

ISSN 2278 - 0211 (Online)

Rural Mothers, Media and the Millennium Development Goals: Post Mortem on Child Mortality Awareness Campaign

Dr. Onyeka Uwakwe

Principal & Lecturer, Department of Mass Communication, Federal Polytechnic, Oko, Nigeria

Abstract:

The United Nations developed eight "Millennium Development Goals" in the year 2000 in an attempt to improve the lives of the poorest people around the world. Goal 4 reads: "Reduce Child Mortality." Target 5 relating to the goal was to reduce by two-thirds, between 1990 and 2015, the under-five mortality rate. Thus deadline was set for 2015 for attainment. According to a UN appraisal report, in sub-Saharan Africa, the annual rate of reduction of under-five mortality was over five times faster during 2005–2013 than it was during 1990–1995 (http://www.un.org/millenniumgoals/2015). Related to meeting this goal in Nigeria, efforts have been made to create awareness of childhood diseases. Ultimately, the exercise was expected to help eliminate the scourge. From field experience, the strategy has taken a mixed media approach. In 2015, it becomes proper to evaluate the journey to the attainment of this set goal. Thus, in view of the need to benefit from this situation, it became necessary to conduct an analysis on the communication journey so far. This survey focuses on goal 4 of the MDs and supplies that both radio and interpersonal channels were effective in awareness creation. Nevertheless, awareness creation came more through traditional channels such as churches, associations and interpersonal relationships.

Keywords: Child Mortality, Post Mortem, Childhood Diseases, Millennium Development Goals, Awareness, Media

1. Introduction

Public responsiveness to government and non-government initiatives remains crucial to world development drive. Over the decades, therefore, the mass media have been envisioned as development partners, especially in developing and underdeveloped nations. Indeed, beyond serving as channels of communication, the mass media and other communication channels are adjudged catalysts of social mobilization.

Over the decades, therefore, the mass media have been envisioned as development partners. Indeed, beyond serving as channels of communication, the mass media are adjudged catalysts of social mobilization. As was captured by Tufte & Mefalopuolos, (2009, p.4): the "vision of using new technologies to pursue better lives for humankind has always existed, and it was reinforced throughout the 20th century with each new technological advancement". To many, the mass media are key components of the future.

In Nigeria, reasonable amount of time, energy and resources are devoted to efforts at creating awareness on MGDs such as child mortality. However, there is increasing evidence that the choice of the mass media as catalysts to change and modernity must exist side by side with the traditional channels.

1.1. The 2015 Millennium Development Goals

The UN created eight "Millennium Development Goals" in the year 2000 in an effort to improve the lives of the poorest people around the world. The deadline was set for 2015(https://www.youtube.com). The internationally agreed framework of 8 goals and 18 targets was complemented by 48 technical indicators to measure progress towards the Millennium Development Goals. These indicators were adopted by a consensus of experts from the United Nations, IMF, OECD and the World Bank (http://www.unmillenniumproject.org/goals)

1.2. Goal 4: Reduce Child Mortality

The MDGS 2015 report supplies the following records in relation to the above goals:

- The global under-five mortality rate has declined by more than half, dropping from 90 to 43 deaths per 1,000 live births between 1990 and 2015.
- Despite population growth in the developing regions, the number of deaths of children under five has declined from 12.7 million in 1990 to almost 6 million in 2015 globally.

- Since the early 1990s, the rate of reduction of under-five mortality has more than tripled globally.
- In sub-Saharan Africa, the annual rate of reduction of under-five mortality was over five times faster during 2005–2013 than it was during 1990–1995.
- Measles vaccination helped prevent nearly 15.6 million deaths between 2000 and 2013. The number of globally reported measles cases declined by 67 percent for the same period.
- About 84 percent of children worldwide received at least one dose of measles-containing vaccine in 2013, up from 73 percent in 2000 (http://www.un.org/millenniumgoals/2015, retrieved August 2, 2015).

