

# INTERNATIONAL JOURNAL OF SOCIAL SCIENCES

*Volume 5, Number 1, December 2006*

## EDITOR

IMOH E. UKPONG

*University of Uyo, Nigeria*

## ASSOCIATE EDITORS

Patrick Aremibong, *Nigeria*

Graham Chapman, *UK*

Leonard Baer, *UK*

Bassey Ate, *Nigeria*

Sunday Ukpung, *Nigeria*

Innocent V. Modo, *Nigeria*



## **Select Radio Programmes and Adolescents' Sexual Behaviour in North-Central Nigeria**

**Mbuk Mboho**

*Department of Communication Arts*

*University of Uyo, Nigeria.*

*and*

**Nicholas S. Iwokwagh**

*Department of Mass Communication*

*Benue State University*

*Makurdi, Nigeria*

**ABSTRACT** - This paper assesses the effectiveness of two selected radio programmes-*one thing at a time* and *radio diary* on adolescents' sexual behaviour in North-Central Nigeria. A survey method was used for the study. Data were collected through depth interview from a purposive sample of 120 respondents drawn from two Tiv speaking rural communities in Gboko Local Government Area, and two Idoma speaking rural communities in Otukpo Local Government Area. Makurdi metropolis, which serves both as the capital and commercial nerve centre of Benue State served as the urban research community. Results confirm that changing the behaviour of people can be a very difficult task. The validity of this finding is to be seen in the fact that only 16.7% of the respondents positively changed their sexual behaviour as a result of information acquired from the selected programmes. It concludes that, there is a relatively low impact of the selected programmes on adolescents' sexual behaviour in North-Central Nigeria and recommends a strong behavioural change component for the programmes.

**KEYWORDS:** Sexual behaviour, Adolescents, Radio Programmes, Nigeria



## INTRODUCTION

Adolescents' reproductive health has been a major source of concern to national governments, policy makers, development agencies, non-governmental organizations and community based organizations the world over; especially in recent years. This concern had earlier compelled the Federal Government of Nigeria through the Federal Ministry of Health, to evolve a National Reproductive Health Policy in 2001. To further underscore the salience of adolescents' reproductive health, and indeed reproductive health to the Federal Government of Nigeria, the government through the Federal Ministry of Health sponsored a National HIV/AIDS and Reproductive Health Survey in 2003. It was reported that:

*The reproductive health status of the Nigerian adolescent is poor. The median age at first sexual intercourse was 18 years in 1999, and contraceptive utilization among the sexually active is low. With a rate of 112 births per 1,000 females of age of 15-19 years, Nigerian adolescent have one of the highest levels of fertility in the world. About 12% of teenagers have had their first childbirth before the age 15 years and almost half became mothers before the age of 20 years. About two-fifths of teenage pregnancies in Nigeria are believed to end up with induced abortion, with majority being carried out by untrained personnel and in unsafe environments. Adolescents constitute the majority of cases of abortion-related complications admitted in Nigerian hospitals. Adolescents also suffer disproportionately from HIV/AIDS and other sexually transmitted infections.*

In a foreword to the report, the Minister of Health, Prof. Eytayo Lambo acknowledges that "serious challenges exist in the area of Safe motherhood, HIV/AIDS, Adolescent Reproductive Health, Family Planning and Gender Based Violence. These are shown in the poor health indices reflecting the reproductive health situation of the country". In order to address these challenges, Prof. Lambo maintained that "Nigeria is actively implementing various interventions to ensure that the varied poor reproductive health indices are improved". He further expresses the commitment of the Federal Government to Reproductive Health in Nigeria in the following words:

*Nigeria is committed to ensuring that all its citizens have access to information and services that it used can guarantee their reproductive health. Nigeria is also committed to the declaration of the International Conference on Population*

*and Development (ICPD) of 1994... The country is committed to the United Nations General Assembly Declaration of Commitment on HIV/AIDS and is responding through a multi-sectoral response which includes prevention and control, the care and support for people living with HIV/AIDS, and mitigation of the impact of the epidemic on the socio-economic system. (NARHS 2003: iii) ‘*

