An Evaluative Study of the Influence of Ebonyi State Broadcasting Corporation's Lassa Fever Public Service Advert on the Health Attitude of Abakaliki Residents

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Abstract

This study evaluates the influence of the Ebonyi State Broadcasting Corporation's (EBBC) Lass a Fever (LF) public service advert on the health attitude of residents of Abakaliki metropolis. Using the survey research design, 400 copies of the questionnaire were administered to different areas of Abakaliki metropolis. The hypothesis was tested at 0.05 significant level and it revealed that there is a significant relationship between the EBBC's public service advert on LF and the health attitude of residents of Abakaliki metropolis. The study discovered that the EBBC's LF public service advert has greatly influenced the health attitude of the people but some residents still eat and sustain the culture of rat consumption, thereby revealing culture and personal beliefs as very strong variables that can wield strong influence against media effect. The Health Belief Model showed that the impression of "perceived susceptibility' to the LF virus by the individual may be discarded as a result of certain personal beliefs. It was recommended that similar adverts like the one under study should be employed in health campaigns, particularly in sensitizing children and rural communities on the need to maintain good health. Aside the broadcast media, interpersonal campaigns in the form of face to face discussions should be carried to the hinterlands where there may be no television or electric power supply because these are the worst hit with rat consumption. A review of the Stimulus Response Mechanistic theory in order to accommodate numerous intervening variables such as personal and cultural beliefs against such acclaimed irresistible effect is also suggested.

Keywords: Rat Consumption, Health Belief Model, Lassa Fever, Public Service Advert, Health Attitude, Health Communication

Introduction

Lassa Fever (LF) is an acute illness that is caused by the Lassa Virus. It is a zoonotic illness, that is, animal-borne or transferred to humans from animals (Uzodimma, 2018). It is claimed to be a disease of the developing nations of sub-Sahara Africa which actually has its origin in a village called Lassa in Bornu State of Nigeria. The Lassa fever epidemic is known to have struck many African nations such as Sierra Leone, Liberia and Ghana. This is understandable as the rodents that carry the virus are found throughout West and East Africa.

Ibekwe (2012, p. 2) explains that "Several imported cases with hazardous outcome have been reported in different parts of the world including North America, Europe and Asia". The above researcher also clarifies that in spite of the spread and fast mortality nature of this killer disease, no lasting solution has been developed for almost 50 years of its identification in the remote village of Lassa in Nigeria. Uzodimma (2018) cited that "Lassa fever heavily impacts Sierra Leone and Liberia in particular where it causes an estimated 5,000 deaths and about 10 to 16 percent of admissions to hospital each year" (p.3). The mortality rate of LF is very high in children and foetuses within the third trimester.

Lassa Fever is close to Ebola in terms of symptoms and mortality rate. As regards the spread of the Lassa fever which is clinically referred to as epidemiology, that is, the study of how a disease is spread, Omeh, Achige and Echekwute (2017) note that each year, 300,000-500,000 persons in the region of Nigeria, Sierra Leone, Guinea and Liberia are affected, and this results in over 5,000 deaths annually. The attack of LF cuts across age, gender or racial predilection. Common symptoms of LF include slight fever, general malaise and weakness, headache, haemorrhaging in gums, eyes or nose, respiratory distress, constant vomiting and facial swelling. Others are pain in the chest, back and abdomen, shock with significant fatality (WHO, 2017).

Its spread among persons is mostly through contact with household items such as food, water or air polluted with the faeces or urine of infected mamultimmate rats, otherwise called, Mastomyces natalensis. In the recent times, perhaps (2010-2018), no state in Nigeria has witnessed the outbreak of LF like Ebonyi State. The epidemic struck so hard on the state that even medical practitioners died in the process, throwing the entire Federal Teaching Hospital Abakaliki into a state of panic and desertion, to the extent that the entire personnel of the hospital had to embark on an unannounced and unauthorized strike, yet with impunity. According to the *Daily Post* of January 15 2018,

The President of NARD Doctor Ugochukwu Chinaka and the whole NARD NEC commiserate with the President and Congress Men of NARD, FETHA on the sudden loss of another of our colleague, Dr Abel Sunday Udo, a Resident Doctor in the Department of Otorhinolayngology, FETHA, and Dr. Ali Felix, a Resident Doctor in the Department of Community Medicine, FETHA...he died about 4 hours after a tonsillectomy on a lassa fever patient (page 1).