In any case, we add that the millennium Development Goals have attracted reactions from scholars. For the co-sponsored CGD-Brookings seminar How the Millennium Development Goals Are Unfair to Africa, Professor William Easterly presented a controversial analysis suggesting that most African countries' predicted "failure" to meet the Millennium Development Goals (MDGs) in 2015 will result more from the design of the Goals than from unique deficiencies in Africa's development process (https://www.youtube.com). Those involved in the MDG campaign routinely states that "Africa will miss all the MDGs." While Africa will miss MDGs, Easterly argues that it will result primarily from a series of arbitrary numerical choices built into the Goals in such a way that "success" was less likely in Africa than in other regions from the beginning (https://www.youtube.com)

1.3. Objectives

- i. To determine the effectiveness of the media in creating awareness on child mortality.
- ii. To determine if the mothers were part of the communication design and implementation.
- iii. To determine the level of adoption of desired behaviour.

1.4. Research Questions

- 1. To what extent did the media help in creating awareness on Child Mortality?
- 2. To what extent where the mothers engaged in participatory communication?
- 3. To what extent did the mothers adopt the desired behaviour?

1.5. Health Scenario in Nigeria and sub-Saharan Africa: Insight from World Health Organisation

WHO Key facts no 178 updated September 2014 (http://www.who.int/mediacentre/factsheets retrieved August 2, 2015)

The UN MDGs report not withstanding, it is important to take a hard look at the 2014 World Health Organization report:

- 6.3 million children under the age of five died in 2013.
- More than half of these early child deaths are due to conditions that could be prevented or treated with access to simple, affordable interventions.
- Leading causes of death in under-five children are preterm birth complications, pneumonia, birth asphyxia, diarrhoea and malaria. About 45% of all child deaths are linked to malnutrition.
- Children in sub-Saharan Africa are more than 15 times more likely to die before the age of five than children in developed regions.

A child's risk of dying is highest in the neonatal period, the first 28 days of life. Safe childbirth and effective neonatal care are essential to prevent these deaths. 44% of child deaths under the age of five take place during the neonatal period. Preterm birth, intrapartum-related complications (birth asphyxia or lack of breathing at birth), and infections cause most neonatal deaths. From the end of the neonatal period and through the first five years of life, the main causes of death are pneumonia, diarrhea and malaria. Malnutrition is the underlying contributing factor in about 45% of all child deaths, making children more vulnerable to severe diseases. Overall, substantial progress has been made towards achieving Millennium Development Goal (MDG) 4. Since 1990 the global under-five mortality rate has dropped from 90 deaths per 1000 live births in 1990 to 46 in 2013. But the rate of this reduction in under-five mortality is still insufficient to reach the MDG target of a two-thirds reduction of 1990 mortality levels by the year 2015 (http://www.who.int/mediacentre/factsheets retrieved August 2, 2015)

According to WHO report 2014, nearly 3 million babies die every year in their first month of life and a similar number are stillborn. Within the first month, up to one half of all deaths occur within the first 24 hours of life, and 75% occur in the first week. The 48 hours immediately following birth is the most crucial period of newborn survival. This is when the mother and child should receive follow-up care to prevent and treat illness. Prior to birth, the mother can increase her child's chance of survival and good health by attending antenatal care consultations, being immunized against tetanus, and avoiding smoking and use of alcohol. At the time of birth, a baby's chance of survival increases significantly with delivery in a health facility in the presence of a skilled birth attendant. After birth, essential care of a newborn should include:

- ensuring that the baby is breathing;
- starting the newborn on exclusive breastfeeding right away;
- keeping the baby warm; and
- washing hands before touching the baby.

- Identifying and caring for illnesses in a newborn is very important, as a baby can become very ill and die quickly if an illness
 is not recognized and treated appropriately.
- Sick babies must be taken immediately to a trained health care provider (http://www.who.int/mediacentre/factsheets, retrieved August 2, 2015)

1.6. Children under the Age of Five

The WHO report 2014 reeled out the following facts (http://www.who.int/mediacentre/fact sheets, retrieved August 2, 2015)

