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Influence of Breast Cancer Radio Campaigns on Utilisation of Screening Services By Women of Vulnerable Age in Tarka Local Government Area of Benue State, Nigeria

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Abstract

Breast cancer is a leading cause of death among women globally. The World Health Organisation (WHO) estimates about 8.2 million cancer-related deaths annually, with over 14 million new cases each year. Studies have shown ignorance as a major cause of breast cancer. This study investigated influence of breast cancer radio campaigns on breast cancer on utilisation of screening services among women of vulnerable age in Tarka Local Government Area of Benue State. Descriptive survey research design was adopted. Questionnaire served as instrument for data collection. Cluster Multi-stage and purposive sampling techniques were used to select a sample size of 400 from the total population of women in the area. Generated data were analysed using simple percentages, frequency table and Chi-square test statistics. Findings show high level of awareness creation on the threat of breast cancer in the area. There was also high level of exposure to radio campaigns on breast cancer among women in the areayet, majority of them do not patronise breast cancer screening services. The study recommends more creative actions from radio contents producers in packaging their messages on breast cancer to engender more appeal and acceptance among women in the area. They could also consider the option of less news, and inject more interpretations into their health programmes, and more of such programmes should be in the people's local dialects to enhance more understanding. Appropriate scheduling of the campaign messages is also very important for greater reach at lower cost.

Keywords: *Breast Cancer, Radio Campaigns, Utilisation, Screening Services, Women of Vulnerable Age*

Introduction

The World Health Organisation (2021), as supported by a 2022 publication of the Institute of Health Metrics Evaluation (IHME) both rank Nigeria among the countries with the highest breast cancer mortality rate in Africa, with prevalence rate of 69.1 per 100,000, and mortality rate of 6.23 per 100,000. It is further estimated that in every 100,000 Nigerian women, 116 of them have breast cancer and that more than half of the number has a very high generic risk status and as such are vulnerable to the disease (American cancer society 2021). In addition, Akpo, Akhator and Akpo (2020), report that a recent onological review of cancer cases in Nigeria puts breast cancer survival rate at less than 50% in the country in contrast to 90% in the developed countries.

These figures represent one of the worst outcomes of breast cancer globally. Other studies such as those of Reuben, Milliken and Paradis (2012), ranks cancer as the second leading cause of death globally, accounting for an estimated 9.4 million deaths or one in six death in 2018. Lung, prostate, colorectal, stomach and liver cancers are the most common types of cancers men; while breast, colectal, lung, cervical and thyroid cancers are the most common among women.

Cancer is a large group of diseases that can start in almost any organ tissue of the body when abnormal cells grow uncontrollably, go beyond their usual boundaries to invade adjoining parts

of the body and spread to other organs (WHO, 2022). The cancer burden continues to grow globally, exerting tremendous physical, emotional and financial strain on individuals, families, communities and health systems. Many health systems in low-and middle –income countries are least prepared to manage this burden and large numbers of cancer patients globally do not have access to timely quality diagnosis and treatment. With an aging population at increasing risk for cancer and the incidence of some cancers rising for unknown reasons, bold steps are required to address the urgent need for more effective and affordable cancer prevention and treatment interventions.

Some of the factors that predispose women in Nigeria to vulnerability include ignorance (UNESCO, 2019), systemic corruption (Transparency International, 2020) and endemic poverty (World Bank, 2022). This important subject has attracted several scholarly investigations. For instance, Mbiere and Etumnu, (2020) investigated influence of breast cancer awareness campaigns on the practice of breast self-examination among women in Owerri municipal, and Omolayo, Ekeh, and Elon, (2021) investigated media campaign strategies, awareness of breast cancer and the practice of breast self-examination among rural women in Adamawa State, Nigeria. Similarly, Ezugwu, and Nzekwe, (2015) investigated influence of breast cancer broadcast media campaigns on the health behaviour of women in South-East Nigeria, Okorie, and Salawu, (2016) investigated the influence of media awareness campaigns on breast cancer care among women in South-West Nigeria.

