

EVALUATION OF WOMEN'S ATTITUDE TO BREAST CANCER CAMPAIGNS: A STUDY OF AWKA RESIDENTS

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Abstract

This study evaluated women's attitude to breast cancer campaigns in Awka, Anambra State. The survey research method was adopted. By this, 399 copies of questionnaire were distributed to women in seven (7) Local Government Areas of Anambra State and 320 were received. Data collected were analyzed and presented in simple percentages and tables. To this end, the findings of the study revealed that the broadcast media awareness campaigns on breast cancer is still very inadequate coupled with the fact that majority of women are yet to imbibe the habit of engaging in early detection measures. The researchers conclude that there is a lacuna in the communication process, owing largely to the inability of the broadcast media to design breast cancer awareness campaigns in such manners that would accommodate the non-literate and susceptible women. It was recommended among other things that campaigns should emphasize preventive rather than curative measure, by encouraging women to imbibe the culture of early dictation measures.

Keywords: Evaluation, Women's Attitude and Breast Cancer.

Introduction

The broadcast media are indispensable component of any society. This is borne out of the fact that with their persuasive nature and power of appealing to the senses of sight and sounds, broadcast media have the capacity to orchestrate change in any society. Irrespective of time, space, educational or cultural inclination, the broadcast media tends to carry everyone along. It is also for these reasons that the broadcast media have over the years, severed as a potent agent of social change and development.



Consequently, the broadcast media comprises mainly of radio and television. These medium of mass communication enjoy some comparative advantage in terms of reach and accessibility. More so, the contributions of the broadcast media in the area of health sensitization cannot be ignored. The broadcast media in Nigeria regularly cover all sorts of issues such as health, music, arts, crime, sports and political events (Meyer 2002; and Soola, 2004). Tosanwume (1994, p.26) has observes that the broadcast media educate, inform and entertain. Yet, beyond these functions; they also persuade and catalyze social mobilization. In other words, the broadcast media can be regarded as powerful sources of information because they have the capability to penetrate every segment of the society; they have the ability to disseminate messages about issues, ideas and products. Furthermore, the broadcast media have the capacity to create awareness and knowledge about issues of national interest.

It is against these backdrops that the role of the broadcast media in creating awareness about breast cancer scourge cannot be over emphasized. Is therefore believed that the efficacy of a message is predicated largely on the medium, the broadcast media could serve as a veritable channel in the campaign on the reduction of breast cancer in Nigeria.

Mduhan (1904, p.56) posits that “the medium is the message, in that medium has the potency of determining the success of a message”. There is no gain saying the fact that breast cancer is the most common cancer in women worldwide, it is a major cause of deaths among women aged 30 and above. It causes deaths among women in both high and low resource setting countries (Bray, McCarron and Parkins, 2005; Dumitrescu and Colaria 2004; and Who Global Burden of Disease, 2004). This reveals the devastating effect of the breast cancer disease thereby making it an issue of international concern. So that if it has generated this much attention; it has become imperative for the broadcast media to be employed towards creating awareness about the disease.

Across the globe and particularly in resource-limited societies, breast cancer and its treatment constitute a greater problem of physical, psychological and economic challenge. The hallmarks of the disease in Africa are patients presenting themselves at an advanced stage for treatment in hospital. It is observed that awareness and knowledge of breast cancer vary among communities and population groups worldwide. While available studies conducted to access the knowledge of breast cancer among women have revealed satisfactory levels of awareness in some places (Grunfield, Ramiez, Hunter and Richards 2002), other reports especially from developing countries such as Nigeria have revealed inadequate knowledge and awareness of the disease (Adebamowo, 2003; and Adebamowo and Ajayi; 2000). This work therefore, intends to examine how the broadcast media have failed in creating the needed awareness on breast cancer disease.

