An assessment of the effectiveness of radio theatre in promoting good healthy living among rural communities in Osun State, Nigeria

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ABSTRACT

The main thrust of this study was to investigate the effectiveness of community radio theatre programme in promoting good healthy behavior among the rural communities in Osun State, Nigeria. The ultimate aim was to ascertain the extent to which it has helped to increase the knowledge of the rural people about the dangers of malnutrition; dirty environment and the need to stem down the spread of sexually transmitted infections (STI) and HIV/AIDS.

The study adopted the pretest, posttest control group design. The sample is made up of 240 house hold in the rural communities in Osun State, selected through stratified sampling technique based on gender, ethnicity and occupation. Three instruments used include: audiotapes containing drama series on (1) STI, HIV/AIDS (ii) environmental heath and, (iii) family planning. The second instrument was a multiple-choice question on the series of radio drama called “ABULOPREACTE”. The last one was a rating on a 5-point Likert scale investigating the way the people perceived the radio theatre programme.

The results showed that radio theatre was an effective method of promoting healthy living. Seventy eight percent of the house hold in the rural communities opined that they were positively influenced and that the medium had influenced their deposition to living healthy life when compared with other media. 89% also said that, the radio theatre used had increased their knowledge about HIV/AIDS and the various ways it could be stemmed down.

Keywords: Community Radio Theatre, Healthy Living, STI, HIV/AIDS, Abule Olokemerin Programme Achievement Test (ABULOPROACTE).

INTRODUCTION

In Nigeria, the health services as currently organized show some defects. These defects are widely characterized by inadequate coverage. According to the National Health Policy Section 2 and subsection 6, only 35% of the population has access to modern health services. Consequently, the rural communities are not well provided with basic health facilities. Other problems facing the health sector included the fact that the orientation of the services is not comprehensively catered for with a disproportionate high investment in curative services to the detriment of preventive services. The management of the services shows major weaknesses resulting in wastage and inefficiency of resources as shown in the failure to meet the target and goals set by World Health Organization (WHO). The communities are not involved in the decision making process. They are not well informed about matters affecting their health. The
chairman of the fact finding panel on vision 2010 also identifies the problem of high infant
mortality rate (IMR), nutritional problems and increase in the reported cases of HIV/AIDS. 
Currently, there are conflicting records of cases of HIV/AIDS in the country. The National Action 
Committee on AIDS (NACA) has put it at 5 million. In Abuja territory for example, the official 
statistics released by Federal Capital Territory (FCT) shows that for every resident that showed 
up for blood screening, 35% have their blood-tested positive. From the above, there is the 
evidence that Nigerians need to drastically stem down the spread of HIV/AIDS.

Other problem area is high death and morbidity rate. Obioha (1997) during the nation-wide fact 
finding exercise on vision 2010, believes that the high morbidity and death rate is preventable. 
According to this author, prenatal infections and parasitic illnesses are responsible for about 
70% of infant death. It is also glaring that Nigeria ranked high among African countries with 
health and nutritional problems. According to the official statistics released by UNICEF (1991) 
only 58% of the total population, have access to good/clean water. In year 2008, this situation is 
yet to improve.

The implication of the above is that special attention should be given to the health, environment 
and nutrition of the people. Obioha (1997) believes that the only way we can achieve all these is 
through better enlightenment programme and health education. According to the author, public 
enlightenment will help to persuade the people to accept measures that will improve their health 
and change their attitude. Over the years the rural communities have been neglected, while 
concentrations have been in the major cities.

STATEMENT OF THE PROBLEM

In Nigeria, there is a greater need for a better strategy for mobilizing the rural communities to 
willingly change their perception, attitude, beliefs and values in order to accept new ideas that 
will help them to develop good health seeking behaviour. The need for a change of attitude and 
behaviour arises because of the need to stem down the spread of HIV/AIDS and other 
communicable diseases.

Presently, there are many programmes designed to educate the public about the need to live a 
healthy life, stem down the spread of STI and HIV/AIDS. One of such programme is the popular 
radio theatre programme called “ABULE OLOKE MERIN”. It is designed in Yoruba and Pidgin 
English. The purpose of this study is therefore to investigate the extent to which the programme 
has effectively helped to promote good healthy seeking behaviour among the rural communities 
in Osun State.

