MASS MEDIA AND PUBLIC HEALTH BEHAVIOURAL CHANGE IN NIGERIA

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ABSTRACT

Communication is an integral part of human existence. The sharing of thoughts, messages and information cannot be avoided as that is the whole essence of human interaction, so also it is for public health. For public health information, thoughts, messages, ideas and its benefits to be known, communication has to take place through a medium. Health is wealth, a popular axiom, seems to be an unavoidable cliché as the general well-being of a human dictates almost all the end result of the activities; either good or bad and at a point or the other would require a revisiting as humans are dynamic. The demands and needs for accurate, relevant, rapid and impartial public health information by people are increasing daily, which brings about a growing dependence on mass media as the main source of information. It is well known that the mass media are significant social institution in any contemporary society. Owning to this fact, the study while employing contextual analysis and relying largely on secondary data, examines the relationship between the mass media and public health communication including the benefits of the popularizing public health behavioural change. In discussing the subject, the paper attempt to operationalize the key concepts in the topic, highlight the theoretical framework upon which the topic hinges; x-ray media’s health communication activities in Nigeria and provide the conclusion and recommendations.

Keywords: Media, Public Health, Public Health Communication, Behavioural Change

Introduction

Mass Media have always been an important component of Public Health. It provides accurate and truthful information as well as promotes correct healthy behaviours. The mass media are principal feature of man’s daily living and are prevalent everywhere. The intentions of the media generally are to convey information to people, thereby, engaging them in order for them to produce some kind of reactions which brings about continuity in message dissemination. The purpose of these messages is to engage an audience and influence his/her way of thinking about certain subject. According to Oyebanji (2005), “from all indications, the health condition in Nigeria is highly deplorable. Among the most common diseases in Nigeria are malaria, guinea worm, pneumonia, measles, gonorrhoea, schistosomiasis, typhoid, tuberculosis, chicken pox, diarrhoea and, recently, HIV/AIDS”.

There is an increase in the demand for true, precise, germane, express and unbiased public health information by people, which in turn brings about a reliance on mass media as the main source of information. The public health practitioners and advocates usually look up to the media for support, attention and endorsement and are considered as a primary source of public health information, even for health professionals. On the other hand, they are also seen as an important tool to disseminate health information to the population.

Behaviour plays an important role in people’s health. It is evident that changing people's health-related behaviour can have a major impact on some of the largest causes of mortality and morbidity in the society. Change in behaviour have enormous potential to alter current patterns of disease (except some genetic cases) National Institute for Health and Care Excellence (2007). Public health is a very important concept in a society as it protects and improves the health of the members of that society. Some of the areas of concern for behavioural change are: use of tobacco, alcohol, and other drugs, heart disease risk factors, sex-related behaviours, road safety, cancer screening and prevention, child survival, and organ or blood donation.
There are various benefits of changing a bad behaviour to a good one in relation to public health as it improves one’s well-being. However, there are larger advantages if these benefits are popularized. Hence, this study aims at exploring the media and public health communication and the benefits of using the media to popularise behavioural change. The major objective of this work is to evaluate how the mass media can be employed in conveying public health messages in achieving a sustainable health behavioural change. Since the Mass media being a carrier of information, it has the ability to educate and sensitize people on how to live healthy even in an environment filled with various kinds of diseases. The motivation for this study therefore is the daily increase in the demands and needs for accurate, relevant, rapid and impartial public health information by people, which brings about a growing dependence on mass media as the main source of information.

In order to achieve the objectives of the study, the researcher assembled current literature on the topic of the study in order to assess how the media have been able to inform the public for public health change. The study also employed the conceptual clarification and relevant theories to explain the phenomenon under study. With the above secondary sources of information for the study as discussed below, the researcher was able to ascertain in the outcome of the study, how the media have been able to influence public health behavioural change around the world and Nigeria in particular. This is followed by the conclusion which forms the concluding part of the study that summarises the important parts of the study.

