

## Radio Health Programmes and Menopause Awareness among women of Perimenopausal Age in Rivers State, South-South Nigeria

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### ABSTRACT

This study was motivated by the perceived lack of awareness among women of perimenopausal age in Rivers State, Nigeria, of the conditions and features that follow the onset of menopause. Specifically, the study analysed the influence of listenership to two flagship health programmes - *Medic 923* (Nigeria Info FM) and *Health Matters* (Treasure 97.7 FM) – on the women's level of awareness and preparation for the onset of menopause. Media Dependency, Media Literacy and Agenda setting theories formed the theoretical framework of the study. Using a survey as the research design, a sample size of 381 was chosen using cluster and purposive sampling techniques from a population of 38,675, with the questionnaire serving as the data collection instrument. The findings reveal that there is a high level of listenership to *Medic 923* and *Health Matters* by women of perimenopausal age, though issues relating to menopause are not significantly focused on, and the result of this is that the awareness of women of perimenopausal age on menopause is low; in fact, radio is not a significant source of menopause information for them. Deriving from the findings, it was recommended that radio do more to prioritise health information programmes with an emphasis on menopause information, and to achieve this, they could partner with Non-Governmental Organisations as well as the Nigerian Women Affairs Ministry for funding.

## INTRODUCTION

The growth in technology has ushered major changes in human society globally. One significant effect of this is that change communication has become easier and more effective in reaching the grassroots, especially, through broadcast media content, particularly, radio (Skuse and Butler, 2004). The main purpose of radio is to convey information from one place to another through the intervening media (waves, and non-conducting material without wires) (<https://www.infoplease.com>science>). Radio plays a vital role in promoting better health and advocates a people-centered and rights-based approach to health communications that emphasise community-driven interventions that help the “vulnerable” and “at risk” to access useful health information and build knowledge for social and behavioural change by increasing tolerance and decreasing the levels of discrimination and stigmatization (Ahmed & Bates, 2013).

In line with the above, a plethora of radio programmes, especially on health, exist at all radio stations in Nigeria in general and Rivers State in particular, whether they be privately-owned or public. This notwithstanding, there seems to be a significantly low level of issues and conditions relating to menopause among women generally and those of perimenopausal age in particular. Available data indicate that these women, who are about to reach the age of menopause lack the necessary health information to be able to prepare and to cope with the changes in their health which this age brings, and this is despite the health programmes on radio, which of course is the most mass of all the mass media channels. This therefore called for an empirical investigation of this nature because the effectiveness of radio programmes is predicated on the level of awareness the target audience on the issues shared by radio as well as the use to which the target audience put the information received from radio.

Menopause, the dependent variable in this study the permanent cessation of menstruation and ovulation due to ovarian failure. “Spontaneous” menopause occurs after 13 months of amenorrhea as ovarian hormone secretion diminishes, on average, around the age of 51 years. Menopause may be induced prematurely (before the age of 40) or early (before age 45 years)” (*www.menopause research.com, retrieved 31<sup>st</sup> January 2020*). Mayo clinic (2019) also defines perimenopause as the entire menopause transition extending into the first 12 months of the early post-menopause stage. Approximately 85% of women experience symptoms of varying types and severity during menopause which include vasomotor symptoms like intense perspiration and hot flashes, sleep disturbances like inability to sleep or resume sleeping when waked prematurely, psychological symptoms like anxiety, mood disturbances and depressive symptoms.

Majority of women attain menopause without adequate information on how to deal with the demands and challenges which come with the age and this may lead to depression and social isolation. In popular media, menopause is often presented as a time of physical degeneration that women dread and women going through this transition are frequently portrayed as emotionally unstable and irrational because of hormones. Fear and anxiety about menopause can be created and exaggerated or manipulated by drug companies or media

pundits who focus attention on the potential problems associated with menopause rather than providing a balanced and accurate picture of women's real experiences at this stage ([www.sharecare.com>menopause](http://www.sharecare.com/menopause)). To address this circumstance, many strategies can be employed by policy makers and handlers but communication would be key. Though the traditional and new media can be effectively used in this regard, radio, with its potentials for reach and ease of use, holds the greatest promise for engendering change in this regard. It is based on this that this study analysed the influence of radio health programmes on menopause awareness among women of perimenopausal age in Rivers State.