THE ROLE OF THEATRE ART IN LEARNING

The use of theatre has been introduced into education since the time of John Dewey (1859- 
1952). According to Aristotle (384-322BC) doctrines of catharsis (poetic) reviewed by 
Halliburton (1983), a good play purges the spectators of the emotions of pity and fear. He also 
believes that drama may be a guide to good conduct. Not only this, theatre also promotes moral 
values and culture. It also offers the widest scope of learning experience by allowing active and 
participatory learning. It can also contribute to the fulfillment of educational goals.

Perhaps it was the realization of the above and the need to meet the goals of WHO and its 
declaration that led to employing radio theatre to mobilize the local communities in the
Southwestern part of Nigeria to living a good healthy life. The WHO declaration says: “the health care system must be based on practical, scientifically sound, socially acceptable method and technology that is universally acceptable to the individual and families in the community. The community must fully participate in the programme at a cost that the community and the country can afford at every stage of development in the spirit of self-determination.” (National Health Policy, 1988 p. 8). This perhaps formed the background for the use of radio theatre in teaching health concepts.

RADIO DRAMA IN PROMOTING HEALTHY LIVING

Radio drama or theatre has been successfully used in different countries. According to related literature that was reviewed, Taylor (2004) reported that the Eskom and ABC Ulwazi developed six series of radio drama programmes in Zulu, Sesotho, Sepedi, Xhosa and Afrikaans. The programme was to support safe and sensible electricity consumption. Also according to Williams (2003), the BBC World Service Trust began a 15 minutes programme twice weekly to about 10-16 million Burma people. It was to raise their awareness about poverty-related health issues including HIV/AIDS and to provide information and practical solution to everyday health care problems.

The radio drama was used to challenge stigmatization and to urge Burma people to accept and help people living with HIV/AIDS. It is not only in these two places that radio drama has been successfully used to promote positive changes in the health behavior of the people. In Afghanistan, Chrommie (2004) also confirmed the successful use of radio to convey health and hygiene messages related to preventing diarrhea diseases in children. The goal of the programme was to reduce infant and child mortality in Afghanistan through prevention and treatment of diarrhea.

In Vietnam, there was a research project carried out by the Department of Film and Media Studies, University of Copenhagen. The research study was focused on the possibility and the effectiveness of radio drama in Vietnam where there was a strong media control. Communication Initiative (2004) identified series of Institutional Review on educational drama for development around the world. One thing that was common to all the projects is that the use of radio drama has contributed greatly to improve and change positively the health behavior of the people. It was also observed radio programmes were motivating and elicited behavioural change.

According to Hess, Gill-Dailey and Heck (2004) a project titled communication for healthy living in Egypt was carried out to provide health information to families to help them reduce family size, improve maternal health and promote breast-feeding. It was also to improve nutrition and hygiene and, to prevent blood-borne diseases like HIV/AIDS and Hepatitis C. The communication strategy used in Egypt was built upon three guided principles: Households as producers of health communication can empower and inform individual; families and communities to protect their own health by carrying out simple behaviour and seeking appropriate services. Integration of health content and message from all the major health areas are delivered under the umbrella of “healthy family”.

The life stage approach here the family is segmented according to the age-or stage-appropriate needs of each member. This approach is meant to address the needs of each family member while at the same time promoting behavioural changes relevant to the population as a whole (Hess, Gill-Dailey & Heck, 2004:2). Unlike other countries, Egypt employed multi-media
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approach i.e. television, radio, sports, entertainment education, talk show formats, press inserts, media contests and media coverage of special events. One of the findings that is relevant to this study is that 90% of the population sampled benefited from the programme and said that it was successful. In Nigeria, USAID has been one of the largest health donors in the provision of quality health and a major contributor to HIV/AIDS prevention and control, reproductive health and child survival programmes. In this country a radio theatre programme has been launched in the South West title “Abule Olokemerin". It was sponsored by USAID, Society for Family Health and John Hopkins University.