Aside these two Medical Doctors who passed away on the same Sunday after attending to a patient who had the Lassa fever virus, Uzodimma (2018) clarifies that two other house officers who joined in treating the LF patient as well as nurses were on the surveillance list. Before this latest and supposed worst-hit LF outbreak in Ebonyi State, cases of Lassa Fever epidemic within the past years in Ebonyi state of Nigeria, is no news. This can be attributed to the fact that Ebonyi State is still quite under developed with many of the residents living in remote areas with dense vegetation. Besides, rodents which are said to be the carriers of the Lassa Fever virus are considered delicacies in many parts of the state. With enough bushes therefore, the rodents find easy habitat and proliferation. And with the Ebonyians' high consumption of rodents, the chances of falling victims of the LF virus are high.

Following the past and recent developments of LF outbreak in Ebonyi State, the past state government created a public service advertisement (PSA) using the drama technique which runs repeatedly on the state owned Television station, Ebonyi State Broadcasting Corporation (EBBC). The PSA uses a mix up of the mother tongues of the different races in Ebonyi State to sensitize people on the need to steer clear from rat consumption. The advert is aimed at re-orientating the consumers on the possible effect of rat consumption in relation to Lassa Fever infections. Hinging specifically on the fear and reason appeals, the advert vividly shows the consumption of rat as the people's culture and explains the dangers inherent. The characters in the ad are made to internalise the message of the campaign as it points out the grave consequences of continuous consumption of rats. It also logically and reasonably shows the causes, epidemiology (how it is spread) and prevention of the LF virus.

The advert became so popular in Ebonyi State, probably because of the language used, the celebrity and the drama approach that it became a slogan among Ebonyi residents while many downloaded it as their phone ringing tones.

Statement of the Research Problem

Since 1996 when Ebonyi State was created, the culture of rat consumption has been sustained, and also on the increase. This has informed several government intervention efforts aimed at educating and enlightening the masses on the dangers of rat consumption. In spite of these campaigns, the habit of rat consumption remains an age long culture that has eaten deep into the people. This is to the degree that children take special pleasure in rat hunting.

Following the incidence of Lassa Fever outbreak in Ebonyi State and the deaths that followed, the government through the Ebonyi State Broadcasting Corporation has

come up with a sweeping public service advert to stop the consumption of rat and forestall the spread of the Lassa Fever outbreak.

In the face of these cultural practices and lack of publicity/effective campaign in the remote areas where the reach of broadcast media is limited; the issue of rat consumption has continued and Lassa Fever continues to ravage the people of Ebonyi. Why is this so? What other strategies could be put in place to stop the culture of rat consumption among the people and by so doing, stop the Lassa Fever outbreak in the State.

Objectives of the Study

The aim of this study is to assess the influence of EBBC's Lassa Fever public service advert on the health attitude of residents in Abakaliki Metropolis. The specific objectives, however, include to:

- 1. find out the level of awareness of Lassa Fever (LF) pandemic in Abakaliki metropolis through the EBBC's LF public service advert;
- 2. establish the influence of EBBC's LF public service advert on the health attitude of residents in Abakaliki metropolis; and
- 3. ascertain the influence of EBBC's L F public service advert on rat consumption in Abakaliki metropolis.

Research Hypothesis

For the purpose of this research, the hypothesis below was formulated: Ho₁: There is no significant relationship between the exposure to the EBBC's PSA

on Lassa Fever and the health attitude of residents of Abakaliki metropolis.

Significance of the Study

It is expected that this study will contribute immensely to the existing body of knowledge in sensitizing the people on the health dangers of rat consumption, not just in Ebonyi State but in other states, particularly in the present time where the menace of LF is becoming endemic. This research is specifically supposed to heighten the awareness level of the public as it relates to the mode of contracting the LF virus. In health communication, this study is expected to benefit health communicators in determining certain beliefs that sustain certain health attitudes even in the face of sweeping campaigns, conscientisation and sensitisation programmes. It will also be beneficial to policy makers in the communication sector and the media to appreciate the strengths and weaknesses of some communication theories with a view to better formulate and implement communication messages.