### **Statement of the Problem**

Menopause is an important and inevitable condition in every woman's life. The inevitability of this fact notwithstanding, available data seem to indicate that majority of women attain menopause without adequate information on how to deal with the challenges, demands, conditions and problems associated with it. There is a pronounced lack of awareness and paucity of information and information sources. In fact, the available information most times, are false and unverified. Following from this is the avalanche of superstitions and negative mind-sets and beliefs about menopause. In fact, in some cases, some women upon approaching menopause choose to live in denial until the inevitable sets in. For instance, some women erroneously equate accepting the inevitability of menopause preceded by the perimenopausal stage as an acknowledgement or admission of being aged and the attendant weakness of body that comes with it.

The foregoing picture significantly contrasts with the high number of radio health programmes which air on the 22 radio stations in Rivers State. With this number of programmes on these stations, and with radio having a high reach index, it should be expected that there would be an avalanche of information on menopause available to women of perimenopausal age in the state. The issue at stake therefore is to ascertain nature of these radio health programmes and the rate at which they focus on issues of menopause in their programmes with a view to establishing the role of radio in the seemingly low level awareness of issues relating to menopause among women of perimenopausal age in Rivers State. It is to achieve the above therefore that this study, Radio Health Programmes and Menopause Awareness among Rivers State women of Perimenopausal Age, was undertaken.

### **Objective and Research Questions**

The objective of this study was to analyse the role of radio health programmes and menopause awareness among Rivers State women of perimenopausal age. The research questions are:

1. What is the extent of listenership to *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) by women of perimenopausal age in Rivers State, Nigeria?

2. What is the extent to which *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) focus on menopause information in their programme contents?
3. What is the level of awareness about menopause among women of perimenopausal age in Rivers State, Nigeria?
4. To what extent do *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health matters* (Treasure 98.5 FM, Port Harcourt) contribute to information and awareness on menopause among women of perimenopausal age in Rivers State?

## THEORETICAL REVIEW

### Media Dependency Theory

In 1976, Sandra Ball-Rokeach and Melvin DeFleur created the "Dependency Theory," which they defined as the correlation between media content, societal norms, and audience behaviour. McQuail (2010) claims that it looks at both macro and mixed elements that affect motivations, information-seeking techniques, media use, functional alternative use, and dependence on certain media. This theory contends that there is an intrinsic connection between mass media, audiences, and complex social systems. According to McQuail (2010), the media fosters this audience dependence by providing them with content that can satisfy their demands for knowledge, entertainment, and information. Two factors have an impact on the level of dependency. An individual gets more reliant on media that fulfils multiple requirements than on media that just fulfil a selected few (Asemah, 2011). Social stability is the second source of dependency. A person is forced to reevaluate and make new decisions based on the information provided by the media when societal change and conflict are prevalent.

This hypothesis suggests a degree of strength in dependent connections. Affective motivation helps the individual increase their degree of enjoyment, whereas cognitive motives enable people to retain a level of focus. The degree to which people believe the media they select are achieving their goals, which were categorised by DeFleur and Ball-Rokeach (1989) into three categories that span a wide variety of personal aims, determines the intensity of media objectives:

1. Social and Self-understanding: Learning about oneself, knowing about the world.
2. Interaction and Action Orientation: Deciding what to buy, getting hints on how to handle news or difficult situations, etc.
3. Social and Solitary Play: Relaxing when alone, going to a movie with family or friends.

The relevance of this theory to the study is that considering the abilities of the mass media to disseminate information to dispersed and variegated audiences who perceive them as credible sources of information, it follows that women of perimenopausal age in Rivers State can depend on radio health programmes for information on menopause.

### **Media Literacy Theory**

According to Bello, Adejola, and Adebimpe (2013), aggressive media now defines human civilization. Whether it be through books, newspapers, magazines, television, radio, or computers, information is always available to everyone. As a result, people automatically evaluate the material they are exposed to in order to mentally protect themselves. Media literacy is this. According to Bergsma (2011), media literacy was brought to the United States in the 1950s as a result of recognition of the growing influence of mass media, such as radio and television, on people's daily lives and educational experiences.

However, a promising paradigm was put out by Hayes, Ross, Gasher, Gutstein, Dunn, and Hackett (2011). It unpacks the theory of media literacy as two continuities, from functional to critical literacy and from consuming to "prosuming" literacy. According to them, "consuming" literacy is the capacity to acquire media messages and use media at various levels, while "prosuming" literacy is the capacity to create media contents. 'Functional' literacy, on the other hand, relates to people's "contextual" meaning-making and use of media tools and contents. The capacity of a population to analyse, assess, and criticise media is known as "critical" literacy.