Statement of the Problem

The magnitude of threat posed by breast cancer to women's health in Nigeria could be damaging if not curtailed. Unfortunately, in spite of the increasing rate of death among women with breast cancer, it seems adequate media attention has not been given in creating awareness about the disease.

Consequently, the broadcast media which ought to create wider awareness about the scourge seems to have neglected its fundamental responsibility to the non-governmental organizations. This is more evident in the fact that their programmes betray the lack of prominent they accord to these diseases. There is agreement that awareness leads to knowledge and knowledge leads to behaviour modification (Rimal 2000). The implication is that in so far as the broadcast media fail to increase the awareness on the breast cancer and its prevention, many more women would continue to fall victim of it.

Furthermore, it's more worrisome that programme type and time of airing breast cancer messages are not crouched enough in such a way that it will produce the needed effect. That is radio and television programme on breast cancer awareness are not usually targeted at peak periods or prime time". Conversely, the languages and mode of presentation of breast cancer messages have much to be desired. Most worrisome is the dearth of knowledge among most women who suffer from breast cancer. The implication of this therefore, is the growing number of women who die often as a result of lack of awareness on the epidemic. Unfortunately, the attitude of women and their practices are such that they have further made the women susceptible to the disease.

Objectives of the Study

This study sought to:

1. Find out whether the respondents are aware of the broadcast campaigns on breast cancer.
2. Identify the respondents' major source of information about breast cancer.
3. Ascertain the respondents' disposition to breast cancer.
4. Find out whether the respondents practice early dictation measures.
5. Evaluate the effectiveness of the broadcast media in creating awareness on breast cancer.

Research Questions

The following research questions were raised to guide this study:

1. How aware are respondents on broadcast media campaigns on breast cancer?
2. What is the respondents' major source of information about breast cancer?
3. What are the respondents' dispositions about breast cancer?
4. What is the practice of respondents on early breast cancer detection

measures?

5. How effective is the broadcast media in creating awareness on breast cancer?

Significance of the Study

The study is justified on the need to provide the populace with adequate information and awareness regarding the reality of breast cancer pointing out its devastating effect on human health, productivity, economy and how to control it. More so, it serves to bring to the notice of the broadcast media to step up their game in providing adequate awareness, on the breast cancer scourge.. By this, the study tends to remind the broadcast media of not only their agenda setting roles but also their social responsibility function.

Consequently, it would serve as useful reference material for researchers and students alike who would want to do further studies in this area, that it would address the yawning gap in the existing literature regarding broadcast media awareness campaign on breast cancer scourge and brings to the fore its relevance. The industry will also be of great benefit as it will enlighten more on the need to take urgent step in cushioning the rate of the alarming disease.

Literature Review

History of Breast Cancer in Nigeria

Breast cancer is a leading female malignancy and a major health concern in the world today. In Nigeria, breast cancer is one of the leading causes of death in women aged 30 years and above. It is the most common form of cancer among women in both high-and low cost resource setting countries (Bray, McCarron and Parkin 2005; Dumitrescu and Colaria, 2000; Who Global Burden of Disease (2004) at the moment, breast cancer constitutes a major public health issue globally with over one million new cases diagnosed annually, resulting in over 400,000 annual deaths and about 4.4million women living with the disease (Bray, McCarron and Parkin, 2005, Dumitrescus and Colaria 2004). More revealing is the fact that it affects one in eight women during their life time (Dumitrescu & Colaria 2004, Bray, McCarron & Parkin, 2005, Okobia, Bunker, Usifo & Okonofuna 2006).

Conversely, breast cancer has been known and feared since ancient times with no reliable treatments and with surgical outcomes often fatal, women tended to conceal the possibility of breast cancer as long as possible with the dramatic improvement in survival rates at the end of the 19th century, the radical mastectomy promoted by William Stewart Halsted raised long-term survival rates from 10% to 50% efforts to educate women about the importance of early dictation and action were begun (Olson, 2002, p.1, King 2006, p.19).



