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Media Campaign Exposure and HIV/AIDS Prevention: 1980–2020

Adamu Muhammad Hamid and Godwin Matthew Sule

Abstract

The interest of health communication scholars hover on relationships between HIV/AIDS message exposure and HIV knowledge, attitude and practice as the epidemic is no longer seen as only a health issue; its ramifications cover all aspects of society from economic, social structures to psychological makeup of communities. The media, under normal condition are expected to complement governments' efforts in achieving set objectives on such important issues as combating HIV/AIDS through the creation of awareness, mobilization and advocacy among other things, such as contained in the cardinal tenets of Development Media Theory. This is more so given that the only remedy to the epidemic is prevention through advocacy on the promotion of safe practices. Mass media play a central role in this direction. Exposure to HIV/AIDS messages especially on the mass media among adolescents in sub Saharan Africa has been reported as abysmal in the early 2000s, but now given growth in infrastructure and development in technology and program appeal, there emerges a need for reassessment. Given that communication particularly through the media is considered a major preventive strategy, this chapter set out to highlight a compressive review of scholarly works on HIV/AIDS media exposure, knowledge, attitudes and practices (KAP) across regions of the world, since the 80s. It is however concluded that the study of media use and HIV/AIDS KAP leaves much to be explored conceptually, methodologically and empirically.

Keywords: media exposure, media use, media campaigns, knowledge, attitude, practice

1. Introduction

The fast spread of the AIDS pandemic has engendered a vigorous debate about the role of media in fighting it. The reasons adduced, so far, are clear; that medical science has been unable to offer anything more than ways or methods of turning it from a deadly into a chronic condition, through the therapies of anti-retroviral. Because these medications are costly and complex, much emphasis and attention had shifted to prevention. This simply translates into encouraging people to change their attitudes towards the syndrome, and behaviour in that most intimate area, sex. Therefore, resources have been deployed into public information, everything from billboard campaigns to the transmission of messages about HIV/AIDS in TV programs.

When you are working to combat a disastrous and growing emergency, you should use every tool at your disposal. HIV/AIDS is the worst epidemic humanity has ever

faced. It has spread further, faster and with more catastrophic long – term effects than any other disease. Its impact has become a devastating obstacle to development. Broadcast media have tremendous reach and influence, particularly with young people, who represent the future and who are the key to any successful fight against HIV/AIDS. We must seek to engage these powerful [media] organizations as full partners in the fight to halt HIV/AIDS through awareness, prevention and education [1]

Substantiating the same position as early as the 90s, Hirose et al. [2] depicted a correlation between media reportage of HIV/AIDS and public risk perception of the epidemic and safer behaviour. As time went by, the complexity of the challenge raised by AIDS has become much more visible. The epidemic is no longer seen as only a health issue; its ramifications cover all aspects of society from economic, social structures to psychological makeup of communities. The pandemic has come to be recognized as a serious development issue for Third World countries since HIV/AIDS and poverty feed off each other.

In addition, as will be seen later, the social forces driving the HIV/AIDS epidemic are more clearly understood particularly through the gender dimension. Three key factors have been identified as making women or girls more vulnerable to infection: (a) the culture of silence surrounding sexuality; (b) exploitative transactional and intergenerational sex, and (c) violence against women within relationships [3]. The pandemic affects women disproportionately, not just in the prevalence of infection, but also in the impact on those affected.

The media, under normal condition are expected to complement governments' efforts in achieving set objectives on such important issues as combating HIV/AIDS through the creation of awareness, mobilization and advocacy among other things, such as contained in the cardinal tenets of Development Media Theory. This is more so given that the only remedy to the epidemic is prevention through advocacy on the promotion of safe practices. Mass media play a central role in this direction.

Combating HIV/AIDS is the number sixth item on the list of Millennium Development Goals, which signals its relative importance in the global scheme of things. Studies have passed the stage of conjecture about the epidemic at the turn of this new millennium. AIDS poses a serious challenge, which can really devastate whole regions and crack decades of national development [4]. As seen above, HIV/AIDS media exposure has been established to play a strategic central role in HIV prevention, yet literature update on the subject has been scanty, or somewhat inconsistent, sometime taking very long time gap. For strategies on HIV/AIDS risk protection to be effective, there has to be constant data updates on the trend of literature documenting advances in tracking the effect of HIV/AIDS media exposure on HIV/AIDS attitude and behavior. Policy thrust globally must rely on such evidence! This Chapter attempts to address that by documenting literature on the subject since the 80s.

