



## **INFLUENCE OF MEDIA ADVOCACY ON THE KNOWLEDGE OF PREVENTION MEASURES AND MANAGEMENT STRATEGIES OF EARLY CHILDHOOD DISEASES AMONG NURSING MOTHERS IN IKWO L.G.A OF EBONYI STATE.**

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**ABSTRACT:** *This study examined the influence of media advocacy on the knowledge of prevention measures and management strategies of early childhood diseases among nursing mothers in Ikwo L.G.A of Ebonyi state. The survey design was adopted in the course of the work. Data for the study was gathered through questionnaire. 850 questionnaires were distributed to the respondents. The frequency tables and percentages and the independent sample tests were used as methods of data analysis. From the analyses conducted, it was revealed that there are prevalent early childhood diseases in Ikwo local government area of Ebonyi state, there are communication intervention programs used in enhancing knowledge of prevention and management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi state, and communication intervention programs on early childhood disease have not enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi state. It is the recommendation of the study that that there should be an increase in early child disease awareness among individuals, family and communities by ensuring community participation in the control and much research should be carried out to find out better ways to ensure communication intervention programs on early childhood disease enhances knowledge of prevention and management strategies among nursing mothers.*



## INTRODUCTION

Early childhood offers a critical window of opportunity to shape the trajectory of a child's holistic development and build a foundation for their future. For children to achieve their full potential, as is their human right, they need health care and nutrition, protection from harm and a sense of security, opportunities for early learning, and responsive caregiving like talking, singing, and playing. This can be achieved with their parents and caregivers who love them. All of this is needed to nourish developing brains and fuel growing bodies (UNICEF, 2019). However, from a global perspective, infectious diseases, including pneumonia, diarrhea, malaria and sepsis remain the leading causes of death for children 1 month to 9 years of age. Access to basic lifesaving interventions such as adequate nutrition, vaccinations, and treatment for common childhood diseases can save many young lives (WHO, 2020).

Globally in 2019, an estimated 5.2 million children under 5 years died mostly from preventable and treatable causes. Children aged 1 to 11 months accounted for 1.5 million of these deaths while children aged 1 to 4 years accounted for 1.3 million deaths. Newborns (under 28 days) accounted for the remaining 2.4 million deaths. An additional 500,000 older children (5 to 9 years) died in 2019 (UNICEF, 2020). Leading causes of death in children under 5 years are preterm birth complications, birth asphyxia/trauma, pneumonia, congenital anomalies, diarrhea, and malaria, all of which can be prevented or treated with access to simple, affordable interventions including immunization, adequate nutrition, safe water, and food and quality care by a trained health provider when needed (WHO, 2020).

Access to basic lifesaving interventions such as skilled delivery at birth, postnatal care, breastfeeding and adequate nutrition, vaccinations, and treatment for common childhood diseases can save many young lives. Malnourished children, particularly those with severe acute malnutrition, have a higher risk of death from common childhood illnesses such as diarrhea, pneumonia, and malaria. Nutrition-related factors contribute to about 45% of deaths in children under 5 years of age.

Children under 5 are especially vulnerable to infectious diseases like diarrhea and pneumonia. Diarrhea is one of the leading causes of mortality and morbidity among children under the age of five, even though it can be prevented easily. Mortality due to diarrhea among infants and children is a very common and devastating problem throughout the globe, in low and middle-income countries, and sub-Saharan countries. Over three million children under the age of five die of dehydration as a result of diarrhea, an easily preventable and treatable disease. Pneumonia remains a leading cause of child mortality globally. Nigeria has the largest absolute number of annual pediatric pneumonia deaths globally with pneumonia accounting for 20% of under-5 deaths nationally. Northern Nigeria is reported as a clear hotspot for pneumonia mortality.

In Ebonyi State, especially among other eastern states in Nigeria, the prevalence of diseases among children in their earliest years investigated were found to be 15% in 2008, 19% in 2009, 21% in 2017 and 26% in 2019 (Jalal-Eddeen, 2020). This study is therefore aimed at carrying out an empirical analysis of media advocacy on early childhood diseases and knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State.



## **Objectives of the Study**

The general objective of this study is to investigate the influence of media advocacy on the knowledge of prevention measures and management strategies of early childhood diseases among nursing mothers in Ikwo L.G.A of Ebonyi State. This necessitated the actualization of the following specific objectives:

1. To identify the prevalent early childhood diseases in Ikwo Local Government Area of Ebonyi state.
2. To identify some communication interventions aimed at enhancing knowledge of prevention in the management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi state.
3. To determine the extent to which communication interventions on early childhood disease have enhanced the knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State.

## **Research Questions**

1. What are the prevalent early childhood diseases in Ikwo Local Government Area of Ebonyi State?
2. What are the communication interventions programs used in enhancing knowledge of prevention and management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi State?
3. Have communication intervention programs on early childhood disease enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State?