The media literacy hypothesis discusses how we take in the deluge of information in our media-saturated culture and looks at how we frequently interpret those messages incorrectly. According to Hodkinson (2011), "people can make media suit particular purposes, such as using media to gather knowledge, control moods, and seek excitement" (p.53). According to the media literacy idea, significant media effects can frequently, and over extended time periods, have a direct impact on the viewer's or reader's intent.

### **Agenda-Setting Theory**

An issue or conversation topic is on the agenda. It is a current issue that provokes either a favourable or unfavourable response from the general audience. On the other hand, developing an agenda entails taking into account current social events (Asemah, 2011). Wimmer and Dominick (2011) note that the idea of agenda-setting by the media contends that what the media choose to publicise has a significant influence on what topics people debate, think about, and worry about. This means that if the media chose to devote the greatest time and space to a particular topic, then that issue will inevitably take precedence in the minds of the viewers. The agenda-setting theory, according to Ani & Anyandike (2013), assumes that the mass media predetermine what issues are regarded as important at any given time in a given society. This predetermination is typically based on the quantity or frequency of reporting, prominence given to the reports through headlines display, pictures and layout in newspapers, magazines, films, graphics, or timing on radio and television, the degree of conflict generated in the reports, and cumulative media-specific effects over time.

### **Women's Health**

Women's health refers to a variety of ways in which a woman's health varies significantly from a man's. The World Health Organization (WHO) defines health as "a condition of complete physical, mental, and social well-being and not

only the absence of disease or infirmity," and women's health is an example of "population health" (Selkie, Benson, & Moreno, 2011). Women have a right to the best physical and mental health possible, as these conditions are necessary for their existence, well-being, and the ability to engage in all facets of public and private life (Beijing [BPA], 1995, as cited in Okorie, 2013). However, there is still gender imbalance in the delivery of healthcare, and it can be difficult for women to get the right care. Giving women the knowledge and abilities they need to reach their health potential is crucial for both their own wellbeing and the wellbeing of their families and children. In order to achieve the Sustainable Development Goal (SDG) that states, "also ensure healthy lives and promote well-being," (United Nations [UN], 1996, p.89), gender inequalities in the provision of health services must be addressed. This would allow all women and men to live healthier lives.

"Women's health is often treated simply as women's reproductive health, however, many groups argue for a broader definition pertaining to the overall health of women... Although women in industrialised countries have narrowed the gender equality/gender gap in life expectancy and now live longer than men, in many areas of health they experience earlier and more severe disease with poorer outcomes. Gender remains an important social determinant of health; women's health is influenced not just by their biology but also by conditions such as poverty, employment, and family responsibilities. Women have long been disadvantaged in many respects ... which restrict their access to ... health care... (www.women'shealth.gov, retrieved February 16, 2021).

Men and women have many of the same health challenges, but women experience unique health problems. In addition to the numerous risks and illnesses, women frequently become spouses and moms as they are just leaving their own childhood. Numerous pregnancies, some of which may or may not be desired, are common among women. In the past, delivery was a dangerous process that frequently resulted in the mother's death. In the past, the majority of women did not live long enough to worry about menopause or old age.

In 1900, a woman's life span was about 50 years. Now, in the new millennium, average life expectancy for women is 82 years of age, and it is continuing to rise. Not only are women living longer, but they also can anticipate the possibility of enjoying a better quality of life throughout their span of years. In order to accomplish this, it is essential that women take charge of their own bodies and that they comprehend how they can maximise their personal health and fitness. It is also helpful that men understand and are supportive of the health concerns of the women" (Office on Women's Health, OWH, 2017 p.2).

