

Public Awareness and Attitude towards Herbal Medicine Campaigns for the Prevention and Treatment of Sexually Transmitted Diseases in South-East Nigeria

Ezeh Aruah Diane Chidimma *, Cookey Ibiere Tom **

* Lecturer II, Department of Mass Communication, University of Nigeria Nsukka

** Lecturer II, Department of Mass Communication, University of Nigeria Nsukka

DOI: 10.29322/IJSRP.8.5.2018.p7747

<http://dx.doi.org/10.29322/IJSRP.8.5.2018.p7747>

Abstract- Despite the existence of herbal medicine campaigns against sexually transmitted diseases in Nigeria, cases of people suffering from STDs still rise by the day, especially in South Eastern rural areas, where discussing sex related issues are considered taboo in many households. Thus, many people are forced to swallow their illnesses and pretend they are fine. However, the introduction of herbal medicine campaigns in various forms of media such as outdoor, radio, television, newspaper and internet have helped to expose people to issues relating to STDs in Nigeria. The main objective of this research therefore was to find out public awareness and attitude towards herbal medicine campaigns for the prevention and treatment of STDs in South-East Nigeria. It employed the survey research design with questionnaire as instrument for data collection. A sample size of 385 was drawn from the population comprising of all the residents of Anambra, Ebonyi and Enugu states by means of Australian Size Calculator of the National Statistical Service (NSS). Theories of agenda-setting and health belief model were used to back-up this study. Data generated found that the publics of South-Eastern Nigeria are aware of herbal medicine campaigns against STDs in Nigeria. Outdoor/word-of-mouth was considered the most dominant medium of herbal medicine campaign, followed by radio, television, internet, billboard and newspaper. The attitude of the publics towards the campaign was found to be more positive than negative, although certain factors like lack of herbal medicine regulation hampered the effectiveness of the campaigns. Recommendations are that the campaign producers should make the internet as their most dominant medium. Health communicators are also encouraged to enlighten parents about the need to educate their children about sex related issues.

Index Terms- Awareness, Attitude, Herbal Medicine, Campaign, Sexually Transmitted Disease

I. INTRODUCTION

1.1.1 Background of the Study

The role of campaigns in moulding public opinions, habits, views and attitudes towards an issue, place or person can never be overemphasized. Many scholars have asserted, by various

means, that campaigns are series of organized actions which are done for particular reasons.

Keen observation of the world media environment will prove how campaigns have aided different disciplines in eliciting change in the minds of their target audience. In the political field, campaigns have been voraciously consumed during elections to attract votes. The geographical sector also use campaigns to inform and warn people about an impending weather disaster and how those dwelling in the affected areas can avail themselves of the consequences of the disasters.

In the health sector, campaigns have been used to inform and educate people about outbreaks of diseases and how to treat and prevent them. The cases of Ebola virus and Lassa fever in Nigeria are typical examples. According to Wakefield, Loken and Hornik (2010, P. 1), in their work, "Use of mass media campaigns to change health behaviour", mass media campaigns can produce positive changes or prevent negative changes in health-related behaviours across large populations.

Johnston (2012, P. 5) asserts that media campaigns are used to increase awareness, analyse features, evaluate benefits, create reminders and promote loyalty. Ambler (2000) also states that campaigns have major influences on consumption volume of sales in the short-run as well as sales volume.

Sahid (1999) identified six fundamental principles on which campaigns have been unanimously agreed upon by researchers. These include:

- To secure attention
- To arouse interest
- To develop and sustain that interest
- To incite action and
- To create goodwill

Rai (2013, pg. 2) maintains that all efforts to make campaigns are centred on the sole aim of making it so effective and persuasive in natural ways so as to serve the need of meeting the consumer's psyche in a positive way.

However, campaigns cannot exist without the mass media. In fact, it is not an exaggeration to say that campaigns are media tools for public communication. Media tools could be traditional, digital and social media. Traditional media tools include word-of-mouth, billboards, banners, newspapers, magazines, television, radio and telephone directories while digital media consist of search engine optimization, mobile marketing,

interactive online advertisements, opt-in email and online partnerships such as affiliate partnership and sponsorship. Social media tools include blogging, tweeting, posting, sharing, networking, pinging, bookmarking, media sharing and commenting in social media websites such as Twitter, Facebook, Orkut, LinkedIn, Pinterest, Reddit and Youtube. (Etree, 2013).

Despite these classifications, research has confirmed that due to the vast increase in technological innovations and the immense diversity of world economy, health, politics, religion and culture, these media tools are supposed to be combined for effective inculcation of media messages. This brings to mind the trendy marketing campaigns strategy called, Integrated marketing campaigns (IMC). Business Dictionary (BD) (2015, P. 1) defines Integrated Marketing Campaigns as an approach to achieving the objectives of a marketing campaigns, through a well coordinated use of different promotional methods that are intended to reinforce each other. As defined by American Association of Advertising Agencies, integrated marketing communications recognize the value of a comprehensive plan that evaluates the strategic roles of a variety of communication disciplines.

