who oversee the campaign and distribution of support aids to the infected patients.	72.2
	None inclusion of HIV/AIDS subjects in primary and secondary school curriculum.	76.6
	Lack of sexuality education in families	82.3
	Peer group pressure	79.7
	Traditional norms and practices (e.g. circumcision of male and female genital mutilation by traditional attendants.	71.3

* Questions with multiple responses

DISCUSSION

In several developing countries recent declines in the prevalence of HIV/AIDS among the youth, accompanied by clear sign of individual behaviour change are proves of fruitful HIV/AIDS campaigns. The story is not different in Nsukka urban as more than 70% of respondents reported that the quality and effectiveness of the campaign against spread of HIV/AIDS were very good and effective respectively to reduce the scourge (questions 6 and 10, Table 2). This result is consistent with results from Thailand where HIV prevalence among young army recruits declined by 90 percent between 1991 and 1995 after the government adopted its comprehensive AIDS-prevention campaigns⁴. In Lusaka Zambia, HIV prevalence among 15-19 year old women dropped from 28 percent to 15 percent in 1998, and similar declined occurred in some rural areas⁵. Also in Australia, Brazil, Senegal and

Uganda, AIDS- prevention campaigns owe their relative success, in part, to collaboration among government, the private sector, and non-governmental organization (NGOs)⁴. All the countries that have achieved some level of success in their campaigns demonstrated that national strategic approaches, not just more projects, are essential to contain the epidemic effectively.

The respondents agreed that many factors were barriers to the campaign against spread of HIV/AIDS as could be seen in question 11 (Table 2). Education and communication, as strategies of HIV/AIDS campaign, alert the populace especially the youths to the risks of HIV/AIDS and promote healthier behaviour through curriculum based programmes in schools, mass media campaigns, peer education, and community outreach. This assertion is not different in this studied population where the majority of the respondents were youths

(Table 1) with high cognitive and psychomotor abilities thus education in this population will be easy if it is explored and exploited. There is a considerable disagreement over HIV/AIDS education including what to teach, at what age, in what setting, by whom, and to what end. Sensitivities about sexuality and youth behaviour often obstruct AIDS education even where there is a strong national commitment to address the AIDS crisis⁶. In spite of such obstacles, some school campaigns appear to have made gains⁶. Any campaign set to address the HIV/AIDS epidemic among the youth require teaching not only the youth themselves but also others who influence their lives. The parents and families are two important groups in the lives of the youth. Parents greatly influence their children's health behaviors. Sexuality and HIV/AIDS education are sensitive topics that many parents avoid. In Canada and US, researchers found that one-third of the 28 campaigns they reviewed delayed the age of sexual initiation among students. Analysis of the review of school-based education campaign in Namibia, Nigeria, South Africa, and Zimbabwe found that some of the campaigns helped delay sexual initiations, decreased numbers of partners, and increased contraceptive use⁶.

This study revealed that traditions and peer pressure were barriers to the campaign against spread of HIV/AIDS. Important component of AIDS education campaign for the youths, according to Collins⁷, included addressing peer pressure and norms that encourage risky behaviour. Changing the youth's risk-taking behaviour requires going beyond providing information to helping the youth acquire the ability to refuse sex and to negotiate with sex partners.

With regards to the media of communication that are effective for the dissemination of HIV/AIDS awareness message, television and radio reach large number of people around the world and have

enormous influence. This studied population was not different as all the respondents had either television or radio (question 1, Table 2). In a 23 country study conducted by UNESCO, among 12 year-old school children whose homes had electricity, over 90 percent watched an average of three hours television per day⁶. Also a study showed that in virtually all developing countries most women ages 15-25 have regular access to television and radio⁷. The results of this study corroborated the findings of these works. Because mass media entertainment is so popular, it can reach many people with positive health information. In Uganda, for instance, the safe sex or AIDS campaign, which encouraged young people to make responsible decisions about HIV/AIDS, reached 92 percent of its intended audience. In Zimbabwe, a similar communication campaign reached 97 percent of the youth surveyed. In Botswana Tsar Banana, a mass media campaign to improve adolescent reproductive health reached about 70 percent of adolescents⁶. It must be observed that the mass media alone cannot address all aspects of HIV prevention. Experience shows that the most effective communication campaigns involve both mass media and face-to-face media such as dance drama, folk theatre as well as sports.

For HIV/AIDS campaign to be effective, the campaign should provide for voluntary counseling, testing and referral. As treatments become more available for HIV infection early testing and counseling could lead to timely care, improved medical management of HIV- related illness, reduced prenatal transmission of HIV, improved quality of life and reduced mortality.

As the debate over whether taking the HIV test leads to safer behaviour or not continues, some researchers have demonstrated that once some people are aware of their HIV- positive status, they will change their behaviour to avoid transmitting

HIV. In additions, starting antiretroviral therapy as soon as possible lowers the viral load and may therefore reduce the risk of transmission of HIV, testing can provide an impetus to develop a plan for avoiding infection⁶. This study was consistent with reported findings as more than 60% of the respondents agreed that somebody knowing his/her HIV status could prevent spread of HIV (question 8, Table 2).

Rosen⁹ and Esim et al¹⁰ stated that equipping youth economically and socially would helping the youth avoid HIV/AIDS. Involvement of Nongovernment organizations will help in no small measure¹¹.

For a successful HIV/AIDS strategy, campaign responses should be based on information research with routine assessments. As a campaign is carried out, monitoring and impact evaluation help planners determine what is working and what is not working and whether resources are being well used as corrupt government and nongovernment agents can defeat all efforts and resources committed to the campaign. Corruption tendency among these agents was also identified in this study as one of the barriers to the campaign. Evidence of the campaign's positive impact on the youth's behaviour is a major indicator of a successful campaign because behaviour change is the goal of HIV/AIDS prevention campaigns.

An AIDS campaign is likely to be more sustained when included in national government budgets and development goals¹². HIV/AIDS campaigns targeted at addressing the AIDS epidemic among youths requires a variety of approaches which include: advocacy; education and communication; voluntary counseling, testing and referral; youth livelihood approaches; involving parents; reaching youth at special risk; and building partnerships with the youth⁶.

Advocacy efforts inform and motivate policy-makers and communities at international, regional,

national and local levels. Advocacy can stimulate effective action on behalf of reproductive health including prevention of HIV/AIDS. Some countries have launched advocacy efforts that are likely to benefit youths¹³.

Community pharmacists can play important roles in dissemination of information since they are closer to the people.

LIMITATIONS

This type of study depends very much on information given by the respondents. However, given that all the respondents who accepted to participate were surveyed; we believe that the results of this study were a close estimate of the situation in Nsukka in particular and Nigeria in general. Interviewer bias was another potential limitation due to differences in interviewers' attitude and approach to questions, we believe that this effect should be minimal as all the investigators were trained before the study and they were highly experienced in this regard.

CONCLUSION

In conclusion, television and radio commercials were found to have positive effects on behaviour and attitude of residents of Nsukka urban towards campaign against spread of HIV/AIDS.

Lack of government commitment, corruption, lack of sexuality education in family, peer group pressure and traditional norms and practices were rated as major barriers to the campaign against spread of HIV/AIDS. These barriers could be removed or reduced with combined efforts of government, nongovernmental organizations and community.

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