### **Female hormones and Menopause**

A hormone is a chemical substance that is released by one organ and moves through body fluids to effect other tissues. Hormones are "chemical messengers," in essence. (retrieved February 17, 2021, from [www.wikipedia.en>hormones.com](http://www.wikipedia.en>hormones.com)). For women, particular hormones are a source of concern. In addition to helping with the development, upkeep, and repair of reproductive tissues, the sex hormones released by the ovaries also have an impact on other body tissues, such as bone mass. Women with eating problems and women who seek to have

less body fat may have issues with this. Examples of such women include athletes, models, and ballerinas. Low body fat women frequently have insufficient sex hormone production. As a result, they may have diseases including menstruation stopping, osteoporosis (bone weakening), fractures, and others that are common in post-menopausal women. Oestrogen and progesterone, two female hormones, are produced less by a woman's body after menopause. As a result, some women may experience discomfort from perimenopausal (menopausal) symptoms. According to strict definitions, menopause occurs when a woman goes 12 months without a menstrual cycle ([www.wikipedia.com/menopause.com](http://www.wikipedia.com/menopause.com), retrieved February 23, 2021). Menopause, a natural aspect of ageing, often starts at age 51. However, the perimenopausal phase typically starts in the early 40s. Menopause is a crucial time of transition in women's lives that has an impact on their quality of life (Okidu, 2013). However, women who have their ovaries surgically removed undergo "sudden" surgical menopause (Dutta-Bergman, 2015).

The reproductive cycle, which has been running continuously since adolescence, slows down and prepares to end as a woman ages (Dutta-Bergman, 2015). Bello (2015) asserts that the production of the hormone oestrogen by the ovaries decreases as menopause approaches. Menstrual cycle (period) changes as a result of this decrease. It can start off regular, then stop. As the body adjusts to various hormone levels, physical changes might also take place. The body adjusts to these changes by exhibiting symptoms during each stage of menopause (perimenopause, menopause, and post-menopause). When the ovaries stop producing large amounts of hormones, the conventional changes we associate with "menopause" take place. As menopause nears, the ovaries no longer release eggs into the fallopian tubes, menstruation will stop.

Perimenopause, menopause, and postmenopause are the three stages that explain the natural menopause process for females. The mindset of society up to the 1950s was that a woman should just accept menopause as part of her fate. There are various medicinal approaches available now to treat menopause symptoms. Women are urged to see menopause as only a period of transition rather than a life-altering event (Okidu, 2013).

### **Menopause: Management and treatments**

When treatment for menopause is discussed, it involves treating the symptoms of menopause that disrupt a woman's life (Dutta-Bergman, 2015). The main types of treatment for menopause are hormone therapy (Oestrogen therapy {ET} and Oestrogen Progesterone/Progestin Therapy {ET}), non-hormonal treatments and hormone therapy. Hormone therapy can relieve many of the symptoms of menopause, including hot flashes (a sudden feeling of warmth that spreads over the body) and night sweats, vaginal dryness (and discomfort during sex) as well as irritability and mood swings Breast tenderness, worsening of premenstrual syndrome (PMS), irregular or skipping periods, periods that are heavier or lighter than usual, racing heart, headaches, joint and muscle aches and pains, changes in libido (sex drive), difficulty concentrating, memory lapses (often temporary), weight gain and hair loss or thinning. Non-hormonal

treatments include changes to the diet, exercise, lifestyle and using over-the-counter options (Dutta-Bergman, 2015).

### **Perimenopause or menopause transition**

Perimenopause, when the ovaries gradually generate less oestrogen, begins 8 to 10 years before menopause and occurs at the conclusion of a woman's reproductive years. The reduction in oestrogen quickens in the latter one to two years of perimenopause. Many women may have menopause symptoms at this time (Bello, 2015). During this time, a lot of women can still have menstrual cycles and become pregnant. Some women don't know how to cope with perimenopausal symptoms like irregular periods or heavy menstruation. Anxiety, melancholy, mood swings, tension, lethargy, and irritability are just a few of the emotional changes that menopause can bring about. Other effects include fatigue and insomnia, lack of desire and difficulties focusing, aggression and irritability.

### ***Treasure 98.5FM and Nigeria Info FM, Port Harcourt***

*Treasure 98.5 FM* Port Harcourt, located at Mgbuoba, is owned by the Federal Radio Corporation of Nigeria and was established to bring the programmes of the federal government to the grassroots. (Dailytrust.com, retrieved February 23, 2021). On the other hand, *Nigeria Info FM* Port Harcourt, a privately owned outfit, started off in 2012, and has the slogan "Your Number One Talk, News and Sports station", making it the first of its kind in Nigeria, according to the NBC ([www.mediaauditinfo.com](http://www.mediaauditinfo.com), retrieved February 23, 2021).