## **LITERATURE REVIEW**

### **Review of Concepts**

#### **The Concept of Communication Intervention**

Communication intervention is the process of disseminating policy-related information through the communications media, especially where the aim is to effect action, a change of policy, or to alter the public's view of issues. While a strict definition of "media" advocacy is limited to the strategic use of mass media in regard to a policy initiative, public health views the term more broadly (Alex, 2018). Almost identical techniques are often used to encourage people to change health behaviors as those directed towards changing policy and communication intervention may be a single element of a specific campaign as well as an ongoing process. Communication intervention is practiced at all levels, from national to community-based campaigns. The ultimate targets of communication intervention most times are politicians and other decision-makers (Francis, 2017). Communication intervention is the strategic use of the mass media to support community organizing to advance a social or public



policy initiative. Essential steps include strategy development, setting the agenda, shaping the debate, and advancing policy.

### **Media Campaign**

The media is a powerful instrument with which to influence health behaviours linked to viral transmission and infection. Mass media (e.g., television, radio), print media (e.g., magazines and newspapers) and new media (e.g., the Internet, mobile phones, search engine news sites and other forms of social media) have been used to convey targeted messages about health risks and raise health awareness. Media messages provide information about factors such as disease outbreaks, symptoms, modes of transmission, fatality rates, treatment centres, drugs and prevention methods. Media messages can be transmitted for either short or long durations, can be attached to other organized programmes, such as institutional outreach, and may complement policy changes. The primary purpose of media campaigns during disease outbreaks is to elicit population behaviour change, which leads to disease prevention and control. However, the effectiveness of such campaigns in achieving this goal depends on message precision and clarity, the degree of funding, the media environment, use of appropriate language and the audience's ability to implement behaviour change.

Over the past few decades, media campaigns have been used in an attempt to affect various health behaviours in mass populations. Such campaigns have most notably been aimed at tobacco use and heart-disease prevention, but have also addressed alcohol and illicit drug use, cancer screening and prevention, sex-related behaviours, child survival, and many other health-related issues. Typical campaigns have placed messages in media that reach large audiences, most frequently via television or radio, but also outdoor media, such as billboards and posters, and print media, such as magazines and newspapers. Exposure to such messages is generally passive, resulting from an incidental effect of routine use of media. Some campaigns incorporate new technologies (e.g., the internet, mobile phones and personal digital assistants), but recipients have so far generally been required to actively choose to seek information (Doris, 2011).

Media campaigns can be of short duration or may extend over long periods. They may stand alone or be linked to other organized programme components, such as clinical or institutional outreach and easy access to newly available or existing products or services, or may complement policy changes. Multiple methods of dissemination might be used if health campaigns are part of broader social marketing programmes (Charles, 2014).

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## Media Role in the Protection and Promotion of Child Rights

While communication is central to development, the media of mass communication plays an active role in that process because of their efficiency in information spread. Melkote and Steeves (2011) noted that mass media play the role of a catalyst to bring about change in the development process. Deane et al. (2012) stipulated that the mass media are fundamental to development. The mass media enable people to learn about issues as well as make their voices heard. They can exert a powerful influence, for good or for ill. Free, independent press are important to ensure freedom of speech (guaranteed by the Universal Declaration of Human Rights), promote democracy, good governance, peace and human rights, combat poverty and crime, inform people about issues and enable them to participate in public debate.

Okigbo (2016) noted that the print media can contribute to development by disseminating truth and useful information, correlating the parts of society and sensitizing (or conscientizing) the people about the need for planned development and social change. Other important functions of the print media in the development process are persuasion, motivation, providing learning materials and appropriate development information for educated members of the society.

Media also shape public opinion and influence public policy. Graves (2017), citing Jaime Abello Banfi, noted that media are used to give a voice to marginalized groups, such as women and ethnic and religious minorities, as well as to promote their rights. In Burundi, for example, the association BonSem produces a weekly radio show and publishes a newsletter designed to encourage discussion about how civil society can work for the political and economic inclusion of the marginalized Twa communities. Similarly, according to Panos London's 2017 report at the Heart of Change, information and the media that deliver it are powerful agents of change that can help reduce poverty and the debilitating effects of disease in the developing world. Sustainable development demands that people participate in the debates and decisions that affect their lives. They need to be able to receive information, but also to make their voices heard. The social impact of media includes improving the quality of education, informing the public about health threats and safe practices to avoid them, serving local communities by bringing attention to their needs, and in times of disaster, providing information and sources of assistance to people displaced from their homes (Graves, 2017).

