EFFICACYOF RAMENY RADIO'S *NGIMADHANO*PROGRAMMEIN PROMOTING THE UPTAKE OF CONTRACEPTIVES AMONG THE WOMEN OF CHAM GI WADU DIVISION IN MIGORI COUNTY, KENYA

BY

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DECLARATION

By Student:

I declare that this research project is my original work, and as far as I am aware, it has not been presented for the award of a degree in any university.

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Sign…… Date ……

Approval by supervisor:

This research project has been submitted with my approval as university supervisor.

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ACKNOWLEDGEMENT

First, I convey my uttermost appreciation to God for the energy input in this work. I wish to recognize the support from Dr. Omukule Emojong', my supervisor for casting confidence in me and giving me ideas that made the study a fulfilment of knowledge.

DEDICATION

To my parents, Enos Obuya Achar and Mary Shisia Luta, for their words of encouragement and unwavering support that made my rise in the field of academia possible to this level. Special thanks to the late Joel Achar -my grandfather, the late Agnes Aneya Achar - my grandmother, Nafula Wamalwa my wife and my children.

ABSTRACT

The main objective of this study was to investigate the use of community radio in the promotion of contraceptive uptake in Cham Gi Wadu Division within Migori County. This was deemed as a representation of women in the rural areas of Rongo Sub-County. Community radio being a traditional mass media, has been used in behavior change campaigns to address unmet need among women in this division. Statistics indicate that most women in this division were still reluctant to have children or want to delay having a child or limit the number of children to bear while at the same time not using any modern family planning method. This study, therefore, sought to establish the efficacy of Radio Rameny's *Ngima Dhano* programme on the uptake of contraceptives among women of Cham Gi Wadu Division in Rongo Sub-County. The objectives of the study were to establish the efficacy of *Ngima Dhano* Community radio programme in creating awareness, on changing attitude and on acceptability of contraceptives among women in Cham Gi Wadu Division. Agenda-Setting theory by McCombs and Shaw (1972) and Knowledge, Attitude and Practices model which originated from Learning Theory (Bandura, 1796) and Diffusion of Innovation theory by Roger, (1995) informed the study. This study employed mixed method research design. Simple random sampling technique was employed to pick a sample size of 400 respondents that was arrived at using Yamane Sampling Formula (1967). Content Analysis was conducted targeting six recorded aired programmes between May-October, 2023. Purposive sampling technique was used to pick two Key Informant Interviews. The study adopted various tools, such as questionnaires, interview schedules, and coding scheme as data collection tools. Quantitative data preferred tool of analysis was descriptive statistics, while qualitative data adopted content analysis. Results presentation was in tables, graphs and textual formats, while qualitative data was presented using narratives and quotes. The study targeted reproductive health communication, formulation of policies on family planning by Government and Non-Governmental Organizations. The study indicated that community radio broadcasts have immense outcome on the uptake of contraceptives and its benefits. From the study, the *Ngima Dhano* programme imparted high knowledge and awareness to both listeners and the community at large. There was also an overwhelming positive attitude towards contraceptive uptake, leading to increased acceptance of contraceptives. This was attributed to through addressing biased information through programme content and listenership participation.

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LIST OF ABBREVIATIONS AND ACRONYMS

AFIDEP	:	African Institute for Development Policy
BBC	:	British Broadcasting Corporation
CBO	:	Community Based Organisation
CA	:	Communications Authority of Kenya
COMBI	:	Communication for Behavioural Impact
COVID-19	:	Coronavirus disease 2019
DHS	:	Demographic and Health Survey
HIV	:	Human Immunodeficiency Virus
KAP	:	Knowledge, Attitude and Practices
KNBS	:	Kenya National Bureau of Statistics
KDHS	:	Kenya Demographics and Health Survey
KNCHR	:	Kenya National Commission on Human Rights
KUMS	:	Kerman University of Medical Sciences
LCA	:	Lwala Community Alliance
MDDA	:	Media Development and Diversity Agency
MOH	:	Ministry of Health
MCK	:	Media Council of Kenya
MUERC	:	Maseno University Ethics Review Committee
NACOSTI	:	National Commission for Science, Technology and Innovation
NDHS	:	Nepal Demographic and Health Survey
NGOs	:	Non-Governmental Organisations
PMG	:	Parliamentary Monitoring Group
SDG	:	Sustainable Development Goal
SSBs	:	Sugar-Sweetened Beverages
US	:	United States
SPSS	:	Statistical Package for Social Sciences
STD	:	Sexually Transmitted Diseases
TPB	:	Theory of Planned Behavior
TV	:	Television
WHO	:	World Health Organization

OPERATIONAL DEFINITION OF TERMS

Acceptance: Capacity of women to agree and use of contraceptives

Community: A community is a group of people having similar characteristics and interests based on cultural orientation.

Contraceptive: Any modern ways including drug, a device, or an implant used to inhibit pregnancy.

Household: Individuals who are living together in the same house and having their daily meal from the same place.

Guru: Somebody with a training and can give an expert opinion.

Efficacy: Capacity to deliver an expected outcome in line with the study

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CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

1.1.1 Contraceptive Use and the Radio

Family planning and use of modern contraceptives as an aspect in health communication and behavior change has been used to educate, inform and communicate. Through mass media, more so the radio, it has been yielding expected results. These included increased knowledge and perception domains, stakeholders considering appropriate policies and supporting women to make harmonized family planning decisions with community radio not being left behind in these campaigns. According to Kenya Demographic and Health Survey report of 2022, Kenya contraceptive prevalence rate was at 57%. Migori County was still struggling to increase its uptake of contraceptives. This is with the current unmet need for family planning at 20.1% against the national unmet need at 13.9% with a National Fertility Rate of 3.159% according to the World Bank Report of 2023 on Family Planning. This was still above the expectation of the Kenyan Government in line with its second objective in Vision 2030 on Family Planning (Kenya Government Commitment, 2021) and Sustainable Development Goals (SDGs) number three (Good health and well-being for all), sub-section 7 that addresses universal access to sexual and reproductive care, family planning and education. Further, the current Kenyan fertility rate stands at 3.19 (Kenya Fertility Rate, 2024) against the global fertility rate, which is currently 2 births per woman, after a decline for several decades, and is projected to continue to fall, reaching 2.1 in 2050 and 1.8 in 2100 (United Nations, 2024) This is with indications of factors affecting fertility rates, including; Economic development, access to birth control, education, marriage and family structure, government policies, health and mortality and migration (Database. Earth, 2024).

According to Mankelkl et al (2024) in a study on factors associated with modern contraceptive utilization among reproductive age women in Kenya as was evidenced by the 2022 Kenyan demographic and health survey, 76% of married women and 89% of unmarried sexually active women had a high need for planning of families. Similarly, 14% of women who were married, aged between 15–49 years and 19% of unmarried women but sexually active had unmet wants on matters of family planning. Further, if the majority of women who expressed their desire to

want space or reduce the number of children had adopted family planning methods, this would lead to an increased contraceptive prevalence rate from 62.0% to 76.0% among married women currently and from 70.0% to 89.0% unmarried women (sexually active).

Migori County has 2.1% of women out of the total Kenyan women population. The total fertility rate is high for women in rural areas contrary to those in urban areas. This is despite a declination of 7.1 (1989) children to 3.9 (2022) children in rural areas. This is against the current Kenyan birth rate of 27.357 and a fertility rate of 3.259, respectively, according to the (United Nations, 2023), against World standards of 2.1 children per woman. Migori County is fifth among other Counties with high unmet needs for family planning, including Marsabit 37.5, Tana River 33.6, West Pokot 30.3, Samburu 29.4 and Siaya/Isiolo 27.5. The five Counties fall within the scope of investigations based on the high unmet need for family planning against the 13.1 National unmet need.

This is despite past studies conducted in the County which still projected high unmet need for contraceptive use above the national unmet need. A study was conducted in eight wards within the County namely: North Kamagambo, East Kamagambo, South Kamagambo, Central Kamagambo, North Sakwa, Central Sakwa, Central Kanyamkago and West Kanyamkago. The study focused on prevalence and determinants of contraception utilization over time in Migori County. In its findings, the overall prevalence of modern contraception use across all regions studied in 2021 was 64.3%, which was slightly higher than the prevalence reported in the survey in 2018/19 (63.3%), and higher than Kenya's 2022 national average of 59% among married women, as reported in the 2022 Kenya Demographic Health Survey. However, in the study catchment area, the implant, injectables, and the male condom were the most reported contraceptive methods used across the two study periods (Li et al.,(2023).

Radio has transmission and dissemination power across the various parts of Sub-Saharan Africa. In Kenya, despite the rapid growth of digital media, radio continues to be a widely embraced medium, with approximately 77% of the population engaging with radio content (Agalo, 2023).In this regard, the same or improved delivery tools have been adopted to easily communicate family-planning information for greater outreach to more target populations. The study factored contraception in the rather static production of food and continual growth of

population, balancing life, work, and education (Meekers et al., 2023). Community Radio Stations have been included in this campaign, with studies on behavior change demonstrating a positive relationship between media exposure and behavioural change (Gong et al., 2022).

According to the Kenya Population and Census 2019, Migori County has 238,133 households. Out of this, 59.8% of households own a radio while 28.1% own a functional Television (TV). Within Rongo Sub County, there are 29,007 households with 62.9% owning a radio while 34.1% owning a functional TV. This was above the national projection where households owning a radio was at 58.5% in the rural setup while in the urban setup it was at 54.4% whereas TV was at 62.5% in the urban setup while for the rural setup it was at 26.9%.Accordingly, the number of people who own the radio in the County was more than those who own Television.

In a survey report by the Media Council of Kenya on the state of the media, 78% of listeners admitted to listening to radio for information, a remarkable improvement of 4% from 2021. This was more so for rural occupants than urban occupants. This made radio a more popular mass media trusted for channelling information (Media Council of Kenya, 2022). In Kenya, while radio remained a popular medium, listenership had seen a slight decline, with 75% of respondents consuming radio content in 2023, down from 78% in 2022, as digital media consumption rose. According to the Media Council of Kenya State of the Media Report 2023/2024, a substantial percentage of Kenyans watched television daily, with over 50% of households owning a TV. Urban residents exhibited higher TV consumption rates compared to their rural counterparts, while radio consumption was more prevalent in rural areas.

Rameny 88.3 FM, formerly a community radio station, was established in 2014 under WINAM Community Based Organisation (CBO) operating within Rongo Sub-County but first went on air on 23rd November 2015. It is located at Maganda Plaza along Rongo-Kisii road within Rongo Township in Migori Sub-County. The radio airs programmes on agriculture, health, education, politics, and economic, social and religious issues affecting the community. *Ngima Dhano* health programme was being sponsored by Lwala Community Alliance (LCA), a Non-Governmental Organisation (NGO) that runs the Lwala Community Health Centre in Rongo Sub-County. However, in January 2024, the station changed from a community radio to a commercial radio station after successfully re-registered by the Communications Authority of Kenya (CA) under Winum Bestcom Company Limited. Despite the change in the radio status, the station has

continued to broadcast the programme as a core mandate with more interest in promoting the uptake of contraceptives within the County, hence airing the programme every Friday of the week between 1915 and 2015 hours under the sponsorship of Lwala Community Alliance.

1.1.2 Community Radio

Mac'Ouma, (2021) in a study conducted in Migori County on peaceful campaigns, cited Rameny radio as the most dominant community radio in Rongo Sub-County. He asserted that this radio was transmitting programs on education, economics, health, family life and spiritual nourishment and it included live phone calls from listeners who the host presenters invited during live debates in the programmes.

Mass media has continually been used to convey messages about health risks and improvement of awareness. This was all done with the primary purpose of eliciting behaviour change, which was a preventive measure in the long run (Wogu et al., 2020).At the core of behavior change campaigns was the use of the media to inform and persuade the masses. This has largely been the case within Sub-Saharan Africa, where media has become a critical component of societal development by mobilizing the masses to embrace specific core values/practices (Szilvasi, 2023).Mass media has also been demonstrated to influence people's attitudes and behaviour. Based on this background, experts in health communication have continually utilized mass media, including community radio stations, because of their unique characteristics (Szilvasi, 2023).

Asuman et al (2019) affirmed that people do not prefer community radios for entertaining, but rather for participating in communication. The radio was a voice to the locals, owned and run by the natives. The study further revealed that people found community radios more reliable due to the media's unique characteristics. Additionally, they found the broadcasted content understandable, valued and reliable, hence the acceptance. Additionally, changes were realized in personal attitudes, self-efficacy beliefs and subjective norms. This prompted them to engage in environmental, health, economic, social and cultural initiatives that are also sustainable in their day-to-day lives. This makes community radios reliable, contrary to other radios that concentrate on charity work, religious activities or profit making.

Community radios are broadly considered as non-profit making. They are owned and operationalized by the community and handle activities within the community. Their main focus was often to enhance social development through participation of the community, educational and empowering processes (Pavarala, 2021). This was contrary to commercial radios, which had wider areas of reach to fulfil high profit-making margins, while community radios appealed to large audiences in given communities not based on audience measurement services, unlike commercial radios. Community radio stations routinely had community-oriented programmes tailored by local community members for the benefit of the locals.

Sobel Cohen et al(2019) in a study conducted among Kenyan journalists on whether Kenyan Community radio stations were helpful or harmful to their audience, revealed the unique roles that local radio stations play in Kenya. The roles ranged from provision of information that was timely, significant, and reachable to a wide-ranging geographic area. These radios connected the listeners to their local languages and assisted them in keeping their traditional culture awake. The community radios also contributed immensely to the nation's vibrant media landscape by improving levels of education and health awareness of the country and enabling well planned operations within the communities.

Okinyi et al (2019) denoted that communities had recoiled into community radio stations so as to articulate community concerns, cultures, and languages. These communities' common grounds were cohesion and inclusion, making them homogeneous; contrary, communication was the way sought to establish homogeneity (Okinyi et al., 2019). Local radio stations had stimulated community reflection, uniqueness and character identity, thereby improving community development. Access to on-air mode through call-ins, text messages, and adlibs established and examined issues and solutions to the needs of the community. In order to understand community radio, the upholding of information flow, literacy and development agenda-setting absorption, the radio broadcasts appreciated the position of the community radios in Kenya (Okinyi et al., 2019). He affirmed that in Kenya, community radio stations had increased including those owned and manned by Kenyan universities with a mission of empowering the community through propagation of information. Communication Authority (CA) has permited community broadcasting licensees to even air commercials within their broadcast range. Majority failed to distinguish between vernacular radios and community radios despite the immense variance of the

two. The community radio's qualification for the genre, the ownership and control of the station must rest with the community that it served entirely (Okinyi et al., 2019).Among the underlying challenges facing community radio stations was competition from commercial radio stations, which had progressively concealed feelings on community radio stations that also served community wants/needs. No adoption of unique characteristics within community development was initiated through the radio rather than the antagonistic/influential positions (Okinyi et al., 2019).

Biwot and Mberia, (2019) noted that Kalya FM had an upper hand in the conflict resolution in West Pokot (County). It was evident that through the community radio, they were disseminating messages of peace in conflict-prone areas, as was documented in the International Journal of Social Sciences and Information Technology in May 2019. This was observed for the actual conflicts but also during the post-conflict period (Biwot and Mberia, 2019). Furthermore, the radio hosted a unique platform. The platform was used for discussions on social issues and increased accountability for leaders/ administrators with the aim of building and maintaining peace and tranquillity. Kalya FM radio continued to provide a medium for fruitful discussion on peace and reconciliation amid the belligerent communities, with peacetime initiatives complementing government determinations to encourage non-violent co-habiting.

Besides the financial crisis, Myres et al (2020) indicated that the proximity of community radio stations worked round the clock to sustain their editorial independence. With this, the radio stations strived to make ends meet and resisted political pressure (Myrers et al., 2020). Other key issues included the assumption that donors foster better media content. Further, donor funding fixated the various stations to be focused on donor-chase, saving techniques on money and dependent on volunteers (Myrers et al., 2020). The over-dependency on volunteers in community radio stations also comprised professionalism standards in these stations. It also exposed them to the vulnerability and temptation of "brown-envelope-journalism" hence a likelihood to put off listeners, gradually losing the radio stations and subsequent closure. Their sole duty is to safeguard the smallest audiences they serve. A key instance is Pamoja FM station during the post-election violence in Kibera slums in Nairobi. The radio offered voices of different communities within Kibera and managed to quell them down. The way they are owned and operated is way different from profit-making media. Equally, community media had challenges,

including raising fees for licenses were high as the commercial stations and finances were often inadequate.

On other challenges facing community radio stations and probable interventions, a South African Parliamentary Select Committee report published on the Parliamentary Monitoring Group Website (2020) after deliberations with the Media Development and Diversity Agency (MDDA), a body established in 2003 that promotes, ensures media development and diversity highlighted a number of challenges. They included high operating costs, generating revenue, poor governance, insufficient financial management skills at community radio stations, and difficulty in content creation, hiring of staff, and adjustment to technological advancement. These made it difficult for some community radio stations, hence necessitating that they go off the air or were facing a financial crisis to have transmission aired. According to the submissions, financially needy radio stations were occasioned by strict licensing requirements by the Independent Communications Authority of South Africa (ICASA), hire expenses in signal distribution, and tax returns. Additional challenges included the unwillingness of businessmen/women to allow for adverts in the radio stations.