The major weakness of the above studies that the current study fills is that whereas all the above mentioned works focused on other zones of the country, the current study rather focused on women of north central Nigeria with particular focus on Tarka local government area of Benue State. This is to say that literature search showed paucity of documented intellectual studies that concentrate in north central Nigeria, particularly Tarka local government area of Benue State. It was an attempt at filling this knowledge gap and academic lacuna that prompted this study.

Method

The study adopted descriptive survey research method. The area of the study was Tarka Local Government Area of Benue State, North Central Nigeria. Agriculture is the main economic activity of the people. About 95% of the population of are rural dwellers with a density of about 213 inhabitants per square kilometre. Women in the area are mainly poor peasant farmers with limited access to healthcare facilities and little exposure to health education. This predisposes them to vulnerability to avoidable common diseases such as breast cancer.

The total population of Tarka Local government area of Benue State was 253,641 according the National Population Commission (NPC) 2006census. This figure was projected to 2022 at 2.28% annual growth rate to arrive at 350,025 out of which a sample size of 400 was derived using the Taro Yemane sample size determination method.

Cluster Multi-stage and purposive sampling techniques were adopted in selecting the survey respondents from three major towns of Tiortyu, Asukunya and Wannune in Tarka local government area of Benue state. Step one involved the clustering of Tarka local government area into the three communities while step two involved the use of purposive sampling technique to ensure that only members of the population who met the criteria of selection were studied.

Structured questionnaire served as instrument of data collection. The instrument were self-administered in conjunction with three research assistants who were trained on how best to undertake the task. The instrument was validated by two experts. The experts were requested to examine the contents in line with the purpose of the study, in terms of their content relevance,

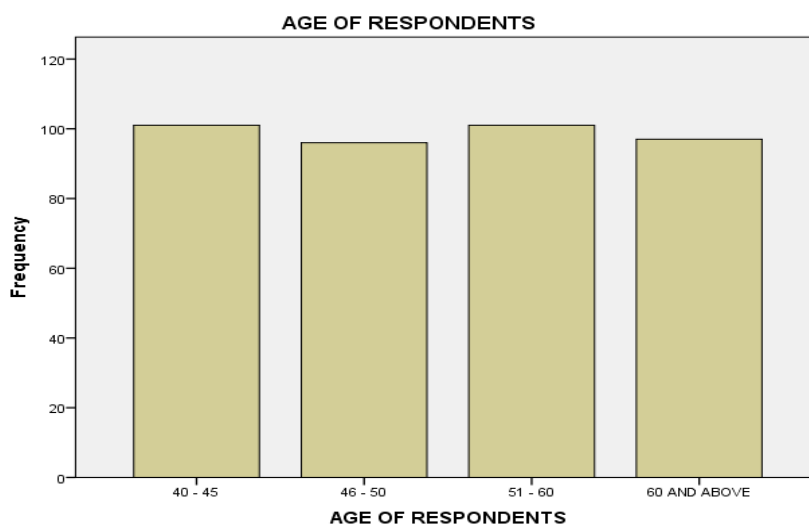
clarity, design, as well as ascertain the appropriateness and suitability. Their inputs provided useful suggestions that guided modifications of the instrument before administration. Data were analysed using simple percentages, frequency table and Chi-square test statistics which were computed using the formula below:

$$X^2 = \frac{\sum (O.E)^2}{E}$$

Where X^2 = Chi-square
 \sum = Summation sign
 E = Expected frequency

Results

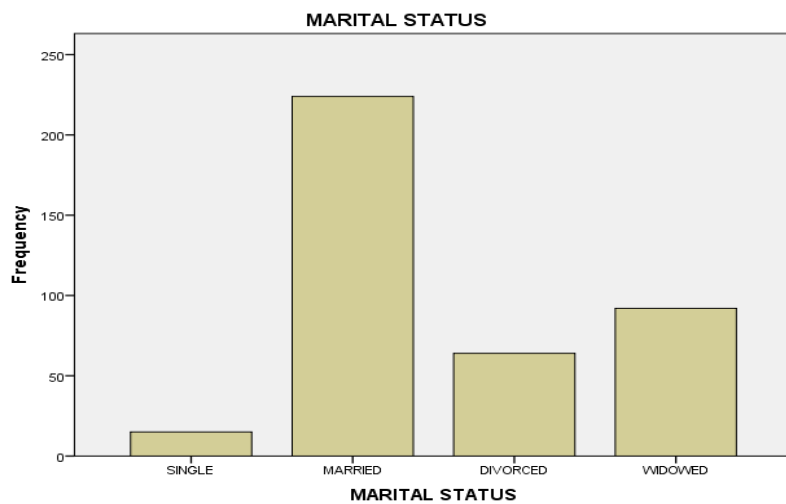
Figure 1: Age distribution of the Respondents



Source: **Field Survey, 2023.**

From figure 1 above, more of the respondents were within the age brackets of 40-45 and 51 – 60 representing 25.6% and 25.6% respectively. Respondents within 46-50 years were 96(24.3%) and respondents who were 60 and above were 97(24.6%).

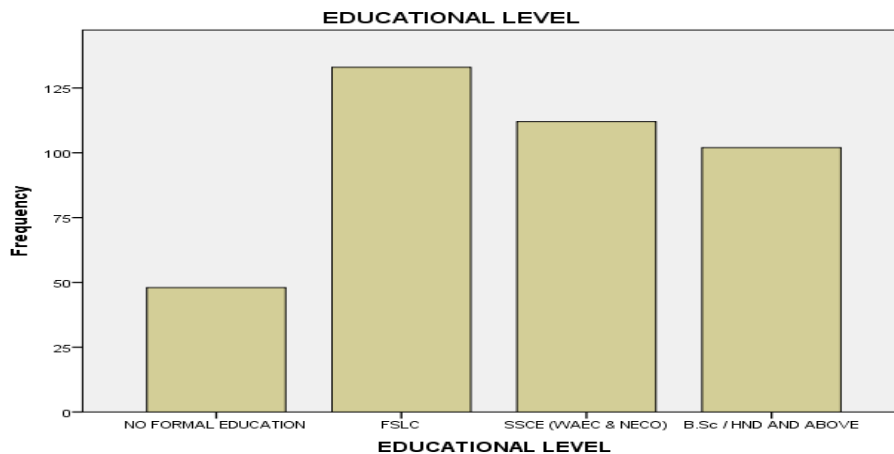
Figure 2: Marital Status of the Respondents



Source: **Field Survey, 2023.**

Figure 2 shows that an overwhelming 56.7% of the respondents were married while 23.3% were widowed. Those who were single were relatively few

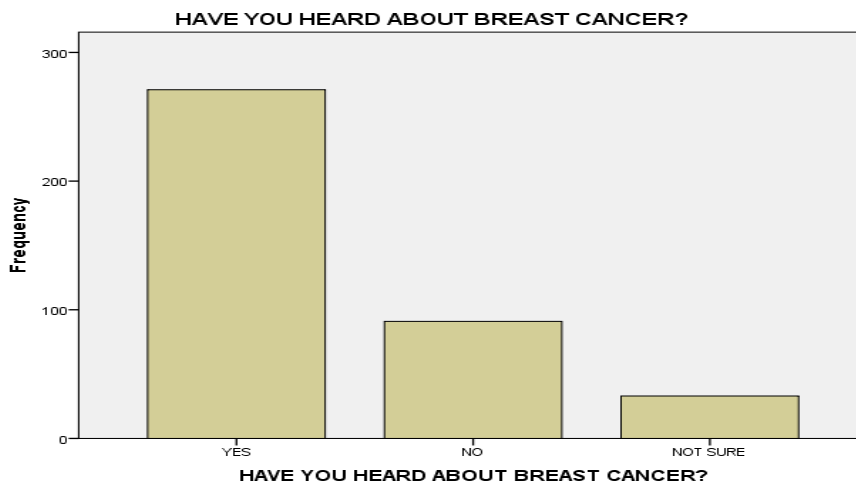
Figure 3: Educational qualification of the Respondents