Article 17 of the Convention on the rights of the child specifies the role the media should play in the promotion and protection of children's rights (UNICEF, 2016). The Committee on the Rights of the Child (1996) believes that the media, both written and audio visual, are highly important in efforts to make reality the principles and standards of the Convention. The media can play a pivotal role in monitoring the actual implementation of the rights of the child. The media are powerful because they penetrate every segment of modern-day society and effectively influence how people view themselves, their neighbours, their communities and their world. Media representations are the primary source of information on social problems for many people (Hutson & Liddiard, 2016).

Maley (2017), for instance, notes that: "In social and cultural matters, the various media provide the main platforms of debate, and their choices of subjects, participants and opinions shape the agenda and much of its content." The media play a significant role in forming and influencing people's attitudes and behaviour (Brawley, 2015).





Goddard and Saunders (2011) drew attention to the essential role of the media in increasing the society's awareness of, and response to, child abuse and neglect. News and features could be used to report child abuse cases, research and intervention strategies. Such media attention to child abuse can positively influence public opinion, and professional and political responses to the circumstances in which children and young people find themselves. Ericson, Baranek and Chan (2017) observed that journalists play a major role in constructing what is considered "deviant" in our society and, therefore, what is "normal". Journalists do not merely reflect the work of others who define deviance and attempt to control it, but are themselves in some ways agents of social control; they are "a kind of deviance defining elite" who articulates the "proper bounds to behaviour" in our society.

In addition to news stories, feature articles and investigative journalism, sporadic mass media education and prevention campaigns could be launched. These campaigns will broaden community's knowledge of child abuse and neglect, influence people's attitudes towards children and young people and change behaviours that contribute to or precipitate the problem of child abuse and neglect in our communities.

Though it has been argued that complex attitudinal or behavioural change requires more direct forms of citizen contact and intervention, the media at least are effective in building citizen awareness of an issue (Saunders & Goddard, 2012; Reger, Wootan & Booth-Butterfield, 2016; Freimuth, Cole & Kirby, 2011). Besides, mass media campaigns and coverage of the rights of children perform a significant role in placing the relevant issues on the public and political agenda. Lindsey (1994:163) also asserts that: "media has a central role in mediating information and forming public opinion. The media cast an eye on events that few of us directly experience and render remote happenings observable and meaningful."

### **Role of Advocacy Journalism**

In fulfilment of its task, Highway Africa (2017) outlines the following functions that advocacy journalism performs in respect of the rights of children or any other development issue:

**Information:** Advocacy journalists aim to inform their community or audience about the issues affecting it. This means informing them in such a way that informed debate can be facilitated in order to solve problems. In order to inform community members adequately, advocacy journalists have to understand and communicate the underlying and often invisible systems behind the issue.

**Alternative to the Mainstream:** The mainstream media cannot always be trusted by their audience and the community they serve, often because of their commercial interests. We have all heard stories about newspapers or magazines wanting to run a controversial story but being unable to because of pressure from advertisers, funders or owners. This pressure, along with the mainstream media's claims of objectivity, means that audiences are becoming less trusting of what they read and see. In some countries, journalists have grown so close to their government and corporate sources that their reporting resembles a conversation among powerful 'insiders' more than an effort to watch over government and business on behalf of the citizens. This is less true of advocacy media and journalists who openly pursue an issue and who are more honest with their audience, bringing back an element of trust. In addition, the fact that community members are offered an alternative to mainstream media provides them with more information and a different type of coverage. Media consumers are often



overwhelmed by the amount of information in the mainstream media, information which, in many cases, simply assaults the senses but does little else. Advocacy journalism goes beyond providing a surface layer of information, allowing audiences to debate and address issues being raised.

**Focus on Audience:** Many of the issues and causes pursued by advocacy media are those which affect their audience and immediate community. Advocacy journalists have to have an ear to the ground at all times in order to have a sense of the issues being raised within their community, so as to be able to address them. Advocacy journalism does not play to an individual's needs or service one sector of the community; instead, it digs deeper into the needs of its audience and the issues affecting the daily lives of its community. Advocacy journalism highlights those issues in order to stimulate debate and ultimately bring about change for the better.

**Aim for Change:** As discussed above, the end-goal of most advocacy journalism is to bring about some kind of change for the better, whether social, policy, economic, etc. This is perhaps the most important role of advocacy journalism. By first highlighting the issue at hand, and then creating an awareness of it with major players (community members, policy makers, government members, civil society), the media are able to facilitate dialogue and debate in order to bring about a positive change. Journalists should not simply report on the news; advocacy journalists have an obligation towards 'improving the community's capacity to act on the news, of caring for the quality of public dialogue, of helping people engage in a search for solutions, of showing the community how to grapple with – not only read about – its problems' (Lichtenberg, 1999). Change within the mindset of community members is one of the roles of advocacy journalism, as is change in the situation or environment of that community for the better. Another is policy change which positively affects community members.

