

Media Influence on Beliefs about Family Planning In Cross River State, Nigeria: Mapping a Role for Socio-Political Reorientation

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Abstract

Despite the numerous media messages on contraceptives, women still face little or low access to contraceptives health care, resulting to unwanted/teenage pregnancy, couples giving birth to children that they cannot provide for or even death of either mother or child. Hence, this study aims at evaluating the sociological and political influence of the mass media on beliefs about family planning among Cross River state residents, through a comprehensive analysis of media exposure, media Content, audience perceptions and socio-cultural factors inhibiting family planning practices and its implications on reproductive health programs. This study was anchored on Agenda-Setting theory of the press. The projected population for this study is 15,657,887 according to 2006 National Population Commission census. The survey research design was adopted for this study, using questionnaire as the instrument for data collection, a total number of 385 respondents were sampled using the Australian calculator. The multi-stage sampling technique was employed. The research questions were analyzed using mean score while the hypotheses were tested using t-test statistics. Findings from this study shows that there is inadequate exposure to family planning media message by respondents. The study recommends that government, non-governmental organizations, medical institutions and other agencies should take advantage of the platform which the media provides to disseminate important information that will make the audience aware and enhance their knowledge about family planning in order to encourage them to practice it especially in Cross River state where this study was conducted.

Keywords: Media Influence, Socio-political beliefs, Media content, Family Planning and Cross River.

Introduction

Family planning is an important aspect of reproductive health and has been shown to have significant benefits for individuals, families, and society at large. However, in many low- and middle-income countries, including Nigeria, the uptake of family planning methods remains low, and there are various reasons for this. One of the factors that may be contributing to low uptake of family planning in Nigeria is inadequate knowledge and misconceptions about family planning methods. In this context, the media can play an important role in shaping attitudes and beliefs about family planning.

Cross River State, located in the South-South region of Nigeria, has a population of over 4 million people, and the majority of the population are Christian. According to the 2018

Nigeria Demographic and Health Survey (NDHS), the contraceptive prevalence rate in Cross River State was 12%, which is lower than the national average of 17%. Given the potential role of the media in shaping beliefs and attitudes about family planning, it is important to investigate the influence of media on family planning practices in Cross River State.

Media influence on beliefs about family planning refers to the ways in which the media (e.g., TV, radio, social media, newspapers, magazines, movies, etc.) can shape people's beliefs, attitudes, and behaviors related to family planning. The media has the power to influence people's perceptions of family planning methods, their efficacy, safety, and acceptability, as well as the perceived benefits and drawbacks of using them. The media can also influence people's beliefs about the importance of family planning and its impact on their health, relationships, and overall quality of life. For example, if a TV show or movie portrays the use of contraception in a positive light, it can influence viewers to view contraception as a responsible and effective way to prevent unwanted pregnancies. On the other hand, if the media consistently portrays certain family planning methods negatively or presents them in a biased or inaccurate way, it can influence people's perceptions and beliefs about these methods.

Moreover, media messages can also shape people's attitudes towards gender roles, sexuality, and relationships, which in turn can affect their perceptions and behaviors related to family planning. Therefore, media influence on beliefs about family planning is an important factor to consider when developing public health strategies to promote family planning and reproductive health. It is essential to promote accurate, evidence-based information about family planning through media channels to promote positive attitudes towards family planning and support informed decision-making. This concept has been widely cited in the field of public health, particularly in studies related to reproductive health and family planning. For example, a 2019 study published in the *Journal of Health Communication* examined the impact of media exposure on contraceptive knowledge, attitudes, and behavior among young women in urban Kenya. The study found that exposure to family planning messages through various media channels, including radio, TV, and social media, was associated with increased knowledge about contraception, more positive attitudes towards family planning, and increased contraceptive use.

Positive attitudes towards family planning, coupled with accurate and positive beliefs about its benefits and the use of effective family planning methods, can lead to increased adoption of family planning practices and improved reproductive health outcomes. Therefore, promoting positive attitudes towards family planning and addressing any negative beliefs or misconceptions through education, counseling, and media campaigns can help individuals make informed decisions about family planning and improve their reproductive health.

Statement of problem

Despite the countless benefits of contraceptive information, there are still challenges faced by Women in accessing contraceptive information. More than 220 million women in developing countries who do not want to get pregnant lack access to contraceptives and voluntary family planning Information and services. There are ranges of constraints that prevent women from

accessing contraceptive information such as Illiteracy, language barriers, lack of adequate health workers and ill-developed health infrastructure are some of the constraints facing women. Likewise, long distance to health facilities and shortage of healthcare workers, unsupportive partners and social stigma are also some of the challenges facing women when seeking information about safe Contraceptive methods. Women are also faced with the challenges in identifying appropriate and trusted source of information. Despite the potential for media messaging to influence beliefs and attitudes about family planning in Cross River State, Nigeria, the uptake of family planning methods remains low. There is a need to investigate the influence of media on family planning practices in Cross River State, including the types of media messaging that are most effective in promoting family planning, the role of social media and other digital platforms, and the barriers and challenges to effective media messaging. Therefore, the problem this study aims to address is to evaluate the influence of media on beliefs about family planning and to identify effective strategies for promoting family planning in Cross River State.