*Medic 923* (which airs on Nigeria Info FM, Port Harcourt) focuses on health issues. It combines one-man talk show with interview as content formats. The same applies to *Health Matters* (on *Treasure 98.5 FM*).

### **Empirical Review**

Bakouei, Basirat, Salmalian and Omidvar (2013) carried out a study on: Assessment of women's awareness level about symptoms and complications of menopause and methods to their prevention. The findings of the study showed that the rate of participants' awareness and knowledge of issues relating to menopause was lower than 50%. The findings of another study conducted by Sugunadevi and Divya (2017) on: Health education programme about postmenopausal changes to perimenopausal women in an urban slum area showed that only 44% of perimenopausal women were aware of the symptoms of menopause and the skills to handle them.

In a related study undertaken by Gayathripriya & Alasmar (2018) on: Menopause Awareness, Symptoms Assessment among Bahrain Women, aimed to assess the menopausal awareness and related symptoms that affect the quality of life. As the findings indicated, on 7.2% of the sample respondents had a significantly high level of awareness on issues relating to menopause, especially, at the perimenopausal stage.

Another study on *Health programming and Community-based radio stations in Sub-Saharan Africa: An example from Zambia*, conducted by Lawrence (2012) asked participants where they got their health information and whether or not they trusted information from Namwianga radio. They were also asked to recall of information discussed on radio and if the information influenced their health behaviour. The findings revealed that radio was a significant and trusted source

of health information (87%), which influenced the health behaviours of the respondents.

## METHODOLOGY

The study adopted the survey design with a research population of 116,025, being the population of women who fell under the perimenopausal age range in three selected local government areas - Obio/Akpor (Trans-Amadi), Port Harcourt City (Mile 1) and Oyigbo (Afam Road) local government areas of rivers State, according to the National Population Census figures (2006) as calculated for 2021 using the annual population growth rate of 2.5%. The sample size was 381, per Meyer's Sample Size Determination Template. The data-collecting instrument was a 19-item questionnaire constructed on a 4-point Likert scale while data analysis adopted Descriptive Statistical Analysis method in which responses were: Strongly Agree - 4 points, Agree - 3points, Disagree - 2points, and Strongly Disagree - 1point. The average mean was 2.5 and any mean less than this was not accepted.

## RESULTS AND DISCUSSION

Out of the 381 copies of questionnaire administered, 290 copies were retrieved (76%). 64% of the respondents were married; the rest was single. The reliability coefficient index was 0.80 while data employed the use of mean score and criterion mean. Any mean below the criterion mean was rejected, while any mean above 2.5 was accepted.

**Research Question 1: What is the extent of listenership to *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) by women of perimenopausal age in Rivers State, Nigeria?**

Table 1. Mean (X) Analysis of the Extent of Listenership to *Medic923* and *Health Matters* By Women of Perimenopausal Age in Rivers State, Nigeria

S/N	Item Description	A			D		Total	Mean	Remark
1.	I listen to radio regularly.	5	22	5		290	3.04	Agree	
		80	66	30		884			
2.	I am aware of <i>Medic923</i> and <i>Health Matters</i> .	7	19	0	4	290	2.68	Agree	
		28	57	60	4	779			

3.	I listen to other radio health programmes.	2	64	0		290	3.04	Agree
		88	92	00		884		
4.	I listen to <i>Medic923</i> and <i>Health Matters</i> .	5	10	4		290	2.62	Agree
		60	30	68		761		
5.	I listen to other radio programmes.	07	60	9		290	3.27	Agree
		28	80	8		950		

As the results in Table 1 above show, there is a significantly high rate of listenership to *Medic923* and *Health Matters* by respondents who are women of perimenopausal age in Rivers State.

**Research Question 2: What is the extent to which *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) focus on menopause information in their programme contents?**

Table 2. Mean (X) Analysis of the Extent to Which *Medic 923* and *Health Matters* Focus on Menopause Information in Their Programme Contents

S/N	Item Description	A			D	Total	Mean	Remark
6.	I feel that <i>Medic 923</i> and <i>Health Matters</i> lay emphasis on menopause in their programme contents.	3	9	33	5	290	2.48	Disagree
		12	07	66	5	720		
7.	I have noticed that <i>Medic 923</i> and <i>Health Matters</i> do not include menopause information in their programme content.	3	2	34	1	290	2.30	Disagree
		12	26	68	1	667		