**Celebrate:** Not all news is good news, but sometimes good news is good for news. Advocacy journalists are distinct from the mainstream traditional journalists in their willingness to cover the positive outcomes and changes which have occurred. Community members who have followed a particular issue through a publication or broadcaster will continue to follow its progress in the hope of a positive outcome. They will continue to follow other stories after that knowing that positive news does get reported. It follows then that advocacy journalism cannot be separated from development journalism. This involves gathering, packaging and disseminating development-oriented news and information (Adebayo, 2014). The writing, packaging and disseminating information on child rights is an advocacy duty, as well as development journalism because child rights is a development subject.



## Empirical Review

Past and related studies on the concept under investigation were reviewed in this section of the study.

Friday and Kinglsey (2018) determined the outcome of an advocacy program aimed at implementing a policy of preventive measures and free maternal and child health (MCH) services in Nigeria. The team conducted a situational analysis on costing of MCH services, and used the results to conduct public health education and advocacy. Advocacy consisted of public presentation on MCH to high-level policymakers, dissemination of situational analysis reports, and media publicity. The implementation of free MCH services at national and sub-national levels was assessed 3 years after. The results showed that the number of States offering comprehensive free MCH services increased from four to nine, the States offering partially free MCH services increased from 11 to 14 (8.1% increase), while those not offering any form of free treatment decreased from 22 to 14 (21.7% decrease). They concluded that advocacy and public health education is effective in increasing the commitment of policymakers to provide resources for implementing evidence-based maternal and child health services in Nigeria.

Adebola and Stella (2015) carried out a study on the effect of media advocacy on Mothers' Understanding of Childhood Malaria and Preventive Measures in Rural Communities of Ise-Orun, Nigeria: Implications for Malaria Control. They conducted a community-based cross-sectional study in rural communities of Ise-Orun Local Government Area, Nigeria. They randomly sampled 422 mothers of children less than 5 years and administered a validated questionnaire to assess their perceptions and practices relating to childhood malaria. They used a 10-point scale to assess perception and classified it as good ( $\geq 5$ ) or poor ( $< 5$ ). Predictive factors for poor perceptions were identified using logistic regression. Approximately 51% of the mothers had poor perception and 14.2% ascribed malaria illness to mosquito bites only. The majority (85.8%) of the mothers practiced malaria preventive measures, including insecticide-treated nets (70.0%), chemoprophylaxis (20.1%), and environmental sanitation (44.8%). Of the 200 mothers whose children had malaria fever within the 3 months prior to the study visits, home treatment was adopted by 87.5%. Local herbal remedies were combined with orthodox medicine in the treatment of malaria for 91.5% of the children. The main reasons for not seeking medical treatment at existing formal health facilities were "high cost", "challenges of access to facilities" and "mothers' preference for herbal remedies." Lack of formal education was the only independent predictor of poor malaria perceptions among mothers (OR = 1.91, 95% CI = 1.18, 3.12).

Joseph (2017) determined if media advocacy played a positive role in campaigns in educating mothers against childhood meningitis control and prevention against outbreaks in Nigeria and to determine the major obstacles to media coverage of meningitis outbreaks in Nigeria. The results revealed that the role of the media advocacy in Nigeria during meningitis outbreaks is positive and supportive. However, paid advertisements and announcements that support the media in health promotion campaigns were undermined by limited understanding of infectious diseases by politicians and some media sponsors. Therefore, the authors recommend the establishment of a permanent funded media structure charged with the responsibility of grassroots campaigns against meningitis, and the integration of the media into committees formed to combat the disease.





Rasaq (2018) investigated the influence of the media advocacy program, most especially television medium in creating awareness among the public on child disease prevention and right as well as child survival using Oredo Local Government Area of Edo State, Nigeria as a case study. The local government was delineated into four zones for the purpose of this research and two hundred (200) participants were randomly selected from these zones. Questionnaires were distributed to the participants and these questionnaires were analyzed using simple frequency tables and percentages. It was found that television as a medium of communication has been able to raise awareness regarding child rights through its various programmes aired, which are geared towards raising awareness on child rights and other issues relating to child development. However, it was found that this awareness does not reflect in the attitude of the residents towards the children in the locality. Based on the findings, recommendations were made on how to improve public attitude with regard to child rights, survival and development issues.