- Under-five deaths are increasingly concentrated in sub-Saharan Africa and Southern Asia, while the proportion in the rest of the world dropped from 32% in 1990 to 18% in 2013.
- Children in sub-Saharan Africa are more than 15 times more likely to die before the age of five than children in developed regions. About half of under-five deaths occur in only five countries: China, Democratic Republic of the Congo, India, Nigeria and Pakistan. India (21%) and Nigeria (13%) together account for more than a third of all under-five deaths.
- Children are at greater risk of dying before age five if they are born in rural areas, poor households, or to a mother denied basic education.
- More than half of under-five child deaths are due to diseases that are preventable and treatable through simple, affordable interventions. Strengthening health systems to provide such interventions for all children will save many young lives.
- Malnourished children, particularly those with severe acute malnutrition, have a higher risk of death from common childhood illness such as diarrhea, pneumonia, and malaria. Nutrition-related factors contribute to about 45% of deaths in children under five years of age.

Based on the foregoing, we see that a number of issues in Nigeria relating to health continue to line up for mass media attention. In the past, we are witnesses to an intense campaign on HIV/AIDS, communication against childhood diseases and mutilation of female genital parts. Indeed, health communication has acquired much importance that much attention is now paid to it in non-governmental agencies and in academics. Health communication involves the study and use of communication strategies to inform and influence individuals and community decisions that enhance health (www.healthypeople.gov, retrieved August 2, 2015). Further insights on communication, education have also been supplied:

Health communication also can increase demand for appropriate health services. It can make available information to assist in making complex choices such as selecting health plans, care providers, and treatment for the community, health communication can be used to influence the public agenda, advocate for policies and programmes, promote positive changes in the delivery of public health, and health care services, and encourage social norms that benefit health and quality of life (www.healthypeople.gov, retrieved August 2, 2015)).

In pursuance of a healthy society, a number of standard objectives have been set:

- Health professional client relations.
- Individual's exposure to, search for, and use health information.
- Individual's adherence to clinical recommendations and regiments.
- The construction of public health messages and campaigns.
- The dissemination of public health risk information.
- Images of health in the mass media and culture at large.
- The education of consumers about how to gain access to the public health and health care system.
- The development of telehealth applications ((www.healthypeople.gov, retrieved Augu 14 5)).

2. Development Media Theory

The basic principle of this theory is that the media have a task of carrying out development programmes (Uwakwe, 2009). This theory was propounded based on the fact that low level of economic development is one of the major features of the Third World countries. Therefore, the media should be pivot in championing the course of development by mobilizing and informing people as well as harnessing their natural and human resources towards achieving this. McQuail argued that the mass media can serve as agents of development by:

(a) disseminating technical know-how, (b) encouraging individual change and mobility, (c) spreading democracy, (d) promoting consumer demand, and (e) aiding literacy, education, health, population control (McQuail, 2005, p.491).

2.1. Diffusion Theory

In 1962, Everret Rogers combined the information flow of information and personal influence in many fields, including anthropology, sociology, and agricultural extension work and developed the diffusion theory generally seen as an extension of Lazarfeld's original two-step flow idea. According to Baran and Davis (2006, p.173), Rogers's efforts at integrating information flow research with diffusion theory was so successful that information flow theory became known as information diffusion theory (and when it is applied to the diffusion of something other than information, that is technologies, it is called an innovation diffusion theory). Thus the process by which innovations spread to members of a social system has been by explained in the diffusion theory. "Diffusion studies are concerned with messages that convey new ideas, the process by which those ideas are conveyed and received, and the extent to which those ideas are adopted or rejected" (Watson & Hill, 2006, p.80). It currently considers the appropriateness of the channel. For example, mass media channels are often more useful in creating awareness or knowledge of ideas, but interpersonal channels are

considered to be more useful in changing attitudes towards innovations. Scholars argue then that the role of the mass media concentrate on information and awareness stage after which personal contacts, organized expertise and expertise and advise take over in the adoption process A principal chronicler of this tradition has been Rogers (1962) whose model of information envisaged four stages: information, persuasion, decision, adoption, and confirmation. We must note, however, that Rogers himself (1986) criticized the theory for its' over reliance on the above in disregard for participatory communication well advocated by Servaes (1999) and Huesca (2003, pp. 50). Infact, scholars argue that the mass media are used to draw attention to innovations and as a basis for group discussion led by change agents. In a way this theory is consistent with limited effects theorists. Baran and Davis commented:

Information/innovation theory is a source dominated theory that sees the communication process from the point of view of an elite that has decided to diffuse information or an innovation. Information/innovation theory, diffusion theory assigns a very limited role to mass media. Media mainly creates awareness of new innovations and only the early adopters are influenced by the content. Others adopt innovations only after being influenced by other people. Rogers recommend that diffusion efforts be led by change agents, people who could go out into rural communities and directly influence early adopters and opinion leaders (Baran& Davis, 2006, p.173).