This work is anchored on the influence of media on beliefs and attitudes towards family planning in Cross River State, Nigeria, and to identify effective strategies for promoting family planning through media messaging. Specifically, this study aims to:

1. Find out audience level of exposure to the mass media in Cross River State
2. Ascertain media messages on family planning audience are exposed to in Cross River State
3. Ascertain the media through which audience are mostly exposed to family planning messages in Cross River State
4. Find out audience beliefs about family planning in Cross River State
5. Ascertain how media influence audience beliefs about family planning in Cross River State

Literature Review

Family planning is a health-related term that is associated with the use of various contraceptive method by individuals to determine the number of children they wish to or not to have. According to the World Health Organization (WHO), family planning is defined as “the ability of individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. It is achieved through use of contraceptive methods and the treatment of involuntary infertility” (working definition used by the WHO Department of Reproductive Health and Research [WHO, 2008]). The importance of family planning is clear from its benefits to individuals, as well as to families, communities, and societies (AGI, 2003). Family planning serves three critical needs: (1) it helps couples avoid unintended pregnancies; (2) it reduces the spread of sexually transmitted diseases (STDs); and (3) by addressing the problem of STDs, it helps reduce rates of infertility.

Family planning is a population control method practiced in various countries including Nigeria; however, it cannot be practice unless people are aware of it and its methods. Contraceptive methods are classified as modern or traditional methods. Modern methods include female sterilization, male sterilization, intrauterine contraceptive device (IUD), implants, injectable, pill, male condoms, female condoms, emergency contraception, and lactation amenorrhea method (LAM), whereas traditional methods include rhythm (calendar), withdrawal, and folk methods (mulatu, 2020).

According to the Federal Government of Nigeria Family Planning blueprint, 2014, family planning is one of the most cost-effective ways to prevent maternal, infant and child mortality by reducing the number of unintended pregnancies, abortions, and the proportion of birth which remains a huge challenge to the country. The report also estimated that meeting women's need for modern contraceptives would prevent about one quarter to one-third of all maternal deaths saving 140,000 to 150,000 lives per year. The United Nations (2017) affirmed that contraceptive use help couples and individuals realize their basic right to decide freely and responsibly if, when, and how many children to have. Family planning offers a host of additional health, social and economic benefits; it can help slow the spread of HIV, promote gender equality, reduce poverty, accelerate socioeconomic development and protect the environment. Garg & Singh, (2014) opined that access to high quality affordable sexual and reproductive health services and information including a full range of contraceptive methods, is fundamental to realizing the rights and well-being of women and girls, men and boys. The World Health Organization & Johns Hopkins Bloomberg School of Public Health (2018) validated that universal access to effective contraception ensures that all people can avoid the adverse health and socioeconomic consequences of unintended pregnancies and have a satisfying sexual life. A woman's ability to space and limit her pregnancies has a direct impact on her health and wellbeing as well as the outcome of each pregnancy (Kio et al., 2016). FP is also the potent cornerstone of a worldwide strategy to slow down population growth (Olawande & Fasasi, 2016).

Turning the tide of family planning services in Nigeria, is a popular program by The Nigerian Urban Reproductive Health Initiative (NURHI) project which commenced in 2009 to address gaps in access to family planning services in six Nigerian cities, targeting "urban poor" communities. The program has run for five years. NURHI's goal at inception was to increase the proportion of women (or their partners) among the total population of child bearing age using modern contraception methods by at least 20 percentage points in six Nigerian cities – Abuja, Ibadan, Ilorin, Kaduna, Benin City and Zaria. NURHI initiated a public-private partnership initiative called the Family Planning Providers Network, a network that brought together family planning service providers from both the clinical and non-clinical sectors (doctors, pharmacies, nurses and patent medicine vendors) regardless of whether they were public or private service providers. The initiative was the first of its kind in the country. To generate demand for family planning services, NURHI put together a campaign titled Get-It-Together. The campaign had three main approaches. NURHI used radio, television and behavioural change materials (leaflets, posters, fact sheets) to spread messages on the

importance of family planning in each of the cities. Another approach was a radio program that included a drama, tailored to each city's context and predominant language. People could call in live and ask questions or make comments during the show. NURHI advocates through Radio stations like Wazobia, FRCN, AIT, and Local broadcast stations in different states in Nigeria. **"Second Chance"** –This is a Pidgin language program which airs on Wazobia 99.5 FM in Abuja every Thursday 4:30 to 5:00pm. This program was first launch February 2, 2012.

Radio listeners can check out what everyone is saying about the programs and add their comments on their respective Facebook pages: Get It Together –Ibadan, Get It Together –Ilorin, Get It Together –Kaduna, Get It Together –FCT, as well as on the page for NURHI. The radio programmes are part of the get it together campaign of Nigeria Urban reproduction health initiative which encourages all Nigerians to KNOW the facts about family planning, TALK to their partners, GO for family planning services. **"Which Contraceptive Dey correct for you"** on Planet Radio 101 FM Uyo. A radio phone-in programmes anchored by Bishop Kelvin Phil's. **"Healthy Living: Family Planning Panacea to a healthy Woman and children "** a talk show organized by independent Television/Radio.

In 2018, the theme of the campaign was ***"It's Your Life, It's Your Future. Know Your Rights, Know Your Options"***. The campaign focused on empowering young people with information about their sexual and reproductive health and their rights to access contraception and other related services. In 2019, the theme of the campaign was ***"Myths, Misconceptions and Misinformation"***. The campaign aimed to dispel common myths and misconceptions about contraception and promote accurate information to help young people make informed choices. In 2020, the theme of the campaign was ***"Safe Sex in the Time of COVID-19"***. The campaign addressed the challenges faced by young people in accessing contraception during the pandemic and encouraged the use of telemedicine and other digital solutions to ensure access to sexual and reproductive health services.