Theoretical Framework and Literature Review

A theory explains how a system or phenomenon works. In respect to the topic under study, the Health Belief Model (HBM) and the Individual Differences theory were used.

The Health Belief Model was developed in the 1950s by social scientists Irwin Rosenstock, Godfrey Hochbaun, Stephen Kegeles and Howard Leventhal in the United States public health service in order to explain the lack of public participation in health screening and prevention programmes. Such health programmes include free tuberculosis screening project, HIV screening test, etc. (FHI, 2004).

In the view of LaMorte (2016), the HBM has the following tenets: (i) Perceived threat: This is made up of perceived susceptibility and perceived severity of a health condition. In perceived susceptibility, one has the subjective perception of the risk of contracting a health condition. Perceived severity has to do with the feelings concerning the seriousness of contracting an illness or of leaving it untreated. (ii) Perceived Benefits: This refers to the believed effectiveness of strategies designed to reduce the threat of illness. (iii) Perceived Barriers: This refers to the possible negative consequences that may result from adopting particular health actions. This involves physical, psychological and financial demands. (iv) Cues to Action: These are events, either bodily or environmental that propel individuals to take action. (v) Self-Efficacy: This refers to the level of a person's confidence in his or her ability to perform a behaviour successfully. However, cues to action is seen as an aspect of the HBM that has not been systematically studied. Variables such as diverse demographics, socio-psychological and structural variables that have influences on people's perception also indirectly exert influences on health related behaviour.

Luquis and Kesinger (2018) and Carpenter (2010) explain that the most influential factor for predicting and explaining health-related behaviours is perceived barrier while perceived severity was identified as the least significant variable in explaining and predicting health behaviours. Health Belief Model explains why a person continues to indulge in a bad health habit, despite the possible known consequences (Pope, 2018).

The Health Belief Model is therefore considered appropriate for this study since it helps to explain why the residents of Abakaliki metropolis may or may not be influenced by the EBBC's LF public service advert in spite of the perceived danger. One of such factors is culture.

The Individual Differences Theory is another theory found very relevant to this study. It has its root from the field of psychology and was propounded by Frances Galton in 1884, purporting that individuals have their personal psychological characteristics. This became popularized in the 1950s and 1960s from the laboratory experiments on behaviourism, classical conditioning, learning differences and attitude formation.

This theory counters the earlier Stimulus-Response Model which assumed that the media possessed unlimited power to change attitudes. According to Ogbuoshi (2011, p. 3), studies in the natural sciences had also revealed differential biological endowments, attitudes, values and beliefs were learnt in the context of experience, and this resulted in differences in cognition and perception.

Understanding the Individual Differences Theory, Okunna and Omenugha (2012) explain that individuals differ in their views and psychological makeup and they do not behave uniformly to a media message. This is a part of the limited effect model as there are inhibitions to behaving according to a media message. These include selective attention, selective exposure, selective recall and selective perception. People therefore pay attention to media contents based on their interests, beliefs, values and experiences.

The Individual Differences Theory is therefore very relevant in explaining the influence of EBBC's Lassa Fever public service advert on the health attitude of residents in Abakaliki metropolis, considering the fact that all viewers of the advert did not react uniformly towards the television public service advert due to certain intervening variables, e.g. cultural beliefs.

Kenechukwu (2015) studied "Understanding Media Effect: A Study of How Studies in Perception Nailed the Coffin On Magic Bullet Theory". Using purely the qualitative research method, the study argues that contrary to the all-powerful media hypothesis, media audiences are really active and filter media messages they receive from different media sources. The study discovered relevant theories such as Individual Differences Theories, Perception Studies, Two-Step-Flow Hypothesis, among others that fault the Stimulus-Response Theory of media effect. Another finding of the study is that media audiences are active media users who react differently to media messages. The study concluded that the media merely provide subjects for discussion while the audience makes different interpretations of media content based on demographics.