Literature Review

Compiling the history of public health, Ladurner, Gerger, Holland, Mossialos, Merkur, Stewart, Irwin, & Soffried (2011) are of the opinion that public health was easy to define before the Second World War. Major threats to life were the result of unsanitary conditions, such as a contaminated water supply and defective or absent sewage or waste disposal, inadequate or overcrowded housing, poor and adulterated food and thus poor nutrition, hazardous work places and little effective clinical care. Then at the beginning of the 20th century, many of these ills had been tackled and we no longer had open sewers or child labour, for example. A new focus for public health began to be identified – namely, the improvement of health, as well as the prevention of disease and death. Thus, public health began to be involved far more actively in health surveillance and in identifying particular groups who needed additional help, such as pregnant mothers, infants and small children (Ladurner et al, 2011).


In Nigeria according to Aja (2001), the history of health care development started midway through the centuries in a similar pattern. It could be traced from the pre-colonial period: an era of traditional medicine in its full course. Health care was basically provided by the traditional bonesetters, traditional surgeons, traditional birth attendants, diviners, koranic healers etc. And during the colonial period, the colonial authorities provided health care to colonial administrators and their families only. A vast majority of the people had no access to orthodox health care. They depended largely on traditional medicine. But the postcolonial period witnessed an era of independence and strategic development plans that culminated in the provision of basic health facilities and services, especially in urban centres. This was a major landmark in the history of health care development in Nigeria. However, public health behavioural change in the country is still in its infant stage as the country has health care has suffered several down-falls (Welcome, 2011).

In the developing countries, good health and wellbeing are not the norms for most of the people. Lack of resources, weak public health infrastructure and unresponsive governance has all great impact on welfare of poor people. Inadequacy of health facilities means that poor people suffer from diseases without being able to communicate their needs. Moreover, preventive health and remedial care could be under-invested or over-invested by the households if people do not have information about illness prevention, neither the effectiveness nor cost-effectiveness of preventative behaviour (Kauppi, 2015). This is why the mass media is to be involved in popularising the benefits of public health behavioural change.

Concept of Mass Media and Public Health

Odorume (2015) defines the mass media as comprising all technological or mechanical devices engaged by a source with the intent of reaching a diversified and heterogeneous audience with messages simultaneously. Mass Media refer to the vehicles through which messages or information is disseminated to a large heterogeneous audience. Okunna (1999) sees the mass media as a variety of channels through which mass communication takes place. They include newspaper, magazines, radio, television, internet and other mass media of information (in Kalejaiye, Layefa, & Adeoye, 2007).

Mass Media as noted by Asadu (2007) in refer to all the avenues through which information can be passed from one person to numerous, scattered and heterogeneous audience. They can also mean channels through which messages, information, ideas, knowledge and culture are transferred from one person to the other.

Nwosu (as cited in Asadu, 2007), sees the Mass Media as “technical” communication concept which refers to the devices employed by anyone involved in a mass mediated communication situation for moving messages across distance and time. To Delleur & Dennis (1981), mass media are ‘devices for moving messages across distance or time to accomplish mass communication’. Hebert et al (1974) classify these devices into seven, namely: books, newspaper, magazine, motion picture, radio, television and sound recording. Rogers (1973), group mass media into five: newspapers, magazines, films, radio, and
television. Blake & Haroldson (nd) stress that the print media include newspapers, books, pamphlets, magazines, direct mail, circulars, billboards, and any technical device that carries a message to the masses by appealing to their sense of sight.

The term mass media according to Akpoveta & Ogbemi (as cited in Ogeiten, 2011), means all the various means of reaching out to a mass audience for the purpose of communication. Overall, in the field of mass communication, the mass media comprises books, newspaper, radio, magazine, television, films, and records. Generally, mass media can be grouped into two main categories. They are the print media and the electronic or broadcast media. The print media include books, newspapers and magazines while the electronic media comprise the radio, television; and presently the internet in which the face of communication has been changed through.

On the other hand, in the words of Llyod & Cynthia (2014), Public Health ‘consists of organized efforts to improve the health of communities. The operative components of this definition are that, public health efforts are organized and directed to communities rather than to individuals. Public health practice does not rely on a specific body of knowledge and expertise but rather relies on a combination of science and social approaches’. Public health is concerned with the function of protecting the health of an entire population against and form of ill-harm. It is not a one man affair because even as individual is as healthy as the environment he or she live in.