ABULE OLOKE MERIN

This is an interactive radio theatre health programme, aired on the radio all over the Southwestern part of Nigeria. It consists of series of play on family planning, environment, STI, nutrition and HIV/AIDS. It is a programme designed in Yoruba and Pidgin English. It is a health programme on family health, good healthy living and teaching on HIV/AIDS and the various ways to prevent it. The programme was designed and produced by the Society for Family Health in Nigeria. It is supported and funded by the United State Agency for International Development (USAID) and John Hopkins University.

Some objectives of the programme are to:

Serve as a means of imparting knowledge to Nigerians at the grass-root about family planning, health and HIV/AIDS. Influence and change the unhealthy belief and behaviour of the people so that they can develop desirable health attitudes and habits. It is also designed to create awareness of the rural communities on the prevailing danger about HIV/AIDS, the need to prevent its spread and create the awareness of a good and clean environment. From the above, it becomes clear what is expected from the radio theatre programme. Some of the expectations are to: create awareness on the need for healthy and clean surroundings, highlights the prevailing evil in premarital sex, drug abuse and promiscuity, prevention and control of endemic and epidemic diseases, evaluation concerning prevailing health problems and the details for preventing and control of diseases.

Abule Oloke Merin is a thirty minutes interactive drama programme. Although it is an innovation, some schools of thought have criticized its usage. Stacy, Lewis, Catherine &Labore (2003) belief that drama is not a good method of acquiring knowledge because it can make the learner passive instead of being active learner. Other schools of thought are of the opinion that it is an active learning method that allows participation. Not only this, it allows higher interactions. The researcher shares similar opinion that the method is participatory, active, highly interactive and motivating. It is upon this premise that the present study was predicated. Although there are different opinions about the effectiveness of radio drama in teaching, there is the need to investigate its effectiveness among rural communities in Nigeria and how people perceive it. In order to do this, the following objectives are stated.
RESEARCH OBJECTIVES

The following objectives are stated for this study;

(a) investigate the perception of the communities and their ratings of the programme.

(b) find out the extent to which the programme has helped to change the attitude and behavior of the people towards good and healthy living, and

(c) examine whether or not the use of radio theatre is an effective method of promoting healthy living among the rural household in Osun State.

METHODOLOGY

The research adopted the pre test, post test control group research design.

SAMPLE

The sample for the study consist 240 household in rural communities in Osun State of Nigeria. They were selected from the thirty local government area of the state through stratified sampling techniques based on gender, ethnicity and occupation.

INSTRUMENTATION

Three instruments used to collect data for study are: series of audio cassettes containing episodes on nutrition, family planning, STI and HIV/AIDS. An evaluation questionnaire termed Abule Oloke Merin’s programmes Achievement Test (ABULOPROACTE) was also used. The questionnaire contained information on the perception and ratings of the people about the programme. It was designed on a five point rating scale – Strong Agree (SA), Agree (A), Neutral (N), Disagree (D) and Strongly Disagree (SD). The third instrument is made up of multiple-choice items on health concepts. The twenty-five items were drawn from the content of the radio theater programme.

VALIDATION/RELIABILITY

Four experts using face and content validity validated the instruments used. They were drawn from Department of Psychology, Educational Foundations and Counselling Department, (EFC), Educational Technology Department, (DET) and one from the Department of Community Health, Obafemi Awolowo University, Ile-Ife. The achievement test was subjected to reliability test using Kuder Richardson formula 21. A reliability coefficient of 0.86 was obtained.

ETHICAL CONSIDERATIONS

All the participants were asked to give consent to participate in the study voluntarily. The questionnaire had no identity to protect their confidentiality.
RESEARCH HYPOTHESIS

The following hypotheses were generated for this study.

(i) There would be no significant difference in the means scores of the participants exposed to the radio theatre programme and those not exposed to the programme.

(ii) There would be no significant changes in the perception, disposition and behaviour of the participants that were exposed to series of the theatre programme and those not exposed to it.

DATA GATHERING PROCEDURE

The samples were randomly assigned to two groups’ i.e. the experimental and the control group. The experimental groups were made up of participants that have been listening to the programme since its inception, while those that have not listened to the programme formed the control group. This was obtained through survey and use of questionnaire. The questionnaire used here contained information on their biography, general information and knowledge about health and exposure to the radio theatre series. This formed the pre-test for the study; the samples were later divided into control and experimental groups. Another questionnaire tagged “Abuloproacte” was administered on the two groups.