And for year 2021, the theme of the campaign was ***"It's Your Life, It's Your Responsibility. #YourRightToChoose"***. The campaign emphasized the importance of young people taking responsibility for their sexual and reproductive health and making informed choices about contraception and other related services. National Population Commission (NPC): Organized ***"Green Dot"*** campaign: This campaign was launched by the NPC in 2011 to raise awareness about family planning and encourage the use of contraceptives. The campaign involved the distribution of green dots (symbols of fertility and life) to women who agreed to use contraceptives.

Federal Ministry of Health (FMOH): ***Task Shifting and Task Sharing Policy***: In 2014, the FMOH introduced a policy to allow midwives and nurses to provide certain types of family planning services, in addition to doctors. This policy was aimed at increasing access to family planning services, particularly in rural areas where there is a shortage of doctors.

United Nations Population Fund (UNFPA): Access to Finance Program: In partnership with the Bank of Industry, UNFPA launched the Access to Finance Program in 2018 to increase access to funding for businesses that provide family planning products and services. The

program provides loans and technical assistance to these businesses, enabling them to expand their services and reach more people. Nigerian Urban Reproductive Health Initiative (NURHI): "**Get It Together**" campaign: This campaign was launched by NURHI in 2016 to encourage young people to make informed decisions about their sexual and reproductive health. The campaign involved the use of social media, radio and television programs, and community events to raise awareness about family planning and other reproductive health issues.

Society for Family Health (SFH): "**My Question**" campaign: This campaign was launched by SFH in 2018 to encourage people to ask questions about family planning and other sexual and reproductive health issues. The campaign involved the use of radio and television programs, social media, and community events to raise awareness and encourage dialogue about these issues.

some political parties in Nigeria have carried out family planning outreach or campaign over the years. However, it is important to note that family planning is not a partisan issue and efforts to promote it have been driven by a range of stakeholders including government agencies, non-governmental organizations, and civil society groups.

All Progressives Congress (APC): In 2018, the APC-led government launched the "**Family Planning Costed Implementation Plan (FP-CIP)**" to increase access to family planning services in Nigeria. The plan was developed in collaboration with various stakeholders including the Federal Ministry of Health and the United Nations Population Fund (UNFPA). People's Democratic Party (PDP): In 2017, the PDP organized a two-day workshop on family planning in Abuja. The workshop was attended by party leaders, health experts, and other stakeholders, and aimed to raise awareness about the importance of family planning and encourage political commitment to its promotion. Social Democratic Party (SDP): In 2019, the SDP included family planning in its manifesto for the general elections. The party pledged to promote access to family planning services if elected into office.

In 2022, The Association for Advancement of Family Planning celebrated its 7th Nigeria family planning conference in Abuja with the theme: **Journey to 2030: The opportunity Ahead**. The event was opened by the federal minister of Health, Dr Osagie E. Ehanire. The Chairman Local Organising Committee Dr. Ejike Oji, said the event, which was preceded by a women pre conference programme and inter-faith forum conference, would involve technical discussion among experts. The conference also provides a platform for fostering policy debate, exchange of ideas and sharing experiences on family planning and other reproductive health issues.

Stevenson (2010) conducted research on broadcast media in family planning matters in rural Nigeria; the Ebelle scenario, this paper employed the survey questionnaire method to gather data, findings here reveal that radio and television, through certain programmes have helped in the dissemination of relevant information on family planning in rural settings just as they have purportedly done in urban cities in Nigeria. The result also suggests that the respondents

understand and are comfortable with the language used in purveying the family planning information to them.

Sanni and Ghose (2020) Also studied "Family Planning Communication Through mass media and health workers for Promoting Maternal Health Utilization in Nigeria": Using a cross-sectional survey method. Did find out that health communication programmes, through community health workers or mass media, are key strategies to promoting awareness and uptake of essential maternal health services. Findings indicate that family planning communication through mass media and health workers could potentially improve the utilization of antenatal and health facility delivery services in Nigeria.

Chukwuji, Tsafe, Sayudi, Yusuf and Zakarriya (2018), studied "Awareness, Access, and Utilisation of Family Planning Information in Zamfara State, Nigeria, “: Using a survey method The finding revealed that married women of Zamfara State are aware of various contraception methods, but factors such as culture, spouse's disagreement, financial constraint, fear of side effects, and non-availability of close health influence the use of family planning and attitudes towards the innovation.

Olawande and Fasasi (2017), in a study titled 'Family planning perception and sustainable development in Nigeria'. A Nigerian home survey of 424 married women was used to conduct the research. They also spoke with five married women in-depth about the high fertility rate and its relation to various forms of family planning. 95.5% of respondents had heard of family planning, but 53.3% declined to use any technique because they were worried about adverse effects, and 51% said that money had been a barrier to its usage. In contrast, 35% of those polled said it was against their religious beliefs.

"Family planning practices of rural community residents in Cross Rivers State" was carried out by Etokidem, Ndifon, Etowah & Asuqo in 2017. Their findings revealed that 17.2% are using family planning methods, 56% indicated that it is against their religious beliefs, 43.8% said it is against their culture, 64.9% said they would like to have more children, 35.3% said their partners are against family planning 42.9% said family planning does not work, 76% argues that it reduces sexual pleasure. In comparison, 59% said it promotes infidelity.

Olubodun, Balogun and Ogunsilu (2020), in support of these studies, stated in their paper titled 'Awareness and practice of family planning among women residing in two rural communities in Ogun state, Nigeria' that even in communities where knowledge about modern contraceptive methods of family planning is widely preached, media campaigns remain futile. A substantial percentage of people still refuse to adopt any contraceptive methods due to religious, cultural practices, and fear of side effects which the media have, over time, failed to address.