3. Methodology

3.1. Research Design

The researcher adopts the survey method. This is because survey method has the ability to measure the belief, idea, opinion, attitude, and behaviour. This method has also the ability to allow for descriptive and inferential analysis and interpretation.

3.2. Population of Study

The study centres in Oko and Ekwulobia communities Anambra State, Nigeria.

3.3. Sample and Sampling Procedure

A sample of 100 respondents was drawn from each of the communities the through random sampling technique.

3.4. Instrument of Data Collection

The researcher made use of a questionnaire.

3.5. Method of Data Collection

The researcher, with the help of research assistants, collected the responses.

3.6. Method of Data Presentation and Analysis

The data collected by the researcher were presented in tables and analysed in percentages.

	Frequency	Percentage
Radio	61	30.5
TV	12	6
Newspaper	18	9
Traditional media (Churches, interpersonal, Town crier, Associations)	109	54.5
	200	100

Table 1: Source of Information on Child Mortality

	Frequency	Percentage
Churches	52	47.7
Town criers	21	19.2
Associations	9	8.2
Market Settings	11	10.09
Family members	16	14.6
Total	109	100

Table 2: Source of Traditional Media of information

The above tables are a pointer to the fact that the traditional media remain effective in rural mobilization and traditional settings. The results support Nwabueze's (2007.pp 62-68) conclusion that the "traditional media are people oriented, giving them more advantage as effective communication channels with the rural rites than mass media". On the use of mass media, radio remains the choice medium and this is supported by Uwakwe (2010, p123) in a report that radio is universal which means that virtually every household has at least one radio. In this ICT journalism times, virtually every mobile phone is also equipped with a radio thereby making it more accessible. Similarly, FAO (1998, p.11) outlined the utilities of radio such as "important mechanism for rapid diffusion of development information in a diversity of languages and to a widespread, often remote geographical areas" as well as a platform for

interactive communication, for dialogue and debate on major issues of development". In a survey on the result of the World Bank assisted campaign against malaria, Uwakwe had concluded that when the use mass media is inevitable, radio remains the smartest mainstream media in reaching rural people (Uwakwe, 2013, pp. 55-66).

	Frequency	Percentage
Involved	Nil	0
Not involved	200	100
Total	200	100

Table 3: Involvement in message design and communication

The seeming success of the campaign notwithstanding, the above table reports lack of popular involvement on the issue and this cannot be overlooked. This position is predicated on the inherent advantages of participatory communication. Effective participatory communication, which enables stakeholders be part of environmental decisions has become a key component of the current world development drive. The participatory communication approach was conceived more than three decades ago as alternative to the overconfident- city-centred and top-down diffusion approach. Participation, which necessitates listening, and moreover, trust, proparticipation scholars argue, will help "reduce the social distance between communicators and receivers, between teachers and learners, between leaders and followers as well as facilitate a more equitable exchange of ideas, knowledge and experiences." And that "the need to listen is not limited to those at the receiving end. It must involve the governments as well as the citizens, the poor as well as the rich, the planners and administrators as well as their targets" (Servaes & Malikhao, retrieved, October 5, 2014, www.fao.org) Tufte & Mefalopuolos, (2009, p.4) gave an account of why participatory approach is required explaining that in respect of the institutional perspective mentioned above, "participation can be used a tool to achieve a pre-established goal defined by someone external to the community involved. For the social movement mentioned above, participation, itself can be a goal as an empowering process." The authors highlighted the consensus for active participation in the early stages of a development project or program, both in research and design of interventions. They, however, asserted that "such participatory goal setting does not secure a continued role for participation in the following stages of project implementation. It only indicates that with ownership in setting goals a sustained process with relevant outcomes and impact will be possible."