In the words of Kahui (2010), Sir Donald Acheson was the one who provided the most widely quoted definition of public health in a report to the United Kingdom government in 1988. He saw public health as “the science and art of promoting health, preventing disease and prolonging life through the organised efforts of society.” Kahui went further to distinguish public health from personal health, and public health interventions from personal health services.

Firstly, he mentioned that public health is about keeping people well, rather than treating their diseases, disorders and disabilities after they have emerged and from the definition of public health, it emphasises promoting health, preventing disease and prolonging life. Secondly, public health focuses on populations, not individuals. Public health is therefore often described as being about erecting fences at the top of cliffs (to protect the many), rather than sending ambulances to the bottom (to treat the few who fall off).

He added that the adjective ‘public’ in ‘public health’, has two meanings - both of which are important. So far we have noted that it means the health of the public” (that is, involving the health of groups or populations rather than individuals). The second meaning of public is implicit in the last part of Sir Donald’s definition of public health, which refers to “the organised efforts of society”. In other words, public health concerns improving the health outcomes of population through interventions that require collective efforts, often organised by public (that is, government) institutions (Kahui, 2010).

The central goal of public health is to minimize disease to its lowest level and improve the general well-being of a community. It is concerned with controlling transmissible diseases, reducing environmental hazards and adoption of new and improved healthy practices. The American Public Health Association (APHA) states that Public health works to track disease outbreaks prevent injuries and shed light on why some of us are more likely to suffer from poor health than others. The many facets of public health include speaking out for laws that promote smoke-free indoor air and seatbelts, spreading the word about ways to stay healthy and giving science-based solutions to problems. Public health refers to “the science and art of preventing disease, prolonging life and promoting health through organized efforts and informed choices of society, organizations, public and private, communities and individuals.

There is no good thing as living healthy. This is because a person who is healthy at all levels- physically, mentally, spiritually and emotionally has the advantage of going through the day doing his or her duty without a hitch (excluding cases of unforeseen circumstances).

Conversely, public health communication involves disseminating public health information to the society or population. It is basically about campaigning about health issues to the public so as to make them live healthy lives. According to Kauppi (2015), Health and development programs use behaviour change communication to improve people’s health and well-being. Information can make a difference, but not all kind of information. The source of information has to be credible, traceable and culturally acceptable. A successful program has a clear goal and focus narrowly on specific behaviour. Target group for the information and information campaigns has to be selected well and sometimes it is necessary to cover a larger population if the campaign has direct or in direct effects on people around (Tindana et al., 2011; Atkinson et al. 2011; Kirby, Laris & Lori 2007; Dupas, 2013).

Relationship between the Mass Media and Public Health Communication

Media and public health belongs to the same discipline. While the media deals with humanities, public health is scientific in nature. This implies that there is a symbiotic relationship between the media and public health. While the public health communication specialist provides the health information, the mass media helps in the dissemination. The local and international media play a vital role as the link between health workers and the larger public. Health authorities educate and entrust the media with essential health information, which is then relayed to the public in readily accessible formats through a variety of media channels. For instance, in order to disseminate information about the avian influenza to the wider public, the U.S. Government tasked the Academy for Educational Development with the responsibility of developing a training program to help the local media understand the complexity of this disease so that they would be able to report about it effectively (Unite for Sight, 2015).
The mass media helps health workers expand their audience reach, which is crucial considering the fact that face-to-face channels of communication often require too many human resources and reach only a small number of people in large, underserved rural areas. The mass media provides an important link between the rural residents and vital health information (Naveen, 2015).

The mass media, in the form of the radio and television, are an effective way to persuade target audiences to adopt new behaviours, or to remind them of critical information. Besides informing the public about new diseases and where to seek help, they can also keep the public updated about immunization campaigns. The mass media can empower rural populations to fight major causes of infant mortality such as diarrhea dehydration and diseases which can be prevented through vaccination, inform large numbers of people of seasonal or daily variations for such activities as an immunization campaign or availability of a new product or service, teach new health skills such as how to mix oral rehydration solution, promote new health behaviours such as taking ivermectin once a year, motivate ad hoc or organized listening groups, and increase community acceptance of health workers (Unite for Sight, 2015).