Further, it highlighted high operating costs, which included the radios meeting the high transmission costs, leasing of premises and over-reliance on volunteers and well-wishers leading to high turnover. Access to Government, including advertising for commercial needs, was part of the challenges due to scarce Government adverts on local radios and lacking reliable audience figures. According to this report, there was a need for quality content creation and inclusion of community concerns to spur socio-economic objectives on access to information. Allocation of funds for equipment (digital), training and mentorship of first-time media personnel, as well as seeking more support for community radios in transiting and dissemination of digital news, was also raised. Stiff competition for limited advertising and reach between community radios and commercial radios was also a challenge, as some radios were not amply economically active to attract advertisers, hence not being self-sustained (Bulani et al., 2021).

Going forward, the government should focus on challenges that posed a threat to the full attainment of operations and obligations to community radio stations in Kenya. These included legislation of policies and their implementations in favour of community radios, affordable costs for radio installation and equipment costs, and tax reduction. This will increase willingness to set

up more community radios to spur community development. Enforcing the Code of Conduct by the Media Council of Kenya (MCK) to all media practitioners and monitoring the professional conduct of journalists was also key. Proper training of journalists broadcasting in the community radio stations was also mandatory to better the audiences' lifestyles and living standards.

1.1.3 Radio and Behaviour Change

In the past, the media has been used to address behavior changes in family planning, with the role of radio recording diverse results globally, regionally, and locally. Behavioural change was concerned with the long-term effects that led to altering habits and behaviours (Van Wee et al., 2021).

Van Wee et al(2021) denoted that for a complete behavioural change, three stages of the change model had three important elements: readiness to change, barriers to change and the likelihood of relapse. In this case, the behavioural change was evaluated as a gradual process that, in some cases, had often relapsed. The Global adoption of the radio has rapidly led to an increase in media transmission. Most countries today have numerous radio stations that would even go a long way in the transmission of regional and local languages. This has led to the adoption of the radio as a rapidly growing transmission system for communication.

An estimate by the United Nations was that three out of every four homes in the developing world had radio access. This set out a scope of more than 44,000 radio stations spanning the globe as of 2018. Meanwhile, traditional broadcast radio had the highest influence in the way they disseminated important messages, (Oparanugo, 2021).

Pavarala et al(2022), in a study done for South Asia and India on community radios as a change agent radio, pointed out that this radio was a reality and penetrated the grassroots and not-for-profit making in India as early as 2006. This was propagated after a Supreme Court judgment in 1995 that declared airwaves in India a public property to be utilized by the public for the public good. The declaration led to about 289 community radio stations that the Government of India licensed in the entire Country, which were situated in areas that were underserved by the mainstream media. Further, community radio gained mileage in contributing to various development and social change activities by involving the communities in radio programming, which was then produced in local Indian languages to act as a voice for the voiceless in championing their agenda.

Africa today had numerous radio stations, some of which were transmitted in the local and vernacular languages. In Burkina Faso, a study conducted by Development Media International (DMI-2020-2021) in a thirty five months community radio drive gave promising results. The use of the radio was chosen because of the far-reaching scope in rural areas. The design was aimed at the reduction of infant mortality (under 5) and the evaluation design selected was a recurrent cross-sectional method, cluster-randomized design. In its design, nineteen distinct geographical points were located using digital terrain maps and engineer's modelling alongside the ground mapping for radio signal strength. The study indicated that for every geographical area, there was access to one or more radio stations, with negative overlapping of the signals. Later, the women residing in the selected geographical areas were assessed using a cross-sectional survey. Consideration was done for the areas that reported a high level of listeners (over 60% of the women) were included in the test.

The other areas were randomly selected for the intervention means and another seven for control parameters. The study showed that the baseline parameters established from a sample size of 5,000 mothers for the particular survey showed an absolute precision of ±3.0% for better behaviours relating to all kids. Also, there was an improvement in the behaviours related to childhood sicknesses like fever and diarrhoea. Further, the survey indicated that radio campaigns doubled the modern contraceptive prevalence rate while impacting more knowledge and attitudes regarding family planning. This was a clear indication that the exposure time and the sample size were adequate to establish some changed in the behavioural patterns; for the sample scope that was studied with the effect of the radios.

Adedini et al (2023), while making a comparison on contraceptive discontinuation amongst parenting adolescents and young women in sub-Saharan Africa, noted that African leaders had in the past opposed the use of contraceptives, viewing the use as a Western imposition aiming at slimming African populations. However, the promise of the demographic dividend had kindled a resurgence of interest in population and family planning issues. Many leaders gradually realized the role fertility decline played in harnessing the demographic dividend and were thus advocating for improved family planning programs. The researcher cited President Yoweri Museveni of Uganda, who applauded the linkages between population and development that exhibited how countries could take advantage of their population dynamics to accelerate

socioeconomic transformation during the 2014 inaugural Family Planning Conference that was held in Uganda.

Taylor et al (2017), while examining the impact of population growth and climate change on food security in Africa with a projection for 2050, denoted that most African Political leaders were advocating for a high birth rate even though around the globe, the campaign was otherwise. Their reasons were elicited by the fact that during the election, their community played a significant role in the selection of leaders. It was also believed that large communities had a big say when it came to voting and bargaining for political positions. Accordingly, in most African countries, people voted along tribal lines and in most cases, when large communities joined hands, they were likely to give national leaders like presidents. Kenya was a classic example where leadership is left for communities with more population. In some regions, political leaders had come up with programs to promote a high birth rate, where any expecting mother was promoted by giving them some amount of money so as to encourage more women to conceive (Taylor et al., (2017).

In Kenya, there were212 radio stations, with 58 community radio stations (CA, 2022), all transmitting in the local and vernacular languages. The local languages were favourable for effective communication that could easily sway the audience and hence making behaviour change easier. According to Fombad et al (2019), broadcasting in the local language ensured a higher chance of causing a sensation of belonging to most people in communication media. Radio was more than just presenters, news, and songs but provided real-time information by broadcasting 24 hours a day giving latest updates to its listeners. Radio could extend across borders as an information source where reliable news was scarce. Additionally, people could only be influenced through using the language they understood from the people they know. This has furthered the interest that this study sought to determine the efficacy of Rameny Radio and its *Ngima Dhano* health program messages on contraceptive uptake among women in Cham Gi Wadu Division.

1.1.4 Radio and Family Planning

With reference to the standard Demographic and Health Survey (DHS) conducted in 33 Sub-Saharan Countries (SSC), there was high fertility in the Sub Saharan Africa (DHS, 2010-2018). Concerns about high fertility rates and low contraceptive prevalence in Sub-Saharan Africa had

led to a stimulated policy program effects aimed at promoting family planning in the region (Adekoya et al., 2019). A substantial amount of resources was spent to educate on the merits of having lean families. Government and private agencies had used mass media to achieve these objectives. According to the study, the use of media in this campaign has effectively propelled change of behaviours in terms of family planning and its uptake among women. Medbo et al (2019), believe that mass media was not only used to generate awareness but also to motivate people's desire to gain much information and facilitate the effort to put the messages into practice. Apart from promoting the use of family planning through media, communication gurus also used an education approach. In this approach, entertaining components of media such as songs, talk shows, and drama had been employed to emphasize the intended message. It has been evident from recent studies that there was a correlation between mass media and family planning in developing countries and that media had influenced the general behaviours of people. According to the study by Matt (2018), in Ghana and Nigeria, there were exceptional solid similarities between media disclosure of contraceptives for the various communications media and contraceptive components.

Akoth et al. (2021) argued that women who had been exposed to the family planning agenda through mass media were most likely to use contraceptives, leading to a strong desire for a limited number of children. By the fact that a larger percentage of women were still hesitant to use contraceptives especially in developing countries and that majority of women with low education levels were more likely to show sluggish acceptance of the use of modern methods of birth control, this study seeks to establish if there was a change in behaviour brought about by *Ngima Dhano* health programme.

This was driven by the fact that most community radio programs were developed by the community around the target audience (Akoth et al., 2021). According to KNBS (2019), only 15% of women in Migori had secondary education. The researcher desired to discern if community-owned radio through a local CBO initiative within Migori County had a positive impact on women with low education levels in contraceptive uptake within rural set-ups.

Habiboy and Zainiddinoy (2019) stated that through radio broadcasts, some countries and communities made wide steps toward achieving optimum population control. They added that through radio programs that focused on the subject of public health and family planning, Latin

American countries such as Honduras, Brazil and Chile had significantly managed to reduce their population and infant death rate by a significant margin. In Brazil, for instance, every location had a radio channel that aired issues that affected that community and positively addressed community challenges- reproduction health. According to Diniz et al(2020), Radio Difusora AM was a good example in Brazil, where a program on family planning was run, and the result was very impressive to the listeners when the study led to the revelation of the effect of the use of the media to relay information regarding family planning. Nigeria, in the recent past, employed media in sensitization on family planning where the research showed immense improvement in birth control (Oyedele, 2021). This came after the government of Nigeria employed several methods, including offering free contraceptive devices. The sensitization of family planning through community-based organizations in North-West of Nigeria led tomore adoption of contraceptives by 6.2 percent.

Sub-Saharan Africa had very high birth rates, which can be attributed to many factors, including increased health care. The aspect of family planning had, therefore, been vastly spread to curb the high-rising population in those areas. Moreover, in Kenya, population control was one of the main functions that was being advocated for by the government through improved family care. According to Jarzyna et al (2021) radio brought unique entertainment chances to people that was affordable. The radio stations not only entertained the locals but also educated. Family planning will be geared towards improving the quality of life that the audience can live; hence,the adoption of changes is higher.

Peytrignet et al (2019) noted that in Kenya, many campaigns carried out to ensure there was birth control, but still, it remained among the fertile nations with a birth rate of 27.357 (World Health Organization, 2023) and a fertility rate of 3.9 (World Health Organization. 2023). According to their research, it was evident that large numbers of people still believed in their traditional way of life and they were reluctant to abandon them as far as family planning was concerned. With the emergence of Local community radios, it was vital to determine if the programme carried in community radios, specifically Rameny Radio, had some influence on behaviour and attitude towards family planning and practices. With the limitation of radio stations that sought to address gaps such as deficiency of knowledge in family planning in rural blocks, maximizing the exploitation of community radios was significant.

Family planning had become a global issue due to the rapid expansion of the human population. In 2020, for instance, the growth rate was 1.05% per year, which led to an average increase of around 81 million people per year (Worldometer, 2022).

According to World Health Organization report (2019), young married women aged between 15-24years had advanced experiences when it came to greater unmet needs on contraceptives use than young married and unmarried sexually active of age 25-49 years. Similarly, in Sub-Saharan Africa, nearly 50% of married young women had stated unmet contraceptive needs. Ethiopian Demographic and Health Survey (2019) revealed that 18.7% of 15.0–19.0 year-old married women stated unmet needs for contraceptive use. This was high in comparison to 14.8% for women who were married. In the case of married women one-third have unmet needs when it came to the use of contraception (Dingeta et al., 2019). According to Dingeta et al (2019), household autonomy in terms of making of decisions and access to family planning information was the basic aspect connected to young married women's unmet needs for contraception. It advocated for more efforts in empowering young women in decision making that affected them and provided correct information to reduce that burden among young women in rural set-ups in Ethiopia.

A study by Dansereau et al (2017) disclosed a correlation between the information relayed and the behaviour change in Chiapas, Mexico. In the research, they noted that most educated women showed significant change in behaviour as they internalized messages they received from mass media and understood. In Cameroon, a study on mass media and family planning presented that the majority of non-educated women still held their traditional way of behaviour because ofa lack of information (Brice, 2018). Another significant fact to notice was that a lot of information the government passed was through national broadcasting media which did not use local dialects. In Kenya, even though many radio stations were mushrooming, few were community-owned. People could only be influenced by using the language they understood and people they knew. It was in this line that the study sought to establish the efficacy of Rameny Radio program on reproductive health and behaviour change towards adopting family planning methods. Radio has served the greater instinct to know; this was for the events taking place around him/her as well as for the distant domains. No stories, but the radio was used to bring news from across the divide without discrepancy. A consistent listener would be impressed by a reduced world, a sensation

that the print media did not bear in the last decade before the invention of the radio, Medbo et al (2019).

Ashimi and Amole (2019), in a study, revealed that rural men accessed radio more than women. A main source of awareness about family planning was radio and 69% in Nigeria listened to Betar programmes on mother and child health, women's rights and development. A recent study based on population representation studies proved a solid connection between exposure to mass media and contraceptive uptake (Yangsi et al., 2017). In 2018, the Cameroon Demographic and Health Survey indicated a reduction in fertility rate to 4.8 (2018) from 5.1 (2011). During the survey, interviews were conducted with regards to acquaintance of women to the Gold Circle campaign and their perceptions on and use of contraceptives. More than a quarter of the women interviewed stated disclosure to the Gold Circle campaign; 52.0% confirmed exposure to the campaign through Radio or Television. It was evident that 1 in every 5 of married women aged 15-49(19%) used any form of family planning, 15.0% of married women adopted modern methods, while another 4% preferred the traditional methods. The survey indicated that 30.0% of women stated they had interacted with family planning messages months before the survey was conducted. A recent study in Northwest Nigeria indicated that messages carried on the radio had a greater impact on family planning in terms of the effect on knowledge and behavior than television or print media such as newspapers/magazines. However, the majority of women with no education remained uninformed on matters related to family planning. The study observed that the chances of knowing of a modern contraceptive method were expressively up among women who had been frequently exposed to radio programs and vice versa.

Maye et al (2020) indicated that in South Africa, community radios played significant roles in addressing family planning. They confirmed from the study that in South Africa and Ethiopia, women who are exposed to Radio broadcasting or any other media were 2.5 times probable to use up-to-the-minute contractive methods as a way of birth control. According to Zonszein (2023), the positive impact of community radio stimulation is attributed to social cohesion by the people and familiarity with the programs since they have been designed to meet their needs.

However, several studies revealed that mass media, particularly radio, had a great influence on the use of modern contraceptive methods (Ahinkorah, 2020). Relatively, Ahinkorah (2020), indicated that the majority of people who were exposure to either radio or television programs on

family planning were 2.5 times more likely to adopt any contraceptive method. This research was guided by the fact that little facts have been revealed on the correlation between the use of community radio and the embracing of modern family planning.

1.2 Statement of the Problem

Since the introduction of modern contraceptive methods as part of family planning, efforts have been put in place to ensure that they were embraced by many for their well-being by use of mass media. Family planning remained very fundamental in order to keep reducing maternal mortality, infant mortality and unwanted pregnancies. It also aimed to decline poverty, improve economic planning, properly provide basic needs and fight environmental degradation. The radio, more so community radio stations, has been used in stepping up these efforts by using different techniques, including airing the *Ngima Dhano* health programme which sought to promote contraceptive uptake among women in Migori County. Despite the airing of these radio programmes that were meant to promote the use of contraceptives, there was still documented low uptake of contraceptives among women. This was despite the County's unmet needs for family planning standing at 20.1% against 67% for the Kenyan Contraceptive Prevalence Rate. The County was fifth among other Counties with high unmet needs for family planning, including Marsabit 37.5, Tana River 33.6, West Pokot 30.3, Samburu 29.4 and Siaya/Isiolo 27.5. Similarly, the County had a fertility rate of 4.2 against the National Fertility Rate of 3.259, with a demand for family planning standing at 74.9%, which is below the Kenyan demand which stood at 82.1% while the Total Fertility Rate is at 3.9 in the rural set up against 2.8 for the urban areas in the Country. This study, therefore sought to establish the efficacy of Radio Rameny's *Ngima Dhano* programme in promoting the uptake of contraceptives for family planning among women of Cham Gi Wadu Division in Migori County.

1.3 Research Questions

i. What is the efficacy of the *Ngima Dhano* Radio programme in creating awareness among women in Cham Gi Wadu Division in Migori County about the use of contraceptives?
ii. What is the efficacy of *Ngima Dhano* Radio programme in changing attitudes on the use of contraceptives among women in Cham Gi Wadu Division in Migori County?

iii. What was the efficacy of the *Ngima Dhano* Radio programme in promoting the acceptance of contraceptives among women in Cham Gi Wadu Division in Migori County?

1.4 Objectives of the Study

i. To find out the efficacy of the *Ngima Dhano* Radio programme in creating awareness about contraceptive use among women in Cham Gi Wadu Division in Migori County.
ii. To establish the efficacy of the *Ngima Dhano* Radio programme in changing women's attitudes towards contraceptive use in Cham Gi Wadu Division in Migori County.
iii. To determine the efficacy of the *Ngima Dhano* Radio programme in engendering the acceptability of contraceptives among women in Cham Gi Wadu Division in Migori County.