In addition, Odigbo et al. [5] stated that the ability to get people's 'imagination and subsequently to change behaviours' especially in the use of the traditional media in health campaigns is yet to be captured in some of the literature. The media as game changer, through its programming has made series of attempt by providing organized agenda setting to reduce HIV/AIDS prevalence among the young adult as a means of contributing towards preventing, reducing, treatment, etc.

In spite of the important roles of communication and the only prevention or vaccine to HIV/AIDS, related literature is not definitively decisive. So it is important to keep track of scholarly contributions in the field.

For the past decades, Human Immune Deficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS) has posed a lot of challenges, especially for

young adults where HIV knowledge is limited. Media roles in the prevention of HIV/AIDS have passed through some uncertainty as sex has not been discussed within the public sphere in most countries with high prevalence. This is as a result of objection of sex education by certain cultures and religions. Although, that does not mean that media has not been in forefront in the campaign strategies.

2. Media campaigns on HIV/AIDS prevention and HIV/AIDS KAP: global overview

In an extensive study, Bertrand and Anhang [6] conducted a systematic review of studies that evaluated mass media interventions in HIV/AIDS prevention, which were published between 1990 and 2004. Studies that were included in the investigation were those that evaluated mass media campaigns that had the main objective of providing information about HIV/AIDS or sexual health. And to clearly show evidence for the effectiveness of mass media intervention in HIV/AIDS prevention, the study included only studies that used a pre-intervention versus post-intervention designs, or intervention versus control design. Or an analysis of cross-sectional data comparing those who had been exposed to the media campaigns with those who had not been exposed [7].

Of the 15 programs identified by Bertrand and Anhang, 11 were from Africa, 2 from Latin America, 1 from Asia and 1 from multiple countries. One program used radio only, six used radio with supporting media, and eight others used radio and television with supporting media. Data generated and analysed by the study generally supported the effectiveness of mass media intervention to increase the knowledge of HIV/AIDS transmission modes to improve self-efficacy in condom use, to influence some social norms, to increase the amount of interpersonal communication on the subject, to increase condom use and to boost awareness of health providers. The study also found fewer significant effects for improving self-efficacy in terms of abstinence, delaying the age of first sexual experience or decreasing the number of sexual partners. Conversely, indirectly these findings would suggest weak impact in Muslim dominated countries because self-efficacy in abstinence is the most potent virtue and protection against HIV.

Specific outcomes of the study which are related to evidences that directly affected global goals on preventing HIV/AIDS among young people as outlined in the Declaration of Commitment of the UN General Assembly Special Session on AIDS are:

- a. Increased awareness and knowledge of information on how to avoid HIV infection measured as
 - changes in knowledge (about modes of transmission, methods of prevention and how to tell if someone has AIDS).
- b. Increased access to skills needed to avoid infection, measured as
 - self-efficacy (in abstinence, condom use).
- c. Increased access to health services to avoid HIV infection, measured as
 - awareness and utilization of health products and services.
- d. Decreased young people's vulnerability to HIV measured as

- more accurate perception of personal risk,
 - changes in social norms (friends' approval of use of condom or abstinence).
- e. Decreased HIV prevalence, measured by its proximate behavioral.
- determinants, such as
 - abstinence (both intention and behavior),
 - a decrease in the number of sexual partners,
 - the use of condom,
 - improvements in mediating factors, such as interpersonal communication (about sexual health, HIV/AIDS, condoms).