The rationale for such a commitment as he further elaborates is to “contribute significantly to the improvement in planning and programming of HIV/AIDS and Reproductive Health Initiatives and thereby contributing to improving the quality of life for all Nigerians”

Ademuwagun, et al (2002:218) have also expressed deep concern over Adolescents’ Reproductive Health. According to them:

*Adolescents need sexuality education because studies have shown that they have poor reproductive health knowledge, constitute a significant proportion of Nigeria population, are sexually active, practice unsafe sex, procure unsafe abortions, lack access to young friendly reproductive health services*

What is clear from the preceding analysis is the urgent need for “a great deal of information about sexuality, relationships, and the self needs to be communicated to the adolescents” (Ademuwagun, et al 2002:219). This is especially true when the risky behaviour of adolescents and its consequences are considered. Moronkola, et al (2003:67-68) list some of these as: teenage pregnancy, abortion, sexual assault, sexually transmitted infections, prostitution and masturbation. There is thus an urgent need for sexuality education for adolescents in Nigeria.

The Nigerian Educational Research and Development Council (2001) defines *sexuality education* as “a planned process of education fostering the acquisition of factual information, information of positive attitudes, beliefs, values as well as development of skills to cope with the biological, psychological, socio-cultural and spiritual aspects of human sexuality”. The responsibility for the provision of factual information and the fostering of attitudinal and behavioural changes, thus, underscores the place or role of the media in the framework of re-directing or re-channeling adolescents’ reproductive health generally and their sexual behaviour specifically.

According to UNESCO (1981:14), the media are to perform the following functions: information, socialization, motivation, debate and discussion, education, cultural promotion, entertainment and integration. Of direct relevance to this paper

are the information and education functions. The information function as UNESCO prescribes, involves the collection, storage, processing and dissemination of news, data, pictures, facts and messages, opinions and comments required in order to understand and react knowledgeably to personal, environmental, national and international conditions as well as to be in a position to take appropriate decision. The point here is that the media are expected through their news and programme contents to provide adequate information about the basic facts of life, reproduction, and sexual intercourse, biological, socio-cultural, psychological and spiritual dimensions of sexuality. This information should help adolescents to understand and react knowledgeably to their sexual self concept; and to equip them to take appropriate decisions, and act in their own interest.

Thus, the basic assumption is that, through its unique characteristics of reach, affordability low production costs and flexibility, *radio* positions itself as the most effective means of disseminating information on reproductive health. More significantly, this information can be communicated through a wide array of selected programmes (jingles, drama, documentaries, news and talk programmes). This study therefore, is based on the assumption that select radio programmes (*one thing at a time*, a drama programme), and (*radio diary*, a discussion programme) will provide adolescents in North-Central Nigeria with adequate information about their sexual self-concept and re-direct or re-channel an integral part of their reproductive health-sexual behaviour.

Consequently, the question is: how much impact do the select radio programmes have on adolescents' sexual behaviour in North-Central Nigeria? In other words, to what extent can it be argued that *one thing at a time*, and *radio diary* have re-channeled adolescents' sexual behaviour in North-Central Nigeria or what is the quality of impact of *one thing at a time* and *radio diary* on adolescents' sexual behaviour in North-central Nigeria?

Specifically, the paper addressed the following questions:

1. What is adolescents' assessment of *one thing at a time* and *radio diary*?
2. Are the contents of *one thing at a time* and *radio diary* persuasive enough to re-channel adolescents' sexual behaviour in North-Central Nigeria?
3. What is the impact of *one thing at a time* and *radio diary* on adolescents' sexual behaviour in North-Central Nigeria?

One null hypothesis was tested as follows:

Ho: Adolescents' assessment of *one thing at a time* and *radio diary* will not be significantly related to their perceptions of the two programmes in re-channeling their sexual behaviour.



## **Theoretical Base**

This study anchored on three key theories: Cognitive Response Theory, Agenda Setting Theory, and Uses and Gratifications Theory.