1.5 Significance of the study

The study builds scholarship opportunities on research and knowledge in social and behaviour change communications to journalists, health practitioners and other relevant stakeholders. Media studies on the efficacy of community radio stations will contribute immensely to the promotion of behavior change.

The findings of this research will inform policies on reproductive health, which will align with the attainment of objective two of Vision 2030 by reducing unmet needs for family planning from 14% to 10% by 2030. It will also align with Sustainable Development Goal (SDG) number three sub-section seven, seeking to ensure universal access to sexual and reproductive health-care services, including family planning, information and education, and the integration of reproductive health into national strategies and programmes.

This study will also equip Government as well as Non-Governmental Organisations (NGOs) with the necessary skills cum knowledge on how best they can exploit Community Radio stations in promoting Family Planning and Reproductive Health Communication, particularly targeting rural areas. It will also inform on behavior change research on how best Community Radio stations can be exploited in rural areas.

1.6 Scope of the Study

Radio Rameny has a wider reach of over 500,000 listeners given that it is also accessible online. The listeners are drawn from Migori, Homabay and Kisii Counties. However, this study was limited to Cham Gi Wadu Division in Migori County, which was within the transmission radius of the Radio Station. Rameny Radio aired many other programs, but the study was interested in *Ngima Dhano* radio health Programme with a focus on progammes aired between May and October, 2023. Whereas the use of contraceptives targeted several people, this study focused on women who were between the ages of 18-50 years (Kenya Demographics and Health Survey, 2022) and were the prime listeners and a great burden bearer group on matters of family planning. However, there were important others who included men, among others, that presented a gap for future studies to examine their role, perceptions, and individual views on matters of contraception. This study focused on women residing in Cham gi Wadu Division.

1.7 Theoretical Framework

This section presented a theory and a model that guided the analysis of the study's objectives. The theories were the Agenda-Setting Theory and the Knowledge, Attitude, and Practices (KAP) model.

1.7.1 Agenda Setting Theory

The agenda the radio sets informs the strategies. *Ngima Dhano* radio program put in place an agenda on matters of contraceptive use. McCombs and Shaw developed the agenda-setting idea in 1972. The proposition of this theory argued that public opinion will seek to change as a result of the media's attention to certain subjects (Mcquail & Windahl, 2013). Agenda setting comprises of setting the media agenda (coverage), the community agenda (perceptions), and the strategy agenda (regulatory / legislative actions on issues).

Ajakaiye et al (2023),in a study on Media and Public Opinion based in West Africa, focused on the interplay role of Agenda-Setting, Agenda-Building and Framing Theories. The main aim was to look at the key makeup of Agenda-Setting theory that was of great importance in how media was shaping public opinions and attitudes on issues discussed by the media. The study highlighted the main connection of agenda-setting that existed for the various practices of the media and politics in West African countries, namely: Nigeria, Ghana and Mali.

Jung (2019), while focusing on the theory against cultural and political interference, asserted that Korean popular culture was spreading across the world and this was signalling a significant challenge to the traditional one-way flow of media culture interference. The study applied the agenda-setting effect, largely applied to political communication, to the domain of mass-produced popular culture. It explored how Korean media's news coverage of the popularity of Korean TV drama in China influences not only the first and second agenda-setting effect but also Koreans' perception of Chinese audiences (Yung, 2019).

Agenda Setting Theory remained a critical framework for understanding how media influenced public perception and prioritizes issues within public discourse. This theory posits that the media does not merely reflect reality but actively shapes it by highlighting certain topics over others, thereby influencing what audiences perceived as important. The relevance of AST became particularly pronounced when examining the internal and external interferences that affected media organizations, including advertisements, ownership structures, political interests, editorial policies, cultural contexts, and broader political dynamics. Internal interferences within media organizations often stem from editorial policies and ownership structures that dictate the content and framing of news. For instance, ownership can significantly influence editorial decisions, as media outlets owned by large corporations may prioritize content that aligns with the interests of their owners, potentially sidelining critical issues that do not serve these interests. This phenomenon is evident in the Romanian media landscape, where political interference has been shown to impact editorial choices, leading to compromised journalistic integrity and a skewed representation of news (Botan, 2024). Such internal pressures can lead to a homogenization of content, where diverse viewpoints are underrepresented, thereby limiting the public's exposure to a broad range of issues.

Moreover, the role of advertisements as a form of external interference cannot be understated. Advertisements often dictated the content that was produced and disseminated, as media organizations may prioritize revenue-generating content over substantive reporting. This commercial pressure lead to a dilution of journalistic standards, where sensationalism takes precedence over investigative reporting. The hybrid media environment has further complicated this dynamic as journalists navigated external pressures from advertisers and political entities while attempting to maintain their autonomy (Hiltunen, 2021). The interplay between these

internal and external factors has created a complex landscape where the media's agenda-setting function was both challenged and shaped.

Cultural contexts also played a significant role in agenda-setting, as societal norms and values influence what issues were deemed newsworthy. In cultures where specific topics were taboo or politically sensitive, media outlets would exercise self-censorship, thereby limiting the diversity of issues presented to the public. For instance, in Slovakia, journalists had reported experiencing "creeping political pressure," which had led to resistance practices aimed at preserving journalistic autonomy (Urbániková, 2021). This cultural interference could result in a narrow framing of issues, where only those that aligned with prevailing cultural narratives were highlighted, and further entrenched existing biases in public discourse.

Political dynamics were perhaps the most pronounced external interference affecting media organizations. The relationship between media and politics was often fraught with tension, as political entities sought to influence media narratives to serve their agendas. This interference manifested in various forms, including direct censorship, the use of propaganda, and the manipulation of public funds to sway media coverage (Botan, 2024). In democratic contexts, such as Finland, journalists had reported experiencing various types of external interference, which complicated their ability to report freely and accurately (Hiltunen & Suuronen, 2020). The implications of such interference were profound, as they not only affected the quality of journalism but also shaped public perception and understanding of critical issues.

Furthermore, the emergence of digital media introduced new challenges and opportunities for agenda-setting. Social media platforms, while democratizing information dissemination, also created environments ripe for misinformation and external interference through targeted advertisements and algorithmic biases (Hollis & Ohlin, 2021). The ability of external actors to manipulate public discourse through these platforms underscored the need for critical engagement with media content, as audiences must navigate a landscape where the lines between information and propaganda are increasingly blurred. The relevance of Agenda Setting Theory was underscored by the myriad internal and external interferences that shaped media narratives. The interplay of ownership, advertisements, political interests, editorial policies, cultural contexts, and digital dynamics created a complex environment where the media's role as an agenda-setter was both challenged and reinforced. Understanding these interferences was crucial

for fostering a media landscape that promoted diverse perspectives and facilitates informed public discourse.

Naser (2020) sought to look at the correlation and effects of the Agenda-Setting theory in the media world. The study pointed out that there was no proper distinction between the traditional media and the Internet-based media, more so when people relied mostly on a few mainstream media. Further, the study highlighted that there were technological challenges in terms of how the mainstream media influenced the agenda for the general public. Other arguments indicated that the theory was developed when audiences relied more on a few mainstream media with a basic choice of informing them on the understanding of issues. The assumption that people received a common media agenda was also questioned against the new media world with a notion that traditional media had changed from its offensive role in placing the public agenda to a defensive role that required coverage of certain news items which were done in a specific way. In the new media, more information was available, all of which could be collected, traced and circulated at an increased speed as the users had more control of this media, hence more interaction between the senders and receivers of the messages

The scholars also questioned whether internet-based media would change the dynamics of the theory and whether a new model would be required for the digital age (Naser, 2020). The digital revolution, in that case, created new platforms to share and display information. This made today's media more versatile. It also led to audiences readily availing themselves faster, embracing cheaper networks to beat barriers making it easier to consume information. This indicated key positive correlations between new media writers' agendas versus traditional media and thus helped understand how agenda setting worked in the modern media environment. The relationships did not show that a given agenda stimulated another, nor did it help in learning how such agenda-setting worked.

On the criticism of the theory, Mohammed et al (2012) noted that the agenda-setting theory in mass media and communication studies had been widely influential in understanding how the media shaped public opinion by determining what people thought about rather than what they thought. However, like any other theory, agenda setting theory faced criticism and shortcomings. Some of the criticisms of agenda-setting theory included oversimplification –it was argued that this theory simplified the relationship between the media and the audience. It assumed a direct

relationship where the media set the agenda for the public but ignored the complex ways in which individuals interpret and relate to media messages. Additionally, it argued that audiences were not generally passive receivers of messages from media but actively sought out information that aligned with their pre-existing beliefs and attitudes. Agenda-setting theory however, did not fully consider the role of selective exposure in shaping the individuals' perceptions and attitudes, (Camaj et al., 2019). They also revealed that while agenda setting theory focused on how media determined the topics the public thought about, it overlooked the role of public opinion leaders, interest groups and other actors in influencing the media agenda. Agenda setting theory suggested a more dynamic relationship between the media and various societal actors in shaping the public opinions and agenda.

The theory has remained relevant in mass communication due to its practical applications in the fields of journalism, public relations, and political communication (Rangarajan et al., 2020). It was also realized that rise of digital media and social media platforms had transformed the media landscape more so in enhancing knowledge levels and awareness on contraceptive uptake among women.

In this study, the information as provided by respondents would help the radio programme hosts and reproductive health experts to identify which programs which would motivate women in the rural areas to frequently tune into the radio programmes. The programmes remained of great interest to the women as they would enjoy wider listenership in the county. The programmes could also be incorporated into family planning campaigns for more sensitization of women in the rural areas while at same time getting entertained.

Agenda Setting Theory suggests that the media significantly had influences with issues that were deemed important by the public by prioritising specific topics in its coverage. In the context of the *Ngima Dhano* Radio programme, this theory suggested that by repeatedly broadcasting content related to contraceptive use, the programme could elevate the issues salience among its listeners. This means that the programme was likely to create greater awareness about contraception by making it a focal point of public discourse. In essence, if the radio content frequently and prominently featured contraceptive information, women in Cham Gi Wadu Division were more likely to recognise contraception as an important health and social issue.

This aligned with the proposition that media exposure directly contributed to public awareness through issue prominence.

This study limited itself to community radio, which was a traditional media, with emphasis on how agenda-setting theory informed the audiences to increase the awareness levels on the use of contraceptives among women of Cham Gi Wadu Division since the media influenced the agenda. For this study, agenda-setting theory was used to analyse objectives one and two.

1.7.2 Knowledge, Attitude and Practices Model

This study used the Knowledge, Attitude and Practices (KAP). The KAP model process was coined from Learning theory (Bandura, 1976) and Diffusion of Innovation theory (Roger, 1995). According to the KAP model, human health behavioral change was attained through the acquisition of the correct knowledge, generation of attitudes, and adoption of behaviors in three sequential processes. Knowledge, Attitudes, and acceptance of Practices are key ingredients of behavioral change models. Knowledge is the understanding of the information, which is the conscious and non-symbolic perception of meaning (Wessman, 2023). The four categories of knowledge include scientific and social scientific knowledge, local knowledge, tacit knowledge, and self-reflective knowledge. Attitude is a positive or negative evaluation of an objective (Diab, 2021). Practice refers to regular activities that are influenced by widely shared social norms and beliefs (Huang, 2019). The processes of this model were developed from the Social-Learning Theory (SL) and Diffusion of Innovation (DOF) theories. It means that the given members of a social system would select the various innovations through four stages: Knowledge acquisition, persuasion, decision, and confirmation over time.

Sharma et al (2024) while examining KAP Survey on whether it really measured Knowledge, Attitudes and Practices, indicated that KAP survey tradition was first born in the field of family planning and population studies in the 1950s. Later KAP surveys established their place among the methodologies used to investigate health behaviour, and today they continued to be widely used to gain information on health (Sharma et al., 2024). The aim of the relationship was to the knowledge, attitudes, and practices. This was characterized by the use of the structured, standardized questionnaire completed by a target population that can quantify and analyse what is known (knowledge), believed (attitudes), and done (practices) with regard to a topic of interest (Nguyen et al., 2019).

Similarly, the model data helps in the identification of knowledge gaps, practice patterns, and attitude barriers that facilitate understanding and actions on a particular issue (Alahdal et al., 2020).

Brzechczyn (2022) indicated that people make value-based judgments of right/wrong and good /bad in their surroundings, which was based on people's perceptions and varies from person to person. It further illustrated that each person had their own learning or paradigm on the concept of value. It was the operational concept rather than a substantive concept in this case. The goal of education was to inform personal concepts of value. The role was to educate on morals and life education, directly contributing to an increase in value formation (Brzechczyn, 2022). It was here that value entanglements and value judgments were attained.

In China, Yang et al (2020) made some findings on the impact of knowledge, attitude, and practices (KAP). This was based on rehabilitation education on the KAP of patients with inter vertebral disc-herniation; it was concluded that based on the KAP theory, there was effectively enhanced patients' awareness of diseases, increase in their rehabilitation consciousness, and promote adoption of positive rehabilitation behavior, hence the improvement of the patients' KAP (Yang et al., 2020).

During a social marketing strategy, Thailand led to an increase in the use of traditional Thai medicines during the COVID-19 KAP model. Puspitasari et al (2020) stated that using community radios was effective for spreading information to the villagers, especially in remote areas. It was effective to the elderly, as they comprised the majority of radio listeners. The programmes featured detailed discussions about the properties and usefulness of herbs (Puspitasari et al., 2020). In the study, it was also indicated that community radio programmes ought to be broadcasted thrice for just 1–3 minutes daily to promote the uptake of herbal medicine in rural areas.

The theory was also used in a study in South East Nigeria on KAP model analysis and Lassa fever media campaigns among residents. It was concluded that health education communication by using mass media was effective in enhancing the audience's knowledge and behaviour (Odionye et al., (2019). Further, in using the KAP model, it was established that constant media campaigns and placing more emphasis on Lassa fever and its perceived health threat against the audiences led to positive attitudes and better health practices in controlling and preventing the

diseases. This outcome was further justified by Agenda Setting Theory which predicted when audiences perceived a health threat perceiving themselves more vulnerable hence likelihood to change behaviour. The results of the study were also in tandem with number 10 of aspiration II of the African Union Agenda (Vision 2063), in which the African community aspires to better living conditions, quality of life, and sound well-being. This is in line with objectives one, two, and three in that the KAP model addresses knowledge levels, attitudes as well as acceptability of contraceptives.

Manika et al(2021), in a study conducted by drawing on Subjective Knowledge and Information Receptivity to examine an environmental sustainability policy on insights from the UK's Bag Charge Policy deduced that the difference between objective and subjective Environmental Sustainable Policy (ESP) knowledge is important for ESP-related behavioural outcomes. Objective knowledge was more vital than subjective knowledge for compliance intentions. In contrast, even though ESP attitudes mediated these, subjective knowledge was more vital than objective knowledge for information receptivity. The more people know, the more likely they are to comply as they understand the importance and impact of the policy initiative. In contrast, those who think that they know a lot, even if what they know is not accurate, will not be receptive to policy information (Manika et al., 2021). The findings had practical applicability towards projected public policy behavioral compliance prior to an environmental policy that goes through structural changes as well as the implementation of future environmental policies. Similarly, this is also in line with objectives one, two, and three in that it addresses knowledge, attitude, and acceptance of contraceptives among women of the Cham Gi Wadu Division.

The Knowledge, Attitudes and Practices Model suggested a sequential relationship where increased knowledge led to the formation of attitudes, which in turn guided practices. For objective 2, the model implied that when women are exposed to informative content on contraceptive use via the *Ngima Dhano* Radio programme, they gain new knowledge about its benefits and methods. This acquired knowledge can then alter their pre-existing attitudes towards contraception shifting them from scepticism or indifference to a more positive view. For objective 3, as these attitudes become more favourable, the likelihood increases that women will find contraceptives acceptable and integrate them into their personal health practices. Thus, the KAP model supported the idea that effective communication (delivered through the radio

programme) initiated a process where knowledge improved, attitudes changed, and ultimately practices (i.e., the acceptability and use of contraceptives) was transformed.

Together, these theories provided a robust framework for understanding how the *Ngima Dhano* Radio programme influenced public awareness, reshaped attitudes, and promoted the acceptability of contraceptive use among women in Cham Gi Wadu Division, Migori County.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter explicitly reviewed the literature on media and behaviour change, focusing on family planning adoption among women. The review aligned with the case study's objectives, which focus mainly on the community-owned radio station.

Here, the paper reviewed various kinds of literature on the role of radio on knowledge and awareness levels, attitude change, and acceptance of practices by the audience, as well as behaviour change among women in remote villages while demonstrating gaps in the existing literature. It also gave details on the role of radio in disseminating information to society, more so to women who are living in rural blocks and how information concerning contraceptive use is conceived.

This section was segmented into three parts as per the objectives: to find out the efficacy of radio in creating awareness of contraceptive use and to what extent this has been achieved; to establish the efficacy of radio in changing women's attitudes and perceptions of contraceptive use; and to determine the efficacy of radio in ensuring acceptance of family planning practices.