Henry (2015) carried out an empirical investigation on the effect of advocacy media programs on childhood diseases preventive measures. Data for this study were obtained from a survey on the 'Impact of Cultural Beliefs and Practices on Child Health among the Yoruba.' The survey was undertaken in the rural and urban areas of selected local government areas (LGAs) of Ondo and Ekiti States. The headquarters of the selected LGAs served as the urban areas while two villages, one near and one far from the headquarters, were selected to represent the rural areas. Besides simple cross-tabulations, the major tool of analysis is the logistic regression model. The logistic regression procedure was adopted to estimate the net impact of socio-economic variables on our dichotomously measured dependent variables: whether or not a mother would know the correct causes of each of the childhood diseases, and whether or not a mother believed in *abiku*. For the regression models, the independent variables are dichotomous and as such assume the value one or zero. The results are presented in two parts. In the first part, we present the mothers' perceptions of the aetiology of the three childhood diseases, measles, diarrhoea and fever, and the effect of such perceptions on the type of curative measures suggested by the mothers. Questions on aetiology, prevention and cure were only asked of respondents who identified these diseases as major childhood diseases in their community. Of the 1559 ever-married respondents selected for this study, 1125, 1248 and 1404 identified measles, diarrhoea and fever, respectively, as major childhood diseases. In the second part, we present our findings on the persistence of the belief in *abiku* and the likely effect of this belief on mothers' management of childhood diseases.

Alfred (2018) examined the impact of media advocacy campaigns on the reduction of malaria (A study of Osun State Broadcasting Corporation). There is no doubt about the fact that malaria remains one of the deadly diseases killing thousands of people especially in Africa and Asia. One of the means to curtail its spread is through awareness creation. The study was anchored on Social Judgement Theory and Source Credibility Theory. The research used a survey method coupled with a questionnaire as a data collection instrument. One hundred (100) respondents were accidentally selected from 100, while only 90 copies were correctly filled and returned for analysis. The data collected were analyzed and discussed in descriptive statistics (frequency and percentage method). Finding also shows that, to some extent, various mass campaigns are as effective as awareness is. The study recommended that there should be an increase in malaria awareness among individuals, family and communities by ensuring community participation in the control while there should be adequate records, documents and



information about malaria in order to assist the health workers to easily spot the malaria-prone areas.

## **Theoretical Framework**

### **Media Advocacy Theory**

The media advocacy theory was propounded by Wallack in 1994. According to the media advocacy theory, media campaigns are not the panacea not only because their effectiveness is questionable but also because they ignore the social causes of unhealthy behavior. Public service announcements have shown limited success in stimulating change and fail to address the social and economic environment that ultimately determines the pertinent issues. Media advocacy theory assumes that the mass media largely shape public debate and, consequently, political and social interventions. To be politically effective, influencing news agenda is mandatory. Media savviness is necessary to get widespread coverage of certain issues and to shape how stories are presented. Thus, media advocacy adopts strategic use of mass media and community advocacy to change the social environment or advance a public policy initiative. Media advocacy adopts a participatory approach that emphasizes the need of communities to gain control and power to transform their environments. It assigns the media a pivotal role in raising issues that need to be discussed and puts pressure on decision-makers. However, advocacy is not solely concerned with media actions.

### **Media Dependency Theory**

Media dependency theory, or simply media dependency, was developed by Sandra Ball-Rokeach and Melvin DeFleur in 1976. The theory is grounded in classical sociological literature positing that media and their audiences should be studied in the context of larger social systems. The theory further states that for societies in states of crisis or instability, citizens are more reliant on mass media for information and as such are more susceptible to their effects. The theory ties together the interrelations of broad social systems, mass media, and the individual into a comprehensive explanation of media effects. At its core, the basic dependency hypothesis states that the more a person depends on media to meet needs, the more important media will be in a person's life, and therefore the more the effects media will have on a person.

## **METHODS**

### **Design**

This study adopts the survey research method. Survey research design focuses on a sample drawn from a population in which the data collected from the former through questionnaire and interview is generalized on the latter. Survey research design is chosen because it is faster, cheaper and convenient (Ngu, 2009).

### **Area of Study**

The area of coverage for this research is Ikwo in Ebonyi State. Ikwo is the largest local government area. It is situated on the eastern part of the state. The city and local government area has a land mass of approximately 500 square kilometers and shares a border with Abakaliki, Izzi, and Ezza Local Government Areas as well as Cross River State. Ikwo is made



up of the many towns and villages but the researcher will be choosing the following villages, namely: Ndufu Amagu, Inyimagu, Ekpelu, Ekpaomaka, Ndufu Alike, and Ndufu Echara. Under the villages listed above, one health center would be studied by the researcher. In Ndufu Amagu, the health center that the researcher would be studying is Abina MDGs Health centre. In Inyimagu, the health center that this research would be carried on is Cottage Hospital Agubia. In Ekpelu, the health center that the research would be carried on is Amangwuru health post. In Ekpaomaka, the research would be carried on at Ebiem Primary Healthcare Center. In Ndufu Alike, the research would be carried out on the respondents of General Hospital, Ikwo. In Ndufu Echara, the health care that the researcher would be carrying out its research on is Obeagu Eleke Primary Healthcare Center. The respondents of the researchers are nursing mothers within the range from 20 years and above.

### **Instrument for Data Collection**

For the purpose of this study, primary data was employed. The data was collected with the aid of a questionnaire and focused group discussion. The questionnaire will be properly drafted using the Likert system.