8.	I feel that <i>Medic923</i> and <i>Health Matters</i> focus on other health programmes more than on menopause information.	00	07	14	9	290 768	2.64	Agree
9.	I feel that <i>Medic923</i> and <i>Health Matters</i> do not give comprehensive information on menopause.	312	07	6	4	290 759	2.61	Agree
10	I have not come across menopause-related programmes on radio.	312	6	8	03	290 629	2.16	Disagree

Data in Table 2 above indicate that radio health programmes - *Medic 923* and *Health Matters* do not contain and disseminate adequate or significantly high menopause information to women of perimenopausal age in Rivers State, Nigeria. In fact, as much as 54.1% of the respondents believe that radio health programmes give greater attention to other health-related matters than issues of menopause.

**Research Question 3: What is the level of awareness about menopause among women of perimenopausal age in Rivers State, Nigeria?**

Table 3. Mean(X) Analysis of The Extent of Agreement or Disagreement on The Level of Awareness About Menopause Among Women of Perimenopausal Age In Rivers State, Nigeria

S/N	Item Description	A			SD	Total	Mean	Remark
11.	I know what menopause is	94	3	3	-	290 1041	3.58	Agree
		76	19	6				
12.	I have information about	52	9	7	1	290	3.34	Agree
	Menopause				1	971		

		08	97	4	2				
13.	I have no information about menopause	4	0	11	15	1	290	1.94	Disagree
		36	0	22	16	1	563		
14.	I often hear about menopause through other media sources.	8	34	7	1	1	290	3.03	Agree
		52	02	14	1	1	879		
15.	I have never heard of the term 'menopause' before?	6	5	2	79	1	290	1.46	Disagree
			5	84	79	1	424		

The results in table 3 show a significant level of menopause awareness among women of menopausal age in Rivers State, Nigeria. However, the respondents also claimed that the sources of information for this awareness level is not significantly from radio health programmes but from 'other media sources.'

**Research Question 4: To what extent do *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) contribute to information and awareness on menopause among women of perimenopausal age in Rivers State?**

Table 4. Mean(X) Analysis of the Extent of Influence of *Medic923* and *Health Matters* in Creating Menopause Awareness Among Rivers State Women of Perimenopausal Age

S/N	Item Description	A			D	Total	Mean	Remark
16.	<i>Medic923</i> and <i>Health Matters</i> do significantly influence my awareness of menopause	6	6	2	6	290	2.62	Agree
		04	28	84	6	762		
17.	Radio generally does not influence my level of	0	3	8	9	290	2.11	Disagree
						614		

	awareness on issues of menopause	20	19	76	9			
18.	<i>Medic923</i> and <i>Health Matters</i> are adequate sources of critical information on the challenges of menopause	8	6	33	3	290	2.30	Disagree
		52	98	66	3	669		
19.	<i>Medic923</i> and <i>Health Matters</i> do adequately provide perimenopausal women with skills required to manage menopause	1	3	30	6	290	2.51	Agree
		44	59	60	6	714		

From responses in Table 4 above, respondents claim that *Medic 923* and *Health Matters* do significantly influence the level of awareness and preparedness of perimenopausal women in Rivers State, Nigeria on the onset of menopause.

### Discussion of Findings

The aim of this study was to analyse the influence of Radio Health Programmes - *Medic923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) and Menopause awareness among women of perimenopausal age in Rivers State, Nigeria. Four research questions were developed to undertake this analysis.

#### **Research Question 1: What is the extent of listenership to *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) by women of perimenopausal age in Rivers State, Nigeria?**

As shown in Table 1, the responses from respondents depicted in item 1 that 75% of respondents agreed that they listened to radio regularly. In item 2, 61% of the sample also agreed that they are conversant with the radio health programmes, *Medic923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt). 81% of respondents in item 3 said that they listened to other radio health programmes. In addition, 60% of respondents confirmed in item 4 that they listened particularly to *Medic923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt), while 92% of respondents in item 5 said that they listened to other radio programmes. From these results above, we can infer that there is a significant rate of listenership to the two health programmes analysed in this study, by women of perimenopausal age in Rivers State, Nigeria. This finding resonates with those of Lawrence (2012) that radio is an effective and powerful means of communication among all strata of society and specifically that as women begin to age, they increasingly resort to

radio (and the new media) to seek information on health and self-esteem issues. This finding also corroborates Bello (2015) that the reason women at this age increasingly resort to use of radio is particularly because most of them at this age have finished training their children while others have retired or are about to retire, so most of the time radio becomes their 'gossip' companion and as a result, they are conversant with almost all programmes (especially on health) on their preferred radio stations.