Women are often considered the decision makers and health care givers in the family across the globe (National partnership for women and families, 2007; National women health resources center 2006, Ojeda, Saiganicoff, 2003). The above statement underscores the salient roles the women play in the society. That is the multiple roles women play in the home profoundly influence the health of both their families and of themselves (Wyn, Ojeda and Saiganicoff, 2003). Researchers and health professionals argue that women often neglect their own health for a number of reasons usually associated with their care-giving roles within the family, Wyn, Ojeda and Saiganicoff, 2003).

Across the globe and particularly in resource limited societies, breast cancer and its treatment constitute great physical, psychological and economic challenges. The hallmarks of the disease in Africa are patients presenting themselves at an advanced stage for treatments in hospitals. This is not unconnected to the lack of awareness of the disease in developing countries like Nigeria. Yet the stigma associated with the disease is yet to die down in this part of the world. At the beginning and middle of the 20th century breast cancer was usually discussed in a hush tones as if it were shameful (Sulik 2010:13). Awareness and knowledge of breast cancer among women have revealed satisfactory levels in some places. (Grunifield, Hunter and Richard, 2002) other reports especially from developing countries such as Nigeria have revealed inadequate knowledge and awareness of disease (Adebamowo et al, 2003; Adebamowo and Ajayi, 2000).

Role of the Broadcast Media in Creating Awareness

There has been various qualitative and quantitative analysis of broadcast media coverage of breast cancer in Nigeria. Some have reported the rise and fall of media coverage on breast cancer in Nigeria (Okobia, Bunker, Okonoja and Usifo, 2006; Salandeen et al, 2002; Salandeen et al, 2009) whereas others have focused on the relationship of health communication and breast cancer in Nigeria. Another stream of research is based on surveys of public opinion on breast cancer. Many scholars have analyzed the issue of breast cancer in terms of public perception. (Adebamowo et al 2003, Adebamowo and Ajayi, 2000, Bray McCarron and Parkin, 2005; Dumitrescu and Colaria, 2004; Salandeen et al., 2009). However most of these studies have focused on how the public receives broadcast media messages, understand the issue of breast cancer. But then few studies have been focused on broadcast media strategies for public awareness of breast cancer. It is against this backdrop that this work would attempt to examine the role of the broadcast media in the fight against breast cancer in Nigeria.

Breast cancer awareness is an effort to raise awareness of the disease and reduce the disease stigma by educating people about its symptoms and treatment options. The role of the broadcast media in this campaign cannot be over-emphasized because

there is no cure at this time; awareness is the primary way to decrease the number of people who die from breast cancer. Breast cancer patient who had a family history of breast cancer, were therefore more aware of the risk factors of the disease are more likely to situate early signs and also had a higher survival rate than those who did not have a family history of breast cancer (Verkooyen, 2011, p.12). There is no gain saying the fact that, the purpose of breast cancer awareness is to make women aware of the risk of the disease so that they can dictate the symptoms as early as possible.

Consequently, the broadcast media do not only inform individual about health issues but their messages can be crucial in influencing individual action. The diffusion of innovation theory holds that the broadcast media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behavior. Similarly, one of the major constructs of the health belief model is the cue to action that helps trigger a particular behavior. Finally, breast cancer awareness campaigns have been highly effective in getting attention for the disease.

According to Arnst (2007, p.121), breast cancer receives significantly more media coverage. Prevalent cancer, such as prostate cancer because breast cancer awareness receive so much attention and has become such a large scale campaign can become hidden, people talk about the fight against breast cancer, but the awareness campaign is not about the cure, the awareness campaign is about raising people's awareness to increase the chance of early dictation and this decrease the fatality rate of the disease among women in Nigeria and the world.

Constraints to Effective Broadcast Media Campaign on Breast Cancer Scourge

Although the broadcast media in Nigeria have recorded some considerable success in the fight against breast cancer, a number of constraints tend to impede their efforts. It is against this back drop that media scholars have argued that the effectiveness of broadcast media awareness campaign against breast cancer cannot be without the interplay of other variables. These variables would comprise worldwide, background assumption, educational or economic status, culture etc. all these go a long way in determining audience members level of processing cancer awareness campaign message.