### **Cognitive Response Theory**

The Cognitive Response Theory provides insight into audiences' cognitive responses to persuasive messages vis-à-vis their attitude towards the object of such persuasive communication. In the words of Daramola (2003:59-60) the Cognitive Response Theory is of the premise that "people are active processors of information received from messages and their interpretation of the information either forms a new attitude or changes the existing attitude or fits into the existing attitude". What this means is that the interpretation the audience would give to messages received from the media is what would condition their attitude position and would predispose them to act either positively or negatively with respect to the elicited behavioural response(s). In the context of our study, there is an underlying assumption that adolescents in North-Central Nigeria would consciously listen to *one thing at a time* and *radio diary*, positively interpret same, and actively change their risky and irresponsible sexual behaviour.

### **Agenda Setting Theory**

The Agenda Setting Theory posits that there is a close relationship between media content and audiences' perception of important events in society. According to Daramola (2003:60) "the basic idea of the theory therefore is that there is a close relationship between the manner in which the news media present issues and the order of importance assigned to those issues by those exposed to the news". In relation to our discourse, it is assumed that media emphasis on health sex seeking habits will re-focus the indiscriminate sexual behaviour of adolescents' in North-Central Nigeria.

### **Uses and Gratifications Theory**

The Uses and Gratifications Theory explains media effects from the receiver/media consumption perspective. According to Folarin (1998:65) "the theory perceives the recipient as actively influencing the effect process, since he selectively chooses, attends to, perceives and retains the media messages on the basis of his/her needs, beliefs..." The import of this is that the receiver discriminately exposes his/her self to media content he/she perceives has some utility value for him/her. With respect to our study, it is hypothesized that many adolescents will deliberately listen to *one thing at a time*, and *radio diary* to acquire new knowledge/information on positive sexual behaviour.

## **Methodology**

Respondents' for this study were drawn mainly from Benue State for three reasons. First, Benue State, apart from being the largest in terms of land mass has the highest population in North-Central Nigeria. The choice of Benue State is thus, seen as being representative of the total population of North-Central Nigeria. This position is validated in the fact that the total sample drawn from Benue State in the NARHS was larger than those of the 5 other states (Kogi, Kwara, Nassarawa, Niger and Plateau) in the geo-political zone. Secondly, Benue State is reported to be one of the states with the highest HIV/AIDS prevalence rate with the median of 13.5% (Federal Ministry of Health 2001). Moronkola (2003:68) records that "60% of these cases were within the age groups of 15-24 years". What this means is that more adolescents in Benue State are involved in risky and irresponsible sexual behaviour, thus, positioning them as the most appropriate population to study.

Data were collected through depth interview with a purposive sample of 120 respondents drawn from two Tiv speaking rural communities in Gboko Local government Area, and two Idoma speaking rural communities in Otukpo Local Government Area. Makurdi metropolis, which serves both as the capital and commercial nerve centre of Benue State served as the urban research community. Thirty male and female adolescents living with AIDS (PLWHA) were studied from both the Tiv and Idoma rural research communities, while sixty respondents were drawn from the existing PLWHA listening groups in Makurdi metropolis. Twenty respondents were also drawn from independent listening groups, while ten respondents were studied from the individual listeners' category.

These respondents were purposively chosen partly because of their seropositive status and partly because of their specialized knowledge on the research topic. The four categories of respondents were asked three basic questions. Their responses were collated and analysed using simple percentages. The chi-square ( $\chi^2$ ) statistical tools were used to express the findings.

## **Results**

Responses of the 120 respondents who participated in the depth interview were as presented in Tables 1,2 and 3 below.

### **Adolescents' Assessment of *One Thing at a Time* and *Radio Diary*.**

All the respondents listened to *one thing at a time* and *radio diary* regularly. Their assessments of these programmes were as presented in Table 1.

Table 1: Adolescents' Assessment of *One Thing at a Time* and *Radio Diary*.

