INFLUENCE OF THE MEDIA ON THE NUTRITIONAL BEHAVIOUR OF RURAL FAMILIES IN BENUE STATE, NIGERIA

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Accepted August 13, 2018

The study investigated the influence of the media on the nutritional behaviour of the rural families in Ogbadibo Local Government Area of Benue State, Nigeria. Three specific objectives guided the study, which are: to determine different channels of information on food and nutrition in the study area, identify various food programmes on the media and establish whether these programmes influence rural families’ nutritional behaviour. The study was conducted among rural families in Ogbadibo LGA of Benue State. The population of the study consists of all rural families in Ogbadibo which is made of 390,988 people. Sample sizes of 400 respondents were selected using a random sampling technique. The questionnaire was used to collect data for the study and was administered in the manner that cut across all the different locations in three Council Wards of Ogbadibo LGA of Benue State, which are Olachagbaha Council Ward, Al-oono Ward 11 and Al-oono Ward 111 Council Ward. Data collected for the study were analyzed using frequency, mean, percentage and standard deviation. Findings from the study showed that radio was the major channel of information used by the rural families, it also reviewed some nutritional programmes been advertised on the media such as foods and their nutritional benefits, food preservation methods etc. The findings also showed the way in which the programme influence rural households nutritional behaviour such as, food programmes introduces skills needed to cook a hygienic meal. It was concluded that behavioural changed programmes aimed at rural families can be carried out by the media. It was, recommended amongst others that Government should continue to launch specific training and educational programmes for rural families using the media.

Key words: Influence, Media, Nutritional Behaviour, Rural Families.

INTRODUCTION

Food is any substance consumed to provide nutritional support for the body. It is usually of plant or animal origin, and contains essential nutrients, such as carbohydrates, fats, proteins, vitamins, or mineral. The substance is ingested by an organism and assimilated by the organism's cells to provide energy, maintain life, or stimulate growth (Encyclopedia Britannica, 2017). Food is fundamental to human survival, in more than just one way. First, it is basically for averting hunger and maintaining healthy life for every human being. Secondly, it satisfies our palate and makes us happy emotionally and socially. Thirdly, it constitutes a form of bond for family members and also serves as a means of cultural expression. The food eaten by families and members of the general public should therefore be safe, palatable, affordable, and of the quality that can maintain mental, emotional,
physiological and physical health in the people eating such food, irrespective of their age, sex, language and culture (Oniang’o et al., 2003). Nutrition is the science of food, nutrients and other substances, their action, interaction and balance in relation to health and disease and the process by which the organism ingests, digests, absorbs and transports, utilizes and excretes food substances (Park, 2009). It focuses on how disease conditions and problems can be prevented or lessened with a healthy diet, as well as identifies how certain disease conditions or problems may be caused by dietary factors such as poor diet (malnutrition), food allergies, and metabolic diseases among others. Several of these dietary factors are influenced by the habits people develop by their constant exposure to various aspects of the media such as watching television, listening to the radio, reading newspapers and magazines, and most recently, attending public shows where certain products such as indomie (a brand of instant noodle), soft drinks, snacks and the likes collectively known as fast foods are advertised and marketed by thin and beautiful models whom the viewers’ seek to emulate.

According to Ikorok et al., (2012), nutritional behavior refers to food consumption habit, choice or selection or the adopted pattern of eating by different groups of people in the community. It also refers to the selection and consumption of food and beverages (Sobal et al., 2006). It considers what, how, when, where, and with whom people eat. This plays an important role in symbolic, economic and social aspects of life by expressing people’s preferences, identities and cultural meanings. It also creates consumer demand, determines which food nutrients and other substances enter the body as well as influence health, morbidity and mortality (Sobal et al., 2006). These food related decisions made by individuals and families are influenced by a complex array of factors and processes. These factors may include availability of the economy and prices, the media, cultural and social habits, physiological attributes such as age, pregnancy, psychological attributes, marketing methods, ethical concerns, nutritional knowledge as well as wider societal trends among others (Oniang’o et al., 2003).