In a survey report by the Media Council of Kenya on the state of the media, 78% of listeners admitted to listening to radio for information, a remarkable improvement of 4% from 2021. This was more so for rural occupants than urban occupants. This made radio a more popular mass media trusted for channelling information (Media Council of Kenya, 2022). In Kenya, while radio remained a popular medium, listenership has seen a slight decline, with 75% of respondents consuming radio content in 2023, down from 78% in 2022, as digital media consumption rises.According to the Media Council of Kenya State of the Media Report 2023/2024, a substantial percentage of Kenyans watching television daily, with over 50% of households owning a TV. Urban residents exhibit higher TV consumption rates compared to their rural counterparts, while radio consumption is more prevalent in rural areas. This was despite a drop from 78% in 2022 to 75% in 2023.

2.2 Efficacy of Radio in Creating Family Planning Awareness

Okinyi (2019), noted that there were more than twenty thousand Radio stations around the globe. The rapidly expanding population and technology had favoured the adoption of radio messages and transmission. Due to its simplicity in terms of establishment, radio was one of the media used by most people around the World, with a listenership estimated at two billion people. This made radio a common channel for creating awareness of public health. In China, for instance, each community has its own radio station. The main purpose of community-based broadcasts was to address issues that affected those communities. Public health was among the issues that community radio had given weight to with an intention of having a healthy nation(Sun and Lei, 2018).The use of radio programs has proved to be effective in relaying messages to various regions while Kenya was not an exemption in the aforementioned examples.

Fombad et al (2019), in their study in South Africa on the magnitude to which community radio had contributed to the development of women, showed that community radio stations played a substantial role in relaying information for rural development, education and entertainment-programmes to the listeners. The study further projected that the stations had more time allocated to content and less to music/entertainment. In Maputo land, the study revealed a slight decrease in cases of domestic violence reported daily at the police stations. This was a very clear indicator that awareness of domestic violence and contact centres detailing and reporting on domestic violence were having an impact on the listeners. Additionally, community radios provided community-driven programmes featuring specific women's issues and addressing the need for improvement in programming to enhance further awareness among women listeners. While these studies had a similarity with the current study in that they investigated media and awareness on the development of women's issues, radio has been used as the independent variable. The present study similarly focuses on community radio and awareness creation on contraceptive use by examining the content of the programmes to ascertain the awareness levels among women.

Bekele et al (2020),in a study conducted in Ethiopia on knowledge and attitude on family planning among women of reproductive age, discovered that most of women had poor knowledge and attitude on contraceptive use. Numerous socio-demographic factors backed the knowledge and attitude of family planning. The study recommended that health sectors and other stakeholders ought to support health awareness programs in circulating family planning

messages with the aim of improving knowledge and attitude. The score on knowledge and attitude had proved to be particularly limited with different socio-demographic and reproductive health patterns. These can be related to good knowledge and favourable/positive attitude towards family planning. Stake-holding partnerships was also recommended to enhance behavioural change in family planning in Ethiopia. This would help in the provision of information, education and communication, as well as the inclusion of community leaders-religious and clan- in these efforts. Whereas this study looked at women of reproductive age and their knowledge on family planning, the present study sought to establish the audience awareness levels and how it influenced the uptake of contraceptives through the sharing of information in the health programme.

Mutumba (2022),in a study on mass media, influences on knowledge for family planning, put known attitudes and methods of choice among sexually active men in selected countries in Sub-Saharan Africa, including Kenya. This emanated from the fact that men are understated in family planning-based research. This was regardless of the extensive promotion with little systematic valuation on how mass media exposure influenced their family planning knowledge, attitudes and accepted behaviour among men. The study relied on Demographic and Health Survey (DHS) data from 31 countries in Sub-Saharan Africa (SSA) collected between 2010 and 2019. The study focused on radio, television and print. Exposure to radio had the largest influence on family planning knowledge accounting for 26.1% of the variance in family planning knowledge, followed by television (21.4%) and print comparatively lesser impact on family planning knowledge (8%). The findings suggested that mass media exposure had positive influences on family planning knowledge. This study related directly in terms of media use and content. It investigated radio in part and its effect on family planning awareness. The present study sought to determine whether similar findings were be yielded with a focus on women as opposed to men in the study.

In Kenya, radio awareness and penetration was at about 78%, which was above average for the nation's awareness in radio according to Media Council of Kenya, 2023 baseline survey. However, there was still low basic understanding in contraceptive use, sex, reproduction, and the risk of pregnancy knowledge. During the review, it was found out that in 8 of 9 studies, women who were exposed to the radio content resulted to higher knowledge levels with increased

positive attitudes towards contraceptive use. Inadequate knowledge of available methods and lack of self-efficacy had limited contraception use. Similarly, studies in Tanzania and Uganda indicated that being exposed to well-designed mass media programming improved self-efficacy for contraceptive use. This may be adopted in Kenya as it further advanced the ideology on the community radio station as a ladder to propagate awareness of reproductive health. This may also mean that radio stations influences family planning practices on women, more so in rural areas. In as much as the role of radio was no longer debatable as was the case in the literature review, community radio stations like Rameny FM had in the past been limitedly studied. This study, therefore, aimed to fill this gap by looking at *Ngima Dhano* radio health programme and whether, as a community radio, it could yield similar results.

2.3 Efficacy of Radio in changing attitudes on Family Planning

Attitude can be defined as a settled way of thought towards something or someone (Dictionary, M. W. 2023). This means that attitude is a thought pattern that is developed over time. It must, therefore, have started and will advance to a later stage, regression or improvement. The global demand for information has led to the adoption of various attitudes over time. Every society has, over the years, evolved due to the various expectations and information presented to them. The case of family planning is information-based since, in some cases, there tends to be a lack of awareness over some of the issues presented. Parsenkar et al (2021) denoted that globally, women's attitudes towards family planning were affected by suitable methods, education levels, number of pregnancies, and information about contraceptives. The change of attitude toward good practices had therefore been brought forth by the family planning education programs and consultancy services (Parsenkar et al., 2021).

Dall' Agnola (2022) in a study conducted in Central Asian countries observed that the success of installing modern contraceptives had largely been attributed to radio awareness creation. Sensitization on public health and particularly family planning through community radio had improved use of family planning by eight and eleven percent, respectively. This means that this contribution cannot be dismissed even in the case of Kenya while focusing on reproductive health (Dall'Agnola, 2022). In Africa, the attitudes, beliefs, and expectations on the use of contraceptives had widely contributed to contraceptive low uptake (Schaub et al., 2022). For instance, the thought that a contraceptive was wrong or believing it was against a person's

religion could hinder contraceptive use. That attitude, for instance, had greatly affected the advancement of contraceptives in such communities. This has led to misinformation about the methods and gender norms. This means that the specific beliefs and outcome expectations stemmed from the culture and thus were in line with objective two of this study.

Schuab et al (2022) found that in Nigeria, individuals who were more exposed to media programmes expressed more positive attitudes as well as the outcomes of their expectations. On the contrary, in Philippines, there was a high number of self-reported exposure to mass media that were characterised by additional positive attitudes about contraceptives (Rogers et al., 2021). In South Korea, the media had been used to correct the various misconceptions that had risen, and this had assisted in the progressive reassurance of people on the safety and legitimacy of the family planning measures adopted(Yi et al., 2022). This means that the media's role remained undisputed in the awareness and correction of the earlier adopted conceptions. This could also be the case in this study where *Ngima Dhano* radio programme sought to establish the attitude change among women listeners in Cham gi Wadu Division.

According to Machange and Munyogwa (2022), there had been a low prevalence rate in the uptake of contraceptives in Tanzania at (32.0%). This was despite the government strategies that were aimed at ensuring that 60.0% of those in need used contraceptives by 2020. Moreover, WHO reports indicated that various factors had led to low contraceptive uptake, more so for the developing countries in the world. The factors included limited access to contraceptives, fewer choices for family planning methods, side-effects fear, cultural /religious opposition, poor quality of services made available, as well as gender-based impediments. However, such factors will not be similar for all instances. In order to plan for affordable remedies, there was need to understand the native context factors. The observations raised by scholars from different countries in Africa showed some factors contributed to low contraceptive intake like poverty, low knowledge base, under-exposure to media, residing in rural blocks, low antenatal visits for pregnant women, and delivery in the health facilities. In Tanzania, there was inadequate information on reasons for low contraceptive uptake. The study will also be related in that women were the main target group for most family planning attitude change.

Kiprono (2021) did a study that aimed at illustrating the various effects of the media on social behaviour among students from the university. The preferred media was NTV Kenya due to its

emphasis on youth issues. During the study, a cross-sectional technique was adopted while the data was collected through questionnaires and documentary review. Purposive and random sampling constituted the main methods for selecting the target population. The study population included lecturers, opinion leaders and media practitioners. It was found after the study that media had the effect of strengthening and channelling attitudes and opinions that were dependable on the psychological makeup of the targeted group. Further, youths were found to change their attitudes and beliefs on issues after exposure to Television messages. Results showed that only 33% (minority group) felt that the media did not necessarily change their attitudes on issues. Whereas the study focused on students and effects of the media in social behaviour, the current study sought to determine whether exposure to community radio messages on family planning affected women's attitude. Having looked at these studies, it was justifiable that radio had been studied in different localities, but few studies had been conducted on community radio stations in Migori County. Hence, there was need to establish the efficacy of the *Ngima Dhano* health programme on women within Cham gi Wadu division.

2.4 Efficacy of Radio on acceptance of contraceptives use

The world'sconcern over the radio and family planning practices shifted with the increase in the information availability. On acceptance of using contraceptives, different studies has been conducted to validate how well the study population embraced the use of modern contraceptives in line with objective three of this study.

In India, a study was conducted on the determinants of an injectable portion of Depot Medroxy progesterone Acetate (DMPA) that was used as a contraceptive for women who were of reproductive age in South Haryana. The study reported an improved acceptance of DMPA as a contraceptive method owing to the sensitization by health workers, radio and the use of the social media. The findings also pointed out on that gains of DMPA use had a low effect on blood pressure in postpartum women. Contrary to the previous beliefs, lactation was not affected. Therefore, the acceptance and continuation of the same can be increased by the proper selection of clients that can be performed through effective counselling, injection timing administration and supportive care (Gupta et al., 2020). The success of the case study included the use of MEWAT Radio, a local radio station that proved vital for the initiative by hosting health talks, which were delivered by faculties of medical college. Radio was one of the sources of

information regarding DMPA contraceptives. This study is in line with the study which intended to establish the acceptance levels of contraceptive as a result of *Ngima Dhano* health programme.

Shezi et al(2023), in an effort to establish knowledge, various attitudes and acceptance of voluntary Medical Male Circumcision (VMMC)for the target group in the males who were attending high school (Shiselweni region, Eswatini) used various tools. The participants in the case study were requested to file their status of circumcision and also if they were willing to get circumcised in the future. The research findings established that students knew VMMC, this was although a negative attitude towards it had existed. In the study, neither adequate knowledge norattitudes could be associated with circumcision. This was based on the social environment and acceptance in influencing the acceptance of VMMC amongst the students in Eswatini. The study, however, looked at the acceptance levels which was in the same regard to contraceptives as a result of *Ngima Dhano* health programme.

Ilegbusi et al (2021), in a study on Knowledge, Attitude and Practice of Women who were of childbearing age on the acceptance of Contraceptive Implants in Akungba-Akoko, Ondo State, Nigeria, noted that issues influencing the reception of contraceptive implants among women of childbearing age included fear of side effects, lack of interest, husband's refusal, lack of information, religious influence, contraceptive failure, lack of regular sex and its diminished sexual pleasure. In conclusion, the knowledge of women of childbearing age towards the acceptance of contraceptive implants needed more improvement. Additionally, they required full information on the cost-effectiveness, benefits and minimal side effects of contraceptive implants. Most of the women who were using contraceptive implants expressed low knowledge of how fertility returned after termination of contraceptive implants. The study also revealed that the attitude of women of childbearing age towards the acceptance of contraceptive implants should be corrected (Ilegbusi et al., 2021). This study expressed similarity in line with this study since both looked at the acceptability of contraceptives. Norms surrounding sizes of family and composition, such as liking of large family or at least siring a son, contributed to higher family sizes and not using contraceptives. Gender norms also influenced sexual and reproductive health behaviours. For instance, some gender norms idealized ignorance of girls pertaining to sex and limited decision-making on their health. This was a perception that needed to be addressed urgently. Several studies have shown that there was a relationship between knowledge of men,

support for contraceptives and women's use of contraceptives. Further, having open communication among couples about family planning would improve contraceptive uptake. The language barrier also contributed to the slow adoption of some contraceptive awareness and adoption among couples. Some media programs based in Cameroon, Egypt and Tanzania documented a positive effect of mass media on spousal communication about family planning (Hutchinson and Meekers, 2022).

Appleford & Emmart (2021) in a study conducted in Kenya revealed that the country had made steadfast improvements in increased uptake of family planning. Family Planning2020 commitment maker in 2012noted that it had surpassed its 2020 target of 58% modern contraceptive use among married women. Despite an adjustment to this target, the government resolved to focus its efforts on expanding equitable access to quality care in the Counties, where the ideal family size ranged from 9 children in the North East to 3 children in the Nairobi region. Similarly, a number of counties had their family planning budget allocations increased; however, they remain a small share of the health budget, (Bailey, 2019). Advocates were working on increased domestic allocation and reducing donor dependency. Even though public health had been on the government's key Big Four Agenda in Kenya, the country is still experiencing a high birth rate. This was due to the limited information and knowledge citizens from remote areas had. There had been limited campaigns done through community lead groups via community radios to reduce this gap. Therefore, this study sought to establish the efficacy of *Ngima Dhano* health programme on contraceptive uptake acceptance among the audience.

Daniel et al (2023)while conducting a study in Kenya, looking at knowledge of the various reasons for women's adoption on various contraceptive methods over others assisted in generating proper mitigations. This was through targeting communications and counselling them about contraceptives to improve their behaviour and decision-making on sexual and reproductive health. In this study, 20 in-depth interviews alongside a focus group of five were used for the subset of sexually active Adolescent Girls and Young Women. They were enrolled in the Girls Health Study that was primarily concentrated alongside the longitudinal cohort study in Thika, Kenya. Given the convenience of the study, cost-effectiveness and a much lower perception of the risk of side effects, emergency pills were more likely to be accepted as a form of contraceptive. This is related to this study in that it also evaluated the level of acceptance of

using contraceptives among Adolescent Girls and You women while this study focused on women between the ages of 15-50 years of age in Cham Gi Wadu Division as a result of the listenership of *Ngima Dhano* radio health programme.

Amiri et al (2022), investigated information that sought to establish the behaviour of the COVID-19 for the students at Kerman University of Medical Sciences (Iran).This was done by using mass media and social media platforms. In the case study, cross-sectional study, alongside an online questionnaire, was adopted. A sample size of 203 was adopted for the selection of the inclusion criteria and completed the questionnaire. It was established that the COVID-19 news was obtainable through social media platforms (Telegram, Instagram, radio, WhatsApp). Further, the findings of the study have demonstrated that for the pandemic period, most students were using social media platforms for information gathering, and this had a significant impact on their willingness to employ the various preventative behaviours that could also be highlighted. The behaviours include refraining from public forums such as places of worship and other crowded locations like supermarkets, high personal hygiene, and constraining from the constant touching of the nose and the eyes with one's hands that were often considered to be likely infected. This study differs from the present one in that it focuses on the use of various media to achieve an intended behavior. The present study, on the other hand, examines the effects of a single medium and specifically community radio.

Kamaku (2021) investigated the various effects of television viewing on students that caused 'unrest in secondary schools in Kiambu County, Kenya. Conceptual framework involving three theories; Cultivation, Social Learning and Social Responsibility Theories were selected. The study adopted the descriptive survey research design. Based on the data collection, the use of self-administered questionnaires was established to be effective when used alongside stratified random sampling. The outcome of the study point to the influence of television viewing on the students' unrest (secondary schools). In particular, there was a strong correlation between student unrest in the schools with the types of TV programs viewed, $r = 0.61$; $p = 0.0$, and for the 'unrest' and the content covered, it was showing an $r = 0.4560$; $p = 0.000$. The present study sought to investigate whether media exposure, in this case, community radio, yields similar positive effects on behaviour as far as the acceptance of contraceptives are concerned.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The methodology section in the study outlines research design, area of study, study population, sample size and sample procedure, data collection techniques, reliability and validity, data analysis and presentation and ethical considerations.

3.2 Research Design

Research design is a strategy for answering your research questions. It determines how you will collect and analyze your data. The main focus is realizing the goals of a researcher (Eng et al., 2022).The study adopted the use of the cross-sectional mixed-method research design. The mixed method approach, within a cross-sectional design, allowed the researcher to gather data that provided statistical insights and offered in-depth explanations and context to the findings (Mrisho & Essack, 2021).