**Public Health and Behavioural Change**

Speaking about behaviour, this has to do with a person’s innate characters. This is the way a person acts, reacts and conducts himself in relation with other people or to circumstances surrounding him. It is the aggregate of response a person exhibit towards situations. What makes one do what he does, how he does what he does and why he does what he does, a person’s behaviour goes a long way in showing who that person is. This behaviour is formed by different factors. Some of this factors according to include Robertson (2014) are willpower, knowledge and skills, social motivation, social ability, structural motivation and structural ability.

Change as they say is the only constant thing. This is not a cliché because change is really the only thing that will keep occurring. Behavioural change can be said to be the replacement of the range of some or all of a person’s actions, inactions, reactions and mannerisms in conjunction with themselves or their environment, towards a cause based on the fact that there is a better alternative. It is reacting differently to what has been regarded previously as a norm or culture. It is also the adoption of new styles or ways of living.

Behaviour change is a central objective in public health interventions with an increased focus on prevention prior to onset of disease. This is particularly important in low and middle income countries, where efficiency of health spending and costs and benefits of health interventions has come under increased scrutiny in recent decades. Behaviour change in public health is also known as Social and Behaviour Change Communication (SBCC). For instance, if a community has been known for dirty behaviour, and there have been public health information telling them about the dangers of keeping a dirty environment and the benefits of living clean, when they decide to turn a new leave, and begin to live clean, it is called a behavioural change.

Behavioural change is a process that comes in stages and not an event. According to Harvard Women’s Health Watch (2012) there are four stages that one passes before making a public health behaviour change. They are: pre-contemplation which shows intention, contemplation which shows consideration, preparation which reveals the plan to change, action which shows the adoption of the behavioural change and maintenance which reveals constancy.

There are various benefits of public health behavioural change because living constantly in a wrong habit can go a long way to diminish a society. In changing the health behaviour of a community, there are various benefits attached to it. Some of the benefits according to Oscar (2014) are;

1. Public health behavioural change improves quality of life generally
2. It reduces human suffering
3. It saves money
4. It helps children thrive in a healthy environment

**Benefits of Popularizing Public Health Behavioural Change**

The role of popularizing behavioural change is the role of the media and public health expert or representatives. In Nigeria for example, there is a walk for cancer. In a year, they usually have a programme where they talk about cancer, the prevention and care for those who have it. They usually go on walks wearing pink colour customized shirts/polo in a bid to advocate. Various media outlets are invited to air and publish this event. This is because there are benefits attached to popularizing public health behavioural change. Among these benefits by Maseru (2009) are:

1. **Increase in knowledge**

Knowledge is gained when public health behavioural change has been popularized. There is an increase in the knowledge of the public when behavioural change is made popular. There is a passage of the holy book (bible) where it is mentioned that people die/perish because of the lack of knowledge. But when behavioural change is been made popular, people get informed about various diseases, the causes, prevention and cure. They even get informed about where to get care and support facilities that can be used during the time of their distress.

2. **Possible adoption**

When health behavioural change is communicated to people, there is a possibility of adoption by some or all of the people. When there is an outbreak of a particular virus and the people are made aware of the deadliness, there is going to be adoption of the
better way of living. When there was the news about the Ebola virus in Nigeria, and the information was related to people, there was a common practice that people started adopting. That practice was the washing of hands. Every corner of most offices had basins and hand wash for people. Banks started sanitizing the hands of their customers before they entered the bank. People tend to adopt public health behavioural change when it is popularized.

3. **Stimulate community dialogue**

It also stimulates dialogue in the community. When issues of public health behaviour change is been popularized, there is an ongoing discussion in the community. The HIV/AIDS virus popularization made people to begin to dialogue with one another on best health practices. Community leaders are used as agents to talk to the members of their community to change their health behaviour. By stimulating community dialogue, issues facing people are shared and ways out are related.

4. **Promote essential attitude change**

Popularizing public health behavioural change helps to promote essential change in attitude. When a particular community has been noted for teenage pregnancy, a public health expert can come tell them the need for abstinence, need to use protection and the possible STDs that can be gotten from unprotected sex, there can be an attitude change towards teenage pregnancy.