From these preludes, the window to the soul of this study is opened. Herbal medicine campaigns against sexually transmitted diseases have been going on in traditional, digital and social media all over the States in Nigeria. It is very common for one to go to open markets, roadsides and open parks in Nigeria and hear loud voices of vendors describing signs and symptoms of sexually transmitted diseases and calling on passersby to buy drugs that would cure them. It is also not unusual for one to tune into local and national radio and TV stations and listen to programmes dwelling on sexually transmitted diseases, how to prevent and treat them, including drugs to buy to get them cured. Even in newspapers and magazines, there are many of adverts in form of campaigns dished out everyday by traditional health practitioners about their herbal medicines and how these medicines can cure all sorts of sexually transmitted diseases. Included in the campaigns are also testimonies/narrative accounts by people who have used these medicines and how the medicines have cured their diseases instantly.

There are also many of websites and social media pages created by these herbal health practitioners to campaign and sell their products. Fliers and billboards are also widely used by them for these campaigns.

These campaigns are so viral that children can even be heard recounting the words of the vendors and the songs used in such campaign programmes.

The virality of these campaigns is because, according to Olapade (1998) in Adegaju (2008), there has been a global resurgence of interest in Traditional Medicines in the last ten years probably because many of the known synthetic drugs in allopathic medicines for the treatment of various ailments are failing or that the causes of these various diseases are developing resistance to the known drugs.

Little wonder then that a new class of herbal medical practitioners has emerged in Nigeria, professing to be well talented, educated and versatile in formulating and modernizing herbal medicine. They also claim that their activities have been under control and monitoring by relevant bodies such as the Nigeria Natural Medicine Development Agency and National

Agency for Food and Drugs Administration and Control. (Adegaju, 2008).

It is in view of these facts that the crux of this study is built on; to find out public awareness and attitude towards herbal medicine campaigns for the prevention and treatment of sexually transmitted diseases in Nigeria.

II. STATEMENT OF PROBLEM

Despite the recurrent attempts by Nigerian health practitioners and agencies to tackle sexually transmitted diseases in Nigeria through the use of herbal medicine campaigns in various media platforms, cases of victims suffering from this disease still rise by the day. According to Cates (2003), more than 20 STIs have been identified by the National Institute for Allergy and Infectious Diseases in Nigeria. Some of the bacterial infections are venereal syphilis, gonorrhoea, chancre, candidiasis, trichomoniasis and non-gonococcal urethritis. Okpara (2010) cited in Hamid and Baba (2014) observed that the Nigerian media are yet to effectively play the surveillance function of the media in their campaigns against sexually transmitted diseases.

This problem has been attributed to many factors such as lack of public awareness, public's lacadaisical attitude towards the campaign programmes, use of inaccessible media for creating the campaigns, complicated and unserious campaigns messages, emotional, psychological and physiological problems.

Several researches have been carried out using different survey instruments to find out public's awareness and attitude towards STD campaigns. It was found out that the research studies have only produced results on HIV/AIDs. Other STD campaigns like Gonorrhoea and Staphylococcus have been ignored even though they are paramount and deadly to the body.

Because of the versatility of these herbal medicine campaigns messages against sexually transmitted diseases, it becomes pertinent to investigate the level of its awareness, its effectiveness and level of its behavioural influences. The need for this investigation is not far-fetched. Some researchers have found out that most people do not lend credibility to these campaigns messages. They consider the messages as mere lies fabricated by selfish vendors for economic reasons. They believe that these messages cause more harm than good as they insert fear in the minds of the listeners and viewers. In fact, some researchers have called these campaigns messages aggressive, forceful, unattractive and vulgar (James, 2013).

The problem of this study therefore is to find out the generalized pattern herbal medicine campaigns against STDs in various forms of the media are perceived among Nigerian audience. It is this gap that this study wants to fill.

III. OBJECTIVES OF THE STUDY

The major objective of this study is to find out public awareness and attitude towards integrated health campaigns in the treatment and prevention of STDs in South-East Nigeria. This main objective is broken down into the following specific objectives:

1. To ascertain the extent of public awareness of herbal medicine campaigns against STDs.
2. To find out the type of media the public is exposed to in dealing with herbal medicine campaigns against STDs.
3. To ascertain users' attitudes of herbal medicine campaigns in preventing and treating STDs.
4. To find out the factors affecting the effectiveness of herbal medicine campaigns in treating and preventing STDs.

IV. LITERATURE REVIEW

In a study carried out by Babalola, Olarewaju, Omeonu, Adefelu and Okeowo (2013) titled "Assessing the adoption of roll-back malaria programme (RBMP) among women farmers in Ikorodu local government of Lagos state", the findings demonstrated the importance of education and awareness efforts on controlling diseases. The authors recommended that awareness campaigns as regards the health and economic advantages of diseases should be intensified especially through the mass media. They also procured the need to focus policy on collaborative efforts of health personnel, cooperatives, media houses and government agencies in fashioning out awareness programmes that incorporate socio-economic characteristics of the audience especially at the local government level.

Meanwhile, Oyesomi (2010) in his work, "Making a difference in HIV/AIDS awareness for Nigeria's development: the role of the media", stated that despite several campaigns and awareness, its impact has become a devastating obstacle to development (pg. 2). According to Oyesomi, widespread lack of awareness, denials, stigma and discrimination constitute major challenges and obstacles to effective HIV/AIDS prevention education. He further asserted that greater participation of the mass media in HIV/AIDS awareness stems from the realization that they could exercise considerable influence on the public by increasing people's knowledge, attitude and promoting debates on HIV/AIDS as well as sensitizing and mobilizing people against the epidemic.

Odutolu (2006) in agreement, encouraged the media practitioners to become more active in the HIV/AIDS communication domain at individual, institutional and professional levels. (p. 8).