**Research Question 2: To what extent do *Medic 923* (Nigeria Info FM, Port Harcourt) and *Health Matters* (Treasure 98.5 FM, Port Harcourt) focus on menopause information in their programme contents?**

This research question measured the extent to which radio health programmes (*Medic923* and *Health Matters*) focused on menopause information in their contents. The results in Table 2 showed in item 6, that 58% of respondents disagreed that *Medic923* and *Health Matters* by means of their programme content laid emphasis on menopause information. However, in item 7, 67% of the respondents disagreed that the programmes did not include menopause information at all. In item 8 on the other hand, 54% of respondents agree that the health programmes focused more on other health content and matters than on menopause information. In item 9, 55% of respondents agreed that *Medic 923* and *Health Matters* did not give comprehensive information on menopause. Further in item 10, 66% of the respondents averred that they had come across menopause-related programmes on radio. From these responses therefore, it is safe to say that radio health programmes (*Medic 923* and *Health Matters*) did not focus significantly on menopause information in their contents and coverage. This agrees with Dutta-Bergman (2015) that though focus on menopause information results in significant improvements in menopause-related knowledge, attitude and confidence as it is useful and helpful to women of that age, however, the broadcast media, particularly radio did not give menopause-related content an adequate coverage to offer the requisite knowledge to the women concerned.

**Research Question 3: What is the level of awareness about menopause among women of perimenopausal age in Rivers State?**

The research question sought to ascertain the level of awareness about menopause among women in Rivers State, of perimenopausal age. The results in Table 3 showed in item 11 that 92% of respondents agreed to have knowledge of menopause, while item 12 shows also that 87% of respondents agreed to have indepth information on menopause. On the other hand, in item 14, 77% of respondents admitted to hearing about menopause through other information sources in addition to radio. And lastly, in item 15, 93% of respondents claimed that the position that some women in the state had never heard of the term "menopause" before. The conclusion here is that there is a high level of awareness about menopause among Rivers State women and this contrasts with the findings by Gayathripriya, Alasmar, *et al* (2018) that menopause awareness among women of perimenopausal women in developing countries was low and at best, moderate. However, this divergence in the findings could be because the

said study focused on radio alone as a source of menopause information for women of this age in Bahrain.

**Research Question 4: To what extent do radio health programmes (*Medic923* and *Health Matters*) influence menopause awareness among women of perimenopausal age in Obio-Akpor LGA, Rivers State?**

Again, this research question examined the extent to which radio health programmes (*Medic923* and *Health Matters*) influenced menopause awareness information awareness among Rivers State women of perimenopausal age. The analysis in Table 4 show in item 16 that 52% of the respondents agreed that *Medic923* and *Health Matters* did not have any significant influence on their awareness about menopause. On their part, 64% also disagreed that the influence of radio generally on creating awareness about menopause is significant, affirming that radio has had an insignificant impact on increasing awareness on menopause. In items 18 and 19, 64% and 61% of the respondents claimed that *Medic923* and *Health Matters* have neither created nor influenced awareness and knowledge of menopause among concerned women in Rivers State. This finding agrees with those of Bakouei, Basirat, Salmalian and Omidvar (2013) that the level of women awareness of menopause in developing countries of African and Latin America is supposed to depend on the mass media, particularly, radio. According to the findings, this class of women expect that radio should achieve this role through educational programmes and campaigns which this class of women get exposed to. However, the awareness and information that these women have on menopause come from other sources, particularly, interpersonal sources and non-formal women groups and associations.

## CONCLUSION AND RECOMMENDATIONS

Based on the findings of this study, which was designed to analyse radio health programmes and menopause awareness among women of perimenopausal age in Rivers State, we conclude that there is a significantly low level of awareness about menopause among Rivers State women of perimenopausal age, and this can be linked to the low level of coverage of issues of menopause by radio, especially through radio health programmes. Consequent upon these findings, it is recommended that radio stations should prioritise health information programmes with emphasis on menopause information and they can achieve this by partnering with women and other NGO's to fund radio health programmes with a review to enriching and widening the scope of already-existing radio health programmes on women.

## ADVANCED RESEARCH

This research still has limitations so that further research is still needed on this topic.

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