Ojih et al (2023) in their study " Cultural Practices and Adoption of National Family Planning Communication Campaigns on Select Ethnic Groups in Nigeria: A quantitative research method. showed that the majority of the people were exposed to information on condoms, implants, and Intrauterine Contraceptive Devices (IUCDs) (Cuppar T) in the course of the campaign; however, most of them were not exposed to information on Oral Pills, Vasectomies,

Tubal ligation and Injections. Findings also revealed that knowledge of modern family planning in the study areas (51.2%) was below the 85.8% national family planning knowledge threshold and far below the expected 95% target of the 2017–2020 family planning communication campaign goal. poor adoption of the campaign messages was associated to their cultural beliefs. The study concluded that family planning was often accepted among people whose ways of life have been significantly altered in favour of the idea.

Theoretical Perspective

This study is anchored on the agenda setting theory.

Agenda-setting theory is highly relevant to the study "Evaluating media influence on beliefs about family planning in Cross River State. This theory suggests that the media can shape the public's priorities and the issues they consider to be important by selecting and emphasizing certain topics over others. In the context of family planning, media outlets in Cross River State could choose to cover certain aspects of family planning (such as contraception methods, family planning education, or government policies related to family planning) more prominently than others. By doing so, they could influence which aspects of family planning people focus on and consider to be important, which in turn could influence their beliefs and attitudes towards the topic.

Therefore, agenda-setting theory can help researchers to understand how media coverage of family planning issues in Cross River State could be influencing people's beliefs about family planning and ultimately their behaviors related to family planning

The tenets of this theory include the following;

- i. the quality or frequency of reporting determines the message important.
- ii. Prominence given to the reports- through headline display, pictures and layout in newspapers, magazines, films, graphics or timing on radio and television.
- iii. The degree of conflict generated in reports
- iv. Cumulative media- specific effects over time.

In summary this theory implies that individuals respond more to information they come in contact with frequently/familiar with and that come from reliable source, higher frequency of media messages on family planning can increase audience uptake and change behavior overtime. A person's social network as well play a very important role on beliefs about family planning, individuals tend to listen more to advise from people close to them and from results seen personally more than mere exposure to media messages.

Methodology

The research design adopted for this study is the survey research method. Using a cross-sectional survey research design for this study will allow to evaluate media influence on beliefs

about family planning in Cross River Nigeria. The population of this study include individuals living in Cross River who are of reproductive age (i.e., between 15-49 years) and who have access to media, such as television, radio, social media, and newspapers. Additionally, other people that may be considered are individuals who have had previous exposure to family planning messaging through media and those who have not. According to the census, the 2006 population of cross river state is 2,888,966. Eighteen local governments make up cross river state. Age distribution during the 2006 national census was classified as 0-14 years: 1,200,620 (41.53%), 15-64 years: 1,586,010 (54.91%), 65 years and above: 102,336 (3.56%). This data indicates that the majority of the population in Cross River State in 2006 was within the working age range (15-64 years), while a significant proportion of the population was also under 15 years old. The population aged 65 years and above represented a much smaller proportion of the total population. To arrive at the estimated population of Cross River state for 2023, the researcher projected for 17years period that have passed since the last census using the annual growth rate of 2.6%. this is achieved by multiplying the previous population by the annual growth rate divided by 100. The result of the sum is then added to the previous population for 2023. The sample size of this study was calculated using the Australian sample size calculator, developed by the national statistical service of Australia. The sample size for this research is 385. The result was gotten using a population of 15,657,887, confidence level: 95%, proportion: confidence interval: 0.05000, standard error: 0.02550. Therefore, the required sample size for this study is 385. The multi- stage sampling technique comprising the simple random sampling method, the proportionate sampling technique. the purposive sampling method, and the convenient sampling technique was used. The instrument employed here is the questionnaire. It is divided into two sections; section A and section B. While Section A is structured with appropriate questions to ascertain the respondents' demographic data, section B is structured with the psychographic questions designed to elicit answers to the research questions. A four-point Likert Scale of strongly agree, agree, disagree and strongly disagree were also adopted for ease of statistical analysis. The Method used was the self-Administration, it was done with the help of two trained research assistant to administer the questionnaire in the research location. Questionnaires were given to respondents to fill and collected upon completion. The researcher employed the qualitative and quantitative analysis to analyze the data gathered from copies of the questionnaire. As quantitative analysis, tables, charts and percentages were used.

Findings

The results obtained sequel to analyses of collected data are hereunder presented, according to research questions and the tested null hypotheses. The preliminary information of respondents who provided the data for this study is presented in Fig.1