Let us look at another health campaigns issue on female genital mutilation, a major cause of STDs. Okofo (2015), in his study, "the influence of media campaigns in the orientation of female genital mutilation practice in selected communities of South-Africa", gathered that media campaigns against FGM have paid off and recommended that sensitization programmes like seminars should be organized for traditional rulers, religious leaders and other opinion leaders to enable them use other rural media communication channels to further sensitize and mobilize the rural women so as to consolidate the gains of the campaigns and ensure total eradication of the FGM practice. (p. 5).

Again, Keating, Mockers and Adewuyi (2006) conducted a study to investigate the effectiveness of media campaigns in enhancing awareness and prevention of HIV/AIDS with a particular focus on reproductive health. Their finding revealed that media campaigns reached a large portion of the target

population and exposure to mass media messages increased awareness of HIV/AIDS, resulting in change in behaviour.

A similar study was carried out by Kiragu and Omotara (1992) to determine the influence of mass media messages in promoting family planning approaches in Nigeria, the result of the study showed that mass media campaigns via radio and television, print materials as well as advocacy proved to be successful in communicating the policy to the people.

In another research conducted by an unknown author among 2000 out-of-school youths in 10 Nigerian cities to assess the levels of their knowledge, attitudes, behaviours and media habits relating to sex, STDs and HIV/AIDS prevention and education in Nigeria, the results showed that 83% of the respondents have heard about HIV/AIDS through the mass media and 76% were aware that unprotected sex leads to STD infections.

In another study, Bauman (1991) analyzed prevention of cigarette smoking by adolescents through the use of mass media campaigns. He found out that the mass media campaigns especially radio had a modest influence on spreading the consequences of smoking. The study also found out that despite the expensive nature of the TV campaigns, they were not more effective than the radio alone.

Bowen (2013) also found bits of attitudinal change from respondents in his study. He looked at the impact of mass media campaigns on bed net use in Cameroon and found out that after listening to a programme called 'Kopalu Night Watch' media campaigns, more than half of the respondents ensured they used bed nets to prevent malaria.

In the same vein, Keating, Meekers and Adewuyi (2006) assessed the effects of media campaigns on HIV/AIDS awareness and prevention in Nigeria. Results of the study showed that more males were exposed to the campaigns and the mean number of radio ranked highest while television was lowest. These media activities had high reach among the target population.

Despite the relatively high percentage of respondents that believe consistent condom can reduce the risk of HIV infection, relatively low numbers of respondents reported using a condom. The authors contend that programmes that specifically target rural populations, females and unmarried individuals, as well as disseminate information on where to obtain condoms are needed to increase condom use in Nigeria.

Though many researchers contend with the effectiveness of the radio in awareness and attitudinal change as seen in our discussion, a study conducted by Adegoke, Fife, Ogunnika and Heemer (2014) came out with a different finding. According to these authors, in their study titled "the influence of HIV/AIDS public enlightenment campaigns on adolescents' sexual behaviour in Nigeria", the print media exerted significantly more influence on adolescents' knowledge, attitudes and beliefs about HIV/AIDS than broadcast media (radio and TV), while organized activities had no effect on HIV knowledge, attitudes and beliefs. The discovery was that information received from print media such as books, magazines, newspapers, posters and billboards had a more significant influence on people's knowledge because it is more than mere exposure, such as the case with the broadcast media. (p. 5).

Meanwhile, several scholars have continued to question the epistemological assumptions inherent in knowledge

production of STIs education promotion (Fanon, 1986; Valentin Mudimbe, 1988; Oyewumi, 1987). These scholars provided a paradigm within which to understand that the highly hyped Western models have their own limitations and that there is a need to recognize that Africans have their own ways of creating knowledge too which must be recognised as the most appropriate cultural model for understanding Africa and its people.

Similarly, Airhihenbuwa (2007) argued that it is important for the design and implementation of STD interventions to target audience with solutions within the context of their values and beliefs which they can adequately understand. Other critics believe that many health communication programmes were unsuccessful mainly because the campaigns planners possessed minimal understanding of the cultural practices of their target communities.

Green (1999) supports this assertion by expressing that it is important to understand how Africans and people from different cultures understand infectious diseases because when health communication programmes ignores the most important aspect of culture, there is a huge probability that they will achieve zero success in their quest to change the behaviour of people.

A cultural approach offers a chance to improve the effectiveness of global HIV/AIDS strategy and rebuild the trust of communities through more sensitive modes of engagement. In so far as a cultural approach allows prevention and care methods to come from within the culture, it improves the socio-cultural ownership and credibility (Somma & Bodiang, 2003). Local community-based approaches driven by reports from the community will remain the most important means of influencing people (Uwah, 2013).

Therefore, Airhihenbuwa and Webster (2004) argued that it is importantly crucial for the design of health communication programme to focus on the African identity of the target audience by deconstructing conventional assumptions and theories that were used in public health issues and solutions in the continent. Selikow (2006) suggests a similar idea that mass media campaigns alone cannot facilitate behaviour change among adolescents but that a multi-pronged approach to media theory led initiatives of behaviour change, dealing with multiple sources of conflicting information and challenging traditional ideas of masculinity and femininity all play a role in ensuring the effectiveness of HIV/AIDs enlightenment programmes.

