
| RESEARCH ARTICLE

Media Dissemination Strategies Utilized for Communication of Covid-19 Information in Western Kenya

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| ABSTRACT

Communication strategies in health communication have a direct impact on the messages shared. Further, they influence the target audience in relation to behaviour change. Following the outbreak of COVID-19, many messages have been shared among communities with the aim of changing behaviour to curb the spread of the pandemic. However, despite the increased dissemination of messages on COVID-19 through multiple channels, the infection rates have continued to rise among community members. Further, community members have continued to flout government directives on COVID-19 safety measures. This presented the need to investigate the communication strategies that are available at the community level through which the community members receive COVID-19 messages. The study was conducted in the Vihiga and Busia counties of Western Kenya. Mixed methods research approaches were applied. The study targeted the general public and media practitioners. The results of the study showed that radio, social media and television are the dominating communication strategies being used in disseminating messages on COVID-19. The findings also revealed that apart from the mass media, other communication strategies include community and religious leaders, as well as government. However, the results showed that the audience has no feedback mechanism through which they can channel their views to the media.

| KEYWORDS

COVID-19, mass media messages, community and religious leaders

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1. Introduction

Africa's health burden is still currently high, requiring the application of innovative communication approaches (Fayoyin, 2016). According to WHO (2017), to build a better, healthier future for people all over the world, effective, integrated and coordinated communication is essential. Fayoyin (ibid) concurs that communication is central to public delivery. Uitterhout (2012) adds that to positively change health behaviour, different ways of communication to educate the public and promote positive health behaviour have to be used.

Community-based health communication interventions have utilized different media channels such as interpersonal channels, new media and the mass media (Schiavio, 2016). Uitterhout (2012) observes that mass media is a popular channel to reach a large audience to try and improve health behaviour by modifying and shaping behaviour. Nurmi (2013) points out that the use of mass media has over time been recognized as an important tool for improving health. This draws a concern that such media dissemination has not reached the core of the community with COVID-19 messages creating a need for this study.

While the use of mass media is upheld as the most popular in health interventions at the community level, according to the rural health information hub website, www.ruralhealthinfo.org, the use of a variety of communication strategies can yield positive feedback in terms of behaviour change among targets. This is achieved by changing people's attitudes and knowledge, increasing

risk perception, reinforcing positive behaviour, influencing social norms and increasing the availability of support. This is of the essence in realizing appropriate behaviour among community members as far as observing COVID-19 government directives is concerned. In addition, the utilization of diverse communication strategies empowers individuals to change and improve their health conditions. According to WHO (2017), the use of multiple channels ensures that the audience receives information and advice from a range of sources.

The use of multiple channels of communication in addressing a health problem will meet the changing need and media consumption behaviour among audiences. Uitterhout (2012) states that individuals consult different media sources to consume health messages and acquire knowledge and skills to make better health decisions. Schiavio (2016) contends that lines of communication need to open a community, and all voices should be encouraged to express themselves. In the case of COVID-19 messaging, this means that the available channels of communication should facilitate dialogue with communities. Further, such dialogue by the mass media communication channels and communities should be infused with community-based communication networks to realize the desired behaviour change.

Ramachandran et al. (2006) suggest that the mass media can create a base and other activities, such as interpersonal communication, which are necessary to actualize the gains of awareness created through the mass media. Further, both formal and informal community involvement can motivate community members. The current study suggests that mass media and COVID-19 messaging must be embedded in community networks and structures in order to elicit desirable outcomes. Cassell et al. (1998) in Uitterhout (2012) concurs that mass media should be used side by side with community-based interventions by highlighting that mass media lacks direct interpersonal contact or rather high social presence hence less effective. Similarly, Schiavio (2016) says that community-based communication strategies have been instrumental in the control of Ebola and other diseases. These strategies can therefore work very well in media dissemination of COVID-19 information.

1.1 Statement of the Problem

The communication channel impacts message reception at the community level. In Kenya, the media has increased the coverage of COVID-19 stories and general programming to address issues related to the possible causes of the disease, its signs and symptoms, available preventive measures and treatment. Despite the increased media coverage and emphasis on COVID-19 information, the infection numbers have continued to rise, especially at the community level. Further, community members have continued to flout government directives on COVID-19 safety measures. This presented the need to investigate the communication strategies that are available at the community level from which the community members receive COVID-19 messages.

2. Methodology

The study was conducted in Vihiga and Busia counties. The two counties had recorded the lowest and highest statistical rates of infection for COVID-19, respectively, in the western region of Kenya, at the time of the study in early 2021. In Busia, the study areas were Angorom and Amukura wards, whereas, for Vihiga, the study areas were Shiru and Banja wards. The study population comprised the general public, who are the consumers of media messages and the media practitioners, who were the key informants.