### **Validation of the Instrument**

Validity refers to the ability of a scale to measure what it is designed to measure. The validity of measurement was established through content validity which was given to other researchers to ascertain whether the questionnaire item adequately covers the domain of the construct. The research instrument was also certified by researcher's supervisors and experts in media campaigns to ensure validity of questionnaire items. This was subjected to expert opinion to test the face validity. However, Average Variance Extracted (AVE) > 0.5 was treated as additional evidence of convergent validity; the construct validity of all variables involved in the study were therefore ascertained. Discriminant validity was also assessed by comparing the AVE with the squared correlations.

### **Reliability of the Instrument**

A reliability test was conducted on the instrument to determine how consistent the responses are. The researcher utilized a test/retest method of reliability testing whereby the questionnaire was administered at two different times to the same group of respondents. The Cronbach Alpha reliability test was utilized to conduct the reliability test. A cronbach alpha coefficient of 0.78 was derived and was considered acceptable.

### **Method of Data Analysis**

This study will utilize both qualitative and quantitative approaches to data analysis. This is through the descriptive and inferential statistical tools of analysis. The descriptive methods that will be used in the interpretation and analyses of data will be the frequency tables and simple percentages.



## RESULTS AND DISCUSSION

### Questionnaire Return Rate

In the course of the study, questionnaires were distributed to the various communities and medical centers, and given the uncertainties beclouding survey studies. Not all questionnaires distributed were returned and properly filled. This section of the study displays the statistics of distributed and returned questionnaires and their corresponding percentages. This is shown in Table 4.1 below.

**Table 1:** *Questionnaire Return Rate*

Community	Medical Centre	QD	QR	QRR (%)
Ndufu Amagu	Abina MDGs Health centre	121	119	98
Inyimagu	Cottage Hospital Agubia	119	110	92
Ekpelu	Amangwuru health post	210	199	94
Ekpaomaka	Ebiem primary healthcare centre	188	179	95
Ndufu Alike	General Hospital Ikwo	120	117	96
Ndufu Echara	Obeagu Eleke primary healthcare.	92	87	95
<b>Total</b>		<b>850</b>	<b>811</b>	<b>Average: 95%</b>

**Source:** *Field Survey, 2023*

Table 1 above reveals the number of questionnaires distributed to the medical centers and their corresponding return rate. It is crystal clear that the return rates are high and hence acceptable, having the highest return rate as 98% and the lowest at 92% and the average return rate as 95%.

### Analysis of the Returned Questionnaires

**Table 2:** *How many children do you have?*

Number of Children	Frequency	Percentage
1 Child	14	2
2 Children	587	72
3 Children	100	8
4 Children	85	10
5 Children and above	25	3
<b>Total</b>	<b>811</b>	<b>100</b>

**Source:** *Field Survey, 2023.*



The number of children possessed by the nursing mothers was ascertained. It can be deduced from Table 2 that nursing with just one child is 14 (2%), those with 2 children are 587 (72%), those with 3 children are 100 (8%), those with 4 children are 85 (1%) and those with 5 children and above are 25 (3%). It can be extracted from the table that nursing with 2 children are averagely the major respondents.

**Table 3: Do you know about early childhood diseases that kill children?**

Options	Frequency	Percentage
Yes	801	99
No	10	1
<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

The nursing mothers were asked if they know about early childhood diseases that kill children, and it was revealed in Table 3 that 801 (99%) said yes while 10 (1%) said no. This entails that the majority of the nursing mothers are aware that there are in existence early childhood diseases that kill children.

**Table 4: Which of these two diseases do you know about?**

Options	Frequency	Percentage
Pneumonia	-	-
Diarrhea	-	-
All of the above	811	100
<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

The knowledge and awareness of nursing on pneumonia and diarrhea were tested. It was seen as reported in Table 4 that there is 100 awareness and knowledge concerning pneumonia and diarrhea.

**Table 5: Which of these are symptoms of pneumonia?**

Symptom	Option	Frequency	Percentage
Cough	Yes	798	98
	No	9	1
	Undecided	4	0.49
	<b>Total</b>	<b>811</b>	<b>100</b>





Symptom	Option	Frequency	Percentage
<b>Vomiting</b>	Yes	798	98
	No	9	1
	Undecided	4	0.49
	<b>Total</b>	<b>811</b>	<b>100</b>
Symptom	Option	Frequency	Percentage
<b>Lack of Energy</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>
Symptom	Option	Frequency	Percentage
<b>Tiredness</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

It can be deduced from the reports of nursing mothers that the major symptoms of pneumonia are coughing and vomiting.