There is another new discovery. Apoh, Kwakye and Badadu (2015) found out that learning about insecticide treated nets through health workers increases the use of insecticide treated nets more than any other channels of exposure. This is supported by a study in Vandatu (2016) which found that participants appeared to be more influenced by those that they saw as an authority when it comes to health issues. Therefore, community based educational radio campaigns involving health workers are recommended to target universal health communication.

Meanwhile, social media have also been recorded as one of the best channels of mass media campaigns against diseases. In a study carried out by Tsegnyu (2015) titled, "An appraisal of mass media awareness campaigns in curbing the spread of Ebola Virus Disease among residents in Minna, Nigeria, Tsegnyu conducted a survey research of which respondents attested to the fact that

jingles, interviews, articles and advertisements in the print media and social media networks like Facebook, MySpace and Twitter were communication strategies adopted by the mass media in creating awareness on the outbreak of the Ebola virus. The study further found out that the effect of mass media awareness campaigns on the attitude of the residents of Minna metropolis was positive and effective and that the residents were able to change their attitude towards the cure of the virus as majority of them bought into the bitter kola and salt therapy.

However, a similar study like Tsegnyu's work had a different finding. Obukoadata and Abuah (2014) in their work "Media surveillance function in Nigeria: influence and perceptual frames", found out that media surveillance campaigns in controlling and preventing diseases have attendant negative consequences for the people (p. 6). According to Obukoadata and Abuah,

Specific on this was the panic created by the message on the usage of salt solution as an antidote that went viral which the respondents identified as catastrophic since the panic of media earlier portrayal of the stealthily nature of the Ebola Virus Disease made most people not to weigh the outcome of a concentrated salt solution on their health as well as never bothered in most cases to seek medical attention before applying the solution. Media reports indicated casualties from the use of the magical antidote.

According to the researchers, Ebola Virus Disease campaigns made people to avoid sick people; people no longer display warm African greeting pattern for fear of contact and a drastic minimization of contact with other people through avoiding church services, parties, gatherings and crowded places. Despite all these negative comments, the researcher also noticed that some of the respondents saw EVD messages to be right in time, quick enough to help the society and that adequate information was provided to help control and prevent the disease. But, some of the respondents indicated that since the disease broke out in other countries, the campaigns should have been started before the outbreak. The study recommended that information on disease control and prevention must be strategically designed and not left at the mercy of citizen journalists or else the result will be a cacophony of information that will result in panic for the society. (p. 10).

A critical look at these reviews shows that not much work have been carried out on STD campaigns. Meanwhile, the reviews are limited basically to campaigns planning and attitude and behavioural change. Unlike these reviews, this research work would not only assess the attitudes, awareness and behaviour but would also delve deeper into seeking the types of media exposure, the content quality, the levels of reliability and factors affecting the campaigns carried out on sexually transmitted diseases in Nigeria.

It is expected that this research would make a lot of difference to the existing literatures and also open the eyes of prospective researchers to new angles of study.

V. THEORETICAL FRAMEWORK

This work is anchored on two fundamental theories; Agenda setting theory and health belief model. Like a bullet, STD campaign messages would be received by the individual

directly and it would have an immediate and powerful effect on the individual, persuading him or her to behave exactly the way the message advocated. This process is called the hypodermic syringe or needle theory because it is believed that the media message acts like the content of a hypodermic syringe, which, when emptied into an audience, would have an instant effect like the drug for a real syringe.

Mass communication messages are passive, and the mass media can, therefore, control and influence members of the audience. The mass media are powerful and persuasive, and members of the mass communication audience are seen as weak and in danger of having their values and behaviour changed by mass media messages (Okunna, 1999). Therefore, constantly feeding the media audience with campaigns messages on the causes, symptoms, treatments and preventions of STDs will actually help to illicit changes in the behaviour of the audience that will achieve the objective.

On the other hand, health Belief Model (HBM) is a psychological model that attempts to explain and predict health behaviours. This is done by focusing on the attitudes and beliefs of individuals. According to Burke (2015), the Health Belief Model (HBM) is an intrapersonal (within the individual, knowledge and beliefs) theory used in health promotion to design intervention and prevention programmes. Applied in this study, herbal medicine campaigns use the psychological impact of the health belief model to make people understand the negative impacts of sexually transmitted diseases and how to prevent and treat them.

VI. RESEARCH METHODOLOGY

This research was anchored on survey research methodology. The population for this study comprised everyone in South-east region of Nigeria. The region is made up of five states of: Abia, Anambra, Ebonyi, Enugu and Imo. It would be cumbersome however, to study the entire five states in the region, so the researchers therefore decided to randomly select three states from the region which include: Anambra, Enugu and Ebonyi states as sample to represent the entire region in the study. According to 2006 population census in by the National Population Commission (NPC), population of the selected states are: Anambra= 4,177,828; Enugu= 3,267,837; Ebonyi= 2,176,947.

Therefore, the combined total population of the three states would be **9,622,612**. This population figure however, is too old and do not reflect the current population of the states. To get estimate of the current population, the researcher therefore used annual population growth rate projection to calculate for the population of the states over a ten year period. Hence, using the straight line formula, 12,701,847 would become the current population for the three states.

In calculating the sample size, the Australian Calculator as provided by the National Statistics Service (NSS) was used to get the sample size of 385.

Multi-stage sampling was used to generate data for this study. The researchers randomly selected one LGA/town from each senatorial district. To generate data for this study, questionnaire was used as instrument for data collection.