Using a survey research method, Jones, Jenson, Scherr, Brown, Christy and Weaver (2015) did a critique on "The Health Belief Model as an Explanatory Framework in Communication Research: Exploring Parallel, Serial and Moderated Mediation". The researchers discovered that though the Health Belief Model seems to be an ideal explanatory framework for communication research, theoretical limitations have limited its use in the field. The study posits that indirect effect of exposure on behaviour through perceived barriers and threat was moderated by self-efficacy. Findings show that health belief model could be useful in explaining conflicting results of the past as well as a good focus for future research. It also discovered that the Health Belief Model has successfully adapted to fit diverse cultural and topical contexts.

Patterson, Bates, Chadwick, Sanchez and Grijalva (2018) used the focus group discussion to study the topic, "Using the Health Belief Model to Identify Communication Opportunities to Prevent Chagas Disease in Southern Ecuador". This research was conducted to collect culturally relevant information to develop a health campaign to decrease the risk of Chagas disease transmission. A thematic analysis was done and the findings show that the Health Belief Model provided clear guidance for the development of Chagas disease prevention messages.

The study concluded that data from HBM emphasise the importance of standardising the messages presented to the community for Chagas disease prevention, and recommended the provision of more information on the protective nature of the behaviours promoted for Chagas disease prevention. Overcoming barriers such as cost and convenience and building on enabling factors, including community members' interest on quality of life, protection of their families and relationship with the land was also suggested.

Lassa Fever: A Conceptual Review

Lassa Fever, according to Adamu (2016, p. 2), "is a disease of the blood, liver and spleen. It is a viral haemorrhage fever". Uzodimma (2018, p. 3) defines it as "a single-stranded RNA haemorrhagic fever virus from the family, Arenaviridea. It is an acute febrile viral illness lasting one to four weeks, and it occurs in West Africa and some areas beyond". Writing on World Health Day 2018, Universal Health Coverage (2017) explains that LF is an acute viral haemorrhagic illness that has duration of 2-21 days in West Africa.

Just like Ebola and Marburg viruses, LF is one of the haemorrhagic fever viruses but not as contagious from person to person, nor as deadly as the Ebola virus. Typically, the Lassa virus is transmitted by the urine or droppings of mastomys rats to human beings. Ibekwe (2012) clarifies that health workers could get infected through direct contact with blood, body fluid, stool or urine of an infected patient. The Nigeria Centre for Disease Control reported a large outbreak of LF in Nigeria in 2018.

Historically, Lassa fever was first described in the 1950s while the viral particle was identified in 1969 from three nurses who were missionaries in Lassa, Nigeria, where they met their death after treating an infected patient (Uzodimma, 2018). In the 2018 outbreak in Nigeria, over 300 positive cases were reported in the month of March, and such cases were prevalent in Bauchi, Plateau, Edo, Ondo and Ebonyi States. Available literatures show that 16 health workers were diagnosed of this virus with four losing their lives. At the time of the last LF outbreak in Ebonyi State, Nigeria lacked the vaccine against LF virus but the then Minister of Health, Prof Isaac Adewale announced that the vaccine would be arriving Nigeria by the end of 2018.

In Nigeria, the campaign against the Lassa virus is preventive, rather than curative. According to the National Centre for Disease Control, adherence to infection

prevention measures and environmental sanitation are immediate efforts at preventing both current and future outbreaks. Since 1969, cases of LF have rarely been diagnosed in the United States; total of diagnosis amount to 6. The most recent case was in New Jersey in 2015 and it was diagnosed in a patient travelling from Liberia. In all the six cases witnessed in the United States, they were all immigrants who had been exposed to the virus transmitting rodent and contracted the virus from West Africa.

LF rarely occurs upon direct contact with saliva, blood, bodily fluids, and mucous membrane or sexual relationship. Casual contact of intact skin with intact skin does not transmit the virus but patients in rural hospitals have acquired it through the use of disposable syringes because the incubation period varies. British researchers have suggested that the incubation period varies from seven to ten days, while in some people, it is up to about 21 days.

Kizor (2017) identifies early signs of LF as feeling unwell, fever, headache and weakness. As the disease worsens, the infected person experiences chest pain, cough, sore throat, nausea and vomiting. Others are abdominal pain, diarrhoea and muscle pain. The following symptoms could also show up; low blood pressure that causes bleeding from the nose and mouth, bleeding from the eyes, bleeding from the gastro intestinal tract (anus), bleeding from the vagina and swelling from the face and fluid in the lungs. A Lassa infected person at the advanced stage could have seizure, be disoriented, go into shock, get into coma and have tremors.