**Table 6: Which of these are symptoms of diarrhea?**

Symptom	Option	Frequency	Percentage
<b>Constant watery stooling</b>	Yes	775	96
	No	27	3
	Undecided	9	1
	<b>Total</b>	<b>811</b>	<b>100</b>
Symptom	Option	Frequency	Percentage
<b>Nausea</b>	Yes	798	98
	No	9	1
	Undecided	4	0.49
	<b>Total</b>	<b>811</b>	<b>100</b>



Symptom	Option	Frequency	Percentage
<b>Bloating</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>
Symptom	Option	Frequency	Percentage
<b>Tiredness</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

**Table 7: Do you know these diseases are preventable?**

Options	Frequency	Percentage
Yes	98	12
No	701	86
Undecided	12	1
<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

The respondents were asked if they knew that these early childhood diseases (pneumonia and diarrhea) were preventable. Surprisingly, 98 (12%) said yes while a whopping 701 (86%) said no while 12 (1%) were undecided. Further analysis revealed that the majority of the nursing mothers assumed that every child must experience these diseases as they thought it was part of development. No wonder many of them endorsed that they were not preventable.

**Table 8: How do you prevent your child from contracting pneumonia?**

Strategy	Option	Frequency	Percentage
<b>Covering of Body</b>	Yes	775	96
	No	27	3
	Undecided	9	1
	<b>Total</b>	<b>811</b>	<b>100</b>



Strategy	Option	Frequency	Percentage
<b>Steamy bath during cold weather</b>	Yes	798	98
	No	9	1
	Undecided	4	0.49
	<b>Total</b>	<b>811</b>	<b>100</b>
Strategy	Option	Frequency	Percentage
<b>Keeping the immune system through healthy food</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

The mothers do the above but from word-of-mouth extraction, they do not do them only explicitly for the prevention of pneumonia.

**Table 9: How do you prevent your child from contracting diarrhea?**

Strategy	Option	Frequency	Percentage
<b>Sanitizing your surrounding</b>	Yes	775	96
	No	27	3
	Undecided	9	1
	<b>Total</b>	<b>811</b>	<b>100</b>
Strategy	Option	Frequency	Percentage
<b>Rotavirus vaccine is of the management strategy</b>	Yes	798	98
	No	9	1
	Undecided	4	0.49
	<b>Total</b>	<b>811</b>	<b>100</b>
Strategy	Option	Frequency	Percentage
<b>Taking of Oral Rehydration Solution (ORS)?</b>	Yes	19	2.3
	No	784	97
	Undecided	8	1
	<b>Total</b>	<b>811</b>	<b>100</b>

Source: *Field Survey, 2023.*

**Table 10: What did you do when you perceived that your child had pneumonia?**

1.	Took the child to a pharmacist
2.	Used warm water to bath the child
3.	Prayers
4.	Applied traditional medicine

**Source:** Field Survey, 2023.

The analysis carried out in Table 10 shows what the surveyed nursing mothers did when they perceived their child(ren) has pneumonia. This ranged from taking the child to a pharmacist to the application of traditional medical medicine.

**Table 11: What do you do when you perceive that your child has diarrhea?**

1.	Took the child to a chemist's shop
2.	Increased breastfeeding
3.	Visited my spiritual father with the child
4.	Avoided giving the child certain foods
5.	Asked my fellow nursing mothers what to do

**Source:** Field Survey, 2023.

**Table 12: Through which of these communication channels do you get information about early childhood killer diseases?**

Communication Channel	Response Percentage
Radio	15%
Magazine	18%
Social Media	25%
Billboard	20%
Lectures	37%
Workshop	40%
Seminars	70%
Hospitals	89%

**Source:** Field Survey, 2023.

It can be clearly deduced from Table 12 that hospitals are the major communication channels where information about early childhood killer diseases is communicated to nursing mothers in Ebonyi. The reason for this is that most of these nursing mothers do not consistently access information from other communication channels.



**Table 13: Do you treat your child without confirming through a test whether they have the disease?**

Options	Frequency	Percentage
Yes	695	86
No	114	14
Undecided	2	0.24
<b>Total</b>	<b>811</b>	<b>100</b>

Source: Field Survey, 2023.

The respondents were asked if they treat their child(ren) without confirming through a test whether they have the disease or not. Table 13 reveals that 695 (86%) treat their child(ren) without confirming through a test whether they have the disease or not. The table also shows that 114 (14%) confirmed through a test whether their child(ren) has the disease. The table also shows that 2 (0.24%) were undecided. This goes a long way to reveal that the majority of the nursing mothers in Ebonyi State do not confirm through a test if their children have the disease or not before treatment.