Of the nine studies examined on reporting data on knowledge of HIV transmission and prevention, four measured precisely increased knowledge of modes of HIV transmission. In China according to the study for example, results showed significant differences, measuring both before and after interventions – in knowledge of modes of transmission, including sexual intercourse (77 percent before versus 95 percent after) sharing needles for drug use (67 percent before and 95 percent after) and having multiple sex partners (69 percent before and 93 percent after). The “Tsa Banana” campaign in Botswana showed mixed results with males showing significant improvements in knowledge and females showing no significant improvements. The one study measuring knowledge of abstinence as a prevention technique, the “HEAT” campaign in Zambia, showed significantly higher knowledge among those who had seen the campaign as compared to those who had not (66 percent males exposed to the campaign versus 53 percent of males not exposed, 65 percent of females exposed versus 55 percent for females not exposed). In general, these studies indicated appreciable general exposure to mass media in countries including sub Saharan Africa, while Bankole et al. [8] discussed the appalling situation of media exposure among young persons in West Africa however, not the general population.

The study also found that those who had higher exposure to the Ghana Stop AIDS *Love Life* campaign were significantly more likely to believe their friends approved of delaying or avoiding sex than those with no exposure, (47 percent of females with high exposure versus 26 percent of females with no exposure). The study thus concluded that mass media programs can influence HIV related outcomes among young people, although not on every variable or in every campaign. Campaigns that included television require the highest threshold evidence, yet they also yield the strongest evidence of effects, which invariably suggested that comprehensive mass media programs are valuable. In another study on HIV/AIDS media programs in South Africa namely *Beyond Awareness II* campaign, the multimedia edutainment program *Soul City*, and the youth program *Love Life*, there was evidence of effectiveness as Coulson [9] found that the potential for mass media to reach South Africans is widely acknowledged. An estimated 99 percent of people had access to radio, 75 percent had access to television and 7 percent, readership of newspapers. The finding on newspaper readership here was rather startling when compared to the high rate of literacy and relative economic viability of South Africans. More study is required here to provide insight into why the situation is

low in newspaper readership in South Africa. The study also revealed sixty-nine percent of young persons watched TV five or more days a week. The study also found, prior to the development of *Soul City* (in 1997), *Beyond Awareness* campaigns (commissioned in 1995) and *Love Life* (launched in 1999), the use of the national mass media for HIV/AIDS prevention in South Africa was undeveloped. However, as a whole, the study concluded that the effective use of the mass media is a critical component of HIV/AIDS prevention.

In the Middle East, Tavoosi et al. [10] assessed the knowledge and attitudes of high school students in Iran regarding HIV/AIDS through a cluster sampling of 4641 students from 52 high schools in Tehran in February 2002. The results identified television as their most important source of information about AIDS. Only a few students answered all the knowledge questions correctly, which indicated low HIV knowledge among them. There were also many misconceptions about the routes of transmission- mosquito bites (33 percent) public swimming pools (21percent) and public toilets (20 percent). Forty six percent believed that HIV positive students should not be allowed to attend ordinary schools. The study also found knowledge level among the students was associated with their attitude and discipline. Since TV has been found to be a major source of information for the students on HIV/AIDS, it shows that TV programs have been ineffectual since exposure does not tally with HIV knowledge as revealed by the study.

3. Media role in fighting HIV/AIDS

Though journalism constitutes just a fragment of media activity, it is worth observing here the rift that has been there between the perceived role of the journalist and that of the health professional in relation to HIV/AIDS. McIlwaine [11] states that the priorities of the journalist differ with those of health professionals: while journalists are interested in the sensational, the human-interest and dramatic angle of the subject, the health professional may deemphasize those aspects. Delineating this tension, Lupton et al. [12] referred to journalists by stating that their task is to sell their commodity i.e. news, not to serve as campaigning arm of health educators. The manner in which journalists report issues such as HIV/AIDS according to the authors can therefore 'detract from the goals of health educators'.

Apparently debunking such position however, showing the role of the journalist and that of health professional in this scenario as arriving at the same objective, Avevor [13] wrote that the role of the journalist is primarily HIV/AIDS prevention. And that they are expected to achieve that by accurate coverage of HIV/AIDS to raise public awareness and ultimately generate desired public opinion, attitude and political support, thereby tackling the syndrome by educating people. Nevertheless, the ideal role of media in combating HIV/AIDS has been aptly summarized by [1] that "education is the vaccine against HIV". The importance of HIV education is underscored by the influence of education in empowering individuals to prevent contracting the disease (The Media and HIV/AIDS: Making a difference, 2004).