A cross-sectional research design is a type of observational study design that provides information on a population at a specific point in time (Yidana, 2021). Cross-sectional studies are particularly useful for assessing the prevalence of diseases, attitudes, knowledge, and behaviours among populations (Kesmodel, 2018). Sinyangwe et al (2019) further state that this methodology enables researchers to triangulate data from different sources, providing a more robust and holistic perspective on the research topic

In the study context, the researcher evaluated the efficacy of radio Rameny's N*gima Dhano* health programme on reproductive health behavior among women in Cham Gi Wadu division of Rongo Sub-County, Migori County, with respect to awareness, attitude change and acceptance of practices.

3.3 Area of Study

This study evaluated the efficacy of radio Rameny's N*gima Dhano* programme on reproductive health behaviour among women in Cham Gi Wadu division of Rongo Sub-County, Migori County.

Rongo Sub-County covers an area of 213.4 square kilometers and has a population density of 124,586 and 29,087 households. Cham Gi Wadu Division has3Locations namely, South Kamagambo, South West Kamagambo and West Kamagambo. It has 8 Sub-Locations namely: South Kanyajuok, Kamreri, North Kanyajuok, Kanyawanga, Kanyimach, East Kanyamamba, Kangeso and West Kanyamamba. The total population of the sub-county is 124,586people (KNBS, 2019), while Cham Gi Wadu Division has a total population of 44,163 and a household of 9,931(KNBS, 2019).

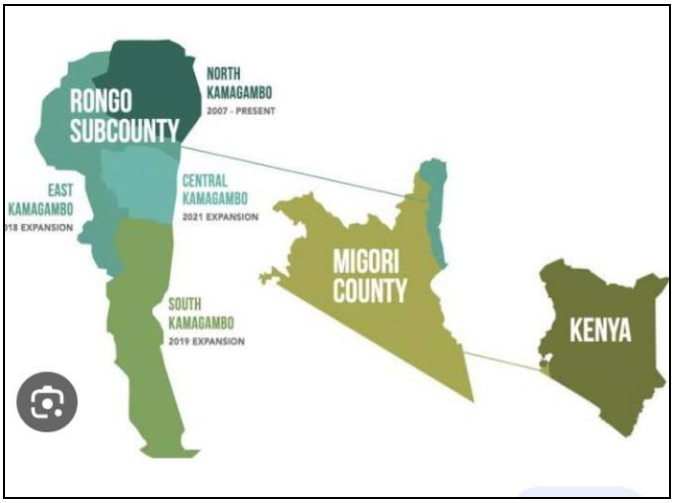


Figure 3.1: Map of Rongo Sub- County

Source: Lwala Community Alliance (2023)



Figure 3.2: Map of Migori County
Source: Survey of Kenya (2024)

Whereas Migori County is fifth among other Counties with high unmet needs for family planning, including Marsabit 37.5, Tana River 33.6, West Pokot 30.3, Samburu 29.4 and Siaya/Isiolo 27.5. The five counties all have high unmet need for family planning and warranted a study to in vestigate the low contraceptive uptake. Despite the digital surge, radio remains one of the most embraced forms of media in Kenya with approximately 74% of the population engaging with radio content (Agalo, 2023). Cham gi Wadu division was chosen owing to high radio listenership where according to the Kenya Census and Population (2019) the radio enjoyed 58.5% listenership in the rural areas while urban areas were at 54.4%.Similarly, 62.9% of the households owned a radio while 34.1% owned a television making the radio the most preferred mass medium. This was despite the elevation of Rongo Division in to a township on 20th March, 2020 vide a gazette Notice Volume CXXII – 50 by Zachary Okoth Obado – Former Governor Migori County as indicated in the Rongo Municipality Strategic Plan (2020-2025).

Cham gi Wadu Division was among other division in Migori County that were still grappling with issues on reproductive health. Reports indicated that about 50% of all women in Migori County between the ages 20-49 first had sex by the age of 16, which was two years earlier than the national average. A similar proportion had first married by the age of 17 between the ages 25-49. This was three years earlier for women at the national level(AFIDEP, 2019).Further, AFIDEP (2019) indicated that the percentage of adolescents who were already mothers was relatively higher at 14.7% compared to the national average. This led to an increased fertility rate at 136 births per 1000 girls compared to the national level at 96. These compounded lead to high unmet needs for family planning, with only 17% using contraceptives compared to the national uptake at 37%.

The study focused on Radio Rameny 88.3 FM and its *Ngima Dhano* health programme, which is aired twice a week between 1915 to 2015 hours. The study focused on Cham Gi Wadu division based on the radio frequency reach, being a rural area in which radio consumption was higher than in the urban area (Rongo division) and having a high percentage of radio receivers within the households as well as high radio listenership. The programme contained reproductive health information on the use of contraceptives by women.

3.4 Study Population

Population in a study refers to a particular group from which a sample is to be drawn for research (Zhao,2021). Rongo Sub-County has a population of 124,586 people. Of this, 59,257 are males, while 65,329 are females. The study focused on 25,364 women between the ages of 18-50 years as they are of reproductive age from ChamGi Wadu Division (KNBS, 2019). The study focused on women as the respondents for this study since they are the key burden bearers in matters of the use of contraceptives. The population of the study also consisted of *Ngima Dhano* radio Programme Host and Station Manager. Further, the investigator also included the recorded *Ngima Dhano* radio progammes on contraceptive use. The study focused in Migori County owing to its unmet need for family planning (KDHS, 2022) and Cham gi Wadu Division since it was within the transmission reach of the radio as well as having a bigger population of women listeners hailing from the rural areas within the Sub County. According to the Kenya Population and Census 2019, Migori County has 238,133 households. Out of this, 59.8% of households own a radio while 28.1% own a functional Television (TV). Within Rongo Sub County, there are

29,007 households with 62.9% owning a radio while 34.1% owning a functional TV. This is above the national projection where households own radio at 58.5% in the rural set up while the urban setup is at 54.4% whereas TV is at 62.5% in the urban set up while for the rural set up it is at 26.9% .Accordingly, the number of people who owns the radio in the County are more than those who own Television.

3.5 Sample Size and Sampling Procedure

3.5.1Sample Size

The population sample size for the respondents was determined by the Yamane (1967) formula. It helps to improve the accuracy level in determining the chunk of a population to sample at a reasonable margin of error (Hassan et al., 2024). The formula is used when the population size is known, when you want to estimate a population parameter with a certain level of precision and when there are limited resources or time and the researcher needs a quick and easy way to determine sample size.

For the respondents:

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

Where **n** = the sample size

e = level of precision at 95.0% confidence interval.

N = population size.

$$n = \frac{25{,}364}{1 + 25{,}364\ \ (0.05)^2}$$

$$n = \frac{25{,}364}{63.41}$$

$$n = 400\ Respondents$$

$$n = 400\ respondents$$

Table 3.1: Distribution table of study population by Sub-Locations within the Division

LOCATION	SUB- LOCATION	NUMBER
	KAMRERI	51
	NORTH KANYAJUOK	52
	SOUTH KANYAJUOK	50
SOUTH KAMAGAMBO		**170**
	KANYAWANGA	56
	KANYIMACH	56
SOUTH WEST KAMAGAMBO		**112**
	EAST KANYAMAMBA	41
	KANGESO	40
	WEST KANYAMANBA	37
WEST KAMAGAMBO		**118**
TOTAL		**400**

For content analysis, the study analysed programmes aired between May and October 2023, which summed to twenty-six weeks times two programmes in a week. However, the study purposively picked one recorded programme aired on the first of each month, totalling to 6 programmes. This was despite the health programme running weekly, totalling to24 programmes aired within the 6 months. In addition, two Radio Rameny staff constituted the sample size for key informant interviews for the study.

3.5.2 Sampling Procedure

This study applied a random walk sampling technique to get the respondents. The technique enabled external validity as the findings of this study zeroed in on the target population. Random walk sampling is a technique used to select a sample from a population, particularly when a complete list of the population is unavailable. It involves systematically selecting respondents by moving randomly through a defined area, often door-to-door, following a set of rules (Qi, X. 2022). In its implementation during data collection, an Assistant Chief's office, a Church, or a School (Primary/Secondary) informed the starting at Sub-Location. At the same time, the head count of households commenced from the first homestead on the right side of the road based on the preferred area. While taking the walks, every household spotted (only on one side of the road) was counted. Every third household was selected as a possible respondent household.

In case no one could be found for the research in the respective households, the researcher proceeded and chose the next household to establish continuity by administering the questionnaires. The counting was established from "1" and the next household proceeded to no. 3 was picked. One woman was selected from each household, and for the case of more than a single woman in a household, a Kish Table was used to pick the respondent to certify random selection (**See Appendix VI**). This involved determining the number of women in the households and listing them by age; then, the table decided on the woman to be picked based on the previous selection. In case women were in the same age group, the researcher introduced the second criterion: who celebrated their birthday first in the year. Respondents who qualified for the study satisfied these conditions: Aged 18–50 years; married or unmarried, be a member of the household for 12 months; available during the 30-day period planned for administering the questionnaires (data collection). These measures guaranteed a 100% response rate for this study.

For Qualitative data: Key Informant Interviews, the researcher picked the Station Manager and the Program Host using purposive sampling based on their position and direct role in the programme. *Ngima Dhano* recorded and aired programmes were subjected to Content Analysis and identified through a purposive sampling procedure. Twenty-four *Ngima Dhano* programmes were aired between May and October 2023. From these programmes, the researcher picked six programmes purposively since they addressed issues on contraceptives among women in Cham Gi Wadu Division.

A purposive sampling method was used since particular programme officials were selected based on their direct involvement in the health programme. This method is used when particular units are selected based on certain characteristics from the larger population (Mweshi et al., 2020). The researcher wanted to identify specific personalities or audiences that were suitable for answering the research questions.

3.6 Data Collection Techniques

3.6.1 Questionnaire

A questionnaire was used to obtain data from the 400 female listeners of*the Ngima Dhano* programme. The questionnaire was administered face-to-faceby female research assistants owing to gender sensitivity and questions administered under the supervision of the researcher. Thefirst

section of the questionnaire provided information on the respondents' demographic data. The subsequent sections were informed by the research objectives. This included section two of the tool, which contained questions on the efficacy of the *Ngima Dhano* radio programme on the level of awareness about family planning among women in Cham Gi Wadu Division.

Section three was based on the efficacy of the *Ngima Dhano* radio programme on attitude change among women listeners in Cham Gi Wadu Division. Section four was based on the efficacy of the *Ngima Dhano* radio programme in the acceptability of family practices among women in Cham Gi Wadu Division in Migori County. Out of a sample size of 400 women, 344 copies of the questionnaire were duly filed and returned. They were randomly distributed by the research assistants in the households where one questionnaire targeted at least one household.

3.6.2 Key Informant Interviews

Key informant interviews were delivered face-to-face. The researcher probed the programme host and station manager using interview schedule. The information probed was based on the research objectives: Level of awareness about family planning, attitude towards contraceptives and acceptance of contraceptives. The interviews were held and recorded thereby transcribed by the researcher to establish the content. The researcher also accessed if the interviewees' responses were in line with the interview schedule.

3.6.3 Content Analysis

This was done using a coding scheme. The coding scheme was used to extract data from recorded *Ngima Dhano* radio programmes based on the three thematic areas of this study: awareness creation, attitude change and acceptability of family planning practices.

The three thematic areas of the study were then broken down into specific indicators for measurement. In this regard, awareness, knowledge levels, feedback and content of engagement were the specific indicators. Consequently, the study assessed the thematic issue of attitude through indicators such as perception, frequency of use and spousal engagement. Finally, in acceptance of practices indicators such as use, frequency and influencing others were employed.

Relational analysis was involved. Each theme was input in the coding sheet, and the researcher recorded the number of times the themes were repeated during the programme against each episode for the six aired recorded programmes that the researcher obtained. The researcher then

counted their frequency as projected in the recorded programmes to confirm the themes were in line with the objectives of the study.

3.7 Reliability and Validity

Reliability and research validity are models used to evaluate the quality of research, including methods used to test measures. Reliability emphasizes a consistency of a measure, while validity depicts its accuracy (Fiona, 2023).

3.7.1 Reliability

In the quantitative aspect, the researcher used a pre-test/pilot method to ensure the reliability of the questionnaires. The pilot study was conducted using40 respondents from Rongo Division, a division that neighbours Cham gi Wadu Division, as asserted by Mugenda and Mugenda (1999) that 10.0% of the total population suffices for piloting. The pilot study was conducted 7 days before data collection and analysis was done prior to the actual data collection, where 30 participants agreed to continued use of contraceptives, 5 were undecided. In contrast, the others still clung to religion and other traditional practices. The questionnaires were pre-tested to establish their reliability and validity using the test-retest method.

The researcher also piloted the interview schedules with staff of Tembea Radio 89.5 FM, a community radio based in Ugunja Sub-County of Siaya County, a different radio station that also aired related content. This was to ensure that the findings would be accurate. For content analysis, the research used inter-coder reliability. Multiple raters were used to analyse the data. Percentage agreement among the coders was attained to ensure there was a degree of agreement among the coders.

3.7.2 Validity

To ensure content validity, the research conducted face validity. This was done through expert opinion from the Department of Communication and Media Technology. The information obtained informed the design of the questionnaire, interview schedules and the coding scheme for content analysis.

The research also enhanced construct validity by linking the objectives with relevant theories and literature. Lastly, the researcher emphasized triangulation. Multiple data collection tools were

employed in the study. This ensured that the findings were cross-validated, further enhancing the credibility of the results.

3.8 Data Analysis and Data Presentation

3.8.1 Quantitative Data

For the analysis of quantitative data, the investigator used descriptive statistics. According to Aggarwal and Ranganathan (2019), descriptive statistics involves the application of certain indices from the raw data to make deductions. Several data analysis techniques, including univariate statistics in the form of tables, percentages and charts, were used to describe the relationship between variables. Descriptive analysis was performed through Statistical Package for the Social Sciences (SPSS)version 25.0. It was used to summarize data that was gathered through the questionnaires. The study's findings generated by descriptive statistics were presented using frequency, contingency tables and graphs.

3.8.2 Qualitative Data

Content analysis necessitated exploring languages used to extract information from text and making sense of the words used (Lindgren et al., 2020). Data from the Key Informant Interviews and audio-recorded programmes was subjected to content analysis. The generated data focused on the three research objectives. The areas of focus were the efficacy of *Ngima Dhano* in creating awareness, the efficacy of *Ngima Dhano* content on attitudes and the efficacy of the *Ngima Dhano* Radio programme on the acceptability of contraceptives. The data generated through content analysis was presented in textual formats.

3.8.3 Measurement of variables

Below is a table summarising how the key variables in the study are measured, based on the provided questionnaire and research objectives;

Table 3.2: Summary of key variables

Variable	Measurement	Data Collection Tool / Section	Response Format / Scale
Listenership to Ngima Dhano Health Programmes (Independent Variable)	Whether the respondent has access to radio and their frequency of listening to the Ngima Dhano programme.	Section A: Ngima Dhano Listenership	Categorical responses (Yes/No) with frequency options: Regularly, Weekly, Monthly, Rarely, not at all, No Answer.
Awareness about Contraceptive Use (Dependent Variable)	Agreement with statements reflecting knowledge about contraceptives (e.g., effectiveness, sources, permanence of effects).	Section B: Level of Awareness of Contraceptives	Binary responses (Yes, No, No Answer).
Attitudes Towards Contraceptive Use (Dependent Variable	Degree of agreement with statements regarding attitudes towards contraceptives (e.g., desirability, impact on romance, moral considerations).	Section C: Attitude on Contraceptives	Likert scale responses (e.g., Strongly Agree, Agree, No Opinion, Disagree, Strongly Disagree).
Acceptability of Contraceptive Use (Dependent Variable)	Extent of agreement with statements concerning the acceptability and personal choice regarding contraceptive use.	Section D: Acceptance of Contraceptive Use	Likert scale with numerical ratings (1.0 = Strongly Disagree, 2.0 = Disagree, 3.0 = Neutral, 4.0 = Agree, 5.0 = Strongly Agree).

3.9 Ethical Considerations

The study sought approval from the National Commission for Science, Technology and Innovation (NACOSTI). During the research, the investigator took individual responsibility for the research including any consequence that may have arisen. Further, the researcher was open and honest when dealing with those involved in the research. The researcher informed respondents of the benefits of this study besides seeking for written informed consent. Participation in the case study was also done on a voluntary basis. To ensure respondents privacy and confidentiality, the respondents' identities were replaced with codes. Data obtained from the study respondents was stored in password-protected devices during and after the analysis. All other researchers' works were attributed to in this study.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND DISCUSSION

4.1 Introduction

This chapter presented and discussed the findings of the study. The first section provided information on *Ngima Dhano* listeners' response rate. This was followed by the analysis and discussion of the three objectives: to find out the efficacy of the *Ngima Dhano* Radio programme in creating awareness about contraceptive use, to establish the efficacy of the *Ngima Dhano* Radio programme in changing women's attitudes toward contraceptive use and to determine the efficacy of the *Ngima Dhano* Radio programme on the acceptability of contraceptives among women in Cham Gi Wadu Division, Kenya. For the analysis of these three objectives, the researcher used descriptive statistics, thematic and textual analysis techniques in each case.