Source: **Field Survey, 2023.**

Figure 3 shows that almost half of the respondents had at least a first school leaving certificate. Another 28.4% had at least an SSCE with very few people having never attended school 48(12.2%). Perhaps, the most significant point here is that majority of the respondents were educated and, thus, probably truly understood the questions and responded accurately to them.

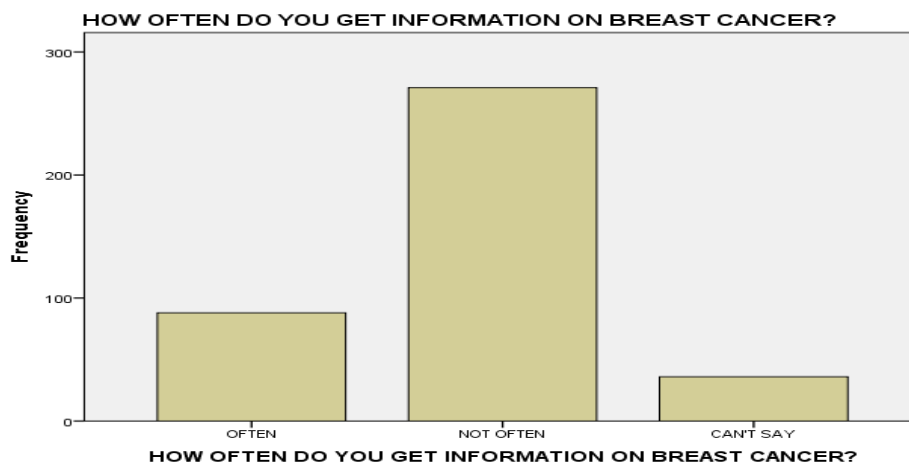
Figure 4: Information of breast cancer



Source: **Field Survey, 2023.**

From the data displayed on the figure above, 395 respondents said they have information on breast cancer while only 33(8.4%) said they are not sure. This implies that majority of the respondents are aware of breast cancer.

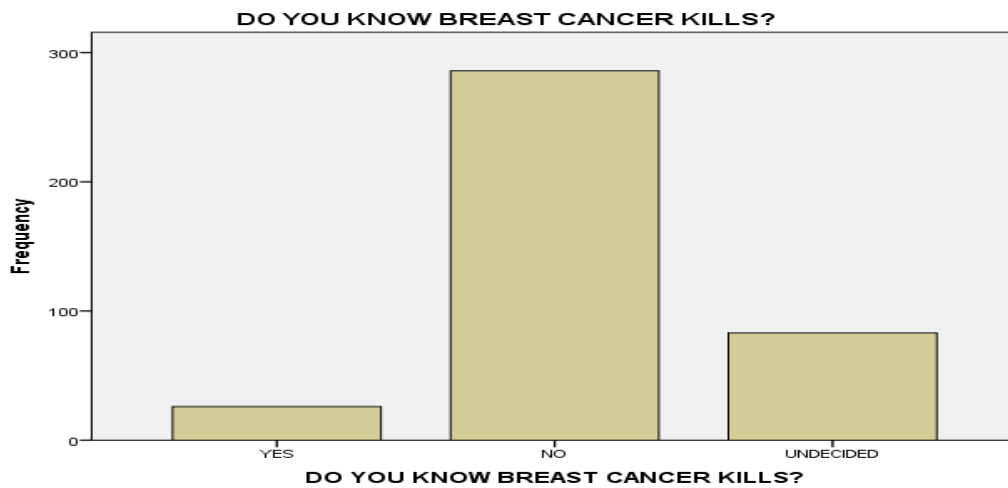
Figure 5: Regularity of information on breast cancer



Source: **Field Survey, 2023.**

The data in the figure above reveal that majority of the respondents said they do not receive the information on breast cancer often, with the 88(22.3%) saying they receive the information regularly. Only less than 10% said they can't say.