Specific roles of media on the syndrome included talking about it, creating support and enabling environment for its prevention, challenging stigma and discrimination, promoting HIV/AIDS services, educating through entertainment, mainstreaming HIV/AIDS messages, emphasizing HIV/AIDS on the news agenda, and pushing leaders to act (ibid). Talking about the syndrome and creating support and enabling environment for it presuppose unlocking all channels of communication about it, thereby addressing cultural norms and confronting existing values and social norms, which are hurdles to opening up about the HIV syndrome.

Moreover, this can be achieved through education through entertainment, 'edutainment'. In Tanzania for example, it has been observed that a radio soap opera *Twendina Wakati*, meaning "let's go with the times" substantially increased the willingness of listeners to chat on the issue of HIV/AIDS [14].

In addition, recounting the limitations of their extensive study on media exposure and knowledge attitude and practice in China, Zhiwen et al. [15] and Pitts and Jackson [16] cited lack of content analyzing media output to determine the patterns of media HIV/AIDS messages as a major limitation of their study. The authors accordingly suggested complementing media and HIV/AIDS KAP studies to be complemented with content analysis of the patterns of media coverage of HIV/AIDS. The authors stated, "this study did not provide information about the nature and contents of the HIV/AIDS prevention information from these.. Content analysis studies are needed in the future to find out what kinds of such information are available through Chinese mass media sources.

Stigma and discrimination have been identified over time as driving force for the HIV epidemic; it plays the role of media to eradicate prejudice against, and encourage solidarity with people living with HIV/AIDS. Effective collaboration between the press and community organizations, government agencies and social service providers can foster for HIV/AIDS counselling, voluntary testing, care giving and treatment. To achieve optimal HIV/AIDS messaging output, media organizations needed to imbibe mainstreaming the syndrome in a number of programs, not just programs solely dedicated to it. This can be justified by the fact that the epidemic affects all facets of life. Putting the syndrome on the news agenda and encouraging leaders to act potentially create a fertile political climate for the 2030 vision of eradicating it completely. This can also be achieved by making it a news priority (in both selection and prominence).

Two decades after the emergence of HIV/AIDS, precisely in 2004, Kaisar foundation published a detailed study of press coverage of the syndrome in America conducted by [17]. After examining 9000 stories, the study concluded that, after 20 years of world's experience with HIV/AIDS, there was a kind of 'AIDS fatigue' on the part of the US media. Journalists also reported facing difficulty in convincing their editors to run HIV/AIDS stories, partly because the syndrome has been considered just like any other disease, while far from that, actually, it is still a major cause of death in the aged 25–44 among African-Americans. In most studies on press coverage of HIV/AIDS according to [18], the common denominator was emphasis on seeking new angles and ways to convey or tell the story. A respected former journalist of Papua New Guinea Anna Solomon observed that "AIDS is a boring report, so let's try to make it interesting" (Solomon, 2002, as cited in [19]), thereby encouraging colleagues to use imagination, sensitivity and initiative to convey the message about the syndrome.

Submissions by [17] and the veteran journalist cited above, clearly suggest that there is a growing disappearance of HIV/AIDS reports from the press as if the syndrome is no longer a serious life-threatening ailment. This situation clearly indicates the need for constant monitor of press coverage of HIV/AIDS to determine whether the situation has changed or is still looking for drastic improvement over coverage, angles, emphasis and dimensions to halt and reverse prevalence. Conversely, the news media undoubtedly served as crucial sources for the public on information about the syndrome. Seventy two percent of the United States public reported that greater part of the information they received about HIV/AIDS came from the media namely newspaper, radio and television [17]. Similarly, a national survey in India showed more than 70% of respondents indicated they received their information on HIV/AIDS from television (ibid). Evidence of press coverage of HIV/AIDS in the United States, Australia, Britain and France through the 1980s revealed a common

pattern- initial slow response in terms coverage, then a heightened coverage in recognition of the emerging risk of spread and followed by a gradual fall in reportage. This is largely because of what was referred to as ‘routinization’ of the disease, i.e. treating it as any other health issue. These three categorizations gradually gave effect to varying degrees of sensationalism, stereotyping and complacency in coverage and proved inadequate relative to the actual scourge of the epidemic in many countries [20].