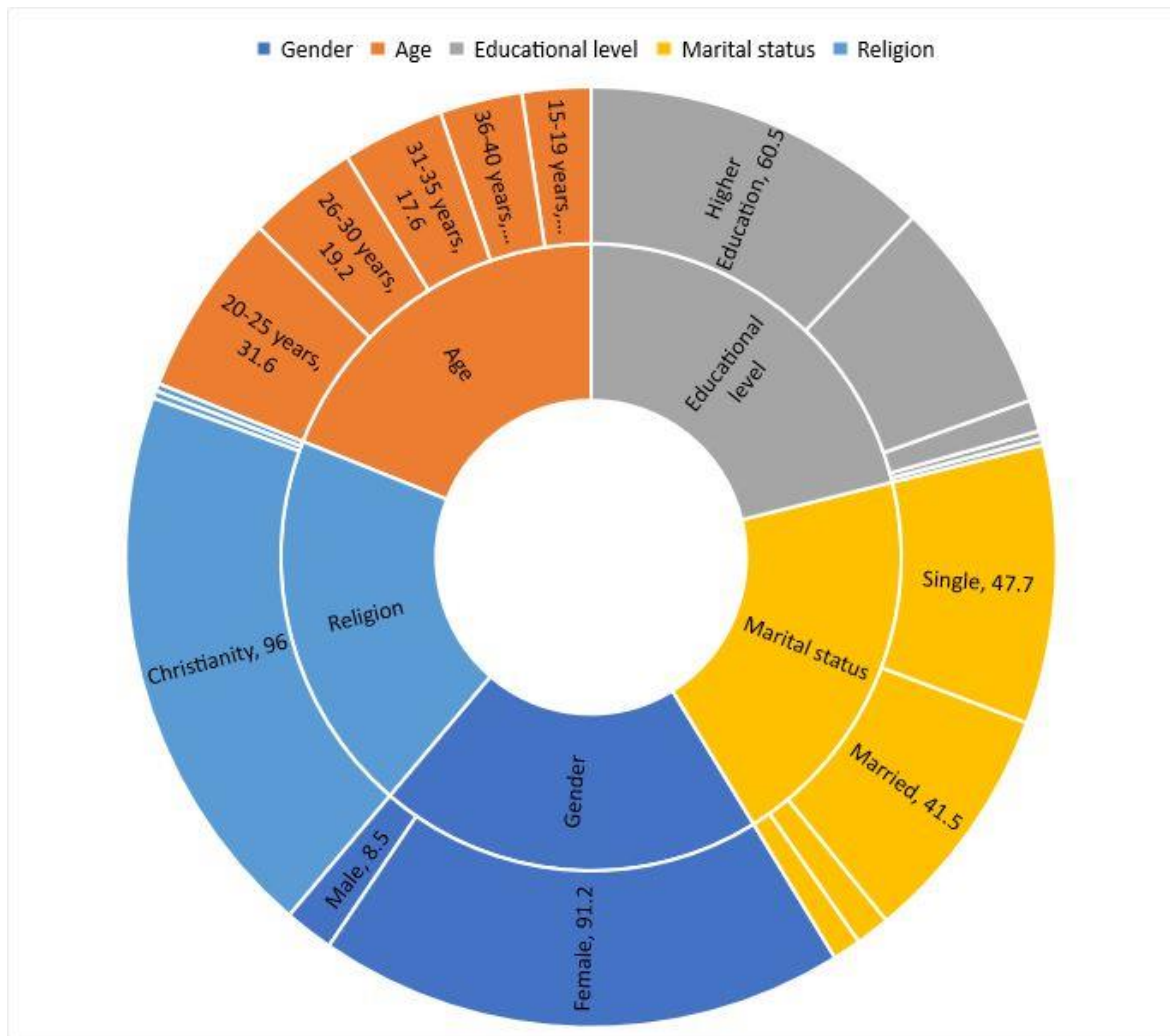


Fig.1: Sunburst chart showing percentage of respondents by gender, age, educational level; parent’s marital status, economic status, and religion

From Figure 1, more females (91.2%) responded to the questionnaire than males. Most respondents (31.6 %) were aged 20 to 25 years, with the modal educational level of respondents being higher education (60.5 %). Most of the respondents are single (47.7 %) and are Christians (96 %).

Furthermore, majority of the respondents had access to electricity (74.7 %), a mobile phone (69.6 %) and internet access (64.8 %) (Figure. 2).

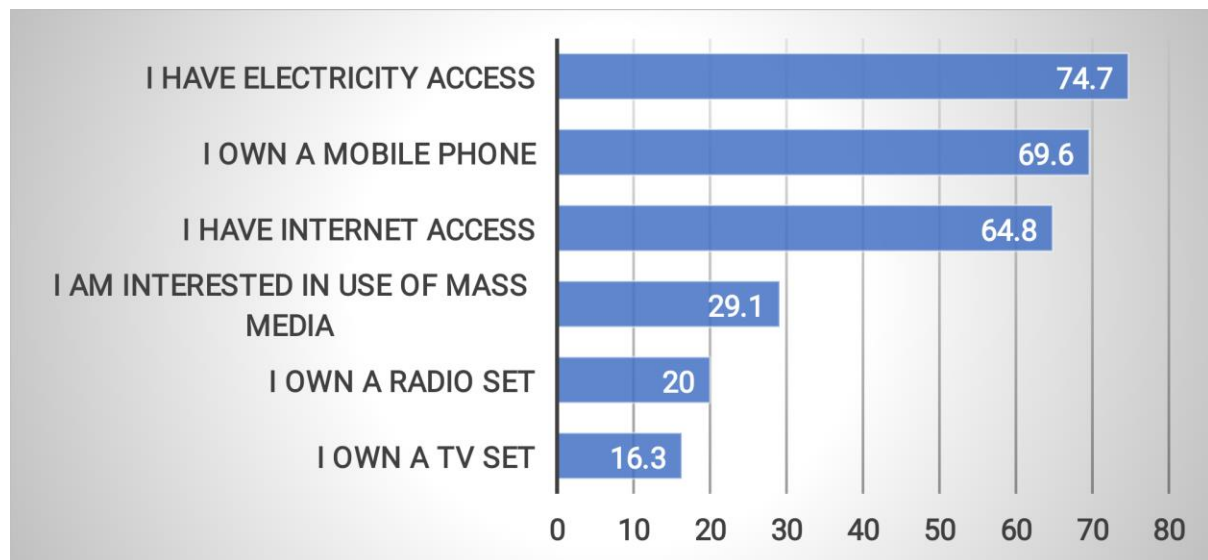


Figure 2: Percentage responses on media resources' access and interest of respondents

Research question 1

What is the exposure level of respondents to the Mass Media?