While the broadcast media have been touted to be effective in the fight against breast cancer, they are not devoid of their limitations, the radio. It has been observed that radio sets and batteries are expensive in Nigeria society (Soola, 1999, p.16). Conversely, the down turn in the Nigeria economy and its toll on people's purchasing power, both the hardware and software of this medium have become expensive for an average income earner.

Consequently, the breast cancer awareness campaign programmes seldomly put into

consideration the peculiarities of audience members and so since there is dearth of community radio stations in Nigeria, rural dwellers are left in the dark as it were, in essence, languages are structured to accommodate more of the educated audience members. But then, there is risk of too much awareness because breast cancer is a highly visible disease. Most women significantly over estimate their personal risk of dying from it. Misleading statistics such as the claim that one eight women will be diagnosed with breast cancer during their lives. A claim that depends on the patient unrealistic assumption that no woman will die of any other disease before the age of 95.

(Olson, 2002: 199-200) obscure the reality, which is that about ten times as many women will die from heart disease and stroke than from breast cancer (Ave, 2000, p.86).

Awareness has also led to increased anxiety for women. Early dictation efforts results in over diagnosis of precancerous and cancerous tumors that would never risk women's life (about one third of breast cancers) and result in her being subjected to invasive and sometimes dangerous radiological and surgical procedure. (Aschwanden, 2009, p102). More so, increased awareness eventually increases victim blaming (Olson, 2002, pp.240-242).

The Broadcast Media and the Nigerian Society Development Process of a Country

They serve as instruments of social control. The fact that broadcasting combines qualities such as sight, sound and motion, sets broadcasting apart from other media of communication. The broadcast media are generally regarded as channels of communication that are capable of reaching heterogeneous audience simultaneously with uniform messages.

Consequently, the broadcast media in Nigeria regularly cover all sorts of issues such as health, music, fine art, crime, sports and political events. (Meyer, 2002: Soola 2004). The broadcast media transmit ideas (1994:62) has observed that the broadcast media educate, inform and entertain beyond these functions. they also persuade and catalyze social mobilization. In other words, the broadcast media can be regarded as powerful sources of information because they have the capability to penetrate every segment of the society. They have the ability to disseminate messages about issues, ideas, and products.

Furthermore, the broadcast media have the capacity to create awareness and knowledge about issues of national interest. The radio has been regarded as the most persuasive and widely dispersed, heterogeneous audience. It is regarded worldwide for being the cheapest, simplest and most portable medium of mass communication



for reaching people. Radio broadcasting is not a luxury, it is the most powerful instrument for educating the people (Chalmer 1951, p.17).

More so, Soola (2009, p.18) has reasoned that radio is limited by electricity which is rarely available and epileptic in 105 supplies when available. In addition, the radio is extremely mobile; people could listen to a radio programme in their cars, homes or offices. This believed that radio should play a more vital part in shaping Nigeria's destine especially in the fight against breast cancer.

Meanwhile, television possesses the unique characteristics of sound sight and motion which it combines with simultaneously. It also transcends the bounds often imposed by intimacy on information and knowledge acquisition. In addition its status conferred on individual's demonstrated practices is unrivaled (Soola 2009, p.54, Soola 1999, p.26).

In other words, television has the capacity of audio-visual presentation of programmes and by virtue of its ownership and operational structure can be regarded as an urban medium. But then television has the ability to reach a heterogeneous audience in both rural and urban settings.

The broadcast media play a significant role in the society. This means that the broadcast media depend solely on what they receive and the information they get for promotion and development of its welfare and interest. Okon (2007, p.16) observes that the media derive colouration from the society within which they operate. By this, there exists a symbolic relationship between the mass media and the society.