### Hypotheses Testing

#### Hypothesis One

**H<sub>01</sub>:** There are no prevalent early childhood diseases in Ikwo local government area of Ebonyi State.

**Table 14**  
*Independent Samples t-test*

	Levene's Test for Equality of Variances		t-test for Equality of Means						
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Equal variances assumed	208.552	.000	3.095	27	.005	.36364	.11751	.12253	.60474
Equal variances not assumed			2.390	10.000	.038	.36364	.15212	.02469	.70258

From Table 14, the independent sample t-test gave an F-value of 208.552 and a t-value of 2.390 and this is significant at .000. Since .000 is less than 0.05, this means that at 0.05 level of significance, the p-value of .000 is significant. Given this, the H<sub>01</sub> is rejected. This implies that there are prevalent early childhood diseases in Ikwo Local Government Area of Ebonyi State.





## Hypothesis Two

**H<sub>02</sub>:** There are no communication intervention programs used in enhancing knowledge of prevention and management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi State.

**Table 15**  
*Independent Samples t-test*

	Levene's Test for Equality of Variances		t-test for Equality of Means						
	F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Equal variances assumed	9.588	.003	-1.284	56	.204	-.14583	.11358	-.37337	.08170
Equal variances not assumed			-2.833	47.000	.007	-.14583	.05148	-.24940	-.04227

**Source:** *Researcher's Computation using SPSS.*

From Table 15, the independent sample t-test gave an f-value of 9.588 and a t-value of -1.284 and this is significant at .003. Since .003 is less than 0.05, this means that at a 0.05 level of significance, the p-value of .003 is significant, hence the decision to reject the null hypothesis. This implies that there are communication intervention programs used in enhancing knowledge of prevention and management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi State.

## Hypothesis Three

**H<sub>03</sub>:** Communication intervention programs on early childhood disease have not enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State.



**Table 16**  
**Independent Samples t-test**

	Levene's Test for Equality of Variances		T-test for Equality of Means						
	F	Sig.	t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Gender Equal variances assumed	0.336	.7800	1.792	43	.080	.35897	.20034	-.04505	.76300
Gender Equal variances not assumed			1.613	38.000	.000	.35897	.07782	.20144	.51651

**Source:** Researcher's Computation using SPSS.

From Table 16, the independent sample t-test gave an f-value of 0.336 and t-value of 1.613, and this is insignificant at 0.7800. Since 0.7800 is greater than 0.05, this means that at a 0.05 level of significance, the p-value of 0.7800 is insignificant. This implies that communication intervention programs on early childhood disease have not enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State.

## SUMMARY, CONCLUSION AND RECOMMENDATION

### Summary of Findings

The essence of this study is to carry out an empirical analysis of media advocacy on early childhood diseases and knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State. Data for the study was generated through questionnaire and focused group discussion. The frequency tables/percentages and the independent sample t-test were used as statistical methods in the study. The major findings of the study based on the stated specific objectives are as follows:

1. There are prevalent early childhood diseases in Ikwo local government area of Ebonyi State.
2. There are communication intervention programs used in enhancing knowledge of prevention and management of early childhood disease among nursing mothers in Ikwo Local Government Area of Ebonyi State.
3. Communication intervention programs on early childhood disease have not enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State.



## CONCLUSION

The communication intervention is a useful instrument with which to sensitize and mobilize the public about desired changes in health behaviour. Communication intervention plays a useful and supportive role during early childhood disease outbreaks in Nigeria. Based on the study conducted, it can be concluded that media advocacy is significant on early childhood diseases and knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area of Ebonyi State. However, it appears the nursing mothers in the aforementioned state are not disposed to take full advantage of media advocacy.

## RECOMMENDATION

In the light of the findings of the study, the following recommendations are suggested:

1. In the course of the study, it was discovered that there are prevalent early childhood diseases in Ikwo local government area of Ebonyi State. In the light of this finding, it is recommended that there should be an increase in early child disease awareness among individuals, families and communities by ensuring community participation in the control.
2. From the study, it was also discovered that there are communication intervention programs used in enhancing knowledge of prevention and management of early childhood disease. Based on this finding, it is recommended that the local government should ensure that those intervention programs should not just be noise-making but should be solution oriented.
3. From this study, it was discovered that communication intervention programs on early childhood disease have not enhanced knowledge of prevention and management strategies among nursing mothers in Ikwo Local Government Area. It is recommended that much research should be carried out to find out better ways to ensure communication intervention programs on early childhood disease enhance knowledge of prevention and management strategies among nursing mothers.
4. Given the observed challenges faced by the Nigerian media generally, the researcher recommends the establishment of a permanent funded media structure charged with the responsibility of grassroots campaigns against early childhood diseases in Nigeria.
5. Media institutions should be integrated into all organizations and committees charged with planning, controlling and preventing outbreaks of early childhood disease.
6. Media programmes on early childhood diseases, especially pneumonia and diarrhea, should be communicated in different native Nigerian languages for easy comprehension.
7. There should be an increase in child pneumonia awareness among individuals, families and communities by ensuring community participation in the control while there should be adequate records, documents and information about child pneumonia in order to assist the health workers to easily spot diseases in children.



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