In answer to research question one above, responses to the relevant section of the instrument (Items B1 – B4) were collated and analysed. The obtained results are presented in Figure. 3.

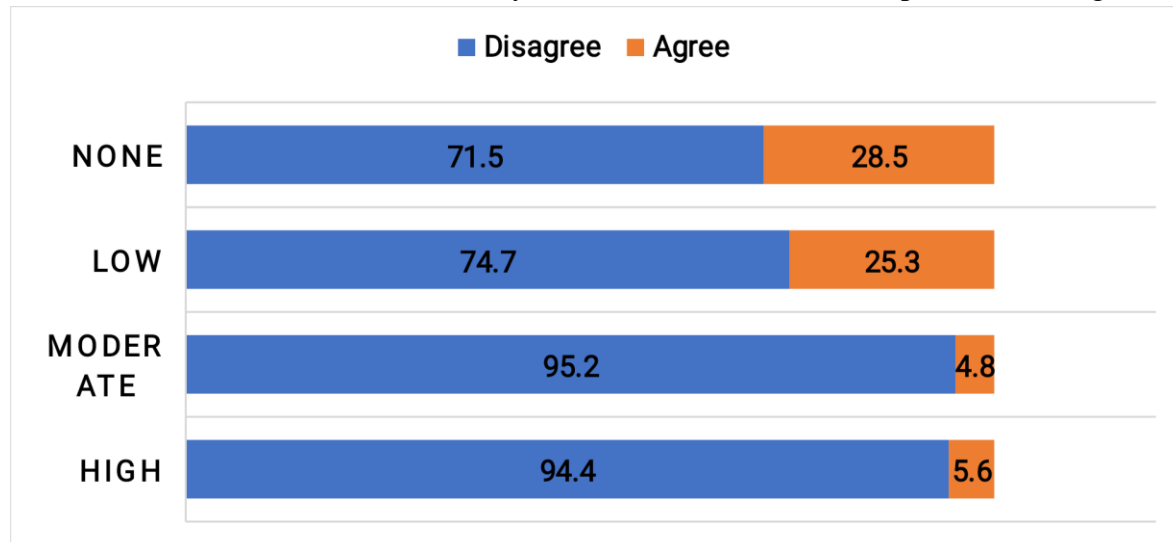


Figure 2: Percentage responses on respondents' level of exposure to mass media

From the total of 375 respondents, only 10 % agree to moderate to high exposure to mass media. Most the respondents are either unexposed or poorly exposed to mass media. (Figure 3).

Research question 2

What popular media messages on family planning are respondents exposed to?

In answer to research question two above, responses to the relevant section of the instrument (Items B5 to B8) were collated and analysed. The obtained results are presented in Table 5.

Table 5: Family planning media messages commonly encountered by respondents

S/N	Items	% Disagree	% Agree	Mean	Remark
5	Family Planning Matters	92.5	7.5	1.57	Disagree
6	Plan Your life	95.5	4.5	1.71	Disagree
7	Planning for Tomorrow	85.9	14.1	1.85	Disagree
8	Our Family, Our future	89.6	10.4	1.92	Disagree
Cluster mean				1.74	Disagree

N = 375

Most respondents disagreed with being exposed to popular family planning media messages such as ‘family planning matters’, ‘plan your life’, ‘planning for tomorrow’, and ‘our family, our future’. Thus, there is inadequate exposure to family planning media message by respondents (Table 1).

Research question 3

Which medium mostly exposes respondents to family planning messages?

In answer to research question two above, responses to the relevant section of the instrument (Items B9 to B16) were collated and analysed. The obtained results are presented in Table 6.

Table 6: Media access of family planning messages by respondents

S/N	Items	% Disagree	% Agree	Mean	Remark
9	Social Media	85.1	14.9	1.67	Disagree
10	Radio	94.4	5.6	1.72	Disagree
11	Posters	84	16	2	Disagree
12	Television	81.9	18.1	1.89	Disagree
13	Newspapers	65.6	34.4	2.47	Disagree
14	Hand bills	19.7	48.5	2.84	Agree
15	Billboards	30.4	69.6	2.87	Agree
16	Flier	39.5	60.5	2.8	Agree
Cluster mean				2.28	

N = 375

There is a general agreement among respondents on three media from where they access to family planning messages (Table 2). Results show that respondents access family planning messages through handbills, billboards, and fliers (Table 2).

Research question 4

What are respondents’ beliefs about family planning?

In answer to research question two above, responses to the relevant section of the instrument (Items B17 to B22) were collated and analysed. The obtained results are presented in Table 7.

Table 7: Respondents' beliefs about family planning

S/N	Items	% Disagree	% Agree	Mean	Remark
17	Family Planning is meant for women ONLY	15.2	84.8*	3.24	Agree
18	Family Planning causes several Health complications	49.7	50.3*	2.58	Agree
19	Family Planning helps in child spacing and control	95.4	4.6	1.63	Agree
20	Family Planning improves the family's wellbeing/ Nutrition because I have less family to Carter for	93.8	6.2	1.55	Disagree
21	Family Planning is not safe at all	21	79*	3.01	Agree
22	I don't have any belief about family planning	49.6	50.4	2.59	Agree
Cluster mean				2.43	

N = 375 | * Negatively worded items and reverse coded during advanced analyses

From Table 3, respondents agreed to all listed items except one. The cluster mean also indicates a low agreement. Three items here marked with an asterisk (*) were reverse coded during the advanced analyses reported subsequently to avoid the introduction of errors in testing the hypotheses of this study. Descriptively, while nearly half of the respondents do not have belief about family planning, most believe that family planning is meant for women only, causes health complications, helps in child spacing and control, and is unsafe.

