Mass Media Programmes for Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) Education for Rural Farmers in Benue State, Nigeria

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Abstract

This study assessed mass median programmes on HIV/AIDS Education for rural farmers in Benue State. The study was conducted using NTA and Radio Benue Makurdi. A sample of 150 rural farmers was randomly selected for the study. Instrument for the study was interview schedule/questionnaire and a perusal of the programme schedule booklets of two media houses. Mean was used to analyse data. Findings revealed that 81.6 percent of the rural farmers were highly knowledgeable about HIV/AIDS epidemic but had constraints in receiving HIV/AIDS education of the media. It was concluded that the media had a good number of programmes which were used for educating rural farmers on HIV/AIDS. It was recommended that electricity should be provided to the rural areas and TV viewing centers be established at appropriate places for practical lifestyle teaching to educate farmers on HIV/AIDS.

Key words: Media, Education, Rural, Farmers, HIV/AIDS.

Introduction

Human Immunodeficiency Virus (HIV) /Acquired Immunodeficiency Syndrome (AIDS) was first reported in a 13 years old girl in 1986 in Nigeria (Akuto, 1994). Since then, the epidemic has steadily grown. It is discovered to be fast spreading to the rural areas at an alarming rate affecting farmers and other livelihoods (Baier, 1999). The epidemic is no longer just a devastating health problem but an economic problem that needs a multisectoral intervention of all stakeholders.

In the past, the disease was attributed to the sex workers whose behaviours were not acceptable especially in the rural areas, and a consequent of the behavior was

envisaged to be a punishment for their sins (Obiokpa, 2004). However, with the reported reality of HIV/AIDS in Benue state, with its highest prevalence rate of 16.8% in 1999, it became apparent to accept that the state was leaving with a disease that is fast spreading but has no cure yet (Gombachika Chirwa, Malata and Maluwa (2012). In view of this the State Government swung into action with the establishment of the Benue State Action Committee on Aids (BENSACA) and the State AIDS Control Agency. With the action of the committee and the agency, FMOH (2004) and Anyebe, Hellandendu and Gyong (2012) reported the trend in prevalence rate in the state to be: 16.8% 1999, 13.5% 2001, 9.3% 2003, 10% 2005 and 12.7% 2012. This trend shows that the infection was still high in the state and still affecting farming and other livelihoods. This is an indication that unless the spread was properly controlled, the disease would impact negatively on the productive sectors of the State economy. Intervention strategies were to curb the spread of the disease, introduction of mitigation strategies for people living with HIV/AIDS (PLWHA) and prevention strategies for uninfected people.

This action requires the contribution of the communication mass media to be able to reach out to both urban and rural communities. Sambe(2008) highlighted that the role of the mass media in the society is monitoring, watching and checking governance with the aim of criticizing

where necessary and propelling government to action when necessary. Yahaya,(2008) gives the function of the include media to surveillance, interpretation of information, transmission of cultural information and clues about the society. The media is also used to teach culture; and as a means of transmitting social education.

In 2009, it was disclosed that no fewer than 400,000 persons were identified as carriers of the dreaded virus in the state (ThisDay Newspaper, 2013). The recent revelation that over 319,000 children are living with HIV/AIDS in Benue State alone with another 708,640 adults also living with the virus should be a cause for serious concern to health authorities in our country. HIV epidemic is in the third decade with Benue contributing significantly to the prevalence of the virus in Nigeria.

The State's Agency for the Control Aids intensified its of has enlightenment drive aimed at encouraging people to go for mandatory tests and counselling in order to determine their HIV/AIDS status (Onsomu, Moore, Abuva, Valentine, 2013) . In fact it has been established that the most avoidable factors militating against the HIV epidemic in Benue State are stigma and discrimination against people living with HIV/AIDS (PLWHAs). Yet this has not deterred the government from establishing treatment sites across the state in order to avail PLWHAs with free medication.

Factors that stand against successful execution of the fight against HIV/AIDS are cultural and religious practices (Kolawole, 2010). Across the state there is strong religious bias against the use of the prevention of condoms for sexually transmitted diseases (STDs) (Kaugama, 2012). Yet the dogged determination shown by Benue State agency for AIDS control in dealing with the scourge demonstrates what is achievable if only more efforts could be made along that area. It is obvious that the failure so far to check the spread of HIV/AIDS in the state only means that the disease has negative impact on the productive sectors of the state's economy.