4.2 Response Rate

Out of the 400 copies of the questionnaire administered to the respondents, 344 were duly filled and safely returned. This represented a response rate of 86.0%. While there was no universally agreed standard for an ideal response rate in social science surveys, a response rate of 60% or higher was generally considered acceptable (Dulle & Minishi-Majanja, 2011).

4.2.1 Demographic Orientation

In the descriptive analysis, frequency, calculation and percentage of "Yes" and "No" responses for each of the awareness questions on contraceptive use for objective one of the study were presented in the bar graphs below against each demographic orientation. Hughes et al (2022) asserts that it is important that researchers continuously evaluate the questions they use to make sure that they are using current and inclusive terminology that is representative of people's identities. These questions provide the guidance needed to adequately phrase demographic inquiries in studies. These questions are designed to assist researchers to collect data that are as accurate as possible. Accuracy here means that what researchers find in the sample of a study really does reflect the population (Hughes et al., 2022). So, these data in turn will impact the conclusions made from the studies and affect the generalizability of the findings (Hughes et al., 2022). More importantly, scientists investigating human behavior have an ethical obligation not only to avoid but also to correct themselves of inaccuracies so as not to harm others (Hughes et al., 2022).

4.2.1.1 Marital Status

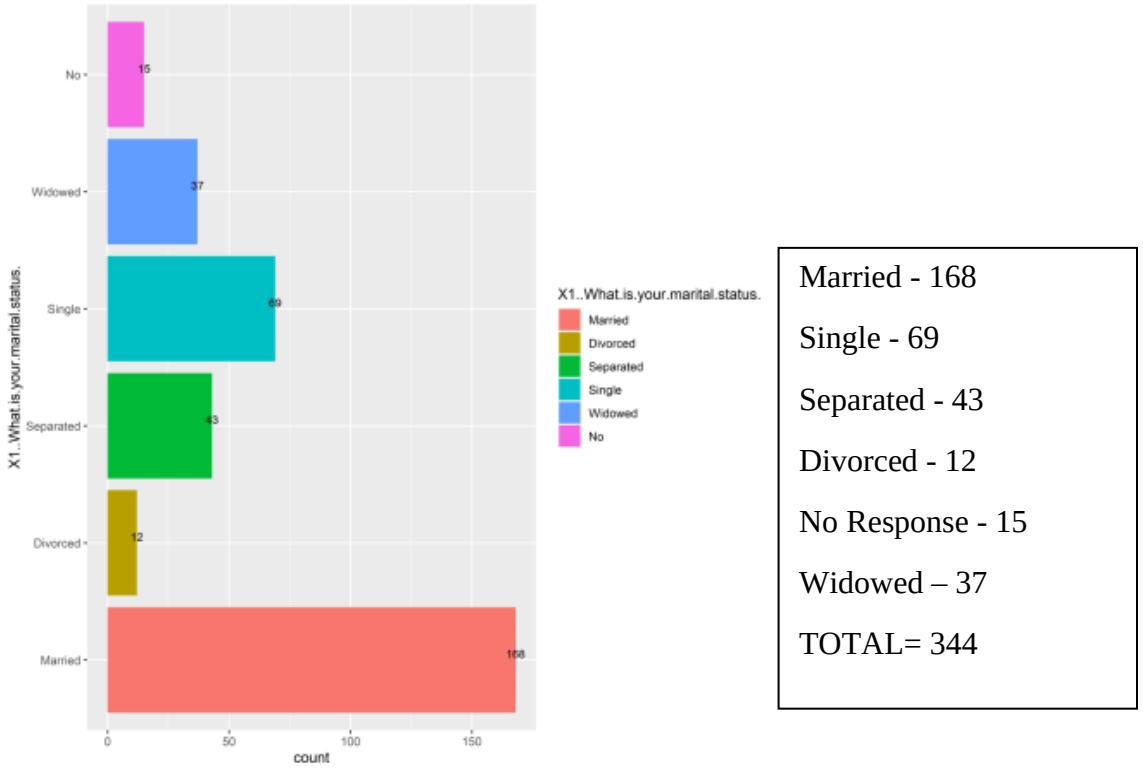
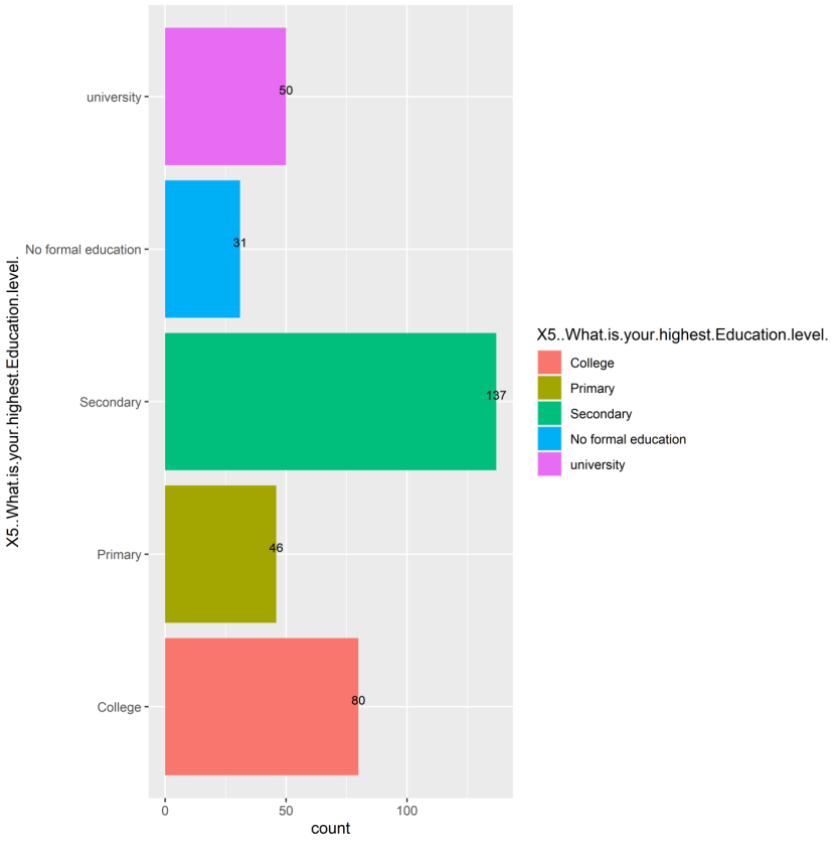


Figure 4.1: Marital Status: The above graph indicates how the respondents responded to the questionnaire based on their marital status

There was general acceptance on use of contraceptives based on the marital status. Married women embraced the use of contraceptives at 49%, followed by the single at 21%, separated at 12% the divorced at 3%, widowed at 11% and the no response at 4%. This projected a clear indication that married women plans their next date of birth while the divorced scored low in attempting to plan for their next birth.

4.2.1.2 Education Levels



College - 80

Primary - 46

Secondary - 137

No Formal education - 31

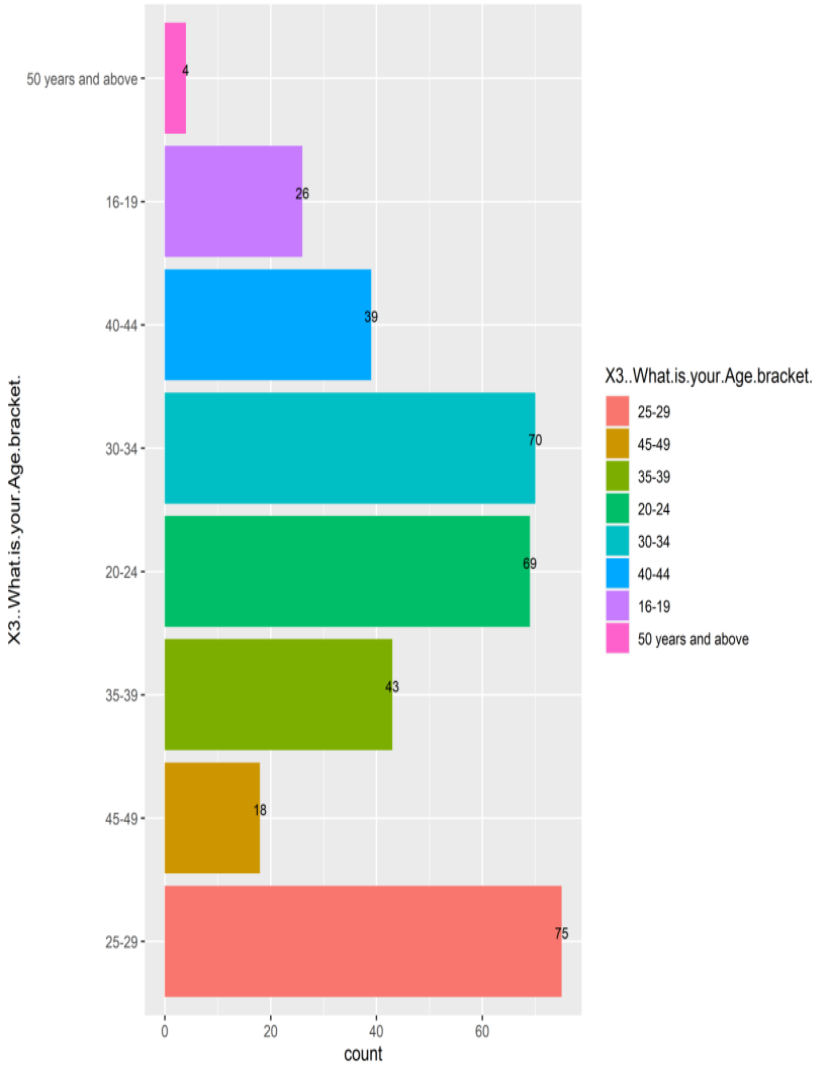
University – 50

TOTAL = 344

Figure 4.2: The above graph indicates the responses against the education level of the respondents

On education: Respondents who had attained secondary education were majority. This was significant in the study since education placed women in different social status and therefore impacted on individual's tastes and preferences. The same may even offer different needs to different individuals. These needs would then require indulgence, hence determining choice of contraceptive to use at a given time.

4.2.1.3 Age Bracket



16-19 = 26

20-24 = 69

25-29 = 75

30-34 = 70

35-39 = 43

40-44 = 39

45-49 =18

50 years and above =4

TOTAL = 344

Figure 4.3: The above graph indicates respondents cluster by age

There was general acceptance all ages of respondents on use of contraceptives. However, acceptability is more in age group 15-19 and 40-44 years. The ages between 25-29 had more respondents followed by age 30-35 and 20-24. This indicated that majority of respondents in this age were using contraceptives unlike other clusters who were 50 years and above.

4.2.1.4 Religion

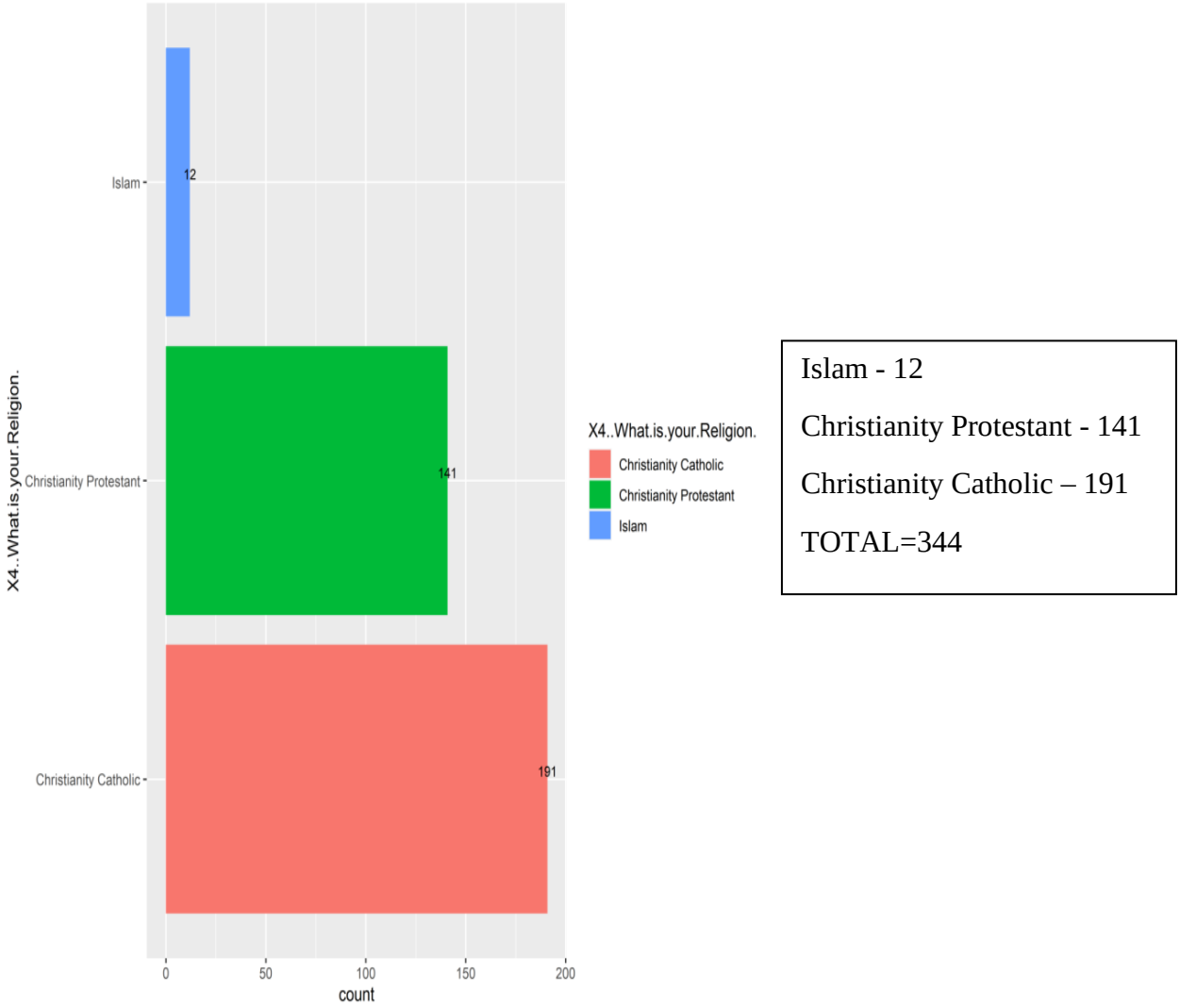


Figure 4.4: The above graph indicate respondents cluster by religion

In religion, Christianity Protestant respondents formed 40% of the study, Christianity Catholic formed 55% while Muslim respondents were 5%. Religion was key to help the researcher distinguish how it affected the respondents in increasing the uptake of contraceptives. Similarly, understanding religious demographics is crucial in contraception studies because religious beliefs and practices significantly influence reproductive health decisions, including contraceptive use, and can act as both a barrier and a facilitator for family planning (Memo et al., 2023).

4.2.2 Control for the confounders in the study

To control for potential confounding variables in this study despite using primarily descriptive analysis vide Likert-scale data, several strategies were implemented during both data collection and analysis. Below is an approach that combined careful design and statistical control:

4.2.2.1 Identification and Measurement of Confounders

Before data collection, identification of potential confounders that would influence the dependent variables (awareness, attitudes, and acceptability of contraceptive use) independently of the independent variable (listenership to the Ngima Dhano Radio programme) was undertaken. Common confounders in this context included:

- Socio-demographic factors (age, education, socioeconomic status)
- Cultural and religious beliefs about contraception
- Exposure to alternative health information sources (other media platforms, community health programmes)

The researcher ensured that these variables were measured using the same Likert-scale or categorical items in the structured questionnaire.

4.2.2.2 Data Collection and Stratification

The researcher collected data on the identified confounding variables alongside the main variables. When analysing the data, stratifying the sample by key confounders was undertaken. For instance: On Stratification, descriptive statistics were presented in form of frequencies, percentages while for subgroups such as age ranges or education levels were compounded. This helped in observing whether variations in awareness, attitudes, and acceptability correlated with these confounding factors.

4.2.3 Efficacy of *Ngima Dhano* Program on Awareness of Contraceptives

The first objective of this study was to assess the knowledge level and awareness among *Ngima Dhano* Radio program listeners regarding family planning in Cham Gi Wadu Division. In doing this analysis, the investigator conducted a descriptive analysis in which 10 questions testing the use of contraceptives among women listeners were posed. In each case, they were to respond with either YES or NO. Their findings are indicated in Table 4.1.