Research question 5

How has the media influenced respondents' beliefs about family planning?

In answer to research question two above, responses to the relevant section of the instrument (Items B23 to B30) were collated and analysed. The obtained results are presented in Table 8.

Table 8: Influence of media on respondents' beliefs about family planning

S/N	Items	% Disagree	% Agree	Mean	Remark
23	I got to know about the usefulness of short-acting family planning methods (such as Oral contraceptives pills, Injectable, Condoms and Exclusive breast feeding method (LAM) from the media.	61.3	38.7	2.28	Disagree
24	I understand that family planning is meant for both male and female	67.3	32.7	2.17	Disagree
25	I understand that Family planning is safe for pregnant/nursing mothers.	61.6	38.4	2.29	Disagree
26	I got to know about the permanent family planning methods (such as Tubal ligation and Vasectomy)	56.2	43.8	2.39	Disagree
27	I got educated on long-acting family planning methods (such as using Implants and Intrauterine Contraceptive Devices (IUDs or IUCDs)	54.1	45.9	2.41	Disagree
28	I got credible family planning messages; therefore I use and will continue to engage in family planning	62.3	37.7	2.31	Disagree
29	I was encouraged by the media to engage in family planning	65.5	34.5	2.25	Disagree
30	I was not influenced in any way by media messages on family planning	36.3	63.7	2.74	Agree
Cluster mean				2.355	

N = 375 | * Negatively worded items and reverse coded during data analyses

From Table 7, respondents disagreed with all but one of the listed items. Again, the cluster mean confirms the general low agreement to their ratings. Evidently, media messages did not influence respondents on family planning.

Hypothesis one (H0₁)

Media type does not significantly influence respondents' mean belief scores on family planning.

To test the null hypothesis (H0₁) above, the mean responses of items B17 - B22 of the instrument were collated and used for analysis, to obtain results of the significance or otherwise, of mean differences, based on respondent's medium of exposure to family planning media messages. Thus, the results of all listed media in B9 - B12 is used to test the mean belief scores and are presented in Table 5.

Table 9: Results of mean differences analyses (based on media from which family planning messages are derived) on respondents' mean belief scores on family planning

Items	Response	N	Mean Belief	p-value	Remark
Social media	Disagree	318	2.1073	.000	Very highly significant
	Agree	57	2.4259		
Radio	Disagree	354	2.1414	.000	Very highly significant
	Agree	21	2.3974		
Posters	Disagree	315	2.1301	.000	Very highly significant
	Agree	60	2.2903		
Television	Disagree	307	2.1045	.000	Very highly significant
	Agree	68	2.3871		
Newspapers	Disagree	246	2.082	.000	Very highly significant
	Agree	129	2.2963		
Hand bills	Disagree	193	2.0816	.000	Very highly significant
	Agree	182	2.2344		
Billboards	Disagree	197	2.0517	.000	Very highly significant
	Agree	178	2.2708		
Flier	Disagree	220	2.0985	.000	Very highly significant
	Agree	155	2.237		

Results in Table 5 above show that respondents who agreed to the use of social media, radio, posters, television, newspapers, hand bills, billboards, and fliers indicated a higher belief score in family planning than those who disagreed to the use of all the listed media. With p-values far less than 0.05 indicating very high significant difference in mean belief scores of both groups of respondents, the null hypotheses (H_0) which states that "Media type does not significantly influence respondents' mean belief scores on family planning" is hereby rejected.

Table 10: Results of family planning mean belief score differences analyses based on respondents' characteristics

Variable	Groups	Mean scores	Levene statistics (Sig.)	Sig.	Test	Remarks
Gender	Male	2.22	.231	.154	<i>t</i> test	Not significant
	Female	2.15				
Age	15-19 years	2.1270	.650	.320	Oneway ANOVA	Not significant
	20-25 years	2.1148				
	26-30 years	2.1635				
	31-35 years	2.1806				
	36-40 years	2.2127				
	41+ years	2.1977				
Educational level	None	2.1914	.251	.000	Oneway ANOVA	Primary > Secondary > None > Higher education
	Primary	2.4499				
	Secondary	2.2737				
	Higher Education	2.0756				
Marital status	Single	2.1403	.153	.005	Oneway ANOVA	Divorced > Separated > Married > Single
	Married	2.1318				
	Separated	2.3059				
	Divorced	2.3092				
Religion	Christianity	2.1443	.568	.002	One way ANOVA	ATR > Islam > Christianity
	Islam	2.4888				
	African Traditional Religion	2.5378				
	Religion	2.5378				

ANOVA = Analysis of variance | N = 375

Mean responses show that mean family planning belief scores are influenced by respondents' characteristics. Educational level, marital status and religion significantly influenced family planning belief mean scores. Further analyses of ANOVA statistics (i.e., Posthoc tests) for these significant variables indicate that respondents who were primary school leavers; those who were divorced; and those who practice the African Traditional Religion had the highest family planning mean belief scores (Table 6). Therefore, we reject the null hypothesis, which states that "personal characteristics (gender, age, educational level, marital status and religion) do not significantly influence respondents' family planning mean belief scores".