Occurrence of LF in late pregnancy can be acute and dangerous as the occurrence in the third trimester can result in the death of the mother and/or the foetus in more than 80% of cases. Temporary loss of hair and disturbance in normal gait could be seen in a patient during recovery. Some patients who recover from LF end up being deaf. "Deafness is the commonest complication of Lassa fever", notes Kizor (2017, p. 3). The Lassa fever infected person normally dies 14 days after the onset of the disease and what actually speeds up death from LF is multi-organ failure. Reports show that in the face of LF outbreak, about 50% of the hospitalised patients die from the attack.

Noting key facts by the Universal Health Coverage, the presence or detection of the infection of the LF infected person in a community is combated by prompt isolation of the affected patient. Good infection prevention and control practice and rigorous contact tracing can stop the spread in the event of infection with the LF virus. UHC (2017, p. 3) explains that the antiviral drug ribavirin could be helpful in the treatment of Lassa Fever if administered early.

Research Method

Research method deals with how the problems of research are investigated. For this purpose, the quantitative research method was used. The survey enabled the

researchers to elicit direct responses from the sample through the instrument of the questionnaire and generalisation made.

The population of Abakaliki metropolis is 134, 102 (World Population Review, 2020). This number comprises of residents in Abakaliki urban which mainly include: Amike-Aba, Kpirikpiri, New Layout, Afikpo Road/Ogoja Road axis and Mile 50. Given the above population, the sample size of the study was 400. This was determined using the sample size published table (Singh & Masuku, 2014) which indicates that a sample of 400 is appropriate for a population above 100,000.

Administration of the questionnaire was based on the quota system whereby the researcher deliberately assigned unequal numbers of questionnaire to different areas of the population based on certain characteristics such as population, location and educational level. The rationale for adopting this approach was to ensure that the greater number of respondents came from the area of the population that is more directly associated with rat consumption. Hence, Amike-Aba which is larger in size and more densely populated with indigenous Izzi people who are deeply rooted in the culture of rat consumption was assigned 130 copies of the questionnaire followed by Kpirikpiri which got 86. New Layout was assigned 84 copies of the instrument while Afikpo Road/Ogoja Road axis got 60 copies. Mile 50 was assigned 40 copies.

The design instrument contained a total of 20 items structured on a Likert scale of 4 points. The choice of Likert scale was considered appropriate since the researcher is studying attitude. Finally, only 363 copies of the instrument were retrieved. This gave a response rate of 91%.

Data Presentation

Demographic data were analysed using the simple percentage while data on general information were analysed using the mean method. The decision rule accepted any calculated mean value from 2.5 following the four-point Likert scale while anything less than that is rejected.

Case	Item	Freq	%
Gender	Male	231	64%
	Female	132	36%
	Total	363	100%
Age	18 - 22	51	14%
_	23 - 27	60	17%
	28 - 32	77	21%
	33 - 37	83	23%
	38 – above	92	25%
	Total	363	100%
Education	PG	28	8%
	Degree	84	23%

 Table 1: Analysis of Bio-data of the Sampled Population

SSCE FSLC	132 65	36%
No formal	54	15%
Education		
Total	363	100%

In Table 1 above, 64% are males while 36% are females, indicating that there are more male respondents than females as the males appeared more disposed to accepting the research instrument. On the age range, 18-22 years forms 14% of the sampled population while 17% shows the age range of 23-27. This implies that respondents composed mostly of youths whose age range cut between 18 and 37 years old. Looking at the educational qualification of the respondents, 8% of the sample has Post-Graduate qualifications, degree holders have 23%, Senior School Certificate holders have 36% and 18% have basic primary education while 15% have no formal education at all. This indicates that the greater part of the respondents is literate and learned beyond basic education, hence can understand the instrument.