Table 4.1: Ngima Dhano Programme Listener's Knowledge and Awareness

QUESTIONS	YES	NO
One can have a child after terminating contraceptive use.	99.7% (343)	0.3% (1)
Are contraceptives effective in Family Planning?	99.7% (343)	0.3% (1)
Use of Contraceptives has a permanent effect on the body of a woman?	0.6% (2)	99.4% (342)
Contraceptives can be sourced from Clinics, Health Centers and pharmacies?	99.1% (341)	0.9% (3)
Contraceptives can be sought directly over the Counter?	97.1% (334)	2.9% (10)
Emergency Pills is a method of Family Planning?	98.5% (339)	1.5% (5)
Implants are methods of Family Planning?	97.1% (334)	2.9% (10)
Coils are mostly used in Family Planning methods?	93.6% (322)	6.4% (22)
Injectables are used in Family Planning?	98.0% (337)	2.0% (7)
Are you aware of Natural methods of Family Planning?	99.1% (341)	0.9% (3)

The analysis demonstrated that the Ngima Dhano Radio program has significantly enhanced awareness and knowledge of contraceptive use among its listeners. This is demonstrated through high percentages of correct responses, ranging from 93.6% to 99.7%, which indicate that the program effectively communicated key information about family planning. For example, majority of the *Ngima Dhano listeners*, 99.7% (343), agreed that one can have a child after contraceptive use with only 0.3% (1) disagreeing. This highlighted the reversible nature of most contraceptives. As to whether contraceptives were effective in family planning, the majority, 99.7% (343) agreed that contraceptives played a crucial role in family planning while 0.3% (1) disagreed.

A critical look at the data revealed additional nuances. For example, only 0.6% of respondents believed that contraceptives have a permanent effect on a woman's body, in contrast to 99.4% who refuted this claim. This divergence suggests that the programme's emphasis on debunking myths about contraceptive side effects is effective. The data on accessibility further supported this conclusion: 99.1% of the listeners were aware that contraceptives can be obtained from clinics, health centres, and pharmacies and 97.1% understand that they were available over the counter. These figures highlight not only the positive reception of the programme's messages but also the practical knowledge imparted to the audience regarding how and where to access contraceptives. Awareness of specific methods was equally robust: 98.5% identified emergency

pills, 97.1% recognized implants, and 93.6% knew about coils, 98.0% understood injectables and 99.1% were aware of natural family planning methods. The high recognition of natural methods stood out as these were often less highlighted in media campaigns compared to modern contraceptives, suggesting the program's comprehensive approach to education.

Table 4.1, therefore, suggested that *Ngima Dhano* Radio program had a remarkable impact on increasing awareness and knowledge about contraceptive use among women in Cham Gi Wadu Division. This position was further bolstered through various interviews conducted with the radio hosts, guest speakers who were experts on the topics of discussion and key persons from the County Government of Migori, Department of Health.

For instance, on expert involvement, *Ngima Dhano* program involved experts in educating women about contraceptive methods, addressing misconceptions and myths. This was supported by quotes (i) and (ii):

> **RADIO HOST I**: *"We bring in experts who teach these women on matters regarding contraceptive use."*
>
> **RADIO HOST II**: *"We bring in people who have successfully used contraceptives and helped demystify myths."*

These strategies including expert involvement and real-life testimonials likely bolstered credibility and relatability. For instance, in a broadcast on August 2, 2023, a listener from Kitere village asked;

> *Do contraceptives have a permanent effect on our body and if so, how do we adjust to this?"*

On this, an Obstetric Gynaecologist responded:

> *"I want to state as a doctor that in my fifteen years' experience I have never heard that before. These are myths surrounding contraception use which as a department we are keen to demystify. We also encourage women to women talks to pen up on these issues. Sharing of experiences on contraceptives to ensure we have a health and well controlled population."*

There was also male involvement in the programme.

> **RADIO HOST II:***"We promote male involvement in decision-making when it comes to issues of contraceptive use."*

This approach broadened the impact of the programme by addressing family dynamics, a critical factor in contraceptive acceptance. Content analysis was based on the three thematic areas as generated by the researcher **(See Appendix V)**. After the relational analysis, the first thematic area on awareness had three indicators, which affirmed that there were high knowledge levels and awareness while the host presenter and expert guests were exchanging ideas on contraceptives. This was also the case during the call-ins, where robust feedback was recorded. One-on-one engagement with the listeners built their confidence and made them more aware of different types of contraceptives, how they were administered, and where they were sourced from. This was in line with objective one of this study.

The research findings among the respondents revealed a high level of knowledge and awareness regarding family planning.

These findings suggested that the *Ngima Dhano* Radio program had effectively raised awareness, consistent with the agenda-setting theory, which posited that media emphasis on specific topics increased public familiarity over time (McQuail & Windahl, 2013). Other studies supported this conclusion. Johnson et al. (2013) reported widespread contraceptive awareness across multiple countries, while Mutumba (2022) found high knowledge levels among sexually active men in sub-Saharan Africa, including Kenya. Birabwa et al. (2021) and Belachew et al. (2023) similarly noted that mass media exposure enhanced family planning knowledge. However, contrasting evidence existed. Bekele et al. (2020) found poor knowledge and unfavorable attitudes towards contraceptives among Ethiopian women, possibly due to differences in media reach, cultural context, or program design. The *Ngima Dhano* programme use of local language, expert engagement, and targeted content explained its comparative success.

4.2.4 Efficacy of *Ngima Dhano* programme on Listeners Attitudes on Contraceptive Use

The second objective sought to examine the attitudes of *Ngima Dhano* Radio program listeners towards contraceptive use in Cham Gi Wadu Division, Kenya. To provide a comprehensive understanding, a quantitative and qualitative data analysis was conducted. The researcher utilized a 5-point Likert scale with eight items and qualitative insights gathered through interviews for the quantitative data. The Likert scale responses were analysed using descriptive statistics (percentages, frequency counts and means), with the key for interpretation as follows: Strongly Agree (SA) = 5.0, Agree (A) = 4.0, Neutral (N) = 3.0, Disagree (D) = 2.0, Strongly Disagree

(SD) = 1.0. The quantitative analysis unveiled distinct patterns in participants' responses to the Likert scale statements. The results were shown in Table 4.2.

Table 4.2: Ngima Dhano Programme Listeners and Attitudes towards Contraceptives

Statement	Strongly Disagree (SD)=1.	Disagree (D)=2	Neutral (N)=3	Agree	Strongly Agree (A)=4	Mean Statistic
1. Using contraceptives is more desirable than abortion	0 (0%)	0 (0%)	0 (0%)	125 (36.3%)	219 (63.7%)	4.64
2. I believe that it is wrong to use contraceptives as they lessen sex drive.	128 (37.2%)	210 (61.0%)	3 (0.9%)	0 (0%)	2 (0.6%)	1.65
3. Using contraceptives makes sex look less loving.	154 (44.8%)	182 (52.9%)	7 (2.0%)	1 (0.3%)	0 (0%)	1.58
4.One should use contraceptives regardless of how long one is married.	1 (0.3%)	6 (1.7%)	13 (3.8%)	117 (34.0%)	207 (60.2%)	4.52
5. I would practice contraception even if my partner resisted.	0 (0%)	3 (0.9%)	26 (7.6%)	197 (57.3%)	118 (34.3%)	4.25
6. Contraceptives are worth using, irrespective of the high cost.	0 (0%)	0 (0%)	0 (0%)	171 (49.7%)	173 (50.3%)	4.5
7. If I or my partner realise negative side effects from a contraceptive method then we will use any other alternative method.	0 (0%)	0 (0%)	0 (0%)	145 (42.2%)	199 (57.8%)	4.58
8. I feel better about myself when I use contraceptives.	0 (0%)	1 (0.3%)	0 (0%)	87 (25.3%)	256 (74.4%)	4.74

The findings demonstrated that *Ngima Dhano* Radio program cultivated overwhelmingly positive attitudes toward contraceptive use among its listeners. High mean scores (4.25–4.74) for agreement statements and low mean scores (1.58–1.65) for disagreement statements reflected a strong consensus on the acceptability and benefits of contraceptives (Table 4.2). It was observed that the majority of *Ngima Dhano* listeners agreed (SA=63.7%, A=36.3%) that using contraceptives was much more desirable than having an abortion and they encouraged friends to use contraceptives. This was supported by a strong mean statistic of 4.64 suggesting a prevailing positive attitude. Concerning belief that it is wrong to use contraceptives and they lessen sex drive, the majority of *Ngima Dhano listeners* (98.2%) either strongly disagreed or disagreed (SD=37.2, D=61.0) that contraceptives lessened sex drive. Only a small percentage expressed neutral views (0.9%). The low mean statistic of 1.65 indicated a strong overall disagreement with

the perception of contraceptives as having permanent side effects. As relates to statement three on contraceptives making sex look less loving, the majority of *Ngima Dhano* listeners (97.7%) either Strongly Disagreed or Disagreed (SA=44.8%, A=52.9%). A small percentage expressed Neutral views (2.0%), and only a minimal portion agreed with the statement (0.3%). The low mean statistic of 1.58 indicated a strong overall disagreement with the perception that use of contraceptives makes sex look less loving. The majority of *Ngima Dhano* listeners (94.2%) Agreed or Strongly Agreed (SA=34.0%, A=60.2%) that one should use contraceptives regardless of how long one is married to one partner. A small percentage was neutral (3.8%), and an even smaller segment Disagreed (2%) with this perception. The high mean statistic of 4.52 indicated a strong overall agreement with the statement.

As related to practicing usage of contraception even if a partner resisted since it is no worry using contraceptives, the majority of *Ngima Dhano* listeners (91.6%) Agreed or Strongly Agreed (SA=34.3%, A=57.3%) that partner opposition was a significant factor leading to non-usage of contraceptives. A small percentage was Neutral (7.6%), and an even smaller portion disagreed (0.9%) with this perception. The high mean statistic of 4.25 indicated a strong overall agreement. Further, there was also a strong consensus among *Ngima Dhano* listeners that contraceptives are worth using, irrespective of the high cost. The mean statistic of 4.5 reflected a substantial agreement. Specifically, 99.7% of the *Ngima Dhano* listeners either Agreed or Strongly Agreed (SA=49.7%, A=50.3%) with the statement. There was a significant agreement among *Ngima Dhano* listeners regarding if a partner realised negative side effects from a contraceptive method, then they would use any other alternative method. The mean statistic of 4.58 indicated a strong consensus, with 57.8% of *Ngima Dhano* listeners Strongly Agreeing and 42.2% Agreeing (SA=42.2%, A=57.8%). Lastly, there was a solid consensus among *Ngima Dhano* listeners that they feel better when they use contraceptives as it does not buoy up philandering. The mean statistic of 4.74 reflected a high level of agreement, with 74.4% of *Ngima Dhano* listeners Strongly Agreeing and 25.3% Agreeing (SA=74.4%, A=25.3%). A marginal proportion of the *Ngima Dhano* listeners disagreed (0.3%) with the statement. These responses were generally reflected following an interview with one of the programme hosts. Concerning attitude change, the programme host observed that the radio program positively impacts attitudes related to contraceptive use. This is as highlighted in the extracts (v) below:

> *"I believe that after a period of time, people's perceptions shall have been changed, and all these myths and misconceptions demystified, to ensure that the entire community embraces the use of contraceptives."*

Further, the impact of radio on listeners' attitudes could also be attributed to extract drawn from the *Ngima Dhano* radio programme that was aired on October 4, 2023. In that case, the programme host asked the invited guest to respond to some of the misconceptions about contraceptives that could generate negative attitudes among the audience.

> *Among the most propelled myths include contraception triggering high blood pressure, increased libido and irregular periods, among others. Being an expert, I assure all users that all methods are designed to fit uses by women and none should shy away from using contraceptives."* -–Reproductive Health Expert

For content analysis of the second thematic area, the researcher generated three indicators **(See Appendix V)**. After the relational analysis, the indicators affirmed that the listeners accepted using contraceptives, remained consistent in their usage and were even more willing to share information on contraceptive use with others. They further admitted that they felt better when using contraceptives to control birth and it was not lessening their sex drive as previously believed. The listeners, while on air, noted that the use of contraceptives was better than securing an abortion that would expose them to more danger or even death. This was in line with objective two of this study. From the foregoing, it was evident that exposure to *Ngima Dhano* radio program among listeners in Cham Gi Wadu Division was associated with overwhelmingly positive attitudes towards contraceptives. The findings aligned with the Knowledge, Attitude, and Practices (KAP) model, which suggested that attitudes stem from beliefs about behavior and its outcomes (Glanz & Rimer, 2005). Here, the educational content of the programme likely reshaped listeners' beliefs, fostering positive attitudes. Moon (2021) supported this, noting that attitudes, shaped by beliefs, predicted behavioral intentions—such as contraceptive use intent. Comparatively, other studies affirmed the role of mass media in attitude formation. Edgerly (2022) found media influences family planning attitudes, Shahjahan et al. (2019) linked men's media exposure to positive contraceptive attitudes, and Schuab et al. (2022) noted enhanced advocacy among media-exposed individuals. However, the focus of this study on a specific radio program and its tailored approach to local myths distinguishes it, potentially explaining the pronounced attitude shift observed.

4.2.5 Acceptance of Contraceptives among *Ngima Dhano* Listeners

The third objective of the study was to assess the acceptance level of contraceptive use among *Ngima Dhano* Radio program listeners in Cham Gi Wadu Division, Kenya. In doing so, the researcher used quantitative and qualitative data analysis techniques. In the case of quantitative data, the researcher tested acceptance by using a 5-point Likert scale with eight items, while qualitative insights were obtained using Key Informant Interviews. The Likert scale responses were analysed using descriptive statistics (frequency counts, percentages and means), with the key for interpretation as follows: Strongly Agree (SA) = 5.0, Agree (A) = 4.0, Neutral (N) = 3.0, Disagree (D) = 2.0, Strongly Disagree (SD) = 1.0. The table below shows the results

Table 4.3: Ngima Dhano Programme Listeners and Acceptance of Contraceptives

	Strongly Disagree (SD)=1.0	Disagree (D)=2.0	Neutral (N)=3.0	Agree (A)=4.0	Strongly Agree	Mean Statistic
1. Am willing to talk to my spouse/sexual partner about me using contraceptives.	1 (0.3%)	5 (1.5%)	1 (0.3%)	232 (67.4%)	5 (30.5%)	4.26
2. I am willing to use contraceptives after consulting a health expert	0	0	0	114 (33.1%)	230 (66.9%)	4.67
3. I consider natural family planning methods (e.g., withdrawal) as valid choices.	116 (33.7)	224 (65.1)	2 (0.6%)	2 (0.6%)	0 (0%)	1.68
4. It is my personal choice not to use any family planning method.	123 (35.8%)	215 (62.5%)	2 (0.6%)	4 (1.2%)	0	1.67
5. I am willing to take emergency pills in case of intercourse without protection only twice a year.	0	11 (3.2%)	6 (1.7%)	72 (20.9%)	255 (74.1%)	4.66
6. I cannot use contraceptives because I fear it might reduce breast milk or cause back pain.	54 (15.7%)	264 (76.7%)	4 (1.2%)	22 (6.4%)	0	1.98
7. My husband's/parents'/family's opinions discourage me from contraceptive use.	10 (2.9%)	302 (87.8%)	32 (9.3%)	0	0	2.06
8. I still desire to have children despite using contraceptives.	0	13 (3.8%)	10 (2.9%)	67 (19.5%)	254 (73.8%)	4.63

The findings revealed a high level of acceptance of contraceptive use among *Ngima Dhano* listeners. This was demonstrated by high mean statistics for expected positive statements ranging from 4.26 to 4.67- close to overall 5, and low mean statistics, 1.67 to 2.06 - lower than 2.5 average (Table 4.3). Specifically, there was a high level of acceptance and support for openly discussing family planning among program listeners. The majority of listeners either strongly

agreed (30.5%) or agreed 67.4% with the statement. Few *Ngima Dhano* listeners Disagreed (D=0.3%) or Strongly Disagreed (SD=1.5%). A negligible proportion was on the disagreement (D = 1.5%, SD = 0.3%) or Neutral side (N=0.3%). The high mean statistic of 4.26 emphasized the general acceptance of the importance of discussing family planning openly among the surveyed program listeners.

The findings also revealed a high level of willingness among program listeners to consult health experts for personalized family planning advice. This was supported by a high mean statistic of 4.67. In particular, the majority (66.9%) strongly agreed, besides 33.1% who also agreed. No *Ngima Dhano* listeners expressed a neutral or any form of disagreement on the idea of consulting health experts for personalized advice on family planning.

A significant proportion of *Ngima Dhano* listeners disagreed (33.7%) or strongly disagreed (65.1%) not to consider natural family planning methods like withdrawal as valid choices of contraception. A small percentage (0.6%) remained neutral, with none expressing disagreement. The mean statistic of 1.68 suggested a moderate acceptance level among listeners about the validity of natural family planning methods. Concerning the personal choice of using family planning methods, a notable portion (35.8%) disagreed, while the majority (62.5%) agreed. This reflected a substantial acceptance of individual autonomy in family planning decisions. A small percentage (0.6%) remained neutral, 1.2% agreed while there was no strong agreement among the surveyed program listeners. The mean statistic of 1.67 suggested a moderate general acceptance of using family planning methods.