In view of the role and function of mass communication in society and the fact that HIV/AIDS has become a socio-economic problem needing all hands on deck to fight it, this paper sought to investigate the mass communication media programmes in use for HIV/AIDS Education to rural farmers in Benue State.

Purpose of the Study

The major purpose of the study was to investigate the mass communication media programmes on HIV/AIDS that are used for educating rural farmers for healthy lifestyle in Benue State, Nigeria. Specifically, the study:

- 1. determined the awareness and knowledge of the rural farmers about HIV/AIDS;
- 2. identified available mass media programmes on HIV/AIDS for

educating rural farmers and their time schedules;

- 3. determined the content of mass media programmes for educating rural people on HIV/AIDS;
- 4. determined perceived ways of avoiding HIV/AIDS by farmers
- 5. determined farmers' constraints in obtaining information on HIV/AIDS from the media

Research Questions

- 1. What is the level of awareness and knowledge of the rural farmers about HIV/AIDS?
- 2. What are the available mass media programmes on HIV/AIDS for educating rural farmers and their time schedules?
- 3. What is the content of mass media programmes for educating rural people on HIV/AIDS?
- 4. What are the perceived ways of avoiding HIV/AIDS by farmers
- 5. What are the farmer's constraints in obtaining information on HIV/AIDS from the media?

Methodology

Research Design and Area of Study: The study was a survey design conducted in Benue State. Benue is a state in the mid-belt region of Nigeria with a population of about 4, 253, 641 in 2006 census. Tiv and Idoma are spoken predominantly. There are other ethnic groups, including Igede, Etulo and Abakwa, Jukum, Hausa, Akweya and Nyifon. With its capital Makurdi. at Benue is а rich agricultural region; some of the crops grown there are potatoes, cassava,

soya bean, guinea corn, flax, yams, sesame, rice, and ground nuts. The state has 23 Local Government Areas (Canback Global Income Distribution Data Base).

Population for the Study: The population consisted of all farm families in Benue State (BNARDA 1992) and two communication media houses-Television (TV) and Radio. There are 143,159 farm families and 71 media workers in Makurdi Local Government The total Area. population for this study is therefore 143, 230 people.

Sample and sampling procedure: Simple random sampling technique was used in selecting 150 farmers from the population of farm families and two media houses for information communication available in the state were also selected. Two media houses namely Radio Benue and Nigeria Television Authority (NTA) Makurdi were purposively selected because they are the major communication outfit in the state. One hundred and fifty (150)rural farmers were randomly selected from Ushongo, Otukpo and Makurdi Local Government Areas (LGAs) based on their HIV/AIDS prevalence rates. Programmes schedule for the two media houses for the year 2005-2010

were perused to ascertain programmes on HIV/AIDS.

Instrument for Data Collection: The instrument for collection of data was structured interview schedule/ questionnaire which was developed base on the literature reviewed and perusal of media houses programmes. The instrument was divided in four sections based on the objectives of the study. Section A sought information on awareness and knowledge of rural farmers on HIVAIDS; B consisted of information on available programmes people educating rural for on HIVAIDS; C enlisted information on healthy lifestyles to avoid contacting HIV/AIDS; and D consisted of information on the perceived factors that hinder education of rural farmers through mass media (TV and Radio).

Data Collection and Analysis Procedures: One hundred and fifty interview schedules/questionnaire were administered by the researcher with the assistance of three research assistants. However, only 136 were found analyzable. Data for the study was analyzed with the use of descriptive statistics; precisely mean and percentages.

Results

150)				
		No		
HIV/AIDS key issue	Awareness	awareness		
	Frequency (F)	Percentage(%)	Frequency(F)	Percentage(%)
Heard of HIV/AIDS in				
the area	125	91.91	11	8.09
Aware HIV/AIDS is a				
killer disease	133	97.79	3	2.21
Aware HIV/AIDS is				
contractible	132	97.06	4	2.94

Table 1: Percentage distribution of respondents on HIV/AIDS awareness (N = 136)

Table 1 shows that majority (91.91%) of the respondents heard of HIV/AIDS epidemic in the study area and 97.79% were aware that it is a contractible disease.