Similarly, other studies that focused on developing countries emphasized on the contents of news stories rather than frequency. Not much attention was paid to discern emerging patterns of coverage, examples are [16] in Zimbabwe, [21] in Zambia and [20] in Papua New Guinea. A similar trend to the Western pattern of reporting was noticed though this rise-peak-decline trend was not a conscious or deliberate decision on the part of journalists or newspaper editors. In Nigeria, a study of *Daily Times of Nigeria* and the *Nigerian Tribune* released in 2008 showed slow coverage in the 90s and accelerated one in 2000s [22] though the study noticed some inconsistencies in the frequency of reports, which were higher in Februaries and Decembers, and generally lower in other months.

In a recent study, Hamid and Tamam [23] reported that the classification of the stories of HIV/AIDS in Nigerian press shows that 84% were straight news stories, 16% were feature and none was an Editorial. This dearth of interpretation reports on AIDS clearly shows that both journalists and experts had not adequately subjected the scourge of AIDS to incisive analysis. By extension, this situation further grossly limited the quantum of AIDS education and awareness in general media audience, and reflects even more, on the kind of attention the deadly epidemic received from the press in such countries. Lack of wider views, expert analysis and incisive accounts and interpretation through features and editorials may grossly affect public knowledge and attitude on HIV/AIDS. Concentrating on hard news suggests that the press, instead of acting proactively to write articles in advance, they are being reactive by waiting for events to happen before they are reported. It was also found that the news functions served by 42% of the HIV/AIDS stories are information, 42% education, 15%, awareness 8%, interpretation 12% and 23% percent advocacy as documented by the study. Scaling this finding against [24] concept of Mobilizing Information (MI), which entailed the press giving information that could be translated into meaningful health behavior or actions as key to success in combating HIV/AIDS, it could be said that the press have done fairly well by having up to 23% of stories on advocacy. After conducting an extensive research as far back as the 80s in Britain, Hamid and Tamam [23] observed that paucity of MI affected the impact of press messages. They argued that such MI communications tend to promote a particular behavior when specific details about action that can prevent health threats are explicitly given. However Cullen [25], found that editors prefer to focus on an issue rather than facilitate public participation.

In the early 90s, Osita [26] reported his study of press coverage of HIV/AIDS by four Nigerian newspapers (mostly based in southern Nigeria) in which he concluded that the press was covering the epidemic inadequately and that the reportage neglected rural areas. While [27], in a study of 3 Nigerian newspapers found that the bulk of HIV/AIDS story types were hard news and articles with no editorial. In addition, in a study of two Nigerian newspapers [28] found that HIV/AIDS stories were not emphasized on front page or given prominent placement in the pages they were carried. Similarly, Komolafe-Opadeji [22] pointed out that coverage of HIV/AIDS by Nigerian press prioritized on issues of rate of infection and workshops. And by contrast, the report of Kaiser Foundation [16] showed that 36% of all news stories on HIV/AIDS in the United States press was on educating people how to protect themselves.

The Panos Institute extensively studied newspaper coverage of HIV/AIDS in the region worst hit by the epidemic, southern African countries. The study was conducted in eight countries of the region: Zambia, Zimbabwe, Namibia, Lesotho, South Africa, Botswana, Swaziland and Malawi in 2003. In the study, tremendous improvement on coverage was noticed in the 80s and then stories gradually became sensational and insensitive to those affected by the HIV/AIDS epidemic. In the 90s, such military metaphors as ‘killer disease’ ‘HIV/AIDS victims’ gave way to a more humane and sensitive expressions as ‘people living with AIDS’, and gradually HIV/AIDS news report was seen as development story which educates people and gives hope rather than just a health story [29]. That period witnessed more stories of hope rather than illustrations of despair with pictures of emaciated people and scary statistics gradually became less preponderant (ibid). Majority of news reports were also noticed to be about workshops, speeches and conferences just as happened in the West as reported by [16]. Panos Institute [29] concluded, the corpus of HIV/AIDS reports omitted the voices of those affected and became ‘monotonous and less appealing to readers.’