This study titled *Evaluating Media Influence on Beliefs about Family Planning in Cross River* had 5 main objectives which were: To find out audience level of Exposure to the mass media, ascertain media messages on family planning audience are exposed to, ascertain the media through which audience are mostly exposed to family planning messages, find out audience beliefs about family planning, ascertain how the media influence audience beliefs about family planning in cross river state.

Regarding demographics, findings of this study showed that majority of the respondents were females (representing 91.2%). Also results show that most of the respondents are between

age 20-25years (representing 31.6%). Most of the respondents are single (47.7%) and are Christians (96%).

Research question **One: What is the exposure level of respondents to the mass media?** Findings on research question one show that majority of the respondents in this study are either unexposed or poorly exposed to mass media. From the total of 375 respondents, only 10% agree to moderate to high exposure to the mass media.

Research question 2: **What popular media messages on family planning are respondents exposed to?** Findings on research question two shows that Most respondents disagreed with being exposed to popular family planning media messages such as 'family planning matters', 'plan your life', 'planning for tomorrow', and 'our family, our future'. Thus, there is inadequate exposure to family planning media message by respondents.

Answering research question 3: **What medium mostly exposes respondent to Family Planning messages?** findings show that There is a general agreement among respondents on three media from where they have access to family planning messages.(48.5% Respondents) agree to accessing family planning messages through Handbills. While (69.6% respondents) agree to accessing family planning message through billboards and (39.5% respondents) through fliers.

Research question four: **What are Respondents Beliefs about Family Planning?** Findings on research question four reveal that A poor belief about family planning exists among respondents. Those who had access to mass media had higher beliefs and these beliefs were further influenced by educational level, marital status, and religion. This findings agrees with the findings of Chukwuji, Tsafe, Sayudi, Yusuf and Zakarriya (2018), study of "*Awareness, Access, and Utilisation of Family Planning Information in Zamfara State, Nigeria,*" : Using a survey method revealed that married women of Zamfara State are aware of various contraception methods, but factors such as culture, spouse's disagreement, financial constraint, fear of side effects, and non-availability of close health influence the use of family planning and attitudes towards the innovation.

Although (79%) agree to family planning being unsafe, (50.3%) respondents agree that family Planning has several health implications while (15.2 %) respondent disagree that family planning is meant for women only.

Research question five: **How has the media influence respondent's beliefs about family planning?** findings show that Mass media messages did not influence respondents on family planning. Evidently, media messages did not influence respondents on family planning. Where (63.7% respondents) agree to not being influenced by media messages on family planning. This finding agree with the findings of Etokidem, Ndifon, Etowah & Asuqo (2017) study of "*Family planning practices of rural community residents in Cross Rivers State*" Their findings revealed that 17.2% are using family planning methods, 56% indicated that it is against their religious beliefs, 43.8% said it is against their culture, 64.9% said they would like to have more children, 35.3% said their partners are against family planning 42.9% said family planning does not work, 76% argues that it reduces sexual pleasure. In comparison, 59% said it promotes infidelity. Although (45.9%) respondents agree to knowing about the permanent family planning methods (such as Tubal ligation and vasectomy) from media messages, 56.2% respondents disagree. Likewise, (37.7%) respondents agree to being educated on long-acting

family planning methods (such as implants and intrauterine contraceptive Device (IUDs or IUCDs) from media messages, (54.1%) respondents disagree. This finding is similar to Ojih et al (2023) study on " *Cultural Practices and Adoption of National Family Planning Communication Campaigns on Select Ethnic Groups in Nigeria*: A quantitative research method showed that the majority of the people were exposed to information on condoms, implants, and Intrauterine Contraceptive Devices (IUCDs) (Cuppar T) in the course of the campaign; however, most of them were not exposed to information on Oral Pills, Vasectomies, Tubal ligation and Injections.

Recommendations

In line with the findings of this study, the researcher makes the following recommendations;

1. It is therefore recommended that the government, non-governmental agencies, medical institutions and other agencies should take advantage of the platform which the media provides to disseminate important information that will make the audience aware and enhance their knowledge about family planning in order to encourage them to practice it.
2. Inadequate information is one of the factors influencing the utilization of family planning methods. The study therefore recommended that family planning providers should provide accurate, unbiased and essential information about the various contraceptive methods. This would remove the problem of both real and imagined side effects of helping women to make informed choices.
3. There is need for the establishment of a Guidance and Counselling Unit (GCU) in this communities, this should be given prominence in all the available health centres or clinics located in the rural areas of the State. Aside this, the family planning unit of the health centres or clinics should have a qualified professional that will be able to handle the issue of health guidance and health counselling.
4. Women's educational level is still generally low in the rural areas and knowledge was found to be positively correlated with contraceptive utilization. This study therefore recommended that policies that would encourage and enhance girl-child education should be enforced in these communities and other rural areas of Nigeria. Among other factors that influence contraceptive use such as age, number of children born, sources of information, education is the only variable that could easily be manipulated by policy makers to achieve a desired increase in contraceptive use.
5. Repackaging should be done in such a way that every resident of these communities can be able to understand the information. Different information packaging techniques can be applied such as creating brochures with pictures, health campaigns, posters, preparing short films or videos: this will require the government to take into consideration, areas without electricity and community infrastructure, to maintain and pay more attention to state Broadcast station to enable broadcaster educate and convey contraceptive information to the local residents. This will enable women of all calibers to be able to understand information contents provided.

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