Table 2: Percentage distribution of respondents by knowledge level of HIV/AIDS Epidemic (N = 136)

Level	Frequency (F)	Percentage (%)
Low (0-5)	4	2.94
Moderate (6-10)	21	15.4
High (11- 15 and above)	111	81.6

Result on table 2 shows that greater (81.60%) of the rural farmers had high level of knowledge about HIV/AIDS, 15.40% were moderately knowledgeable and only 2.94% had low knowledge.

Findings shows that out of 76 TV programmes by the NTA, only 3 were on HIV/AIDS. Whereas, of the 89 radio programmes by the radio Benue am and fm, 19 were on HIV/AIDS. This result shows that more HIV/AIDS programmes were broadcast on radio than TV.

Available radio and TV Programmes Educating rural people on HIV/AIDS Out of the three TV programmes on HIV/AIDS, two were targeted at the rural people because they were aired in the major local languages in the (Tiv: "Imongo" state (vouth panorama) and Idoma: "Eko-oka" (family time). Out of the 19 radio programmes on HIV/AIDS, 15 were targeted at the rural people because of the time they were aired and the use of local languages. Out of the 15 programmes targeted at the rural people, 9 were aired in the local languages.

HIV/AID5				
Programme	Contents			
Issue of the movement	Avoid casual sex, keep one sexual partner			
Play of the week	Oracle cannot help, use condom			
Heart of the matter	Does not show on face, use condom			
Heal the world	Be faithful to one partner, be self-control			
Female productive health	Avoid multiple partners, use condom, discipline yourself			
People's forum	Avoid sharp objects and unscreened blood transfusion			
Reflections	Adhere to moral instruction to avoid.			
One thing at a time	self discipline and adherent to moral instruction helps			
Ocho utok' aho (Idoma)	Use of condom and other healthy life style			
Ososo (Etulu)	Use of condom and other healthy life style			
Youth health	Use of condom and other healthy life style			
Olohi- iye (our health) (Idoma	Self discipline and adherent to moral instructions			
Family digests	Self discipline and adherent to moral instructions			
Mkpeyol wase (our health) (Tiv)	Self discipline and adherent to moral instructions			
Eat healthy food like vegetable	s, milk, fruits etc			
Mtem uhegen (living now) (Tiv	Eat healthy food like vegetables, milk, fruits etc.			
Imongo (Tiv magazine	Be faithful to your partner, self disciplined and			
programme	controlled			
	Be faithful to your partner, self discipline and			
Ola ayaji (dairy in Idoma Gbenda u mkpeyol (way to our	controlled Avoid casual sex, use condom and other healthy			
health (Tiv)	practices			
	HIV/ AIDS- availability of anti- retroviral therapy			
NTA	(ART).			
	HIV/ AIDS- availability of anti-retroviral therapy			
We care	(ART).			
Imongo (Youth Programme)				
	HIV/ AIDS- availability of anti- retroviral therapy (ART).			
Eko-oka (Family Time) Idoma HIV/ AIDS- availability of anti- retroviral therapy (ART				
Source: NTA and Radio Benue Programme Schedule (2005-2010)				

Table 3: Content of mass media programmes for educating rural people on HIV/AIDS

Table 3 shows the content of the massconmediaprogrammes for educatingconrural people on HIVAIDS to includeheasuch healthy lifestyles as: Avoidingonecasual sex or total abstinence, use of

condoms for sexual intercourse, self control, moral instruction about healthy sexual relationships, keeping one sexual partner among others.

Ways of Avoiding HIV/AIDS	Frequency (F)	Percentage (%)
Avoid exposure to mosquito and other insect bites.	136	100
Avoid sharing cloths with infected persons.	129	94.9
Avoid eating with infected persons.	132	97.1
Avoid any contact with infected persons.	133	97.8
Seclude infected persons.	106	77.9
Consult oracle and follow its instructions.	98	72.1
Learn and adhere to practicing cleanliness.	79	57.5
Avoid sex (which is not very easy).	135	99.3
Keep one serious partner.	111	81

Table 4: Perceived Ways of Avoiding HIV/AIDS by Farmers

Table 4 shows the need for further education as perceived ways of avoiding the disease indicated stigmatization of the victim and other wrong ways of avoiding the disease such as: avoiding mosquitoes (100%),

using cover-ups to the farms (100%), avoid sharing clothing with infected person (94.9%), avoid eating with infected person (97.1%) and any other contacts with infected person (97.8%) among others.