Category	Frequency	Percentage
Effective	80	66.7
Undecided	30	25
Not Effective	10	8.3
Total	120	100

### Contents of *One Thing at a Time* and *Radio Diary* and Re-channeling of Adolescents'

#### Sexual Behaviour in North-Central Nigeria.

The respondents were asked to say whether or not the contents of *one thing at a time* and *radio diary* were persuasive enough to re-channel adolescents' sexual behaviour in North-Central Nigeria. Their responses were as shown in Table 2.

Table 2: Contents of *One Thing at a Time* and *Radio Diary* and Re-channeling of Adolescents' Sexual Behaviour in North-Central Nigeria.

Category	Frequency	Percentage
Persuasive	70	58.3
Undecided	30	25
Not-persuasive	20	16.7
Total	120	100

### Impact of *One Thing at a Time* and *Radio Diary* on Adolescent's Sexual Behaviour in North-Central Nigeria.

To determine the nature of impact of *one thing at a time* and *radio diary* on adolescents' sexual behaviour, respondents were asked to choose the most appropriate from three options. Results were as presented in Table 3.

Table 3: Impact of *One Thing at a Time*/Radio Diary on Adolescents Sexual Behaviour in North-Central Nigeria.

Category	Frequency	Percentage
Cognitive	60	50
Affective	40	33.3
Behavioural	20	16.7
Total	120	100



### Test of Hypothesis

The null hypothesis tested in the study was:

Ho: Adolescents' assessment of *one thing at a time* and *radio diary* will not be significantly related to their perceptions of the two programmes in re-channeling their sexual behaviour.

Chi-square computation at four degrees of freedom (df) and 0.05 significant levels ( $\alpha$ ) suggests that the hypothesis received statistical support ( $\chi^2 \text{ cal} = 8.49$ ). Thus, a significant relationship existed between adolescents' assessment of *one thing at a time* and *radio diary*, and their perceptions of the two programmes in re-channeling their sexual behaviour. Data in tables 4 (a) and (b) below show the direction of the relationship.

**Table 4a: Relationship between adolescents' assessment of *one thing at a time* and *radio diary*, and their perception of the two programmes in re-channeling their sexual behaviour.**

Adolescents Assessment of the Programmes	Effective	Undecided	Not Effective	Total
Adolescents perceptions of the Programmes	F (%)	F (%)	F (%)	F (%)
Persuasive	050 (62.5)	016 (53.3)	004(40.0)	070(58.3)
Undecided	014(17.5)	011(36.7)	005(50.0)	030(25.0)
Not persuasive	016(20.0)	003(10.0)	001(10.0)	020(16.7)
Total	080(100)	030(100)	010(100)	120(100)

**Table 4b: Relationship between adolescents' assessment of *one thing at a time* and *radio diary*, and their perception of the two programmes in re-channeling their sexual behaviour.**

Adolescents Assessment of the Programmes	Effective	Undecided	Not Effective	Total
Adolescents perceptions of the Programmes	F (%)	F (%)	F (%)	F (%)
0	E	O-E	(O-E) <sup>2</sup>	$\frac{(O-E)^2}{E}$
50	46.7	3.3	10.89	0.23
16	17.5	-1.5	2.25	0.13
4	5.8	-1.8	3.24	0.56
14	20	-6	36	1.8
11	7.5	3.5	12.25	1.63
5	2.5	2.5	6.25	2.5
16	13.3	2.7	7.29	0.55
3	5	-2	4	0.8
1	1.7	-0.7	0.49	0.29
				8.49

$\chi^2 \text{ cal.} = 8.49, \chi^2 \text{ tab.} = 9.49, df = 4, \alpha = 0.05$

According to data in table 4, adolescents who assessed *one thing at a time* and *radio diary* as being effective also perceived the contents of the programmes as being persuasive enough in re-channeling adolescents' sexual behaviour.