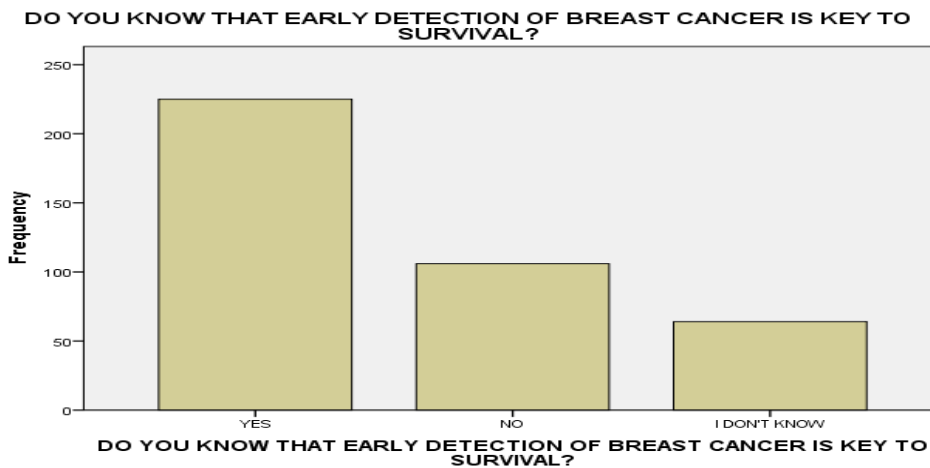
Figure 6: Assimilation of information on breast cancer



Source: **Field Survey, 2023.**

Figure 6 shows that 72.4% of the respondents overwhelmingly confirmed that they had no knowledge about the fatality of breast cancer. However, 6.6% of the respondents indicated 'Yes' while 83(21%) abstained from taking a position.

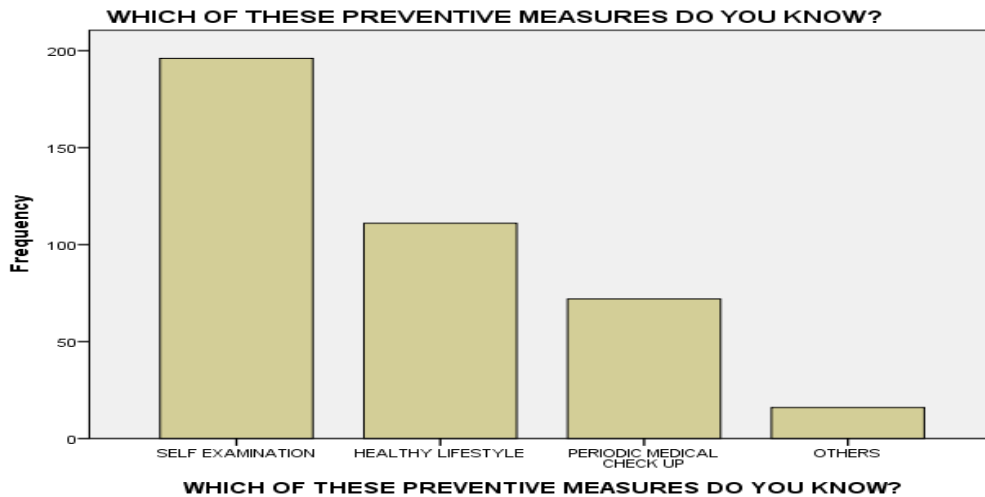
Figure 7: stage of breast cancer



Source: **Field Survey, 2023.**

Figure 7 shows that 57% of the respondents agreed that early detection of breast cancer is the key to survival. The remaining 26.8% and 16.2% were for respondents who indicated 'no' and 'don't know' respectively.