In a related study also, Jing [30] tested relationships between the coverage of HIV/AIDS news frames or themes and how the different themes were emphasized in the US and Chinese newspapers and found a significant relationship between HIV/AIDS story frames and their emphasis in the newspapers studied. Similarly, discussing the analytic procedures of newspaper content analysis, Panos Institute [29] showed that newspaper content variables sometimes have statistical relationships with one another. They elucidated for example, that newspaper stories’ sources mostly have relationship with their geographic focuses. Though much interesting in revealing patterns of newspaper coverage, extremely few newspaper content analysis paid attention to testing relationships between content variables. Such studies mostly focus on only descriptive statistics.

4. Knowledge of HIV/AIDS and attitude change

Knowledge of HIV/AIDS is closely linked to people’s consciousness on avoiding the disease. An extensive study on knowledge and consciousness was conducted on “self – awareness” by [30] which posits that each one formulates body of personal knowledge about one’s characteristics. In his view, self-awareness has significant influence on behavior, adding that we can scarcely have consistent and favorable attitudes and beliefs towards ideas which we have not previously encountered.

In instances, knowledge level of HIV/AIDS is predicted by socio-economic status. In a study conducted in Lebanon, education and income were found to be significantly related to knowledge of HIV transmission and prevention among women. In terms of income, women in richest quintile were found to be 4 times more likely to be knowledgeable than women in the poverty quintile. Almost half applies to women with the highest education as compared to women with elementary education or less than that [31].

In an earlier study, Lynch and Peer [32] reports that a study by UNFPA stated that sexually transmitted infection (STIs) are generally major public health challenges that have received public health attention in the two decades before the study because of their serious social and economic consequences. Knowledge of STIs according to the study is important because of associated disabilities and more importantly because of the “close association between STIs and HIV/AIDS and how they could be contacted and prevented.”

In this key area of HIV/AIDS knowledge, it is worth highlighting that the area of study – Northeast Nigeria-- is remarkably weak in terms of HIV and STIs

knowledge especially among the female population. For example, way back since 2004, UNFPA [33] also showed that only 7.7% of the female populations in Bauchi have STIs complete knowledge according to recognized indicators. The female figure in Gombe is 23.0%, in Borno 26.0%, in Katsina 25.7% and in Kebbi 18.7%. And in all the states, the investigation showed that HIV awareness is relatively lower among the female population. Recent data on this key index of HIV prevention appears to be lacking.

A potent measure in increasing HIV/AIDS knowledge is educational program in mass media. In a study conducted on YARD (Young Adults Reproductive Health) program, Kirby (1999) as cited in [34] reviewed the evidence on the effectiveness of the program in the United States, and the work suggested that HIV/AIDS education efforts are more effective than the general reproductive health education programs, possibly because they are more successful in attracting the attention of boys.

Bankole (2004) as cited in [34], states that despite the international attention that the HIV/AIDS epidemics has received, knowledge of the disease is not usual among adolescents. Perceptions of personal risk are sometimes at odds with reality. According to him, while at least 90% of the women and men aged 15–19 years in most countries in sub-Saharan Africa have heard of HIV/AIDS, substantial proportion in some countries have not; 43% - 46% of young women in Chad and Niger, 26% in Nigeria and 19–21% in Burkina Faso. In majority of countries with available data, half of adolescent women who have heard of HIV/AIDS think they are at risk of becoming infected. But in Ghana, Nigeria, Niger and Tanzania, no more than three in 10 young women consider themselves at risk. Adolescents' perception of risk is not always consistent with HIV prevalence in different countries. In Kenya, Cameroon, and Zambia for example, only about half of young women and men who have heard of HIV/AIDS think they are at risk, even though prevalence is high in these countries. On the other hand, in Mozambique, another country with high prevalence about 7 in 10 adolescent women and men who have heard of HIV/AIDS believe that they are at risk.