In essence, the broadcast media in Nigeria provide useful and up-to date information about local, national and international events by facilitating innovation, adaption and progress. They find out about relevant events and conditioned in one's immediate environment or surroundings satisfying curiosity and general interests, learning, education and gaining a sense of security through knowledge.

There is no gainsaying the fact that the broadcast media help in correlating the different segments of the society. They do this by explaining, interpreting and commenting on the meaning of events and information, providing support for established authority and norms. (Okon, 2007, p.31).

Continuing, Okon, submitted that they socialize the people to accept the required and acceptable values, norms and make them functional members of the society thereby contributing meaningfully to the socio-economic cum political development of the nation. Furthermore, the contribution of the broadcast media is to make available substantial amount of information for the people in the society. Ndolo (206, p.96)

argued that they widen the horizon of knowledge of the people and thus help to build empathy, focus attention on problems and goals of development thereby raising the personal and national aspiration and all these they do largely by themselves and directly.

Theoretical framework

This study is anchored on agenda setting theory. It holds that active members attach importance to issues in the domain of public discussion because the mass media have effectively brought them to public focus. The ability of the mass media to establish silent issues and images in the mind of the public forms the bases for the agenda setting theory. McCombs and Shaw (1995, p.5) hold that: Considerable evidence has accumulated that editors and broadcasters play an important part in shaping our social reality as they go about their day to day task of choosing and displaying news, the impact of the mass media is the ability to effect cognitive change among individuals to structure their thinking has been labeled the agenda setting function of mass communication.

Also, Conen (1980, p.42), says emphatically that the media may not be successful in telling us what to think about. This justifies the aptness of this theory as the role of the broadcast media in setting the agenda for the awareness campaign against breast cancer, cannot be over-emphasized. Health Belief Model

This is another theoretical framework upon which this work is based. The health belief model (HBM) is a health behaviour change and psychological model developed by Trwin, M. Rosenstock in (1966) for studying and promoting the uptake of health services. The model was furthered by Beeker and Colleagues in the 1970s and 1980s. Subsequent amendments to the model were made as Late as 1988 to accommodate evolving evident generated within the health community about the role that knowledge and perceptions in personal responsibilities.

Originally, the model was designed to predict behavioural response to the treatment received by acutely or chronically ill patients, but in more recent years the model has been used to predict more general health behaviours

The original model included these four constructs:

1. **Perceived Severely:** Individuals assessment of the seriousness of the condition and its potential consequences.
2. **Perceived susceptibility:** Individuals assessment of their risk of getting the disease
3. **Perceived benefit:** individual assessment of the positive consequences of adopting the behavior.
4. **Perceived bafflers:** individual's assessment of the influences that facilitates or discourage adoption of the promoted behavior.



Constructs of mediating factors were added to connect the various types of perceptions with the presided health behavior.

1. Demographic variables (such as social economic, status, personality).
2. Socio-psychological variables (such as Social-economic, status, personality).
3. Perceived efficacy (an individual self assessment of ability to successfully adopt the desired behaviour).
4. Health motivation (whether an individual is driven to a given wealth goal).
5. Perceived threat (whether the danger imposed by not undertaking a certain health action recommended is great).
6. Perceived control (a measure of level of self-efficacy).

The prediction of the model is like hood of the individual concerned to undertake recommended health action (such as preventive and curative health actions). The theory is related to this study means that women who are susceptible to breast cancer likely cultivate favourable attitude to the campaign against the level of adoption and advocacy.

The theory maintains that people's health behaviours are the makers of what people perceive and think about the threat to themselves, the benefits to be obtained if a suggested action is adopted, the cost of the action, the impact of the external forces such as age, status, education, family etc. other motivating factors and self confidence.

Methodology

The method adopted for this study was the survey while the population of the study comprises of all residents in Awka, Anambra State which is estimated to be 234,736 (National Population Commission, 2006).