## Discussion

There appears to be a strong positive correlation between the theoretical base and the findings in this study. Research data show regular patronage for *one thing at a time*, and *radio diary*, for their perceived utility value. However, there seems to be a great dissensus among respondents over the perceived utility value of these programmes. For instance, while some respondents were of the view that *one thing at a time* and *radio diary* were timely interventions by Society for Family Health (SFH) and Partnership for Transforming Health Systems (PATHS) towards curtailing the raging HIV/AIDS, and sexually Transmitted Infections (STIs) scourge in the State, through the provision of quality information on what should and should not constitute positive sexual behaviour; others however were of the opinion that these programmes, especially *one thing at a time* served as a vehicle for relaxation and entertainment. What the latter case means is that most adolescents listen to *one thing at a time* not to acquire knowledge that would help them in changing their risky sexual behaviour, but for its recreational value. In fact others said they listened to *one thing at a time* specifically to acquire new knowledge for sexual experimentation.

Specifically, results in Table 1 show 66.7% of the respondents subscribing to the effectiveness of *one thing at a time* and *radio diary*. Twenty-five percent 25% however, were undecided, while 8.3% expressed a contrary view that these programmes were not effective. The point here is that there were mixed feelings and mixed reactions about the effectiveness of *one thing at a time*, and *radio diary* programmes in their ability in re-directing adolescents' sexual behaviour in North-Central Nigeria. However, survey results show a clear leverage for the effective category. For instance, it was the considered opinion of one of the respondents that: "By radio diary programme HIV/AIDS patients have been "baptized", so that this stigma about them is not there".

The contrary views expressed by the 25% (undecided) and 8.3% (not – effective) of the study respondents emerged from the position that the content of these programmes, especially *radio diary* was not attractive to the adolescents in the light of their aspirations and perceptions of life. For example, one of the respondents observed:

*A greater percentage of people that suffer from the disease are youths. I am a young person, and young persons like listening to attractive things, things that catch their interest.*

### *Select Radio Programmes and Adolescents' Sexual Behaviour*

*I don't see a 21 year old sitting down and listening to a programme that talks about HIV and the possibility of illness and death. He will be more interested in a musical comedy, that's why one thing at a time has become a household name...*

The point we are trying to put across here is that the differing positions of adolescents on the effectiveness of these two programmes is indicative of the contradictions that have characterized debates about media effects. The data have thus confirmed previous research findings presented by Gunter (2000:251) that: "the media are believed to have the power to increase people's knowledge but also in some cases, to decrease their ability to learn".

Findings in Table 2 have shown the place of the contents of *one thing at a time* and *radio diary* in re-channeling of adolescents' sexual behaviour in North-Central Nigeria. Fifty-eight point three percent (58.3%) of respondents attested to the persuasive nature of *one thing at a time* and *radio diary* in re-directing adolescents' sexual behaviour, while 25% and 16.7% said "undecided" and "not persuasive" respectively. McGuire (1981) lists factors that could determine how persuasive messages are rated. Some of these factors are source related and include: credibility, attractiveness, power source training, personality and ability. Other factors include message factors such as: message appeal, delivery style and organization of material. Channel factors, receiver factors and destination factors, were also some of the identified factors.

Opinions of the 25% in the "undecided" category and the 16.7% in the "not persuasive" category bordered on some of the non-persuasive qualities of *one thing at a time* and *radio diary*. It is however, pertinent for us to see why 58.3% considered these programmes as "persuasive". Findings show a general consensus in both the Idoma and Tiv speaking research communities on the persuasiveness of *one thing at a time* and *radio diary*. According to these respondents:

*One thing at a time and radio diary programmes have achieved a lot even within a short time of existence, especially in the area of getting the people to accept and show love and care to people living with HIV and AIDS. This has significantly reduced the stigma and discrimination associated with the disease and those living with it. These programmes have achieved these because they are informative, educative and equally interesting.*

Twenty-five percent 25% of the respondents who were undecided about the persuasive nature of the programmes faulted the credibility, and organization



of materials in these programmes. For instance, one respondent had this to say about the *radio diary* "The programme is ok but there are loopholes to be corrected" one of such loopholes as another respondent indicated was that the time was not enough for a programme like this and should be improved on. More fundamentally, it was observed by one of the respondents that:

*when you are doing something and there is a mistake, it creates room for suspicions, I remember, in the fourth episode or so, where the voice of a man was presented, instead of that of a woman, and the introduction referred to the diarist as a woman. So if there's a problem like that, the listeners will begin to suspect, and that will cause them to begin to withdraw.*

The other 16.7% said the radio diary was not persuasive because the signature tune was not attention catching in the first place, and that, it was produced only in the local languages (vernacular). According to one of the respondents "programmes like these should come with music (signature tune) that will portray the idea about the programme, and should be capable of catching attention".

Seen in the light of the data presented above, while it would not be out of place to say that *one thing at a time* and *radio diary* were found to be somewhat persuasive especially in provision of information meant for re-channeling adolescents' sexual behaviour in North-Central Nigeria, we should not lose sight of the fact that these programmes, especially *radio diary* was fraught with credibility and organizational challenges. These challenges were however, crucial and rather than attempt to convict the target audience, did cast doubts on their minds. The remarkable aspect that received general consensus was that 15 minutes timing for each of the two programmes was grossly inadequate. This is because there is need to present a lot of information and facts to be able to convince and consequently persuade others to a point of view being canvassed.

Results in Table 3 show the quality of impact which *one thing at a time* and *radio diary* had on adolescents in North-Central Nigeria. Fifty percent (50%) of the respondents attested to the cognitive impact of the programmes, 33.3% concurred to their affective ability, while 16.7% averred to their behavioural impact. What this means is that these programmes have had more impact in creating or raising awareness of adolescents on the risks involved in risky and irresponsible sexual behaviour, but have done little in terms of changing adolescents' risky sexual behaviour which more often than not, puts them at risk and makes them vulnerable to sexually transmitted infections. In fact, as one of the respondents posits "we know what we should and should not do to avoid sexually transmitted infections, but our physical urges have often been stronger than our rationality, thus, driving

us into indiscriminate sexual escapades". Another respondent who shared a similar position averred that "these programmes help in further exciting interest in sexual experimentation". Such experimentation, invariably leads to more promiscuity and further increases the risk that these programmes were conceived to reduce.

Sixteen point seven percent (16.7%) of the respondents however, offered a contrary view. According to one of the respondents:

*I have observed a general trend among adolescents, especially those living in the neighbourhood, they appear to show some restraint, and exercise more caution in their sexual behaviour in recent times. This behaviour is not unconnected with their exposure to the two radio programmes in question.*

These findings confirm earlier research findings that "changing the behaviour of people can be a very difficult task. . .changing behaviour is a gradual and sustained process"( McGuire, 1981). Furthermore, they confirm the findings of Klapper (1960) that "Mass communication ordinarily does not serve as a necessary and sufficient cause of audience effects, but rather functions among and through a nexus of mediating factors and influences". Katz and Lazarsfeld (1955) in their classic study of the 1940's US Presidential election underscored the centrality of opinion leaders as one of the key factors or influences in the dissemination and perceived influence of media messages on their audience. What these mean is that, the media, and in our context the radio medium through the programmes: *one thing at a time*, and *radio diary*, has had limited direct influence in attaining attitudinal and behavioural changes in adolescents' sexual behaviour in North-Central Nigeria. What this means in effect is that if major attitudinal and behavioural changes in the sexual behaviour of adolescents in North-Central Nigeria are desired, interpersonal channels of communication such as face-to-face communication, especially with opinion leaders like parents, religious leaders, and community leaders, is desirable.

### **Summary and Conclusion**

The foregoing analysis was based on the study of two selected radio programmes – *one thing at a time* and *radio diary* which addressed adolescents' sexual behaviour in North-Central Nigeria. In Summary;

- \* The study has strengthened the position that adolescents need a great deal of information about sexuality education; and the media, especially the radio medium through its programme content is faced with the responsibility of helping adolescents to understand, appreciate and prevent or minimize the risks involved in risky sexual behaviour.
- \* The programmes have been effective only in raising awareness of adolescents on the risks involved in risky and irresponsible sexual behaviour, but have

done little in terms of changing adolescents risky sexual behaviour, which often puts them at risk and makes them vulnerable to sexually transmitted infections. In fact, the programmes have invariably contributed to more promiscuity by exciting interest in sexual experimentation.