VII. DISCUSSION OF FINDINGS

This study made a number of findings which are discussed in this section, guided by the four research questions. Result showed that the public is aware of STDs in Nigeria. Gonorrhoea, HIV/AIDs and staphylococcus ranked the most common STDs in Nigeria. Syphilis is also common but not as these three. Chlamydia is the least common type of STD prevalent in Nigeria as it recorded low awareness in all the states. It was found out that the public have access to word of mouth/outdoor media, radio, television, billboards, fliers, newspapers and internet and that they have seen and listened to herbal medicine campaigns in all of these platforms. It was also discovered that almost all the respondents said that they often and very often listen to the campaigns in the media platforms listed earlier. Only very few people said they rarely and never listen to the campaigns. The kind of campaigns they are exposed to include: Ossa herbal, Goko cleanser, Katoka Mixture, Gbogbonishe, Agnes Nwamma, Papa and Mama Oshun, Deep Root, Jerusalem stone, Anya Ben and co, Green World Intl, Tianshe, UNO and Emma.

On the types of media the public is exposed to in dealing with herbal medicine campaigns against STDs, it was found out from the herbal medicine campaigns are mostly listened to via the word-of-mouth medium more than any other medium. This is followed by radio, then billboards before internet and lastly, newspaper. This is in line with what Kotler and Armstrong (2006) earlier explained in the literature about face-to-face medium being the most versatile means of communication in human existence as it allows one to express oneself.

As regards public attitude towards herbal medicine campaigns for prevention and treatment of STDs in South-East Nigeria, more than half of the respondents said they have never suffered from STDs while a little less than half said they have been victims. However, despite many people claiming not to have ever suffered from STD, a large number of people agreed to have bought the campaigned products to cure their STDs, although, the number of people who claimed they have never bought the products outweigh those that said they have. A large number of people also agree to have bought the products for their friends who have STDs.

Results of this study also show that these campaigns provide a lot of information about the importance of practising safe sex. Not only that, the campaigns also make people to buy the medicine and take, even when they don't have STD, so as to prevent the symptoms described in the campaigns from manifesting in their bodies. As they say, prevention is better than cure. According to Krepps and Silvaram (2009), television and other forms of communication have enormous influences in educating and empowering individuals to avoid contracting diseases. Also, the campaign went a long way in helping people cure their STDs as a reasonable number of the respondents whose health status was extremely bad, moderately bad and just bad were reported cured after taking the campaigned products.

However, 70% of the respondents do not believe that the herbal medicines can cure all the STDs indicated in the campaign. This result proves what Adegoju (2008) found in his study, "that herbal medicine campaigns possess exaggerative power of discourse" (Pg. 54). Findings reveal that the voices of the campaigners are audible enough to alert the health consciousness of the respondents. Hence, loudspeakers in the

markets, studio microphones, bold and colourful headlines and pictures splashed in the front and back of newspaper pages, billboards and fliers are messages on their own, saying “hear me, hear me! Read me, read me!”

Besides, the loud voices shouting, “O na-ako gi oko? I n'enwe watery discharge?” are enough to make one, even for a second, examine one's body and keep one into retrospection about the way one has been living one's sexual life.

Many of the respondents attested to remembering the campaign after listening to it. This means that the campaign is successful in appealing to the selective retention quality of which successful campaigns are characterized by. According to Okoro (2015), a campaign is a failure if no one remembers to sing it. It was also discovered that the campaign was long, serious and funny and engaging to a large extent. About the language, 51% of the respondents do not perceive the language as being vulgar while 49% thinks the language is vulgar. Meanwhile, 74% have never visited the campaign offices, 26% have. This means that the campaigns to a large extent do not affect the ‘visiting spirits’ of the public. Asked whether the campaigns elicit fear of infertility and barrenness in them, 70% of the respondents said yes while 30% said no. Finally on attitude, the researcher found out that 60% of the respondents believe that the testimonies accompanying the campaign messages are fabricated while 40% believe that they are true. No wonder Darrel Huff cited in Lucas (1999:128) argues that although testimonies do not lie, they can be manipulated and distorted as there are no ways the audience could test or confirm the figure.

Factors affecting the effectiveness of the herbal medicine campaign in preventing and treating STDs are use of indigenous language and lack of herbal medicine regulation. Some of the respondents also believe that some of the campaigned herbal products are dangerous and can kill. Almost all the respondents agreed that stigmatization of STD patients pose great threat to the effectiveness of the campaign in treating and preventing STDs. Other factors include shyness, financial challenges, and prejudice against herbal medicine by educated people, location, noise pollution, exaggeration and overuse of propaganda.

VIII. SUMMARY

This work investigated the public awareness and attitude towards herbal medicine campaigns against sexually transmitted diseases in prevention and treatment of STDs in South-East Nigeria. The overall objective was to discover if the campaigns, over the years, have generated awareness and helped people prevent and treat STDs.

The objectives of this study were to find out the extent at which the public was aware of herbal medicine campaigns against STDs in Nigeria, to determine the type of media public is exposed to in dealing with herbal medicine campaigns against STDs, to find out the attitude of the publics towards herbal medicine campaigns against STDs in preventing and treating STDs and to find out the factors affecting the effectiveness of STD campaigns in preventing and treating STDs in South-East Nigeria.

The study covered three selected states in South-East Nigeria namely: Anambra, Enugu and Ebonyi states. Being a survey, the questionnaire was used to generate data.