5. **Advocate for policy changes**

There can be advocacy for policy change when public health behavioural change is popularized. For instance, for those living with cancer, when the pain the people who have it are been shared, there can be a policy change that those who have cancer should have a reduction in their work hours; they should only be allowed to work from 9:00am to 3:00pm instead of the normal 8:00am to 5:00pm.

6. **Create a demand for information and services**

As one of the benefits of popularizing public health behavioural change, there can be a rise in the demand for information and services needed for the change in the information. This is to the advantage of media outlets as this can generate audience for their channels. Even if one of the core values of public health is to transform a community’s health, there can also be a generation in the readership and viewership of the media. Another example is, when people have been advised to eat healthy, it can increase the patronage of gym services and equipment like dumbbells, tummy trimmers, thereby increasing sales.

7. **Reduce stigma and discrimination**

This is an important benefit of popularizing behavioural changes. It tells people about a certain diseases and the need to care for affected people and not to neglect them. Especially people living with the HIV virus. Because of the transmissible nature of ailment, members of the society tend to discriminate the carriers of the virus. However, popularizing the way the disease is been spread and how to treat affected people goes a long way in reducing discrimination and stigmatization.

8. **Minimizes the risk of wrong perception**

It minimizes the risks of wrong perceptions, adoption of archaic social norms and superstitions, emotions and uncertainty

9. **Increase standard of living**

Overall, popularizing public health behavioural change improves the standard of living of the people of a society or community.

**Role of Mass Media in Popularizing the Benefits of Public Health Behavioural Change**

The media has the sole duty to popularize the benefits of changing ones behaviour towards health issues or adopting new behaviours. Because social, environmental, and biologic factors interact to determine health, public health practice in this wise utilizes, a broad set of skills and interventions. This intervention comes from the relationship public health has with the media. The media are channels through which information are been passed to heterogeneous audiences. They include the traditional media (radio, television, newspaper and magazines), the outdoor media (flyers, billboards, leaflets, outdoor/transit vans, posters, neon-lights) and the new media (internet- social networks, blogs, vlogs, podcasts, etc). Mass media campaigns are used to expose high proportions of a population to health promotion messages, using the media as an educational tool. Mass media campaigns are favourable because they are capable of communicating information, increasing awareness, and affecting a large number of people. Mass media interventions can produce positive health changes on a grand scale by enforcing positive health behaviours among individuals.

Consequently, “while the mass media cannot, except under most extraordinary conditions be expected to move people to action if the action is in opposition to strong beliefs and attitudes, they can be effective in moving people to action if the desired course of action is in the direction of basic personal and social motives, and particularly if the action is supported by leaders holding acceptance and prestige in the eyes of laymen” (William & Andie, 1960).

Using the general roles of the media to explain the roles they play in popularizing the benefits of public health behavioural change, some of these roles include:
Information
The media gives ample information about health practices and need to change one’s behaviour towards a favourable health situation. One of the major functions of the media is to give information to the masses. Thoughts, ideas, messages concerning health issues are sent out to the audience to make them informed decision. Information on outbreaks of diseases, cures for diseases and prevention of some diseases are communicated to the public. Today, public health professionals continue to seek cures for cancers and diseases, including HIV/AIDS and diabetes. They also work to improve the overall health of communities through research, regulation, education and high-quality, accessible health care. Learn more about public health careers at the local, national, and international level (PublicHealth, 2016).

Education
This is another basic role of the media. In popularizing health behavioural change, the media gives education on best health practices and teachings on how to go about them. For instance on the NTA programme called A.M Express every Saturday, there is usually a fitness programme where the gym instructors show and demonstrate how to exercise different parts of the body.

Surveillance
This is the act of carefully watching in order to detect an occurrence. This is the investigative part of the media. The mass media are the eyes and ears of the public. The media provide information and alert us of the changes that take place around us. Surveillance act is carried out on an issue so as to prevent it from falling below the expected standard, or to prevent it from going astray (Sambe, 2005). They can help in telling the public about the outbreak of diseases as they did during the time Laser fever was rampant. An outbreak or an epidemic is the occurrence of more cases of disease than expected in a given area or among a specific group of people over a particular period of time. Usually, the cases are presumed to have a common cause or to be related to one another in some way. It is the role of the media to disseminate information that will help stem down the tides of this public health issues.