According to [35] awareness of HIV/AIDS is generally high in both urban and rural areas in Nigeria and between males and females of all age groups though in north east and north central zones, 2 out of 10 respondents in the survey have never heard of HIV/AIDS. Knowledge about HIV/AIDS prevention and transmission routes is fair with 59% (63% males and 56% females) knowing all the four main transmission routes: Sexual intercourse, blood transfusion, mother – to – child and sharing of sharp objects. The survey went further to reveal that misconceptions about HIV transmission are still high. Twenty five per cent of females and 21% of males believed HIV is transmitted through sharing of toilets. As far as prevention is concerned, only 51% (42% of female and 60% of males) reports that one can reduce the risk of contracting HIV by being faithful to uninfected partner. Six out of 10 respondents know that healthy looking person can be HIV positive. On mother to child transmission, 65% of females and 71% of males know that HIV can be transmitted during pregnancy.

Federal Ministry of Health [35] also indicates that the awareness of AIDS in Nigeria is higher among men than women with 97% of men and 80% of women reporting that they have heard of AIDS. The survey showed no significant differences in knowledge among men by background social and demographic characteristics. However, there are significant differences among women living in households ranked lowest on prosperity index (70%). Even though there is sometimes an appreciable level of HIV knowledge among respondents, however, misconceptions about the disease hamper progress in communication efforts to stem its prevalence (Soyombo, 2005 as cited in [32]).

Expounding on the correlation between media exposure and HIV/AIDS knowledge, a study of media use and HIV/AIDS knowledge in northwestern Ethiopia by

[36] delivered mixed results. Exploring the knowledge gap resulting from mass media use disparities in the study population, precisely checking the relationship between mass media exposure relating to HIV/AIDS and HIV/AIDS knowledge, the study found that in the total population of the respondents mass media exposure is not a significant predictor of knowledge related to HIV/AIDS. But at the same time however, the study showed that there is a negative relationship in knowledge gap between respondents with high education and those with low education as HIV/AIDS media use increases. Put differently, the knowledge gap between the two groups closes with the increase in HIV/AIDS media consumption. Therefore in this study, the impact path from media exposure to HIV/AIDS safe practice is hypothesized to be mediated by HIV/AIDS knowledge because in the study above, though faintly, a relationship is figured out between media use and HIV/AIDS knowledge. This study will clarify further, such a relationship.

Much has been written about the linkage between HIV knowledge and attitude change, but from the standpoint of psychology, knowledge about an idea is often quite different from using it. Most individuals know about many innovations, many of which they do not adapt to. Here, the reason could be the individual does not regard the idea as relevant to his/her situation. Buttressing this relationship of knowledge and attitude change, Ajzen and Fishbein [37] posited that attitude is typically viewed as a latent variable that is assumed to guide or influence behavior.

In a research on sexual behavior and perception of AIDS in Benin City, Evelyn and Osafor (1990) as cited in [34], revealed that despite good HIV/AIDS knowledge, a high percentage of the study sample admitted having multiple sex partners with only a negligible proportion using condom. This shows a risky behavior against the knowledge about HIV prevention. Depending on the nature of a particular society, a range of issues are raised about the use of condom. For example, based on an assessment of HIV/AIDS among youth and adult men with steady sex partners in four states of Nigeria, condom use depends on one's perception of and desire for the trust of their partner(s). Introducing the use of condom in a relationship is in some cases seen as evidence of, or suspicion of infidelity among sex partners. Reference to "skin – to – skin" contact among the majority of sex workers' clients as well as other men and youth with multiple partners placed groups at a heightened risk of contracting HIV [38].

5. Conclusion

Based on the review, it is concluded that media exposure is a necessary but not a sufficient precursor for HIV/AIDS safe behaviour and attitude. Media exposure reinforces other components of HIV/AIDS knowledge and perhaps, interpersonal discussions on HIV/AIDS via media agenda setting to affect HIV/AIDS favourable attitude and safe practice.