DATA ANALYSIS

The data were analyzed using simple percentages, mean, standard deviation and z-score.

RESULTS

See Table 1 for the frequency distribution of participants rating.

DISCUSSION

From the data obtained in table 1, 78% of the participants were of the opinion that after listening to the series of theatre, they were more favourably disposed and more interested in health matters. In addition to the above, 75% of the respondents were of the opinion that they learn a lot more from the series of the radio theatre programme than from any other sources (see table 1 item 8). The result of the data analyzed, further showed that 89% of the respondents were of the opinion that the radio theatre programme provided sufficient information and materials on HIV/AIDS and healthy living while only 57% were of the opinion that it influenced them positively.
Table 1: Frequency distribution of participants rating

<table>
<thead>
<tr>
<th>S/No</th>
<th>Description</th>
<th>SA</th>
<th>A</th>
<th>N</th>
<th>D</th>
<th>SD</th>
<th>DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Abule Oloke Merin provides sufficient information and materials</td>
<td>100</td>
<td>109</td>
<td>3</td>
<td>18</td>
<td>10</td>
<td>89%</td>
</tr>
<tr>
<td>2</td>
<td>It is highly motivating, interactive and participatory</td>
<td>97</td>
<td>111</td>
<td>10</td>
<td>12</td>
<td>10</td>
<td>87%</td>
</tr>
<tr>
<td>3</td>
<td>A lot of guidance were provided on how to live a healthy life</td>
<td>96</td>
<td>98</td>
<td>16</td>
<td>12</td>
<td>8</td>
<td>81%</td>
</tr>
<tr>
<td>4</td>
<td>There was enough repetition of important concepts and ideas</td>
<td>69</td>
<td>33</td>
<td>47</td>
<td>13</td>
<td>48</td>
<td>43%</td>
</tr>
<tr>
<td>5</td>
<td>The examples used in the drama to illustrate health concepts are local, familiar and easy to understand.</td>
<td>95</td>
<td>85</td>
<td>14</td>
<td>17</td>
<td>39</td>
<td>75%</td>
</tr>
<tr>
<td>6</td>
<td>The language and vocabulary used in the programme are excellent and it encourages more comprehension</td>
<td>101</td>
<td>87</td>
<td>3</td>
<td>19</td>
<td>30</td>
<td>78%</td>
</tr>
<tr>
<td>7</td>
<td>After listening to the series of drama, I am more favourably disposed and interested than ever before.</td>
<td>101</td>
<td>87</td>
<td>3</td>
<td>19</td>
<td>30</td>
<td>78%</td>
</tr>
<tr>
<td>8</td>
<td>I believe I learn a lot more from the series than from other sources.</td>
<td>97</td>
<td>83</td>
<td>7</td>
<td>23</td>
<td>30</td>
<td>75%</td>
</tr>
<tr>
<td>9</td>
<td>The transmission period is very convenient</td>
<td>98</td>
<td>96</td>
<td>7</td>
<td>18</td>
<td>21</td>
<td>81%</td>
</tr>
<tr>
<td>10</td>
<td>The rate of presentation is too fast</td>
<td>3</td>
<td>8</td>
<td>33</td>
<td>45</td>
<td>101</td>
<td>3%</td>
</tr>
<tr>
<td>11</td>
<td>It should be restricted to radio broadcast only instead of being televised</td>
<td>98</td>
<td>81</td>
<td>49</td>
<td>5</td>
<td>7</td>
<td>74%</td>
</tr>
<tr>
<td>12</td>
<td>It is an effective method of disseminating health information.</td>
<td>87</td>
<td>97</td>
<td>20</td>
<td>20</td>
<td>16</td>
<td>76%</td>
</tr>
<tr>
<td>13</td>
<td>It is user friendly and has influenced me positively.</td>
<td>76</td>
<td>61</td>
<td>7</td>
<td>12</td>
<td>54</td>
<td>57%</td>
</tr>
<tr>
<td>14</td>
<td>It has contributed to my knowledge about the dangers of HIV/AIDS / ways to stem it down.</td>
<td>85</td>
<td>98</td>
<td>13</td>
<td>24</td>
<td>20</td>
<td>89%</td>
</tr>
<tr>
<td>15</td>
<td>I recommend radio theater as an effective method for usage in health campaign and teaching.</td>
<td>96</td>
<td>88</td>
<td>23</td>
<td>17</td>
<td>16</td>
<td>77%</td>
</tr>
</tbody>
</table>