Displaying public health data
The media plays the role in displaying public health data on morbidity and mortality rate and the statistics of people a certain disease has killed over the years. Health related statistics and data sources are increasingly available on the Internet. They can be found already neatly packaged, or as raw data sets (Chew, 2016). Considered by some to be the best source for public health data and information is the web site of the Centres for Disease Control and Prevention. From this website, people can locate numerous government data sources, obtain facts on chronic and infectious diseases, and gain fingertip access to health updates, including the Morbidity and Mortality Weekly Report (MMWR). Another valuable site is that of the Association for Toxic Substances and Disease Registry which includes a primer on health risk communication principles and practice. Through this site, persons learn how to communicate about health risks to a sceptical public, including factors that influence the public’s risk perceptions (Medernott & Albrecht, 2005)

Frequent feedback
The role of feedback cannot be overemphasized. Feedback can be written (e.g., a monthly newsletter) or oral (e.g., updates at regular meetings of medical staff or at rounds). The feedback should be timely, informative, interesting, and relevant to each reporter's practice. Feedback should include information about disease patterns and control activities to increase awareness and to reinforce the importance of participating in a meaningful public health activity

Changing of misconceptions and negative attitude
The media performs the role of changing misconceptions that result from lack of knowledge or negative attitude. Misconceptions that could arise for instance in cases of HIV/AIDS related issues are that the patient-physician relationship maybe compromised, they could have concern that their report might result in a breach of confidentiality, judgment that a certain disease is not that serious, belief that no effective public health measures exist or perception that health department are not effective. This misconception can result in a stop of a behavioural change for a community. Since, the media are believed to be the most trusted means of information; it plays the roles of debunking these misconceptions.

Linkage
The media provides linkage especially on the social media. There could be linkage with support systems or groups. On Whatsapp application, you could create a group that is named ‘Divas that Rock’ where ladies with cervical concern can communicate their fears, troubles and solutions can be proffered.

Theoretical framework

Agenda-setting theory
The Agenda-setting theory propounded by Maxwell McCombs and Donald Shaw in 1973 best explains the effect the mass media has on public health communication. It proposes that the facts which people know about public issues tend to be those which the mass media presents to them. It is of the opinion that the mass media may not be successful in telling us what to think, but may be highly successful in telling us what to think about. It is assumed that the media sets agenda for our general discussion. As people depend on the media for general information, the mass media and the members of the public health community can use this opportunity to set in the minds of audiences what they see important to their general wellbeing.

Medium Theory
Medium theory is the name assigned to a wide range of methods used to examine how the means of expression of human communication impact the meaning(s) of human communication(s). The theory is attributed to Joshua Meyrowitz as utilized in
his 1985 book, No Sense of Place. It States essentially that the medium of communication is much more germane than the contents being communicated. Other scholars whose literatures are associated with medium theory are: Marshall McLuhan (1963, 1966, 1988) and Neil Postman (1985). Currently, medium theory occupies a marginal position within U.S. communication and media studies (Croteau &amp; Hoynes, 2003:305). Conversely, majority of U.S. communication and media studies place their emphasis on the content of communication (e.g., sex and violence) not the medium of communications. In Canada and elsewhere, the theory continues to inform studies that assess large-scale social changes that follow the adoption of a new medium.

Group think Theory

Group think theory harps on a process where people come together to take unanimous decisions that concern a whole group and decide a possible course of action. Here, other options might be more beneficial but they choose to be united to avoid conflicts or due to group pressure. The theory states that group cohesiveness enhances progress and also that the need for unanimity in groups and organisations is worth taken seriously. The term “Groupthink” was coined in 1972 by a social psychologist, Irving Janis, to learn how group decisions are made and how group decisions could be successful and otherwise. He made his conclusions based on studies on American Soldier Project and U.S. foreign policy decisions, which included the Japanese attack on Pearl Harbor of 1941, the Bay of Pigs invasion of 1961 and the beginning of Vietnam Wars (1964 to 1967). He concluded that in all these events, the decisions were made through groupthink. The theory is not only applicable to political decisions decision as also in any other decision making and communication processes.