In spite of well acknowledged potential of mass media in HIV prevention, little is known in terms of the knowledge gap on HIV/AIDS that exists in societies as a result of disparities in media exposure and the concomitant effect of HIV/AIDS media use on attitude and behaviour regarding HIV/AIDS. This study is a response to such paucity in literature. It is also concluded that fusing HIV/AIDS-related information can narrow the gap in HIV/AIDS knowledge in a given social milieu, and as well address the challenges of negative HIV/AIDS attitudes and risky practice. From the evidence garnered in this study it is further concluded that the propositions of media Accumulation theory and Klapper's (1964) reinforcement perspectives gained much support thereby rendering the arguments of the critics of the transmission model of HIV/AIDS preventive media campaign theories implausible and

very weak, as cited in [39]. Prolonged periods of persistent supply of HIV/AIDS preventive campaigns on condom use has the capacity to alter the long engendered negative view of condoms in North-eastern Nigerian societies. So Western developed HIV/AIDS preventive campaigns based on social psychology do have success.

The mass media remain a major source of HIV/AIDS information for majority of adolescents girls in North-eastern Nigeria and West Africa in general and Hausa Home Video provides a potentially big window for mass media access to and addressing adolescents on HIV/AIDS. In line with the improvements in literacy and media exposure among adolescents however, the press needed to pay more attention to HIV/AIDS protective or preventive stories instead of overemphasis on care for people living with HIV/AIDS which is a reactionary approach.

Though there was a remarkable improvement noticed in this study in terms of the scope of HIV/AIDS coverage by the press as compared to the findings of previous studies in Africa and elsewhere, the press are not doing enough by not making the HIV/AIDS stories prominent on front pages or in back pages or dedicating an editorial to it or even illustrating the stories with attention catching design devices. At least when the emphasis the press give to the subject is compared to the fact Africa is the bearer of the largest HIV/AIDS burden.

6. Recommendation

Based on the findings in this study, it is hereby suggested that strategy must be adopted in HIV/AIDS media messages conceptualization process to emphasize messages that advance the knowledge of adolescents on HIV/AIDS specific issues of prevention, transmission, demography and epidemiology and deemphasize those that directly instruct them to change behavior. This is largely because this study establishes that HIV/AIDS message exposure only affects HIV/AIDS behavior through HIV/AIDS knowledge. By improving adolescents HIV/AIDS knowledge reservoir, this study contends, behavior change is almost guaranteed. Put differently, this study supports designing programs aimed at directly influencing HIV/AIDS knowledge among adolescents, thereby subliminally targeting attitude and behavior change. For example, the media can emphasize on issue-specific knowledge on HIV risky practices, and the knowledge that the practice is risky could perhaps motivate behavior change.

HIV/AIDS messages producers and reporters must research the interpretations of target audiences of such messages before any media campaign slogans are released. If possible misinterpretations are not controlled, the campaign messages are less likely to reap the desirable impact. While the ABC and safe sex campaigns can be suggested by this study to continue, findings also indicate that mother-to-child transmission and multiple sex partner slogans are prone to negative interpretations and they are suggested to stop and be replaced by other phraseology that are less prone to misinterpretation. Again, HIV/AIDS campaign producers and news reporters should consider campaigns that extol the virtue in virginity and similar themes like eschewing nudity or wearing sexually provocative dress in Northeast Nigeria because they are in consonance with Islamic philosophy on chastity and other praise-worthy values that are deterrent to HIV/AIDS risky practices.

The press in Nigeria should emphasize stories on the risks of HIV/AIDS and publish adequate editorials and features with Mobilizing Information in order to help the public to translate such information into meaningful health actions. Newspaper reporting on HIV/AIDS should also avoid over concentrating in the urban centres; serious effort should be made to reveal the overall comprehensive outlook of the HIV situation down to the grassroots. Newspapers should employ

designate professional health reporters as that will increase frequency of HIV/AIDS features and encourage the newspapers to have editorials with informed opinions and official stand over issues concerning HIV/AIDS. Editorial design and production of newspapers should pay close attention in page layout by emphasizing HIV/AIDS stories on the upper left quadrant of pages, accompanying the stories with attention capturing devices such as color, picture and cartoon and most importantly by accentuating the stories on front pages.

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Author details

Adamu Muhammad Hamid* and Godwin Matthew Sule
Department of Mass Communication, The Federal Polytechnic, Bauchi, Nigeria

*Address all correspondence to: hamidadam00@gmail.com

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