Data were collected from a total sample size of 400 residents of the selected areas and 6 media practitioners attached to the standard newspaper, the Nation newspaper, Citizen TV, KTN, Vihiga FM, and Radio Emuria. Two focus group discussions of eight members, four from each gender, were conducted in both counties. A structured questionnaire was administered to the general public, who were randomly selected, while interviews were conducted with the media practitioners who were purposively selected. The study adopted a mixed-methods approach whereby both quantitative and qualitative data were collected and analyzed using descriptive statistics and thematic analysis, respectively.

3. Findings and Discussions

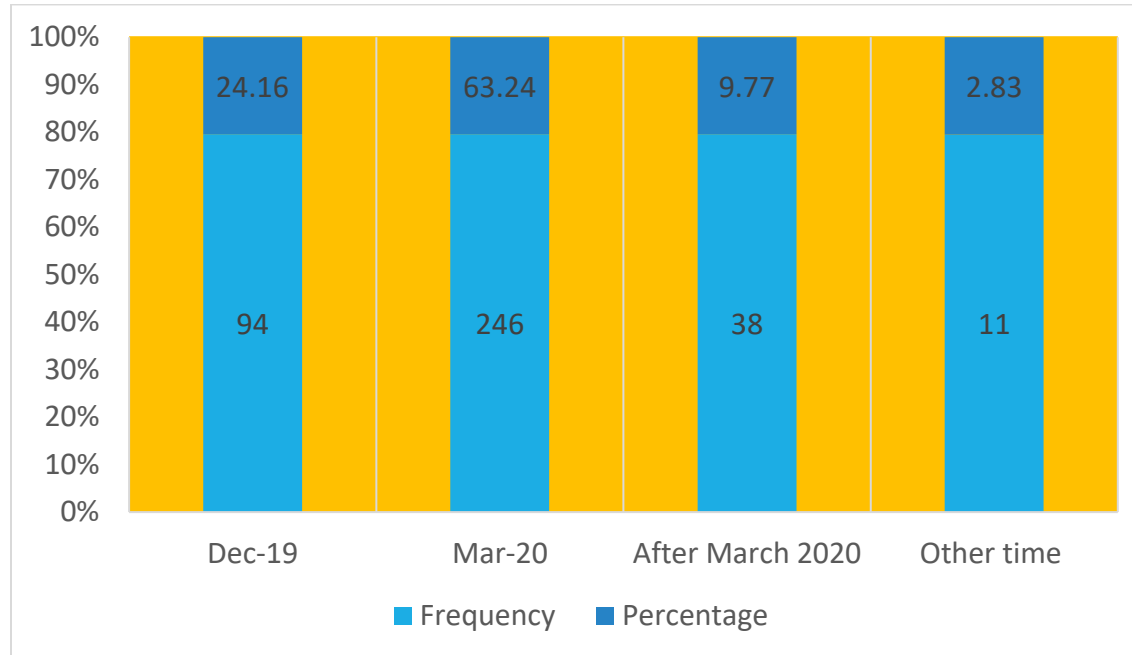


Figure 1: When respondents first heard of COVID-19

The majority of the respondents (63.24%) first heard of COVID-19 in March 2020. Only 24.16% heard about the COVID-19 pandemic in December 2019. These findings show that we have various categories of media audiences based on the manner in which they consume media messages. While others will give media messages keen attention the first time the issue is mentioned, as in the case of the 24.16%, others, who form the majority, ignore or fail to accord media messages the attention they deserve.

According to Ifekristi and Omowale (2020), a majority of audiences fall in the category of time-shifted content, whereby content consumption is postponed till later, unlike those who try to create meaning from the messages the first time they are exposed to them hence information snacking category. Further, while others purpose to get information from the communication channels, others stumble into information. Michelle (2018) states that media audiences are heterogeneous, anonymous, diverse individuals or groups that receive media content at the exact time of dissemination as intended.

On the other hand, other individuals or groups stumble on or intentionally delay the synthesizing of information content to a later time. This means that in communities targeted by this study, the majority of residents don't draw meaning from media messages the first time they receive them but rather wait until the issue is highly focused on by the media. This would be due to the literacy levels, demographics and attitudes. Ramachandran et al. (2006) concur with the results of this study, noting that poor literacy rates affect the effectiveness of communication channels resulting in poor health-seeking behaviour and compliance to treatment or even prevention protocols as in the case of COVID-19.