Food consumption pattern vary considerably between urban and rural areas (Dapi et al., 2005). Diets of the African population tend to differ between rural and urban dwellers, a study carried out by Steyn et al., (2001), showed that rural dwellers diets are low in fat and sugar but high in carbohydrates and fibre while their urban counterparts show high fat and low fibre and carbohydrate intake which is typical of a Western diet (Bourne et al., 2002). Epidemiological data from developing and developed countries concluded that with the westernization of the diet, many chronic diseases would emerge, among which are obesity a major risk factor for non-communicable diseases as well as type II diabetes, stroke, hypertension certain types of cancers and cardiovascular diseases (World Health Organization, 2000). The increase in these diseases has been associated with increased urbanization and lifestyle changes (Lungiswa, 2007). As a result of these changes, many people replace healthy foods with fast foods which mainly consist of saturated and trans-fats with low content of massive portion sizes and fibres. Thus dietary changes from traditional high fibre diets towards foreign fast food diet have contributed to the increase of the incidence of diet related non communicable diseases. Rapid urbanization is accompanied by unhealthy dietary practices and sedentary lifestyles which Yadav and Krishnan (2008), attributes to the fast change from rural to urban lifestyle, to which the media can be said to be a key factor of solving this problem.

The influence of the media on humanity in all ramifications can never be overemphasized. Media devices are becoming an important aspect of today’s society. Each and every day, people in both rural and urban areas interact with media of many different forms. Media is defined as channels of communication through which news, entertainment, education, data, or promotional messages are disseminated (Business Dictionary, 2018).

The mass media is a diversified collection of media devices that reach a large audience via mass communication. The technologies through which this communication takes place include a variety of outlets such as the broadcast media (film, radio, recorded music, or television); digital media (internet i.e. email, social media sites, websites and mobile mass communication); outdoor media (Augmented Reality (AR) advertising, billboards, placards or kiosks placed inside of buses, commercial buildings, sports stadiums etc); print media (books, comics, magazines, newspapers or pamphlets). It is possible to assume that media is made up of completely unbiased information and that the media companies do not impose their own control upon the information being supplied to media users.
However, since many people use media very frequently, it is glaring that it has effect on people. According to the textbook Media Now, “media effects are changes in knowledge, attitude, or behavior that result from exposure to the mass media”. This leaves one with many unanswered questions about media and its influences. Media influence is the actual force exerted by a media message, resulting in either a change or reinforcement in audience or individual beliefs. Media effects are measurable effects that result from their influence, or a media message (Perse, 2001).

This study mainly assessed the influence of media on the nutritional behavior of the rural families in Ogbadibo LGA of Benue State. Specifically the study:
(a) Determines different channels of information on food and nutrition from the media;
(b) Identifies various food programmes on the media; and
(c) Establishes whether these programmes influence nutritional behavior of the rural families who used them.

MATERIALS AND METHOD
The study was conducted among rural families in Ogbadibo LGA of Benue State. Ogbadibo Local Government Area was created out of the old Okpokwu Local Government Area in 1991. It derives its name from a stream called Ogbadibo in the area. Located 250 km West of Makurdi, Ogbadibo shares boundary with Olamaboro Local Government Area (Kogi State) in the West, to the East by Udenu local government area in Enugu State and Okpokwu on the South Eastern axis. Ogbadibo local government council area, with Otukpa as headquarters, has a land mass of about 550 sq km with a population of over 390,988 people (National Population Commission, 2006). The local government area is made up of three major districts. These include Otukpa, Orokom and Owukpa. It has a total of thirteen council wards namely, Aioodo I, Aioodo II, Aioodo III, Aiononl ,Aiono II, Ehaje I, Ehaje II, Itabono I, Itabono II, Olachagbaha, Orokom I, Orokom II, and Orokom III. Otukpa has six of the council wards, while Orokom and Owukpa have three and four council wards respectively.

Over 80% of the population of the local government engages in farming. Cassava is cultivated in commercial quantity in the districts of Ogbadibo local government area. Other agricultural produce include yam, beniseed, bambara nuts, melon and millet. Ogbadibo Local Government Area has the largest palm plantation in the state and produces palm wine in commercial quantity.

Population of the Study
The population of the study consist of all rural households in Ogbadibo Local Government Area of Benue State which is made up of 390,988 people (National Population Commission, 2006).

Sample and Sampling Technique
Random sampling technique was used to select the sample size within Ogbadibo LGA. Sample sizes of 400 respondents were selected randomly from the total population of the area. This cut across the three major districts, with 133 respondents each from Otukpa and Orokom and 134 respondents from Owukpa. The sample of this study was obtained using the Taro Yamane’s formula.

Instrument for Data Collection
The instrument used was a self-structured questionnaire to elicit information from the respondents, oral interview was also used. The instrument was divided into two sections. Section A is for the respondent bio-data. Section B contains items based on the research based on the specific objectives of the study.