The Taro Yamane's formula was used in determining the sample size of the study. The formula establishes sample size against their corresponding population (Okeke, Olise and Eze, 2008, p.127).

$$N = \frac{N}{1 + N(e)^2}$$

Where:

$$\begin{aligned} N &= \text{sample size} \\ e &= \text{level of significance} \\ N &= \text{population size} \\ &= \frac{1 + 234,736(0.05)^2}{1 + 586.8425} \\ &= \frac{234,736}{1 + 586.8426} \end{aligned}$$

$$\begin{aligned} &= \frac{234,736}{587.84} \\ &= 399.31954 \\ &= 399 \end{aligned}$$

Therefore, n = 399

In this study, Awka was divided into 19 divisions, but for the purpose of this research work, seven (7) of the divisions were selected randomly. The sample for this study is therefore 399. It is believed that the sample size is adequate to represent the population. A simple random sampling was used.

Table 1: Communities in Awka

Nibo	Awka South
Nise	Awka South
Awka	Awka South
Amawbia	Awka South
Isiagu	Awka South
Okpuno	Awka South
Mbaukwu	Awka South
Umuawulu	Awka North
Ezinato	Awka north
Awba Ofemili	Awka North
Ugbene	Awka North
Ebenebe	Awka North
Amanasa	Awka North
Urum	Awka North
Amanuke	Awka North
Isu Aniocha	Awka North
Mgbakuwu	Awka North
Ugbenu	Awka North
Achalla (the capital)	Awka North

Data Presentation Analysis

Demographic Data

A total of 399 copies of questionnaire were administered for the potency of this study. Out of 399 copies of questionnaire administered, 320 copies were correctly filled and returned, giving 80% response rate and 20% invalid copies.

The total of 399 copies of questionnaire was distributed to respondents in the seven (7) local government areas used in the study.

Table 2: Gender of Respondents

Respondents	Frequency	Percentage
Male	90	28.1
Female	230	71.9
Total	320	100

The table above shows that 90 (28.1%) of the respondents (71.9%) were female.

Table 3: Age Range of Respondents

Respondents	Frequency	Percentage
20 – 25	55	17
26 – 30	100	31
31 – 35	60	19
36 – 40	65	20
41 and above	40	13
Total	320	100

The table above reveals that 55 (17%) of the respondents fall within 20-25 years, 100 (31%) were within age range of 26-30 years, 60(19%) were within age range of 31-35 years, 65(20%) were within age range of 36-40 years, 40(13%) were within age

range of 40 and above.

Table 4: Marital Status of Respondents

Respondents	Frequency	Percentage
Single	120	37.5
Married	200	62.5
Total	320	100

Table 4 above shows that 120 (37.5%) of the respondents indicated single, while 200(62.5%) indicated married.

Table 5: Educational Level of Respondents

Respondents	Frequency	Percentage
Non formal education	104	32.5
Primary	80	25
Secondary	72	22.5
Tertiary	64	20
Total	320	100

The data in table 5, shows that 104(32.5%) of the respondents had no formal education, 80(25%) of the respondents are of primary school level, 72(22.5%) of the respondents are of secondary school level, while 64(20%) of the respondents are of tertiary institution.

Table 6: Occupation of the Respondents

Respondents	Frequency	Percentage
Civil servants	50	15.6
Traders	90	28.1
Students	60	18.8
Farming/fishing	105	32.8
Others	15	4.7
Total	320	100

The data in table 6, shows that 50(15.6%) of the respondents are civil servants, 90(28.1%) of the respondents are of traders, 60(18.8%) of the respondents are students, 105(32.8%) of the respondents farmers and fishers while 15(4.7) of the respondents are others.

Research question one

Are respondents aware of broadcast campaign on breast cancer?

Question 8 on the questionnaire suggests answers to the question.