	Frequency	Percentage
Yes	200	100
No	Nil	0
Total	200	100

Table 4: Attendance to Anti natal

	Frequency	Percentage
Yes	200	100
No	Nil	Nil
Total	200	100

Table 5: Attendance to Immunisation/Vaccination against childhood diseases

	Frequency	Percentage
Hospital	161	80.5
Maternity	18	9
Health Centre	21	10.5
Native Assistant	Nil	0
Home	Nil	0
Total	200	100

Table 6: Place of birth

Tables 4-6 indicate that mothers attended antenatal and sent children to facilities for vaccination. The women also utilised modern facilities at child birth. This finding collaborates the 2015 MDGs report which held that in sub-Saharan Africa, the annual rate of reduction of under-five mortality was over five times faster during 2005–2013 than it was during 1990–1995. The report also held that measles vaccination helped prevent nearly 15.6 million deaths between 2000 and 2013. The number of globally reported measles cases declined by 67 percent for the same period. About 84 percent of children worldwide received at least one dose of measles-containing vaccine in 2013, up from 73 percent in 2000 (http://www.un.org/millenniumgoals/2015, retrieved August 2, 2015). "Though sub-Saharan Africa has the world's highest child mortality rate, the absolute decline in child mortality has been the largest over the past two decades. The under-five mortality rate has fallen from 179 deaths per 1,000 live births in 1990 to 86 in 2015" (http://www.un.org/millenniumgoals/2015, retrieved August 2, 2015).

4. Summary and Conclusion

The mass media have always played an important role in promoting modernisation and development to people as well as articulating the views of the common man. But the benefits of the mass media do not undermine strength of the traditional media for the same purposes. After all, Ugboajah (1985) talked about the "Oramedia" in Africa. His work described the effectiveness of the popular media: Drama, singing, dancing, poetry, proverbs town criers, fortune tellers, market women, theatre, and on. These are existing traditions enjoyed by many people. They are indeed popular and beneficial to them. Based on the foregoing, we can summarize as follows:

- Radio is still the choice mainstream media in reaching a widely dispersed people.
- The traditional media remain potent in transmission of information.
- Religious settings as Churches are vital in information distribution.
- Surveyed women attended antenatal
- Surveyed women gave birth at modern medical facilities
- Surveyed women preferred giving birth at hospitals.

5. Recommendation

- In view of the apparent progress made so far on child mortality reduction awareness, efforts to should be made consolidate
 the gains.
- Improving on campaign strategy to include participatory communication is essential. This would promote greater success in similar initiatives.
- New media should be explored to complement the existing media.
- The gains recorded in this part of Nigeria is of significance and, therefore, should be studied so that the gains could be replicated elsewhere.