Method of Data Collection
Data for the study was collected by the researcher through the use of Questionnaire. To enhance efficiency in retrieving completed Questionnaire the researcher visit every household to enable the researcher have physical contact with the respondents.

Method of Data Analysis
The data was organized based on the research questions. Specifically, the research questions were analyzed using percentage, frequency, mean, and standard deviation. The questionnaire was designed using a four (4) option rating scale, of strongly agree (SA), agree (A), disagree (D), strongly disagree
Table 1. Percentage distribution of respondents based on their channels of information on food and nutrition (n=400).

<table>
<thead>
<tr>
<th>S/N</th>
<th>Sources</th>
<th>Frequency</th>
<th>Percentage (%)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Radio</td>
<td>350</td>
<td>87.5</td>
</tr>
<tr>
<td>2</td>
<td>Television</td>
<td>330</td>
<td>82.5</td>
</tr>
<tr>
<td>3</td>
<td>Family members</td>
<td>300</td>
<td>75</td>
</tr>
<tr>
<td>4</td>
<td>Friends/neighbour</td>
<td>290</td>
<td>72.5</td>
</tr>
<tr>
<td>5</td>
<td>NGO</td>
<td>270</td>
<td>67.5</td>
</tr>
<tr>
<td>6</td>
<td>Ministry of health</td>
<td>250</td>
<td>62</td>
</tr>
<tr>
<td>7</td>
<td>Religious organization</td>
<td>249</td>
<td>62</td>
</tr>
<tr>
<td>8</td>
<td>Comm. leaders</td>
<td>240</td>
<td>60</td>
</tr>
<tr>
<td>9</td>
<td>News paper</td>
<td>260</td>
<td>65</td>
</tr>
<tr>
<td>10</td>
<td>Telephone</td>
<td>200</td>
<td>50</td>
</tr>
</tbody>
</table>

(SD). The cut off mean = \(\frac{\frac{4+3+2+1}{4}}{10} = 2.50\) served as a bench mark.

Therefore, any item in the questionnaire that has the mean rating of 2.5 and above was considered as agreed, while on the other hand, the mean ratings below 2.5 was considered as disagreed.

RESULTS

Table 1 reveals the major channels of information on food and nutrition. Majority (87.5%) of the respondents knew about the food and nutrition programme through the radio as their major sources of received information. Other channels of received information included family members (82.5%), television (75%), friends and neighbour (72.5%), community leaders (70%), non-governmental organization (67.5%) and many more.

Table 2 show the frequency and percentage respondent of the kind of food programme advertised on the media. The result revealed that majority of the respondents 73% agreed that programmes on food preparation are usually advertised on the media. Programmes on food and nutrition, food preservation and food importance had 74%, 79% and 82% level of acceptance respectively to the programmes on the media.

Table 3 show Mean response and standard deviation of the ways programmes influences rural family's nutritional behaviour. It shows that food programmes introduce many of the basic skills needed to cook a meal with a mean of (3.42), it also creates awareness of foods and sickness and diseases such food can cure, with a mean of 3.28. Since all the mean response on the item is greater 2.50, it means that all the items are accepted to be the ways programmes influence rural family's nutritional behaviour.

DISCUSSION

Findings from the data collected and analyzed in Table 1 indicated that radio was the basic sources of information for food and nutrition in the study area; this has a percentage of 87.5%. This is in line with the study of Miko (2010) who reported that rural farmers used radio to receive information on the technologies of improved wheat production in Kano State. This also agrees with Amonjenu and Wombo (2016) in their study accessibility of agricultural innovations by rural farmers for profitable vegetable production in Benue state, Nigeria where it was found that media such as leaflets, newsletters, posters, exhibitions, visual aids, radio programmes among others are effective means for communicating agricultural innovations to villages. The findings of this study also support the views of Conroy et al., (2005) that radio is the most preferred electronic media by the people. The authors further reported that large supply of learning can be spread effectively, accurately and quickly through radio. Radio is the only mass medium which is accessible.
Table 2. Percentage Response on the Kind of Food Programmes advertised on the Medias (N = 400).