Social Marketing Theory

Marketing theory is a theory of mass communication that promotes socially profitable and accepted behaviours. Information theory was proposed by Philip Kotler and Gerald Zaltman in the 1970s and is now used by social and welfare organisations. It tries to integrate marketing ideas, principles, tools, techniques and socially beneficial concepts to promote communication in such a way that benefits society. As a framework, it helps in planning, designing, implementing and evaluating social campaigns with information sharing as its major objective. It relies on the instrument of creativity to churn out Information packaged and disseminated following a plan so that maximum sharing and outcome is possible. The study is anchored on the theory of social marketing. The reason is that, the theory, among other theories is much more apt and relevant to the study under review since it dwells on campaigns such as public health campaign and how socially profitable information could be disseminated to ensure change of behaviour in the society through the help of marketing techniques.

Summary Of Findings

Information dissemination is very important in popularizing public health behavioural change and the media has the responsibility to act in this wise. Findings from the study indicate that there is a relationship between the mass media and public health communication and this relationship is symbiotic in nature. The media requires information from the public health specialist and the public health specialist needs the media to disseminate public health information to the audiences all in a bid to give adequate information to the public. The roles of the mass media are used to relate their role in popularizing public health behavioural change. They include information propagation, education, linkage, surveillance, and displaying of public health data. Conversely, evidence from other research reveals that when the media is used to popularize public health behavioural change it will increase knowledge on what ways are right and wrong, bring about possible adoption, stimulate community dialogue, promote essential attitude change, advocate for policy changes, create a demand for information and services, reduce stigma and discrimination, minimizes the risk of wrong perception and increase standard of living. The findings of the study point to the fact that the main objectives of the study which is to ascertain how media influences public health behavioural change. Consequently, the role of the mass media in the society cannot be underestimated when it comes to dissemination of public health information for behavioural change geared towards improving the health of the people.

Conclusion

Dissemination of information has an important role to play in influencing behaviours such as smoking, alcohol consumption, drug use, diet, physical activity and sexual behaviour. Effective campaigns with provocative messages tailored to capture the attention of their target group should be well coined (Robertson, 2008). And should come from a trusted source the media, have content that captures the target audience’s attention and, if possible, include messages that impact on social norms.

The television can be used to run campaign that will induce behavioural change. For instance the campaign on hand washing. The use of radio to disseminate health education messages is chiefly beneficial because of the wide range of people it can reach at a time. In developing countries, many rural villages do not have access to electricity or television, but battery operated radios are commonplace. Consequently, its ability to reach people in a diverse range of settings has made radio a prime medium for educational initiatives, and various health topics have been addressed through radio programming throughout the developing world. Educational radio can be used for rural development, health education, nutrition education, family planning and health and to promote awareness of proper breastfeeding practices (UniteForSight, 2015).

Organization could use advertisements and public relations to popularize the benefits of public health behavioural change. For example, Morten in conjunction with the media houses like NTA usually run 3 minutes promotion of how mosquitoes can cause malaria and families should use Morten as insecticide. Even if it appears as a means for them to sell their products, it is a public health message. The media is very prevalent in disseminating public health behavioural change as effective information generally must come from a trusted source and the media is one.
Perhaps the greatest limitation of the study is its reliance on secondary sources which makes it difficult to ascertain if new fact based on primary sources could have offered a new perspective to the study. It is therefore suggested that further study is carried out using primary sources to ascertain new findings that may change the findings of the study.

**Recommendations**

From the above, the various recommendations are provided

1. Information on public health behavioural change needs to be concise and provision of passive information should be limited. It is one thing to talk and it is another thing to act. People need more than knowledge to be healthy. They also need the skills to change. Therefore, public health behavioural change campaigns should always include other services and interventions if they are to bring about changes in often multifaceted, customary and habitual lifestyle behaviours.

2. There should be special reporters for the coverage of different areas of public health and the media specialist should work with the public health communication specialist to get accurate and solid information.

3. Due to preference of majority of readers, the health messages should be given either on first page which covers mainly political news or on sports page of the newspaper.

4. Health information should be casted when there is going to be large concentration of viewers and readers to ensure adequate coverage. For instance on television, the prime times can be used to disseminate public health information.

For further studies, it is recommended that more researches is done in the area to investigate the message content of the public health communication, the system of delivery and the effect of the content.

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