Table 1: Sources of information on COVID-19 at the community level

Covid-19 Information Source	Frequency	Percentage (%)
Friend	34	8.74
Community health worker	15	3.86
Local Authority	22	5.65
Family	63	16.2
Mainstream media	255	65.55
Total	389	100.0

Table 1 above shows that mainstream media is the main source of information on COVID-19 at the community level, rated at 65.55%. Family and friends have also played a significant role in sharing COVID-19 messages, rated at 16.2% and 8.74%, respectively. It's also notable that community health workers did not take up the role of creating awareness of the disease immediately after it broke out. Their participation in the dissemination of COVID-19 messages was only 3.86%.

During focus group discussions, it was revealed that the mainstream media, family and government entities were crucial in the dissemination of COVID-19 messages, as shown in the extracts from discussants below:

Discussant 1

"The radio and TV stations suspended their normal programs to give us more information on COVID-19." (FGD Angorom)

Discussant 2

"We had to motivate each other at the family level by reminding each other to observe government directives on containment measures. Personally, I regularly wash my hands." (FGD Shiru)

Discussant 3

"We looked up to the government to get to know what they were doing to contain the virus." (FGD Angorom)

The findings in table 1 are a reflection that mainstream media is part and parcel of people's lives. Creating meaningful awareness of COVID-19 is necessary, and this can only be anchored appropriately through the mainstream media. These findings confirm with Uitterhout (2012), who suggests that mass media is a popular channel to reach a large audience. Sokey et al. (2018) concur that mass media has the ability to reach a vast number of their target audience quickly.

The statement by **discussant 1** shows that great value is placed on traditional media. This is in line with the views carried by the Rural Health Hub Website, www.ruralhealthinfo.org, that radio and Television are preferred by rural audiences; further, it states that using multiple communication and media strategies will ensure a broader reach. In addition, the rates recorded on the use of family and friends as well as the statements by **discussants 2 and 3** show the need to use multiple channels in communicating with communities.

Table2: Media channels that were respondents' sources of information

INFORMATION SOURCE	FREQUENCY	PERCENTAGE
Radio	261	67.10
Television	213	54.76
Newspapers	121	31.11
Magazines	40	10.28
E-mails	33	8.48
Phone calls	68	17.48
Posters	27	6.94
Meetings/Barazas/Conferences	71	18.25
Text messages	159	40.87
Social media	221	56.81
Signs	11	2.83
Illustrations	17	4.37
Webpages	23	5.91

The findings in table 2 above depict that radio, social media, and television were the avenues through which most respondents received information about COVID-19, rated at 67.10%, 56.81% and 54.76%, respectively. Visual media (signs and illustrations) attracted the least consideration as avenues to share messages on COVID-19, rated at 2.8% and 4.37%, respectively.

During focus group discussions, the power of radio, as well as social media, was revealed, as shown in the extracts presented by the discussants below:

Discussant 4

"I always listen to Vuuka FM wherever I am. I don't want to miss updates on COVID-19." (FGD, Shiru)

Discussant 5

"Those of us who have smartphones follow discussions and other messages on COVID-19 through WhatsApp and Facebook." (FGD Angorom)

Discussant 6

"Radio Emuria updates us on the COVID-19 status in the country." (FGD Angorom)

The existence of community radio stations such as Radio Emuria, Vihiga FM, and Vuuka FM have contributed to the popularity of radio among residents in the study area. These findings concur with Wilding et al. (2018), who contend that traditional media is not dead among its audience and that radio and TV remain the most preferred media channels alongside social media.

The category of radio, such as Radio Emuria, Vihiga FM, and Vuuka FM, allows community members to communicate directly among themselves without having to pass through gatekeepers. This agrees with Ochichi (2013), who posits that community radio addresses the immediate needs of its audience. Further, (Hazra, 2017) agrees that community radio uses local language and thus serves the educated, illiterate and remote communities.

The average use of social media in accessing the information on the COVID-19 pandemic in Vihiga and Busia counties shows that digital platforms have taken their place as far as communication is concerned about penetrating rural audiences. This shows that the African or rather Kenyan trend on the use of social media is improving each day. As the state of Broadband Report (2020) highlights, people spend an average of 3hours 10minutes a day consuming social media, and this is the highest in comparison to other media. In addition, this shows that social media platforms are novel avenues through which awareness is created. However, Ifekristi and Omowale (2016) caution that other forms of media should not be ignored. Instead, they should be used alongside

social media to realize profound change. Moreover, social media present a global perspective on issues because of its ability to engage the global audience at an unprecedented speed (Ibid, 2016).