Table 7: Are you aware of the broadcast campaign against breast cancer

Respondents	Frequency	Percentage
Yes	102	31.9
No	190	59.4
Undecided	28	8.7
Total	320	100

Data in table 7 reveals that 102 (31.9%) response are yes, that they are aware of broadcast campaign against breast cancer, 190(59.4%) responds are no, that they are not aware of broadcast campaign against breast cancer while 28(8.7%) response are undecided.

Research Question Two

What are the respondents major source of information about breast cancer?

Answers to question 10 of the questionnaire provided data that suggest answer to this research question.

Table 8: Respondents major source of information on breast cancer awareness campaign

	No. of Respondents	Percentage
Television	120	37.5
Radio	90	28.1
Newspaper	40	12.5
Cinema	10	3.1
Interpersonal	60	18.8
Total	320	100

The data in table 8 shows that 120 (37.5%) of the respondents says that their source of information is the television, 90(28.1%) of the respondents says their source of information is the radio, 40(12.5%) of the respondents says their source of information is the newspaper, 10(3.1%) of the respondent says is the cinema and while 60(18.8%) of the respondents says their source of information is through interpersonal.

Research Question Three

What are the respondent dispositions about breast cancer?

Answer to question 13 of the questionnaire provided data that suggests answer to this research question.

Table 9: How would you describe your attitude to the campaign?

	No. of Respondents	Percentage
Concerned	200	62.5
Indifference	80	25
Can't say	40	12.5
Total	320	100

The data in table 9 shows that 200(62.5%) of the respondents says they are concerned about breast cancer campaign, 80(25%) of the respondents say they are indifferent about the breast cancer campaign, while 40 (12.5%) of the respondents says they can't say about breast cancer campaign.

Research Question Four

Do the respondents practice early breast cancer dictation measures?

Answers to question 16 of the questionnaire providing data that suggest answer to this question

Table 10: Respondents practice early dictation measures

Response	No. of Respondents	Percentage
Yes	120	37.5
No	160	50
Undecided	40	12.5
Total	320	100

Data in table 10 shows that 120(37.5%) of the respondents says yes that they practice early dictation measures, 160(50%) of the respondents says no that they do not practice early dictation measures while 40(12.5%) of the respondents are undecided.

Discussion of Findings

The study reveals that more women within the age of 26-30 are most vulnerable to breast cancer disease. This confirms the position that breast cancer is the most

common cancer in women worldwide. Bray et al (2002), Dumitrescu and Colaria (2004) and who Global Burden Of Disease (2004) maintained that, if it is a major cause of deaths among women in both high and low resource setting countries.

Conversely, it was revealed that majority of the respondents 104 (32.5%) had no form of education. While it is a disturbing trend, there tends to be an increase in the knowledge gap when it comes to creating awareness about breast cancer via the broadcast media. More worsening is the fact that the mode of presentation of breast cancer awareness campaign in the broadcast media is not such that accommodates the uneducated as it were. The finding therefore, disconfirms the type veritable channel of communication, reaching heterogeneous audiences with uniform messages. Among a predominantly non-literate rural population, broadcast media reach is severely limited and the impact of its content is impeded by the barrier of language.

More so, it was revealed that majority of the respondents 190(59.4%) were not aware of broadcast media awareness campaign on breast cancer. This result, therefore, disconfirms research question one which attempted to know whether respondents were aware of broadcast media campaign on breast cancer, yet it confirms the earlier position taken by Soola (1999:86), where he argue that “television stations in Nigeria suffer from poor production capability, declining economic fortunes and cheap foreign alternatives with most of the programmes being entertainment centered”. All these at the expense of quality health information on breast cancer, that many women are not aware of broadcast media campaign on breast cancer, re-echoes the knowledge gap theory. Let us remember that most of them are non-literate see table 4 (respondents level of education) on the demographic data.