Table 5: Perceived constraints in obtaining information on HIV/AIDS education from the mass media

Constraints	Mean $(\overline{x})^2$
No electricity in my area to use TV	3.82*
Cannot question and get feedback from TV and Radio	2.34*
Do not have access to TV	2.29*
Cannot read and write	2.26*
There are no TV viewing centres around	2.22*
Cannot afford cost of TV	2.05*
Programmes not explicit enough	2.04*
Too many myths about HIV/AIDS	1.98
Frequent power outage	1.93
Do not own a radio set	1.92
Do not attend clinic, hospital/health centre	1.89
Do not have money to buy radio	1.86
Radio signals are very poor	1.82
No time to listen to radio	1.81
Do not always have money to buy batteries in radio	1.81
Too many commitment to give attention to programme on HIV/AIDS	1.71
Programme time not convenient	1.55

 \overline{x}^* = Significant mean

Table 5 shows that the major constraint perceived by the rural people to be hindering obtaining information on HIVAIDS education through the media was lack of electricity to use tv (\bar{x} =3.82). Other constraint included: lack of feedback from TV and radio (\bar{x} =2.34), lack of access to TV (\bar{x} =2.29), among others.

Discussion

Based on the findings of the study, there was indication that high about percentage awareness HIV/AIDS was created in the study area. This may have been due to the responses to the high prevalence rate of the state in 1999 (16.8%)which prompted the government of Benue State to set up the Benue State Action Committee on AIDS (BENSACA) and the Benue State Agency on AIDS. This result agrees with that of Omotoso (2003) who found that HIV/AIDS awareness is increasing phenomenally with each passing day. The overall knowledge level of the rural people about HIV/AIDS was also found to be high (81.6%). This may also be attributable efforts of BENSACA and other stakeholders on health issues. Akinagbe (2006) and Utulu (2011) also found that farmers in south western Nigeria found radio as a cheapest mass media for reaching large audience.

More (9 out of 15) programmes on HIVAIDS were aired in the local languages to ensure that all and sundry not only hear about the epidemic but also understand it clearly. Ode (2003) advised that the media should ensure careful selections and use of words and languages to create effect since locution (technical style of speaking) may lead to unclear understanding of some issues involved in HIV/AIDS.

Mass media programmes on HIV/AIDS contained healthy lifestyle practices to avoid contacting the epidemic. However, ways to avoid contacting the disease as perceived by the rural people indicated that further education on alleviation of fear and stigmatization was needed. Wrong ways of avoiding the disease were found among the rural people in the state among which were not sharing clothes and even eating with infected people.

This result is also supported by the findings of Chah, Igbokwe and Agwu (2011) who also found that though a high proportion (69.4%) of rural farmers in Cameroon had knowledge and positive attitude towards HIV/AIDS, a good proportion (47%) indicated negative attitude of not feeling comfortable with infected people as neighbours.

Many of the serious constraints to receiving education from the mass media were related to Television as a media for education on HIV/AIDS. This is an indication that the rural people desire the use of TV as a media for education on HIV/AIDS. The desire for this media could be due to its audio-visual nature which enables the rural farmers not only to hear about the epidemic and its effects but also see infected people and the effects of the epidemics on them. This is in

(1994) agreement with FAO а publication, where a rural farmer confessed that: what he hears, he forgets, what he sees he remembers and what he does he learns. In addition Agbamu (2006) agrees with the desire of the rural farmers to have TV as a medium for education on HIV/AIDS as he asserted that Television is particularly useful in assisting the target audience to better understand and remember the subject matter presented, as it offers them the opportunity to employ the senses of seeing and hearing in learning. (1994)Obinne also identified tendencies for human beings to remember: 10% of what they read, 20% of what they hear, 30% of what they see,50% of what they hear and see,70% of what they say, and 90% of what they say and do.

Conclusion

This study revealed that the media has also played important role on the education of rural people on HIV/AIDS epidemic in Benue State as indicated the number bv of programmes broadcasted through the radio and TV, with the contents of the programmes consisting of healthy lifestyles and the use of local languages to ensure even illiterate rural people benefited.

Recommendation

Based on the results of the study, it was recommended that:

1. Television viewing centres or audio-visual centres should be

used to educate rural farmers about HIV/AIDS.

- 2. Rural areas should be provided with electricity.
- 3. Efforts should be increased towards ensuring that TV and radio signals cover all parts of the rural areas of the state.

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