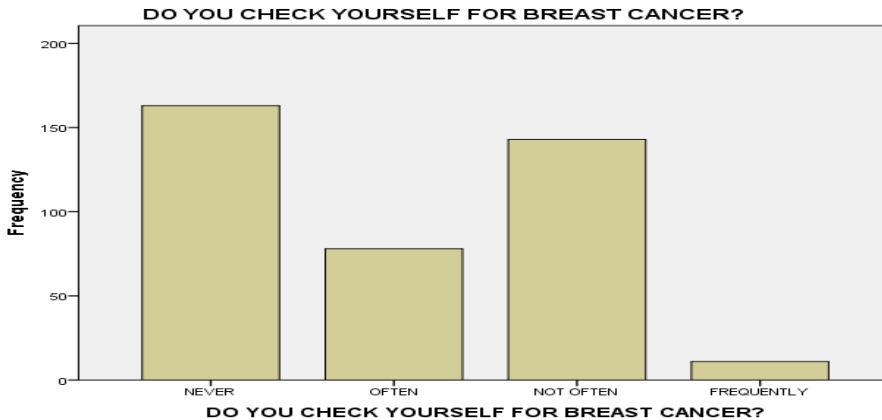
Figure 8: stage of breast cancer



Source: **Field Survey, 2023.**

A follow up question was asked whether there are ways in which breast cancer can be prevented but more suggested self-examination. Figure 8 reveals that 28.1% said they prefer healthy lifestyle with almost 20% of the respondents said they prefer periodic medical check-up. However, 4.1% suggested other means.

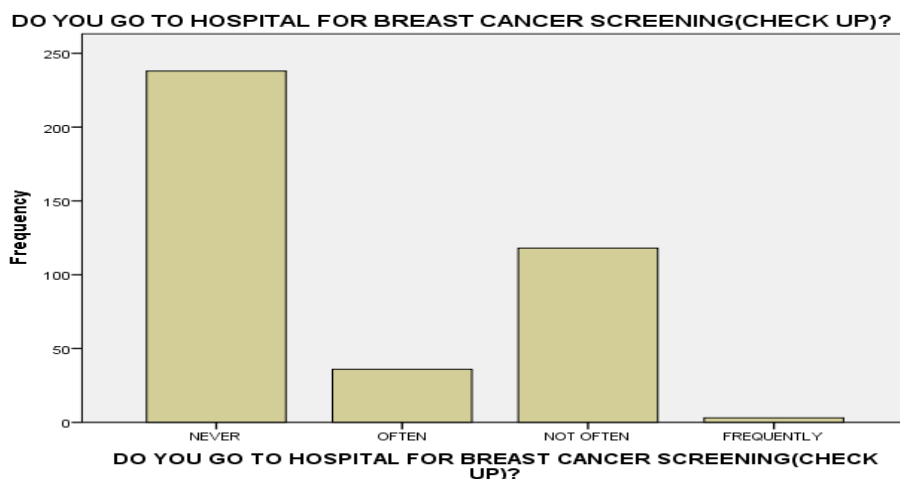
Figure 9: Self-examination of breast cancer



Source: **Field Survey, 2023.**

Figure 9 shows majority of the respondents representing about 41.3% said they never do self-examination on themselves. Conversely, about 36.2% said they don't do often while 78(19.7%) said they do often. The remaining respondents 11(2.8%) said they do that frequently.