On respondent major source of information on breast cancer awareness campaign, it was revealed that their major source of information is through the television. But following closely is with the radio 90(28.1%) respondents. This confirms the fact that the broadcast media (radio and television) if properly harnessed can serve as a useful and effective tools in the campaign against breast cancer. It again buttresses the position of Soola (2009:71), Soola (1999:126), when he said that “television possesses the unique characteristics of sound, sight and motion which it combines with simultaneously”. He continues that it also transcends the bounds often imposed by illiteracy on information and knowledge acquisition. Yet, this result further confirms the efficacy of the interpersonal communication as a source of information about breast cancer.

Again the study disclosed that while majority of the respondents have a fearful disposition towards breast cancer, 80(25%) of them would rather be indifferent. This latter group, makes this finding rather disturbing. It is disturbing because the



seeming indifference of women, is possible because of their dearth of knowledge of the ailment could account for the growing rate of death associated with breast cancer in this part of the world. This again justifies the outcome of research question, which revealed the inadequacies in broadcast media campaign on breast cancer.

But then, the study also show that majority of respondents do not practice early dictation measures. This result therefore, disconfirms research question 3, yet, the contention now lies in the fact that respondents inability to practice early dictation measures could either be out of ignorance of what and how to go about practicing these measures so that their knowledge of this dictation measures or lack of it has a way of affecting their attitudes towards the disease. Respondents reaction in table 8, on the respondents no if they practice early dictation measures, with 120 (37.5%) responds saying yes they practice it, justifies their position in research question 4.

Meanwhile, the study did show that majority of the respondents claimed that the awareness campaign on breast cancer have increased their knowledge of the disease. There is no gain saying the fact that this result confirms research question 1, with regards to the potency of media in advancing awareness on breast cancer.

Similarly, it confirms the precaution adoption model, which recognizes that the media play a major role in disseminating information and raise awareness. According to this theory, awareness is an essential component that moves an individual in various stages.

Finally, majority of the respondents agreed to adopting campaign information on breast cancer, the study had revealed. While this result indicates a paradigm shift with regards to respondents' preparedness to work with the right information to stem the tide of breast cancer, cynicism and indifference have continued to impede the efficacy of some campaigns, especially that of breast cancer.

Conclusion

The basis of this research is to access the knowledge, attitude and practice of women to broadcast campaign on breast cancer, a study of women residents in Awka. Having analyzed the responses from respondents, it is therefore concluded that broadcast campaign on breast cancer is still below percent especially when we consider the devastating effects of the scourge as against the level of attention it is getting in the media.

Consequently, there remains a lacuna in the communication process. This owing mainly to the fact that most women in the rural areas are non-literate and the broadcast media are yet to design convenient means of presentation of these awareness campaign messages to accommodate this highly susceptible group of

persons.

Conversely, the practice of early dictation measures among women seems to be still low. This might not be unconnected to their occasional exposure to broadcast media campaign messages on breast cancer. While the media have continued to have their effect on women's attitude, knowledge and practice as it bothers on breast cancer, the place of interpersonal communication cannot be over-emphasized. So that a perfect synergy in the regard will help in the awareness campaign against breast cancer.

The seeming inability of the broadcast media to make the most of its potency to orchestrate change in society makes the campaign against breast cancer lose its efficacy not until the media begin to prioritize society's needs they might just be rotating in a circle with little or no impact.

Recommendations

Following the findings made in the research, the following recommendations are hereby put forward.

1. That the broadcast media should intensify efforts in their campaign against breast cancer awareness.
2. That they should go beyond intensifying their efforts to actually designing programmes that adequately accommodate the non- literate seeing that they constitute the most prone group.
3. That synergy with other means of communication would go a long way in making the campaign against breast cancer far reaching.
4. That the broadcast media should bring to fore certain health issues concerning women, especially on the need, life styles and attitudes that can make them more susceptible to breast cancer.
5. Finally, that broadcast media campaign awareness messages should lay emphasis on preventive rather than curative measures in the fight against breast cancer. The broadcast media should therefore stress the need for regular early dictation measures.



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