Research Objective I

Awareness level of LF among Abakaliki residents, through the EBBC's advert

 Table 2: Mean Responses of Respondents on the Awareness Level of LF through EBBS

 Public Service Advert

S/N	ITEM	SA	Α	D	SD	FX	$\overline{\mathbf{X}}$	DECISION
1	I know about the EBBC's Lassa Fever public service Advert	211	134	18	-	1282	3.53	Accepted
2	I enjoy watching the EBBC's Lassa Fever public service advert as many times as it plays	152	187	17	7	1210	3.33	Accepted
3	The message of the EBBC's Lassa Fever public service advert is very well understood	233	100	22	8	1284	3.54	Accepted
4	Majority of the Abakaliki residents are aware of the EBBC's Lassa Fever public service advert	79	242	32	10	1116	3.07	Accepted
5	The EBBC's Lassa Fever public service advert features in both Radio and Television	93	136	84	50	998	2.75	Accepted

The mean score of 3.53 in table two above indicates that majority of Abakaliki residents are exposed to the EBBC's LF advert. This shows that the LF public service advert is popular. With a mean value of 3.33, the respondents confirm their interest in watching the drama programme as many times as it features. The interest is linked to the drama approach adopted and the celebrity featured in the advert. Due to the

language and drama approach, the comprehension of the ad message is massively supported with a mean score of 3.54 and the mean of 3.07 shows that the ad has mass viewership in Abakaliki. This also has an effect on the awareness level. The mean score of 2.75 shows that the advert features in both radio and television. This is to achieve wide audience reach. This implies that the EBBC PSA was very popular and has created a high level of awareness about the LF.

Research Objective II

Influence of EBBC's Lassa Fever public service advert on rat consumption in Abakaliki metropolis

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S/N	ITEM	SA	Α	D	SD	FX	\times	Decision
6	I used to eat rat before the	54	91	198	20	905	2.49	Rejected
	EBBC's Lassa fever advert							-
	came up							
7	I stopped eating rat after the	84	35	104	40	789	2.17	Rejected
	EBBC's Lassa fever advert							
	came up							
8	Rat is one of the common	113	125	66	59	1018	2.80	Accepted
	meats eaten by the Ebonyi							
	people							
9	I still perceive no danger in	21	94	119	129	733	2.02	Rejected
	rat consumption							
10	I know people who still eat	79	149	100	44	971	2.67	Accepted
	rat in Abakaliki							

 Table 3: Mean Responses of Respondents on the Influence of EBBC's Lassa Fever

 Public Service Advert on Rat Consumption in Abakaliki Metropolis?

In Table 3 above, the mean of 2.49 shows that many of the respondents were not used to eating rats before the EBBC's Lassa fever advert. This can be attributed to the fact that they reside in the urban and have a level of literacy and exposure. With a mean value of 2.17, it is rejected that it was after the EBBC's advert that the respondents stopped rat consumption. By implication, a good number of the respondents were never given to rat consumption before the media campaign. This also is linked to education and exposure. The mean of 2.80 shows that rats are common meat in Ebonyi State as part of the culture while the mean of 2.02 negates the item that there is no danger in eating rats. This explains that culturally, the people see no hazard in rat consumption. The mean score of 2.67 confirms that there are people who still eat rat in Abakaliki consequent upon the age long practice of rat consumption. The above table therefore posits that in the view of the EBBC's Lassa Fever public service advert, many have retreated from rat consumption while others still perceive the practice as harmless.

Research Objective III

Influence of the EBBC's Lassa Fever advert on the health attitude of Abakaliki residents?

Table 4: Mean Responses of Respondents on the Influence of EBBC's Lassa Fever Pr	ublic
Service Advert on the Health Attitude of Abakaliki Residents	

S/N	ITEM	SA	Α	D	SD	FX	Х	Decision
11	I believe the specie of rat that has the Lassa fever virus is not in Ebonyi State, If not, our parents would not have lived till date.	88	102	97	76	928	2.56	Accepted
12	I avoid all kinds of rats as a result of the EBBC's Lassa fever public service advert	92	77	120	74	913	2.52	Rejected
13	I have been more careful with food handling as a result of the Lassa fever public service advert	107	116	82	58	998	2.75	Accepted
14	During the recent outbreak of Lassa fever and deaths in Federal Teaching Hospital Abakaliki, I avoided visiting the hospital as a result of the EBBC's public service advert on Lassa fever	61	147	71	84	911	2.51	Accepted
15	People are now more careful about general hygiene as a result of the EBBC's public service advert on Lassa fever	166	175	18	4	1229	3.39	Accepted