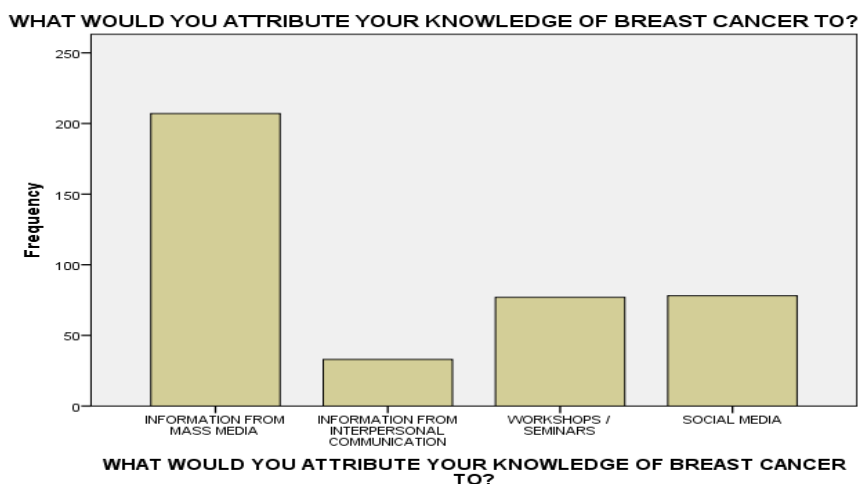
Figure 10: Medical check-up on breast cancer



Source: **Field Survey, 2023.**

From the figure displayed above, 60.3% of the respondents indicated ‘never’, 118 respondents indicated ‘not often’ and the 36(9.1%) said they do often go for medical check-up on breast cancer. only 3(0.8%) respondents said they do go for medical check-up regularly.

Figure 11: Source of knowledge of breast cancer



Entries in the figure above show the response degree of how the respondents got knowledge about breast cancer. An overwhelming majority of the respondents 207(52.4%) said they gained the knowledge from information on the mass media while 19.7% said they got the knowledge from social media. The least response category were respondents who indicated ‘information from interpersonal communication’ with 33(8.4%).

Figure 12: Radio influence on the utilization of screening service

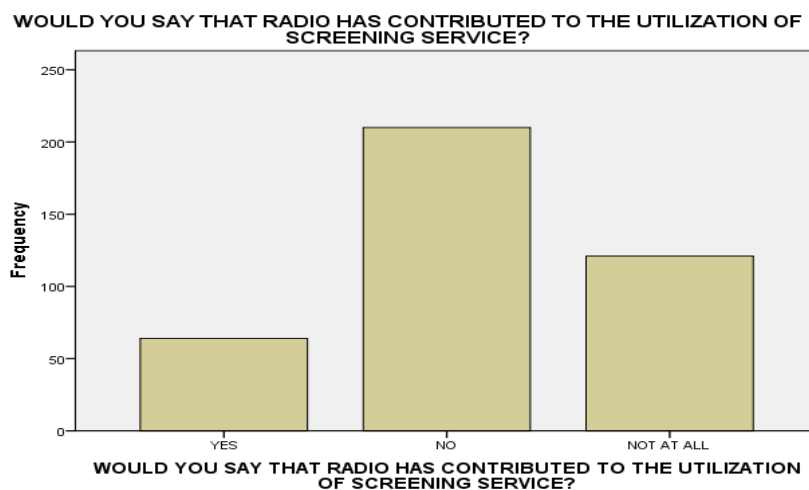


Figure 12 shows that 53.2% of the respondents confirmed that radio has no influence on the utilization of screening service. However, 30.6% of the respondents said not at all with the remaining respondents saying ‘yes’ to the statement.

Discussion

The discussion in this section was guided by the four research questions raised in the study. Each research question discussed was based on the findings obtained from the analysis made. More so, these findings are linked to other similar studies reviewed in the course of this study so as to give the findings empirical support. The analysis and interpretations are made below.