Data generated from the study showed a high level of awareness of herbal medicine campaigns. Respondents also indicated word of mouth, radio, television, internet, newspaper, billboards and fliers as the media for herbal medicine campaign with word of mouth ranking first and radio second. The respondents also showed awareness of STDs and identified HIV/AIDS, Gonorrhoea and Stahylococcus as the most common STDs in South-East Nigeria. Other not as popular are syphilis and chlamydia. The attitude towards the herbal medicine campaigns was more positive than negative while numerous factors were identified as militating against the effectiveness of the campaign messages.

IX. RECOMMENDATIONS

In the course of this study, some research findings were made. It is on the basis of these findings that the following recommendations were made:

1. Health communicators should go beyond the use of outside radio and word of mouth. Herbal medicine producers who want to campaign for their company products should embrace the internet, especially the social media. They should have a blog, a facebook page or twitter page where they can judiciously talk about their products without reservations. They should also have an online shopping platform where people can easily order for their products without feeling shy. Outdoor and radio campaign is important but most people who are in the market already have their budgets and may have just come across the campaign by chance. Internet creates a relaxing atmosphere for the public to carefully read about the product and make their demands without feeling shy.
2. Moreover, photos and video clips of people who have used the products should be uploaded in their blogs and facebook so as to create more emotional appeal and trustworthiness.
3. Also, comment sessions should be made available in blogs and social media pages where the publics can easily critique their products and make recommendations that would make their products come more alive. This would also reduce the stress of visitation as all consultations are made online.
4. Health communicators should master the art of dressing well. A health communicator who looks dirty and unkempt with a dirty van roaming round the market cannot be taken too seriously. Because health is associated with cleanliness, herbal medicine campaign messengers must learn to dress clean and look tidy in order to attract customers.
5. Health communicators should not be extremists. A little propaganda adds taste to the campaign but too much of it spoils it entirely. Therefore, exaggeration of efficacy of their products should be curtailed and brought to realistic level so as to ensure more credibility.
6. Herbal medicine campaigners are also encouraged to diversify the types of STDs they talk about. There are numerous STDs besides these ones that people should be aware and conscious of.