Key: SA = Strongly Agree, A = Agree, N = Neutral, D = Disagree, SD = Strongly Disagree, DA = Degree of Agreement

On whether radio theatre was an effective method of disseminating health information, 76% of the respondents agreed that the method was effective. In support of the above, 77% also recommended radio theatre as an effective method for health campaign and promotion. Some of the reasons adduced for this included the fact that; it was user friendly and motivating, it
encouraged active participation and that it was highly interactive. Sixty six percent of the participants also commented on the coverage, language and vocabulary that they were adequate and easy. Also it was reinforced by the use of local examples within the local environment of the participants. It was not a surprise to see this kind of reactions. This was because the package used was motivating, easy to comprehend and highly interactive. Learning was also real, creative and meaningful.


Since interest is a deciding factor in learning, the method and the package used might have heightened the interest of the participants, thereby producing a more lasting impact on them. This result implied that radio theatre, if effectively used in teaching, particularly in health concept, could help improve significantly the attitude and behavior of the people towards good healthy living.

In order to test hypothesis one, the data collected was subjected to a Z-statistics. The result is as shown in Table 2.

Table 2: Mean, standard deviation and calculated Z value of participants exposed to Abule Oloko Meje and those not exposed

<table>
<thead>
<tr>
<th>Group</th>
<th>X</th>
<th>S.D.</th>
<th>N</th>
<th>SE</th>
<th>Z_{cal}</th>
<th>Z_{tab}</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental</td>
<td>69.9</td>
<td>11.49</td>
<td>120</td>
<td>9.76</td>
<td>1.96</td>
<td>1.96</td>
</tr>
<tr>
<td>Control</td>
<td>55.3</td>
<td>11.76</td>
<td>120</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The result as obtained in Table 2, showed that there was a significant difference in the achievement means scores of the participants that were exposed to Radio Drama Series and those not exposed to it. Those that were exposed to the radio theater series had a mean score of 69.9 while those not exposed, had a mean score of 55.3. When this was subjected to Z statistics, the $Z_{cal}$ was 9.76 while the $Z_{tab}$ was 1.96. Therefore, hypothesis I was rejected because $Z_{cal} = 9.76$ was greater than $Z_{tab}, 1.96$ at 0.05 level.

When the results obtained from this study is compared with other studies on the effectiveness of media in instruction, it is evident that media in whatever form, if correctly used, can significantly improve, promote and enhance learning. Not only this, the use of relevant and locally produced media packages can significantly enhance positive behavior and heighten retention. The Communication Initiative (2004) and Hess et al (2004) share the same opinion. The Communication Initiative (2004) however said, for media to elicit collective behavioral change, design principles and multimedia approach should be used. The present study however, has shown the effectiveness of radio theatre as an effective method of promoting/teaching health.
CONCLUSIONS

Based on the findings of the study, the following major conclusions could be drawn.

(i) Radio theatre was an effective instrument for promoting healthy living.
(ii) The use of radio drama produced a significant improvement in the disposition and behaviour of the people. It positively influenced their attitude.
(iii) The use of drama combined with instruction in local language enhanced better participation thereby heightening the interest of participants.
(iv) 89% of the participants learn more about HIV/AIDS and how to control it from the package than from any other sources.

RECOMMENDATIONS

Based on the major findings of this study, the following recommendations were made:

(i) The use of radio theatre for teaching and promoting health in schools and communities should be encouraged.
(ii) In designing and producing the package, local languages and simple English should be used. Local examples should also be used.
(iii) The package to be used should be motivating, user friendly and highly interactive.
(iv) For the advancement and the encouragement of the use of radio theatre, qualified personnel in Theatre Art, educational technologist, specialists in designing, developing, selection and production of packaged media should be employed or called upon to design programmes in drama form.

REFERENCES