In Table 4 above, the mean value of 2.56 indicates that the respondents sustain the belief that the rat carrying the Lassa Fever virus is not in Ebonyi State. This belief is culture sustained. The mean of 2.52 shows that the respondents have highly been sensitized to the degree that they avoid all species of rat as a result of the EBBC's public service advert on Lassa fever. With the mean of 2.75, the masses support being careful with food handling as a result of the EBBC's public service advert on Lassa Fever. By this, the EBBC LF public service advert has had a strong influence on the health attitude of respondents. Also, the mean score of 2.51 indicates that the Abakaliki residents avoided the Federal Teaching Hospital during the recent outbreak of Lassa Fever and deaths as a result of the EBBC's public service advert on Lassa Fever. This shows the advert message imparted fear and caution in Abakaliki residents while the mean of 3.39 lent support to the claim that the Abakaliki residents are more careful about general hygiene as a result of the EBBC's Lassa Fever public service advert.

Test of Hypothesis and Data Analysis

Ho₁: There is no significant relationship between the exposure to the EBBC's PSA on Lassa Fever and the health attitude of residents of Abakaliki metropolis.

Here, a Chi-square (X²) is used to test the hypothesis and data analysed. Thus; $X^{2} = (f_{o} - f_{e})^{2}/f_{e}$

Where $f_o =$ frequency of the observed data

 $f_e =$ frequency of the expected values

To calculate the expected frequency, we multiply the total column by the total row and divide by the grand total.

Response	Sample	Sample	Sample	Sample	Sample	Totals
_	1	2	3	4	5	
Agreement	190	157	223	208	341	1119
Disagreement	173	206	140	155	22	696
Totals	363	363	363	363	363	1815

Table 5: Samples Collected

Source: 2019 field survey

Total in the first row = 1119 Total in the second row = 696

Total in each column = 363

Thus, expected frequency (f_e) in the first row =

363x1119/1815 = 406197/1815 = 223.8

And expected frequency (f_e) in the second column =

363x696/1815 = 252648/1815= 139.2

From table five above, the chi-square (X^2) table can be set up.

Table Six: Chi-Square (X²) Table

Observed	Expected	$(\mathbf{f}_0 - \mathbf{f}_e)$	$\left(\mathbf{f}_{\mathrm{o}}-\mathbf{f}_{\mathrm{e}}\right)^{2}$	$(\mathbf{f}_{\rm o}-\mathbf{f}_{\rm e})^2/\mathbf{f}_{\rm e}$
(\mathbf{f}_0)	(f _e)			
190	223.8	-33.8	1142.44	5.10
157	223.8	-66.8	4462.24	10.94
223	223.8	-0.8	0.64	0.00
208	223.8	-15.8	249.64	1.16

341	223.8	117.2	13735.84	61.38
173	139.2	33.8	1142.44	8.21
206	139.2	0.8	0.64	0.00
140	139.2	0.8	0.64	0.00
155	139.2	15.8	249.64	1.80
22	139.2	-117.2	13735.84	26.84

Chi-Square $(X^2) = 5.10+10.94+0.00+1.16+61.38+8.21+0.00+0.00+1.80+26.84 = 115.43$

To calculate the degree of freedom (df):

(Row - 1) (Column - 1)

i.e. $(5-1)(2-1) = 4 \times 1 = 4$.

Since 115.43 > 11.070 which is the value of alpha (0.05) in the probability level, it is therefore empirically supported and the null hypothesis (H_o) rejected. Hence, there is significant relationship between the exposure to the EBBC's PSA on Lassa Fever and the health attitude of residents of Abakaliki metropolis.

Summary of Findings

From the analysis so far, it could be gleaned that the EBBC's Lassa Fever public service advert has a positive influence on the health attitude of the residents of Abakaliki metropolis.