REFERENCES

- [1] Adaja, T. (2005). Communication and strategies for effective communication. *Journal of communication and society*. 4(33-38)
- [2] Adegoju, A. (2008). A Rhetorical Analysis of the Discourse of Advertising Herbal Medicine in Southwestern Nigeria Adeyemi Adegoju (Ile-Ife). Retrieved from www.linguisticsonline.com
- [3] Agudosi, F. I. (2007). Mass media and the promotion of health care in rural communities. In E. S. Mosaye, A. Salawa & O. Oyero *Ebenezer Soola conference on communication*. Proceedings/Ibadan: Ebenezer Soola conference communication (pp. 104-116). Ibadan, Nigeria.
- [4] Akerele, O., Blass, A., Singh, M. M., Chowdhury, S. R., Kulshreshtha, D. K., Kamboj, V. P., Bishaw, M. (1993). Natures medicinal bounty: dont throw it away. In *World Health Forum* (Vol. 14, pp. 390-5).
- [5] Akpati, N. S. (1998). Television programming as a tool for social integration. Unpublished project submitted to the department of Theatre Arts and Mass Communication. Benin: Nigeria.
- [6] Ambler, T. (2000). Brands on the Brain: Neuro-Images of Advertising. *Business Strategy Review*. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/1467-616.00144> on 4th December, 2016
- [7] Asemah, L. S., Anum, V. & Edeogoh, L. O. (2013). Radio as a tool for rural development in Niger: prospects and challenge. *AFRREV IIAH*, vol.2(1)
- [8] Asuquo, I. M., & Olajide, T. E. (2015). The role of health education on breast cancer awareness among university of calabar female undergraduates. *Journal of Education and Practice*. 6(44). Retrieved from files.eric.ed.gov/fulltext/EJ107866.pdf on 4th December, 2016
- [9] Awareness. (2017). Oxford Advanced Learners Dictionary. Retrieved from <https://en.oxforddictionaries.com/definition/awareness> on 4th December, 2016
- [10] Ayimey, E. K., Awunyo-Vitor, D., and Gadawasu, J. K. (2013). Does radio advertisement influence sale of herbal products in Ghana? Evidence from Ho Municipality. *Journal of modern economy*. Retrieved from <http://www.sclrp.org/journal/me> on 12th April, 2017.
- [11] Bates, T. (1982, September). The impact of educational radio. *Media in Education and development*, 15(3), 144-149
- [12] Berlett, J. E., Kotrlk, J. W. & Higgins, C. C. (2001). Organizational research: Determining appropriate sample size in survey research. *Information Technology, Learning and Performance Journal* 19(1), pp. 43-50
- [13] Blum, R. (2004). Risk and protective factors affecting adolescent reproductive health in developing countries. *Geneva*. Retrieved from www.geneva-risk-and-factors.com on 2nd December, 2016.
- [14] Cates, W. (1999). Estimates of the Incidence and Prevalence of Sexually Transmitted Diseases in the United States. *Sex Trans Dis* 1999;26(suppl):S2-S7.
- [15] Cragg, G. M., Newman, D. J., & Snader, K. M. (1997). Natural products in drug discovery and development. *Journal of Natural Products*, 60(1), 52-60.
- [16] Cunningham, C. M. (1993). *Advertising and Marketing Communication management*, New York: Dryden Press.
- [17] Dery, B. B., Ofysnia, R., & Ngatigwa, C. (1999). Indigenous knowledge of medicinal trees and setting priorities for their domestication in Shinyaga region, Tanzania Nairobi. *Kenya International Center for Research in Agroforestry*.
- [18] Dienne, V. (2011). The educational and social implications of sexuality and sex education in Nigerian schools. *African Journal of Social Sciences*, 1(2), 11-19.
- [19] Dourish, T. & Belotti, B. (1992). Awareness and Coordination in Shared Workspaces. Retrieved from <http://www.dourish.com/publications/1992/cscw92-awareness.pdf> on 4th December, 2016
- [20] Etree, A. (2013). Types of marketing tools. *Small Business*. Retrieved from <http://smallbusiness.chron.com/types-marketing-tools-61742.html> on 4th December, 2016
- [21] Fratkin, E. (1996). Traditional medicine and concepts of healing among Samburu pastoralists of Kenya. *Journal of Ethnobiology*, 16, 63-98.
- [22] Freedom House. (2012). Nigeria. *Freedom on the Net 2012*. Retrieved from <http://www.freedomhouse.org/sites/default/files/Nigeria%202012.pdf> on 4th December, 2016
- [23] Geary, C., LenI, S., & Adesegun, F. (2010). United States Agency for International Development/Nigeria: Adolescent and Sexual Reproductive Health. *Program Review and Design*. Retrieved from USAID.com on 5th January, 2017.
- [24] Grice, H. P. (1999): Logic and Conservation. In: Cole, Peter/Morgan Jerry L. (eds.) (1975): *Syntax and Semantics*. New York: Speech Arts.
- [25] Gutwin, C & Greenberg, S. (2004). The Importance of Awareness for Team. In E. Salas and S. M. Fiore (Editors) *Team Cognition: Understanding the Factors that Drive Process and Performance*, pp. 177-201, Washington: APA Press.
- [26] Hamid, A. M., and Baba, I. M. (2014). Resolving Nigeria's *Boko Haram* Insurgence: What Role for the Media? *Social and Behavioural Sciences* 155 (2014) 14-20
- [27] Hochbaum, G. M. (1958). *Public Participation in Medical Screening Programs: A Socio-Psychological Study* (Public Health Service Publication No. 572). Wasgington DC:Government Printing Office
- [28] Iwu, M. M., & Gbodossou, E. (2000). The role of traditional medicine. *Lancet*, 356 suppl, s3
- [29] Jacobsen, G. D., & Jacobsen, K. H. (2011). Health awareness campaigns and diagnosis rates: evidence from national breast cancer awareness month. *Journal of Health Economics*. 30(2011)55-61. Retrieved from pages.uoregon.edu/gdjaco/NBCAM.pdf on 3rd January, 2017
- [30] James, Godswill. (2012). Education and Sexuality: Towards Addressing Adolescents' Reproductive Health Needs in Nigeria. *Current Research Journal of Social Sciences*, 4(4), 285-293.
- [31] Johnson, T. C. (2015). Understanding sexually transmitted diseases. *WebMD*. Retrieved from webmd.com/sex-relationship/understanding-stds-basics on 4th January, 2017.
- [32] Johnston, K. (2012). Bridging Organizational Divides in Health Care: An Ecological View of Health Information Exchange. *JHIS publications*. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4288076/> on 4th December, 2016
- [33] Kiringe, J. W. (2006a). A survey of traditional health remedies used by the maasai of Southern Kaijido District, Kenya. Retrieved from <http://scholarspace.manoa.hawaii.edu/handle/10125/238>
- [34] Kothari, C. R. (2012). *Research methodology: methods and techniques*. New Delhi: New Age International (P) Limited, Publishers.
- [35] Kotler .P. & Armstrong G. (2006). *Principles of Marketing*. New York: Henry Press
- [36] Lindsey, D. (1994). *The welfare of Children*. US:Oxford
- [37] Lucas, S. E. (1992): *The Art of Public Speaking*. New York: James Press
- [38] Nachmias, C. F., & Nachmias, D. (2009). *Research methods in the social sciences* (5th ed.) London: Holder Education.
- [39] National Census (2006). National population commission of Nigeria (NPC), NPC Head Office, Abuja.
- [40] Offiong, D. A. (1999). Traditional Healers in the Nigerian Health Care Delivery System and the Debate over Integrating Traditional and Scientific Medicine. *Anthropological Quarterly* 72, 3:118-130. Retrieved from <http://www.jstor.org/view/0035491/ap000187/00a0003010> on 6th April, 2017.
- [41] Ofosu, B., Ishmael, B. O. & Kofi, A. O. (2013). Assessing the role of advertising of herbal medicine towards consumer buying attitude (case study of amen scientific herbal centre atwima tachiman). Retrieved from <http://www.sclrp.org/journal/me> on 12th April, 2017.
- [42] Okorie, N., Oyesomi, K., Olusola, O., Olatunji, R. W. & Oludayo, E. S. (2014). Effective use of information sources for breast cancer care: interplay of mass media and interpersonal channels. *Journal of African research in business and technology*. 10-51:71(14). Retrieved from ibimapublishing.com/articles/JARBT/2014/152107.pdf on 4th December, 2016
- [43] Okunna, C. (1999). *Introduction to mass communication*. Enugu: Abic Publishers
- [44] Oladepo, O. & Fayemi. (2011). Perceptions about sexual abstinence and knowledge of HIV/AIDS prevention among in-school adolescents in a western Nigerian city. *BMC public health*, 11(1), 304.
- [45] Osakue, S. O., Kayode, R. A., Marcel A. O & Adekunle, A. A. (2009). HIV/AIDS and the broadcast media: an evaluation of the Edo state of