Findings also suggested a high level of regarding the use of emergency contraceptive pills in urgent situations, as indicated by the high mean statistic of 4.66. Specifically, a substantial majority (74.1%) strongly agreed that emergency pills were a valid option for urgent situations. This was backed by a notable portion (20.9%) who agreed with the statement. There were marginal outcomes as related to those in the neutral and disagreement categories (1.7% and 3.2%, respectively). A significant proportion (76.7%) expressed disagreement with the statement that contraceptives might affect breast milk and cause back pain. This was further cemented by 15.7% who strongly disagreed. Those on the neutral were 1.2%, while 6.4% agreed with the statement. The mean statistic of 1.98 suggested a moderate leaning towards disagreement.

The majority (D =87.8% and SD = 2.9%) disagreed with the notion that family opinions discouraged contraceptive use. On the other hand, 9.3% expressed a neutral position, while none strongly agreed or agreed with the statement. The mean of 2.06 suggested an overall disagreement that family opinions could not be a strong deterrent for contraceptive use. Lastly, there was a high level of agreement by the program listeners on their desire to have children despite using contraceptives, as demonstrated by a high mean of 4.63. The majority (73.8%) strongly agreed with the statement, with an additional 19.5% agreeing. 3.8% of the *Ngima Dhano* listeners disagreed with the statement while 2.9% were neutral. No *Ngima Dhano* listeners expressed a strong disagreement.

Content analysis of recorded aired radio programmes on the third thematic area established that there was a deliberate effort by *Ngima Dhano* radio progamme to improve the acceptance level of contraceptive use among the audience. According to the three indicators as generated by the researcher **(See Appendix V**), the listeners remained consistent and highly accepted to using contraceptives. They were also willing to share information with others on the use of contraceptives. For instance, a radio program aired on 4th October 2023, where the invited reproductive health expert addressed some misconceptions about contraceptive use. He stated in particular that these misconceptions '*slowed down the uptake of contraceptives*.'

> *"I would like to state that there are several hearsays and myths being propagated with the intention of slowing the uptake of contraceptives. Most importantly is that contraceptives are sourced from Hospitals, Clinics and Health Centres, making it easy for one to be observed and advised on the best method to use."* –Reproductive Health Expert.

These results aligned with the Agenda-Setting theory, which posits that media emphasis on specific issues shapes public opinion (McQuail & Windahl, 2013). The *Ngima Dhano* program focus on contraceptive education appeared to have elevated acceptance among listeners. The Knowledge, Attitude, and Practices (KAP) model further supported these findings, as listeners' knowledge (e.g., sourcing contraceptives from health facilities and attitudes e.g., rejecting myths) correlated with high acceptance levels. Wessman (2023) underscored knowledge as a driver of behavioral change, evident here in the listeners' shift towards contraceptive acceptance.

Other studies, such as Ahmed and Seid (2020), have linked mass media exposure to increased contraceptive use, while Westoff and Koffman (2021) found associations between radio

exposure and reproductive behavior changes. Pandey and Karki (2019) and Yesuf et al. (2021) similarly note that media-driven messages motivate contraceptive discussions. However, this study emphasized on a specific program's myth-debunking strategy distinguished it, potentially amplifying its impact.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This section presented the summary findings of the study according to the objectives. In addition, it presented the conclusion and provided recommendations as well as the adequate suggestions for further research.

5.2 Summary of research Findings

The study sought to evaluate the Efficacy of *Ngima Dhano* community radio programme in the uptake of contraceptives among Women in Cham Gi Wadu Division, Kenya. This is anchored on the research objectives: To establish the efficacyof *Ngima Dhano* Radio programme in awareness creation on use of contraceptive among women in Cham Gi Wadu Division, Kenya, to establish the efficacy of *Ngima Dhano* Radio programme in changing attitude on contraceptives use among women in Cham Gi Wadu Division, Kenya and to determine the efficacy of *Ngima Dhano* Radio programme on acceptability of contraceptives among women in Cham Gi Wadu Division, Kenya.

5.2.1 Efficacy of *Ngima Dhano* Radio Program on Knowledge and Awareness

The first objective of this study was to establish the efficacy of the programme on level of knowledge and awareness among *Ngima Dhano* Radio program listeners on contraception use in Cham Gi Wadu Division, Kenya. The research findings revealed a high level of knowledge and awareness regarding contraception use. This was indicated by high percentages of correct responses, ranging from 93.6% to 99.7%, which indicated that the program effectively communicated key information about family planning. These findings were also supported by qualitative data, from radio host, invited guests and call-in sessions.

5.2.2 Attitudes of *Ngima Dhano* Listeners and Contraceptive Use

The second objective was to establish the efficacy of *Ngima Dhano* Radio program on attitudes in contraceptive use in Cham Gi Wadu Division, Kenya. It was discovered that exposure of *Ngima Dhano* radio program among listeners in Cham Gi Wadu Division is associated with overwhelmingly positive attitudes towards contraceptive use. As concerns the quantitative research method, *Ngima Dhano* listeners were asked about their attitudes based on Likert scale

questions. This was based on eight items. Using contraceptives is much more desirable than having an abortion and reassuring friends to use contraceptives, believing that it is wrong to use contraceptives and they lessen sex drive, using contraceptives makes sex look less loving, one should use contraceptives despite of how long one is married if you mind about your partner, practicing contraception even if a partner resisted, contraceptives are worth using, irrespective of the high cost, using alternative contraception methods on realization of negative side effects and feeling better about oneself when using contraceptives. In each case, the findings indicated that high mean scores (4.25–4.74) for agreement statements and low mean scores (1.58–1.65) for disagreement statements. This reflected a strong consensus on the acceptability and benefits of contraceptives.

5.2.3 Acceptance of Contraceptives among *Ngima Dhano* Listeners

The third objective of this study was efficacy of *Ngima Dhano* Radio programme on acceptance levels among women in Cham Gi Wadu Division, Kenya. This study established a remarkable acceptance of contraceptives among *Ngima Dhano* radio program listeners in Cham Gi Wadu Division. Qualitatively, the researcher asked questions related to the topic to the programme hosts. The researcher also conducted a content analysis on selected *Ngima Dhano* Radio programme episodes. Quantitative methods revealed high levels of acceptance based on 8 questions tested on a Likert scale. The questions tested were on: talking openly about family planning, willingness to consult on family planning, natural family planning methods and choice on to using family planning method, emergency pills use, effects of contraceptive use and the desire to have children while using contraceptives. This was evidenced by the high mean values for positive statements—ranging from 4.26 to 4.67, nearing the maximum score of 5—and the low mean values for negative statements, which fell between 1.67 and 2.06, well below the 2.5 average.

5.3 Conclusions

Objective one wasto establish the efficacy of *Ngima Dhano* Radio programme in the awareness creation of contraceptive use among women of Cham Gi Wadu Division, Kenya. Based on the findings, it was concluded that *Ngima Dhano* radio program listeners in Cham Gi Wadu Division revealed a high level of knowledge and awareness regarding contraception use.

Objective two was to establish the efficacy of *Ngima Dhano* Radio programme in changing attitudes towards contraceptive use among women of Cham Gi Wadu Division, Kenya. Based on the findings, it was concluded that exposure to *Ngima Dhano* radio program among listeners in Cham Gi Wadu Division was associated with overwhelmingly positive attitudes towards family planning and contraceptive use. Objective three was to determine the efficacy of *Ngima Dhano* Radio programme on the acceptability of contraceptives among women in Cham Gi Wadu Division, Kenya. Based on the findings, it was concluded that among *Ngima Dhano* radio program listeners in Cham Gi Wadu Division, there were high levels of acceptance of contraceptives and their use. In conclusion, the study found each objective of this study to be efficacious.

5.4 Recommendations

Given the findings of the study and conclusions on *Ngima Dhano* programme it was found to be effective in creating awareness, attitude change and acceptance levels. Therefore, the study recommended that: Community radio stations should be exploited more to improve awareness levels on diseases, health campaigns and promotion on behavior change. This may be a critical component in disease prevention initiatives, behavior change campaigns as well as effective health promotions. The study also recommended that further investigations on the demographical relations may be considered. This may include looking at correlations such as education levels against the age of women against contraceptive uptake with a focus on attitude change and acceptance of practices.

5.5 Suggestions for Further Research

i. This study did not explore the extent to which other variables, for instance, education and age, may have affected knowledge and awareness about contraceptives. Therefore, there is a need for researchers to conduct further examinations along these lines.

ii. Since this study was only based on radio, other studies can be undertaken to test the effects of other media since the community in Cham Gi Wadu Division was also exposed to other media that may equally affect contraceptive uptake.

iii. Further research should also be undertaken on other important groups which include men, and religious leaders, among others, on their perception, views, and involvement in contraception uptake.

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APPENDICES

APPENDIX I: QUESTIONNAIRE

Dear respondent,

I am a student at Maseno University. In fulfilment to submit a research project as a requirement for partial fulfilment of a Masters of Arts in Communication and Media Technology. My research work is on "EFFICACY OF RAMENY RADIO'S *NGIMA DHANO* RADIO PROGRAM ON UPTAKE OFCONTRACEPTIVES AMONG WOMEN IN CHAM GI WADU DIVISION, MIGORI- KENYA."

I would wish to kindly request your assistance in filling in the questionnaires provided and would assure you that the information given will be treated with the utmost confidentiality. The information shall be used for the sole purpose of this study.

Section A:

General information

Instruction: Mark by a tick

A1. What is your marital status?

Single ( )

Married ( )

Separated ( )

Divorced ( )

Widowed ( )

No Answer ( )

A2. How many children do you have?

None ☐

1 ☐

2 ☐

3 ☐

4 and above ☐

No answer ☐

A3. What is your Age bracket?

15-19 years ( )

20-24years ( )

25-29years ( )

30-34years ( )

35-39 years ( )

40-44 years ( )

45-49 years ( )

50 years and above ( )

A4. What is your Religion?

i. Christian Catholic ( )

ii. Christian Protestant ( )

iii. Islam ( )

iv. Other (specify)…….

A5. What is your highest Education level?

Primary ( )

Secondary ( )

College ( )

University ( )

None ( )

A6. Do you have access to Radio?

Yes ☐ No ☐

A7. Do you listen *to Ngima Dhano* radio program?

Yes ☐ No ☐

A8. If Yes, How often?

Regularly ( )

Weekly ( )

Monthly ( )

Rarely ( )

Not at all ( )

No Answer ( )

Section B:

Level of Awareness (Knowledge) on the Family Planning

B1. Do you agree with these statements?

		YES	NO	NO ANSWER
i.	One can have a child after terminating contraceptive use?			
Ii	Contraceptives are effective in Family Planning?			
Iii	Use of Contraceptives has permanent effect on the body of a woman?			
Iv	Contraceptives can be sourced from Clinics, Health Centers and Pharmacies?			
V	Contraceptives can be sought directly over the Counter?			
Vi	Emergency Pills is a method of Family Planning?			
Vii	Implants are methods of Family Planning?			
Viii	Coils are mostly used Family Planning methods?			
Ix	Injectable are used in Family Planning?			
X	Are you aware of Natural methods of Family Planning?			
Xi	Do you access Family Planning from Hospitals, Health Centers, Private Clinics or Pharmacies?			
Xii	Contraceptives are used to space birth			
xiii	Natural methods (including withdrawal is a method of Family Planning?			
Xiv	A use condom is a way of Family Planning?			
xv	Women are more likely to use contraceptives if messages are Delivered in vernacular language through community radios?			

Section C:

Attitude on Contraceptives

C1. To What extent do you agree with the following Statements?

	STATEMENTS	**Strongly Agree**	**Agree**	**Strongly Disagree**	**Disagree**	**No Opinion**
i.	Using contraceptives is more desirable than abortion					
ii.	I believe that it is wrong to use contraceptives as they lessen sex drive.					
iii.	Contraceptives make sex seem less romantic.					
iv.	One should use contraceptives regardless of how long one is married.					
v.	I would practice contraception even if my partner resisted.					
vi.	6. Contraceptives are worth using, irrespective of the high cost.					
vii.	If I or my partner realise negative side effects from a contraceptive method then we will use any other alternative method.					
viii.	I feel better about myself when I use contraceptives.					

Section D:

Acceptance of Contraceptives use

D1. To what extent do you agree with the following statements?

	Strongly Disagree (SD)=1.0	Disagree (D)=2.0	Neutral (N)=3.0	Agree (A)=4.0	Strongly Agree
1. Am willing to talk to my spouse/sexual partner about me using contraceptives.					
2. I am willing to use contraceptives after consulting a health expert					
3. I consider natural family planning methods (e.g., withdrawal) as valid choices.					
4. It is my personal choice not to use any family planning method.					
5. I am willing to take emergency pills in case of an intercourse without protection only twice a year.					
6. I cannot use contraceptives because I fear it might reduce breast milk or cause back pain.					
7. My husband's/parents'/family's opinions discourage me from contraceptive use.					
8. I still will desire to have children despite using contraceptives.					

APPENDIX II: INTERVIEW SCHEDULE

1. How do radio messages specifically targeting reproductive health impact women's knowledge and awareness of on use of contraceptives in the context of *Ngima Dhano* health programme?
2. What are the key areas and content areas in radio messages that effectively promote positive contraceptive use among women?
3. How do these messages address cultural, social, and economic factors influencing family planning?
4. What is the reach and listenership of the radio program focusing on contraceptive use among women?
5. How can the effectiveness of these programs be measured in terms of audience engagement and behavior change?
6. How does the format and delivery style of radio messages influence women's perception, acceptance, and adoption of recommended reproductive health behaviours?
7. What are the barriers and facilitators to accessing and utilizing reproductive health information provided through the radio programs?
8. How can these barriers be addressed to improve the effectiveness of radio messages that you transmit in promoting reproductive health behavior change?
9. What are the long-term effects of exposure to radio messages on reproductive health behavior among women which are your core audiences?
10. How can sustained behaviour change be facilitated through your radio programs?

APPENDIX III: NACOSTI LETTER

MASENO UNIVERSITY
SCHOOL OF ARTS AND SOCIAL SCIENCES
DEPARTMENT OF COMMUNICATION AND MEDIA TECHNOLOGY

Tel. 254-057-351622,351620351008,351011
Fax: 254-057-351221,351153

Private Bag
MASENO

Ref: MA/FA/00024/019

Date: 5th Oct, 2023

National Commission for Science Technology and Innovation (NACOSTI)

Off Waiyaki Way, Upper Kabete,

P.O. Box 30623, 00100 Nairobi, KENYA

Dear Sir/Madam,

RE: RESEARCH PERMIT APPLICATION

This is to inform you that Mr. James Omondi Obuya, of registration number MA/FA/00024/19, is a postgraduate student at Maseno University in the department of communication and media technology pursuing a Master's degree.

His Master's proposal with the title "Efficacy of *Ngima Dhano* Community Radio Messages in the Uptake of Contraceptives among Women of *Cham Gi Wadu* Division, Kenya" was approved by the university, and he needs a research permit to proceed to collect data.

Your urgent assistance in his acquisition of a research permit will be appreciated.

Yours Sincerely,

Dr. Geoffrey Korir

CHAIRMAN, POSTGRADUATE COMMITTEE OF THE DEPARTMENT OF COMMUNICATION AND MEDIA TECHNOLOGY

APPENDIX IV: CODING SCHEME

CODINGSCHEME

The code sheets will correspond to the total number of programmes purposively sampled out.

Each coding sheet will then be issued to a different coder for the purposes of reliability

Date of coding: _____

Name of coder: _____

Aired: Month: __ __ Date: __ __ Year: _ _ _ _

1. Duration of program _____?

2. Duration for *Ngima Dhano* programme _____?

	Themes	**Indicators**	**Remarks**
1	Awareness Creation	Knowledge levels Feedback Content of Engagement	Knowledge levels was sufficient Robust Feedback Demonstration of Knowledge and one to one engagements
2	Attitude Change	Perception Frequency of use Spousal engagement of use of contraceptives	Programmes demystified perceptions and myths on use of contraceptives Contraceptives were used frequently to control birth rates Spouses discussed on using contraceptives before commencement
3	Acceptance of Contraceptives use	Usage Frequency of use Influence on others	They accepted to using contraceptives They remained consistent on usage They were willing to share information with others to use contraceptives

APPENDIX V: KISH GRID TABLE

	Eligible Women								
Household	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	
1									
2									
3									
4…									
400									

APPENDIX VI: NACOSTI PERMIT

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **621984**

Date of Issue: **03/November/2023**

RESEARCH LICENSE



This is to Certify that Mr.. James Omondi Obuya of Maseno University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Migori on the topic: Efficacy of Ngima Shani Community Radio Programme among women of Cham go Wadi Division Kenya for the period ending : 03/November/2024.

License No: **NACOSTI/P/23/30941**

621984

Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

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