- \* The programmes are devoid of a strong behavioural change component.
- \* Results provide very weak evidence that the programmes have reduced adolescents' risky sexual behaviour.
- \* The programmes are not long enough in duration to be effective. They don't provide enough detailed information about how to minimize risks and do not provide immediate feedback or interactive mechanism for follow-up questions and further clarification of confusing points.
- \* Findings underscore the centrality of interpersonal communication channels for effective attitude change.
- \* Findings show the radio medium as the most accessible channel in Nigeria for information dissemination on social mobilization.
- \* Information communicated through the programmes does not conform to the social realities of the target population (adolescents) in terms of their aspirations and perceptions of life.

## **Recommendations**

The following recommendations are necessary imperative in boosting the effectiveness of *one thing at a time* and *radio diary* programmes in re-directing adolescents sexual behaviour in North-Central Nigeria:

1. There is an urgent need for the programmes to provide enough information about sexuality education as this would help adolescents' to adequately understand and prevent the risks involved in risky sexual behaviour.
2. There is also a need to re-train the producers of these programmes so they can have a better understanding of the programmes and re-package them to have a strong behavioural change component; for it is the risky sexual behaviour that puts adolescents at risks.
3. The transmission time for these programmes which is approximately 15 minutes, should be extended to 30 minutes. This is to ensure that a number of issues the listening target audience (adolescents) need to know about are adequately addressed. It is also recommended that a two way communication exchange be established to facilitate interactions between the discussants and the listening adolescents (this is especially, true of *radio diary*). This will go a long way in eliminating suspicion, and could be achieved through phone-in-lines. For *one thing at a time*, it is further recommended that other possible variants such as discussions, and music, drawn or composed from the experiences of infected adolescents be used.



These variants will make the programme even more attractive to the key target group.

4. There is a strong need for adequate counseling of adolescents' in North-Central Nigeria on how to handle sexual feelings and how to evaluate relationships with peers, especially those of the opposite sex. This underscores the need for interpersonal communication channels.

## REFERENCES

- Ademuwagun, Z. Ajala, J. Oke, E. Moronkola, O. & Jegede, A. (2002) *Health Education and Health Promotion*. Ibadan: Royal People (Nigeria) Ltd
- Daramola, I. (2003). *Introduction to Mass Communication*. (2<sup>nd</sup> ed.): Lagos: Rothan Press Limited.
- Federal Ministry of Health (2001). *National HIV/Syphilis Sero-prevalence Sentinel Surve*: Abuja..
- Folarin, B. (1998). *Theories of Mass Communication: An Introductory Text*. Ibadan: Stirling-Horden Publishers (Nig.) Ltd.
- Gunter, B. (2000). *Media Research Methods*. London: SAGE Publications.
- Katz, E. & Lazarsfeld, P. (1955). *Personal Influence*. New York: Free Press.
- Klapper, J. (1960). *The Effects of Mass Communication*. New York: Free Press.
- McGuire, W. (1981). "Theoretical Foundation of Campaigns" In Rile, R. & Paisley, W. (eds) *Public Communication Campaigns*. California: SAGE Publications Inc.
- Moronkole, O. & Okanlawon, F. (2003). *Fundamentals of Public and Community Health Education*. Ibadan: Royal People (Nigeria) Ltd.
- Federal Ministry of Health Nigeria (2003). *National HIV/AIDS and Reproductive Health Survey*. Abuja.
- Nigerian Educational Research and Development Council (2001). *The National Sexuality Education Curriculum*. Abuja.
- UNESCO (1981). *Many Voices, One World*. Ibadan: Ibadan University Press.