Research Question One: *To what extent do media create awareness on the threat of breast cancer to women of vulnerable age in Tarka local government area of Benue State?*

From the study, it shows the responses of respondents as to how they received the information on breast cancer. An overwhelming 25.8% said they received it through interpersonal service. Majority of the respondents said they do not receive the information on breast cancer often and they also do not understand the message on breast cancer. In the light of this, majority representing 95.7% of the respondents said they believe the message they received on breast cancer and as well confirmed that they had no knowledge about the fatality of breast cancer. It is interesting to know that the findings of this work correspond with the findings of Mbiere and Etumnu (2020) and Ezugwu and Nzekwe (2015) in that the studies are unanimous on the efficacy of radio campaigns on breast cancer among rural people. This however, disagrees with that of Omerigwe, (2012) which rather shows that radio programmes have limited effects in preventing diseases such as breast cancer.

Research Question Two: *What is the level of exposure to media campaigns on breast cancer among women of vulnerable age in Tarka local government area of Benue State?*

Findings of research question two showed high level of exposure to media campaigns on breast cancer among women of vulnerable age in Tarka local government area of Benue State. Despite high exposure, many were still ignorant of the major causes of breast cancer as majority attribute it to old age; others believe that breast cancer cannot be prevented. Only a few know about self-examination as a means of breast cancer prevention. A total of 52.2% of the respondents said that breast cancer has no cure but agreed that early detection of breast cancer is the key to survival.

These findings are consistent with that of Omolayo, Ekeh, and Elon, (2021) entitled media campaign strategies, awareness of breast cancer and the practice of breast self-examination among rural women in Adamawa State, Nigeria. It however negates that of Ezeah, Apeh, Omerigwe, and Ojo, (2012) which rather showed high level of knowledge of both curative and preventive measures for breast cancer.

Research Question Three: *What is the level of utilization of breast cancer screening services among women of vulnerable age in Tarka local government area of Benue State?*

Basically, majority of the respondents representing about 41.3% said they had never done self-examination on themselves and also never go for medical check-ups for breast cancer. An overwhelming majority of the respondents 207(52.4%) said they gained the knowledge from information on the mass media. This again agrees with Onyenegechaa, Secimb, and Akunc, (2021) which investigated effectiveness of media inclusiveness with the works of influence on the breast cancer care awareness campaign in Northern Cyprus. This finding is particularly important as it shows no significant difference between studies done here in Nigeria and the one done in far-away Cyprus, Greece.

Research Question Four: *What is the relationship between exposure to media campaigns on breast cancer and utilisation of screening services among women of vulnerable age in Tarka local government area of Benue State?*

Majority of the respondents said that radio never had an influence on their knowledge of breast cancer and more importantly confirmed that radio has no influence on their utilization of screening service. This finding is in consonance with that of Okorie, and Salawu, (2016) which investigated the influence of media awareness campaigns on breast cancer care among women in South-West Nigeria and came up with the major finding that exposure to radio programmes does not significantly translate to adherence to the message of campaign. This suggests the need for a multimedia approach in carrying out such significant campaigns that have to do with matters of life and death.

CONCLUSION

From the results of this study, we conclude that there is high level of awareness creation on the threat of breast cancer to women of in Tarka local government area of Benue State Nigeria. Women in the area get exposure to these campaign programmes mainly through radio. Majority of the women do not patronize breast cancer screening services despite their level of exposure and awareness.

RECOMMENDATIONS

Arising from the findings and conclusions of the study, the following recommendations were made:

1. Radio Content producers should engender more creativity in packaging messages on breast cancer for greater appeal and acceptance among women in rural areas such as Tarka Local Government Area of Benue State. They could consider the use of celebrities in the campaign for a possible greater impact on audience.
2. Again, content producers could consider the idea of less news programmes, and inject more interpretations on their health programmes.
3. Policy makers and media campaigners could consider changing their media of information dissemination from time to time.

4. Policy makers and media campaigners should package majority of their campaigns aimed at rural women in their local dialects to enhance greater understanding.
5. Appropriate scheduling of the campaign messages is also very important in order to reach the target audience.
6. Multiple media approach could also be deployed in carrying out such campaigns, particularly with the indigenous communication systems.

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