6. References

- i. Adeyanju, Akeem (2008) Communicating or impact in Nigerian health sector. In Nwosu Ikechukwu, Soola, O.and Chinaka N.(eds.) Communication for health and sustainable development in Nigeria. Enugu:Rhyce Kerex Publishers. pp. 24-30
- Adeyanju, Sola (2007). WASH in Nigeria & MDGC: The Nigeria target. A paper presented at the UNICEF-NOA workshop on Material Development held at Crest Hotel Jos, July 2007
- iii. Agrawal, B. (1981). SITE social evaluation: Results and implications. Ahmebad India: Space Application Centre.
- iv. Akinfeleye, R.A. (1988). Media policy: Tool for national development. In Akinfeleye, R.A. (ed) Contemporary issues in mass media for development and national security. Lagos: Unimedia securities. P.49
- v. Akinfeleye, R.A. (2003). Fourth estate of the realm or fourth estate of the wreck: Imperative for the social responsibility of the press. Lagos: University of Lagos Press.
- vi. Baran, S. J. (2002). Introduction to mass communication. New York: McGraw-Hill.
- vii. Baran, J and Davis D (2006) Mass communication theory (4thed). Mexico: Thomson Wadsworth.
- viii. Bordenave, Juan(1977). Communication and rural development. Paris: UNESCO
- ix. DeFleur, M.L and Ball-Rokeach, S. (1975). Theories of mass communication (5th ed.)New York: David Mckay.
- x. Desai, M.V. (1977), Communication policies in India. Paris: UNESCO.
- xi. Dominick, J. R. (1996). Dynamics of mass communication (5th ed.). New York: McGraw-Hill.
- xii. Dominick, J. R. (2002). Dynamics of mass communication (7th ed.). New York: McGraw-Hill.
- xiii. FAO (1987). Development communication case study: Towards putting farmers in control. Rome: FAO
- xiv. FAO (1998). Knowledge and information for food security in Africa. From traditional media to Internet. Rome: Food and Agricultural Organisation.
- xv. Habte, A.M. (1983). Mass media role in the third world. In J. Martin and A. Chaudhary (Eds.). World mass media systems. N.Y.: Longman. PP. 95-109
- xvi. Hawkings, H. and Velatin, R. (1997). Development and the information Age: Four global scenarios for the future of information and communication technology. Ottawa:IDRC &UNDSTD
- xvii. Huesca, R. (2003). From modernization to participation: The past and future of development communication in media studies. In A. Valdivia(ed). A companion to media studies. Oxford: Blackwell, pp.50-71.
- xviii. Lerner, D. (1958). The passing of traditional society. Glencoe, IL: Free Press
- xix. Littlejohn, S. (1992). Theories of human communication (4th ed.). California: Wadsworth Publishing Company.
- xx. Mboho, M. and Batta H. (2008). Theorising on health client's therapeutic decision system: Implications for health communication. In I. Nwosu, Soola, O.and Chinaka N.(eds.) Communication for health and sustainable development in Nigeria. Enugu: Rhyce Kerex Publishers. pp.16-21
- xxi. McQuail, D. (1987). Mass communication theory: An introduction. Beverly Hills CA: Sage Publications.
- xxii. McQuail, D. (2005). Mass communication theory (5th ed.). Thousand Oaks California: Sage Publications.
- xxiii. Melkote, S.R. (1991). Communication development in the third world: Theory and practice. London: Sage Publication.
- xxiv. Mustapha, L.K. (2008). Mass media and optimization of health policy: the participation option. In Nwosu Ikechukwu, Soola, O.and Chinaka N.(eds.) Communication for health and sustainable development in Nigeria. Enugu: Rhyce Kerex Publishers. pp.59-69)