<table>
<thead>
<tr>
<th>S/N</th>
<th>Items</th>
<th>Freq</th>
<th>Yes (%)</th>
<th>Freq</th>
<th>No(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Programmes on food on preparation</td>
<td>293</td>
<td>73.25</td>
<td>107</td>
<td>26.75</td>
</tr>
<tr>
<td>2</td>
<td>Programmes on food and nutrition</td>
<td>297</td>
<td>74.25</td>
<td>103</td>
<td>25.75</td>
</tr>
<tr>
<td>3</td>
<td>Programmes on food preservation</td>
<td>317</td>
<td>79.25</td>
<td>83</td>
<td>20.75</td>
</tr>
<tr>
<td>4</td>
<td>Programmes on importance of specific food</td>
<td>329</td>
<td>82.25</td>
<td>71</td>
<td>17.75</td>
</tr>
</tbody>
</table>

Table 3. Mean Response and Standard Deviation on the Ways Programmes Influence Rural Families’ Nutritional Behavior (N = 400).

<table>
<thead>
<tr>
<th>S/N</th>
<th>Items</th>
<th>$\bar{x}$</th>
<th>SD</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Food programmes introduce many of the new skills needed to cook a meal</td>
<td>3.42</td>
<td>99.37</td>
<td>Accepted</td>
</tr>
<tr>
<td>2</td>
<td>Create increase awareness about relationship between foods and sickness/disease it can cure</td>
<td>3.28</td>
<td>84.95</td>
<td>Accepted</td>
</tr>
<tr>
<td>3</td>
<td>Increase knowledge on how certain foods are prepared in the right way</td>
<td>3.22</td>
<td>77.57</td>
<td>Accepted</td>
</tr>
<tr>
<td>4</td>
<td>Food programmes encourages us to eat more healthy food</td>
<td>3.15</td>
<td>71.94</td>
<td>Accepted</td>
</tr>
<tr>
<td>5</td>
<td>Craving for consumption of attractive food on the media</td>
<td>3.12</td>
<td>78.76</td>
<td>Accepted</td>
</tr>
<tr>
<td>6</td>
<td>Increased consumption some unknown foreign foods</td>
<td>3.04</td>
<td>59.20</td>
<td>Accepted</td>
</tr>
</tbody>
</table>

to both rural and urban audiences in large number. Determination of food programs on the media has therefore shown that all the food programs were accepted. It was agreed that the program has helped preparation and preservation of food and also food nutrition and food importance. Media is a channel of communication through which news, entertainment, education, data, or promotional messages are disseminated. This is contrary to the report of the Institute of Medicine and National Research Council (2009) who reported that, social marketing programs that use the media to promote physical activity or healthy diet in adults, whether as part of a mass media-focused effort or a broader multi-component campaign, tend to produce mixed results. Therefore, the influence of the media on food choices based on this study was good.

Table 3 reveals influences of the programs on rural families nutritional behaviour, from the analysis all the items presented in the table it was agreed by the respondent that the programmes influences their nutritional behaviour. Food programmes introduce many of the new skill needed to cook a meal, created increased awareness about relationship between food and disease/sickness it can cure etc. This is in agreement with the findings of (Fettling, 2005) that said media can also influenced food choices positively particularly if the information being provided is accurate and is promoting healthy food choices. Additionally, the media can be used to convey consumer information and public health messages, such as regarding youth smoking (Institute of Medicine and National Research Council (2009).

CONCLUSION

The influence of the media on the nutritional behaviour of the rural families cannot be overemphasised. Assessing nutritional information through the media by the rural households is very important; this gives them adequate knowledge and information about the food they consume. It was concluded from the study that rural household should be vigilant to minimize the benefits of the media on their nutritional behaviour, since a lot of nutritional programmes are been carried out there.
RECOMMENDATIONS

On the basis of the results and conclusion extracted from the study, the following recommendations are made:
(i) Government should continue to launch specific training and educational programmes for rural families' nutritional purpose using the media.
(ii) The media should keep working hard to educate the rural families on issues like primary health and good eating habit.
(iii) More of the nutritional programmes should be introduced on the media to help the rural families.

ACKNOWLEDGEMENT

The authors wish to express profound gratitude to the management of Federal University of Agriculture, Makurdi for their tireless efforts at encouraging research and development activities.

REFERENCES


Lungiswa PT (2007). Urbanization and lifestyle changes related to non-communicable diseases: An exploration of experiences of urban residents who have relocated from the rural areas to Khayelitsha, an urban township in Cape Town. MPH Minithesis. Department of School of Public Health, University of the Western Cape, Cape Town. Pp. 8-15.

Miko S (2010). Adoption of improved agricultural technologies disseminated via television farmers. Programme by Farmers in Kadawa Research Sub-Station Centre, Kano State.