Findings indicate that the EBBC's public service advert on Lassa Fever has created a high level of awareness about the Lassa Fever virus. It can also be deduced from the study findings that while some of the respondents persist on rodent consumption, a greater number of residents do abstain from eating rat as a result of the EBBC's public service advert on Lassa Fever. Persistent consumption of rat by some is attributed to socio-cultural factors such as background, illiteracy, individual beliefs and indifference. Findings in Table 4 show that the greater number of the residents of Abakaliki have improved hygienically as a result of the EBBC's PSA on Lassa Fever.

Discussion

The major discussion, significance and objective of this research is looking at the influence of EBBC's Lassa Fever public service a dvert on the health attitude of Abakaliki residents. In as much as the EBBC's Lassa Fever public service advert has greatly influenced the health attitude of the people, it is evident from the findings that some residents are still bent on rat consumption because it is an age-long culture. Some do not regard the fear appeal of the PSA message while others act completely out of ignorance. This is a direct attack on the stimulus-response effect as the recipients of a mass media message do not behave uniformly to media exposure.

This finding shows that individual differences such as personal and cultural beliefs can obstruct media influence on the recipients and thus lends support to the

works of Kamau (2016) which noted that the idea of the media as omnipotent while the audience is atomised, just receiving message from the media without other interferences or interplays, does not exist. No matter the severity of the media message (warning), individuals have their own minds and specific beliefs. Otherwise, the severity of the warnings in the EBBC's LF public service advert was enough to make all the viewers to steer clear from rat consumption. It can thus be argued in the thought of Esser (2008) that there are individual differences that serve as intervening and militating variables against media stimuli.

HBM seems more appropriate in explaining the health attitude of the respondents of this study. The underpinnings of HBM such as perceived susceptibility, perceived benefits and perceived barriers are clearer and more credible explanations of the reactions of Abakaliki residents to the influence of EBBC's Lassa Fever public service advert. First, some of the residents still eat rat on the assumption that their parents who started to feed on rats are still alive; the impression of susceptibility to the virus is thus jettisoned -Perceived susceptibility. Some persons even believe that they cannot be attacked by certain sicknesses. Perceived severity has also caused some to desist from rat consumption as they consider the seriousness of acquiring the disease. Carpenter (2010) explains that the most influential factor for predicting and explaining health-related behaviours is perceived barrier while perceived severity was identified as the least significant variable in explaining and predicting health behaviours.

This finding is also in consonance with the study of Pope (2018) which observed that the Health Belief Model explains why a person continues to indulge in a bad health habit, despite the possible known consequences. Though some have heard the dangers in rat consumption, they continue to eat rats. In explaining health attitude of a people, common factors that play a significant role in decision making of the audience are ignorance and environmental factors. This is also closely linked to the educational level and exposure of the respondents. In this study, respondents from the Amike-Aba area have more people who are disposed to rat consumption in spite of media campaigns. This can be attributed to the facts that they have the highest number of educationally disadvantaged persons in the study area, less urbanised, economically less buoyant, and are the natives of Izzi land where the culture of rat consumption is entrenched.

Conclusion

Based on the findings of the study, certain differences which majorly border on culture and personal beliefs militate against the overwhelming effect of the media to make recipients of mass media message to behave exactly in accordance with media advocacy. In fact, while the paper agrees to the power of the media to change behaviour, the HBM appears more suitable in explaining media effect on health behaviours.

Recommendations

Considering the findings of the study, particularly as regards the influence of EBBC's Lassa Fever public service advert on Abakaliki residents, it is strongly recommended that the same advert should run continuously since it is attention-catching, interest-propelling, desire creating and action-motivating which are core elements of an ad copy. Aside using the broadcast medium, similar campaigns in the form of interpersonal communication, evidenced by face to face interactions should be carried to the hinterlands where there may be no television or electric power supply because these are the places that are the worst hit with rat consumption.

It is also recommended that the HBM be used more in explaining health attitudes and conditions since it examines the different perceptions that reduce or increase the possibilities of persons to participate in preventive health strategies, consequently, media influence.

In the light of the above findings, it is recommended that S-R mechanistic theory should be reviewed in order to accommodate numerous intervening variables against the proposed "all powerful effect" model of mass communication. While mass communication as an institution appreciates the "violent exposure = violent social behaviour model", the interplay of other factors that militate against these media effect should be taken into consideration. An understanding of this will help the media as an institution to understand the workings of media effects.

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