- Nwabueze, D. (2007). The role of traditional media in grassroots mobilisation and poverty reduction for sustainable human development. In I. Nwosu, Fab-Ukozor, Nwodu, L (eds.). Communication for sustainable human development. Unugu, ACCE, pp. 62-68.
- xxvi. Nwosu, Ikechukwu (1990). An overview of mass communication problems in Nigeria. In I. Nwosu (Ed.), Mass communication and national development. Aba: Frontier Publishers, p.92.
- xxvii. Nwosu, Ikechukwu (2008). Towards an integrated and holistic health communications strategy for sustainable human development. In Nwosu Ikechukwu, Soola, O.and Chinaka N.(eds.) Communication for health and sustainable development in Nigeria. Enugu:Rhyce Kerex Publishers. pp.1-15
- xxviii. Nwuneli, O. (1985). Development news and broadcasting in Nigeria. In O. Nwuneli (ed.) Mass communication in Nigeria: A book of reading. Enugu: Forth Dimension Publishers. , pp.103-110).
- xxix. Ochonogor, C. I. (2007). The mass media and attitude change: The imperative for national development. In O. Uwakwe (ed.) Communication and national development. Enugu: Afrika-Link Books. pp.249-269.
- xxx. Ogai, J. (2007). An analysis of the concepts of development and underdevelopment. In O. Uwakwe (ed.), Communication and national development. Enugu: Afrika-Link Publishers, pp. 16-44.
- xxxi. Ofor, C. C. (2005). Mass communication research: Design and Methods. Agbor: Royal Pace Publications.
- xxxii. Ojobor, I.J. (2002). "Mass Communication Theories". In C. Okunna (ed.). Teaching mass communication: a Multi-Dimensional Approach. Enugu: New Generation Books.
- xxxiii. Rampal, K. (1983). Mass media as vehicles of persuasion and opinion making in the third world. In Martin .J and Anju Grover. Comparative mass media systems. NY; Longman. pp.147-166.
- xxxiv. Rao, Y.V. (1966). Communication and development: A study of two Indian villages. Minneapolis University of Minnesota
- xxxv. Rogers, E.M. (1962). The diffusion of innovations. Glencoe, IL: Free Press
- xxxvi. Rogers, E.M. (1986). Communication technology. New York: Free
- xxxvii. Rogers, E.M. (1969). Modernisation among peasants: The impact of communication. New York: Holt, Rinehart and Winston.
- xxxviii. Sambe, J.A. (2005). Introduction to mass communication practice in Nigeria. Ibadan: Spectrum Books.
- xxxix. Sambe, J. (2008). Mass media and the anti corruption campaign in the health sector. In Nwosu Ikechukwu, Soola, O.and Chinaka, N.(eds.) Communication for health and sustainable development in Nigeria. Enugu: Rhyce Kerex Publishers. pp. 50-58);
 - xl. Servaes, J. (1999). Communication for development. Cresskill, NJ: Hampton.
 - xli. Shaw, D. and M. McCombs (1977). The emergence of American political issues. St. Paul: West.
 - xlii. Soola, E.O.(2003). Development communication: The past, the present and the future. In E. Soola (ed.), Communicating for development purposes. Ibadan: Kraft Books, pp.1-28.
 - xliii. ----- (2003). Development journalism for print and electronic media journalists in Nigeria In E. Soola (ed.), Communicating for development purposes. Ibadan: Kraft Books, pp.115-25.
 - xliv. Straubhaar and LaRose (2004). Media now. Belmont: Wadsworth
 - xlv. Schramm, W.(1977), Big media, little media. Beverly Hills: Sage.
 - xlvi. Schramm, W.(1964). Mass media and national development. Stanford: Stanford University Press
- xlvii. Tiamiyu, M (2002). Information and communication technonologies for social development: Issues, options and strategies. In E. Soola (ed.), Communicating for development purposes. Ibadan: Kraft Books, pp 29-60.
- xlviii. Ugboajah, F. O. (1985). Oramedia in Africa. In Ugboajah, F.O. (ed.) Mass Communication, Culture and Society in West Africa. London: WACC.
- xlix. Ugwulebo, E. (2006). An appraisal of rural development in Nigeria: The place of the mass media. African Journal of Communication Studies, I (1), p. 21.
 - 1. Wilson, D. (2006). Indigenous-modern communication interface for sustainable environmental development. The Nigerian Journal of Communications, 4 (1&2), p.12.
 - li. Umueri, A. and Galadima, J. (2008). Role of communication in promoting health care delivery. In Nwosu Ikechukwu, Soola, O.and Chinaka N.(eds.) Communication for health and sustainable development in Nigeria. Enugu: Rhyce Kerex Publishers. pp.40-49);
 - lii. UNESCO (1976). Intergovernmental Conference on Communication Policies in Latin America and the Caribbean. Final Report. Paris: UNESCO
 - liii. Uwakwe, O. (2007). Communication and National Development (Rev.ed.) Enugu: African-link Books .
 - liv. Uwakwe, O. (2009). Digital Age mass communication. Unpublished mimeograph. Federal Polytechnic, Oko.
 - lv. Uwakwe, O.(2010). Communication for development purposes. Awka: Amaka Dreams.
 - lvi. Uwakwe, O. (2013). An analysis of the effectiveness of the World Bank Assisted Campaign on Malaria Control Booster Project in a rural community in Anambra State. Journal of Linguistics and Communication Studies, vol. 3 no 1, pp, 55-56.
- lvii. http://www.un.org/millenniumgoals/2015 retrieved August 2, 2015
- lviii. https://www.youtube.com, retrieved August 2, 2015
- lix. http://www.who.int/mediacentre/factsheets retrieved August 2, 2015
- lx. https://www.healthypeople.gov, retrieved August 2, 2015
- lxi. Servaes & Malikhao, retrieved, October 5, 2014, https://www.fao.org