- Nigerian situation. *Current Research Journal of Social Sciences* 1(3). 111-116. Retrieved from [maxwellsci.com/print/crjss\(3\)111-116.pdf](http://maxwellsci.com/print/crjss(3)111-116.pdf) on 4th December, 2017.
- [46] Osonwa, K. O., Eko, J. E., Abeshi, S. E. & Offiong, D. A. (2013). Factors affecting accessibility and utilization of condom for HIV prevention among students in University of Calabar community, Nigeria. *International Journal of learning and development*. Retrieved from citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.682.9049&rep=type1pdf on 4th December, 2016
- [47] Perloff, R. M. (2003). *The Dynamics of Persuasion: Communication and Attitudes in the 21st Century*, 2nd ed., Lawrence Erlbaum Associates, New Jersey: Publisher Mahwah.
- [48] Rai, N. (2013). Impact of Advertising on Consumer Behaviour and Attitude with Reference to Consumer Durables. *International journal of management research and business strategy*. Retrieved from http://www.ijmrbs.com/ijmrbsadmin/upload/IJMRBS_515da4e542f55.pdf on 4th December, 2016
- [49] Rukangira, E. (2001). Medicinal plants and traditional medicine in Africa: constraints and challenges. *Sustainable Development International*, 4, 179–184.
- [50] Seedhom, A. E., Kamel, E. G., & Awadalla, H. I. (2011). Attitudes and patterns of use of alternative medicine in a rural area, El-Minia, Egypt. *European Journal of Integrative Medicine*. Retrieved from www.europeanjournalofintegrativemedicine.com on 12th April, 2017.
- [51] Sexually transmitted diseases (2016). *MedlinePlus*. Retrieved from <http://medlineplus.gov/sexuallytransmitteddiseases.html> on 4th December, 2016
- [52] Sexually transmitted diseases (2017). *Medicine Net*. Retrieved from <https://www.merriam-webster.com/dictionary/prevention> on 4th December, 2016
- [53] Shahid, M. I. (1999). *Mass Communication*. 2nd Rev. Edition, Lahore: Carvan Press.
- [54] Soala, E. (1999). Traditional and modern communication media use and strategies for effective environmental awareness. *Journal of communication and language art*. 1(2), 32-44
- [55] Steinberg, C. S. (1972). *The communicative arts: An introduction to mass media*: New York: Hastings House Publishers
- [56] Symptoms and causes of sexually transmitted diseases. *Mayoclinic*. Retrieved from www.mayoclinic.org/diseases-conditions/sexually-transmitted-diseases-stds/symptoms-causes-dxc-20180596 on 4th December, 2016
- [57] Taflinger, R. F. (1996). *Words. Further Advertising Tricks of the Trade*. Part Two of a Two Part Series. Retrieved from <http://www.wsu.edu:8080/~taflinge/tricks.html> on 12th April, 2017.
- [58] Treatment (2017). *Medical Dictionary*. Retrieved from <http://medical-dictionary.thefreedictionary.com/treatment> on 4th December, 2016
- [59] Uzo, C. A. (1999). Effect of home video films on student behaviours: A case study of University of Nigeria Secondary School, Nsukka. (Unpublished B. A. project) University of Nigeria, Nsukka.
- [60] Uzo, C. A. (1999). Effect of home video films on student behaviours: A case study of University of Nigeria Secondary School, Nsukka. (Unpublished B. A. project) University of Nigeria, Nsukka.
- [61] Wakefield, M. A., Loken, B., & Hornik, R. C. (2010). Use of mass media campaigns to change health behaviour. *HSS Public Access*. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4248563/>
- [62] Wallace, S. I. (2002). Osteoporosis prevention in college women: Application of the Expanded Health Belief Model. *American Journal of Health Behaviour*, 26(3), 163-172
- [63] What causes a sexually transmitted disease or sexually transmitted infection (STD/STI)? *Eunice Kennedy Shriver National Institute of Child Health and Human Development*. Retrieved from <http://www.ruchd.nih.gov/health/topics/stds/conditioninfo/pages/causes.aspx> on 4th December, 2016
- [64] Winkler, A., Mayer, M., Ombay, M., Mathias, B., Schmutzhard, E., & Jilek-Aall, L. (2010). Attitudes towards African traditional medicine and Christian spiritual healing regarding treatment of epilepsy in a rural community of northern Tanzania. *African Journal of Traditional, Complementary and Alternative Medicines*, 7(2).
- [65] World Health Organization, WHO. (2008). HIV/AIDS Epidemiological Surveillance Report for the WHO African Region 2007 Update
- [66] World Health Organization, WHO. (2013). Sexually Transmitted Infections. (Fact N110). Retrieved from <http://www.who.int/mediacentre/factsheets/fs110/en/> on 4th December, 2016

AUTHORS

First Author – Ezeh Aruah Diane Chidimma, Lecturer II, Department of Mass Communication, University of Nigeria Nsukka

Second Author – Cookey Ibiere Tom, Lecturer II, Department of Mass Communication, University of Nigeria Nsukka