Table-1: Specific government sources from which they have received COVID-19 Information

Government Source	Frequency	Percentage (%)
Presidential address on COVID-19	317	81.49
MOH officials on COVID-19	144	37.02
Health Practitioners and their unions	95	24.42
County government Committee on COVID-19 Prevention and management	61	15.68
Community Health Workers /Community Health Volunteers	121	31.11

Based on the findings shown in table 4 above, the president’s address on the COVID-19 pandemic was a critical source of government information on COVID-19, with most respondents (81.49%) having listened to the presidential addresses. County government committees on the prevention of COVID-19 have disseminated the least messages (15.68%).

During focus group discussions, the members agreed that the government had played a key role as a source of information on COVID-19, as presented by the discussants below:

Discussant 7

"We always look forward to any presidential address, and we follow it in groups. When the president issues any statement on COVID-19 in person, it is usually a weighty issue. That is why we paid keen attention." (FGD Angorom)

According to the above results, Kenya has overwhelmingly communicated COVID-19 information at the national level. However, results further indicate that both national and community leaders should share messages on COVID-19 to not only instill confidence but also to give assurance to their citizens that efforts are being made to contain COVID-19. Nonetheless, this is not happening at the community level in many countries. Confirming these findings, the Organization for Economic Co-operation and Development (OECD, 2020) points out that much of the information shared by governments is communicated through the headlines and press releases which offer little detail resulting in speculations about the information provided.

Table-2: Frequency of media dissemination of COVID19 messages

Media	Very High (5)	High (4)	Average (3)	Low (2)	Very low(1)
TV	139(4 5.7%)	106 (29.5 %)	79(16 %)	11 (2.7 %)	54 (6.1%)
Radio	154(4 6.9%)	108 (30.1 %)	84(17. 0%)	24 (3.1 %)	19 (2.9%)
Magazines	11(2.7 %)	16 (2.7 %)	9(1. 9%)	72 (15.8 %)	281 (76.9 %)
Newspapers	49(5.9 %)	78(1 5.9%)	55(8.8 %)	98(2 9.5%)	109 (39.9 %)
Social Media	102 (37.7 %)	51(5. 9%)	137 (44. 8%)	48 (5.7 %)	51(5.9 %)

Radio, television and social media were the highly ranked media with regard to frequency of dissemination of COVID-19 information at 46.9%, 45.7% and 37.8%, respectively. Most respondents reflected by over 76% for magazines and 39% for newspapers stated that they had received very minimal information on COVID-19 through print media. This shows that print media has not played a great role in reaching out to the communities with COVID-19 information.

Focus group discussions further revealed that radio was more preferred among the rural community under study, as reflected below in the views of discussants:

Discussant 8

"Radio, Vuuka FM has been consistent in giving us messages on COVID-19 since it was reported in the country. I don't read Magazines and newspapers" (FGD Shiru)

Discussant 9

"We rarely get a supply of newspapers. However, whenever we access them, we do read, and sometimes issues of COVID-19 are addressed though not much as in the case of radio and TV." (FGD Angorom)

Based on the findings above, radio is the most dominant source of information on COVID-19 in the study area. The results complement those of Saleem et al. (2021), whose research points out that radio has a robust influence on rural populations and enhances good values among listeners. Further, the findings agree with Ziba (2015), who suggests that radio has positively impacted psychologically on their audience and granted them more exposure to critical information in the media.

The statements by **discussants 8 and 9** show that newspapers and other forms of print rarely reach rural populations such as those in Angorom and Shiru in Busia and Vihiga counties. These findings agree with Ramachandran et al. (2006) that newspapers, magazines and books appear to be sources of information to the urban elite and not the rural dwellers.

4. Conclusion

Based on these findings, radio remains the media that has disseminated most messages on COVID-19 in Vihiga and Busia counties. This shows the high level of trust that the rural population have towards radio messages. Print media is yet to be embraced by the rural populace. Social media, with the aid of modern internet supporting devices such as smartphones, and tablets, among others, is becoming a popular media channel among rural dwellers. The presidential address has been the major source of information from the government on COVID-19. In addition to directives issued by WHO to curb the spread of COVID-19, the audience was keen on listening to the presidential address to gain an understanding of the government's imposed stringent measures and efforts toward containment of COVID-19.

5. Recommendations

In order to educate rural communities and promote good health, especially for unknown diseases such as COVID-19, the organizations or parties concerned should integrate mainstream media with new media and community-based communication structures. This will not only realize the fast spread of messages but will also result in ownership of information and eventual behavior change.

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