

Communication Strategy for Rural Healthcare Delivery System in

Ukwa West Local Government Area, Abia State

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Abstract

The article explores communication strategies for rural healthcare delivery system in Ukwa West Local Government Area of Abia State. More so, descriptive survey research method was used as a research design for this study. The study population was gotten from a 2.5 percent growth rate of the 2006 population census of Ukwa West LGA which is 127, 200 between 2006 to 2024 which put the total at 135,850. However, Krejci and Morgan statistical determinant was used to realize the actual sample size for this study which is 360 drawn from 135,850. The study explores the use of accidental sampling technique in administering the instrument to respondents and the analysis revealed that the people of Ukwa West LGA are not aware of the presence of healthcare delivery services and facilities provided by government for their well-being in their area rather resort to their traditional belief system and trust for herbs. The study recommends that strategic communication should be deployed to educate and persuade rural dwellers against the dependence on traditional medicine for their healthcare needs, so that they will depend on and resort to the use of the healthcare facilities provided by government.

Keywords: Appraisal, Communication, Strategy, Rural Healthcare, Delivery, System

Introduction

Healthcare delivery in rural communities is very crucial for the survival of rural dwellers in any part of the world. It forms the nucleus of development in rural settlements around the world due to the challenges rural communities face such as environmental pollution, sanitation, water, etc. Its importance cannot be over-emphasized as it is linked to the well-being and lives of rural community dwellers. Rural health is the health of people living in rural areas, who generally are located farther from healthcare facilities and other services than people living in urban areas. Rural areas tend to have higher rates of people who do not have health insurance and who have limited access to healthcare services because many medical centers in rural areas are closing or not functioning effectively.

Globally, rural populations face increased burdens of non-communicable diseases such as cardiovascular disease, cancer, diabetes, and chronic obstructive pulmonary disorder, contributing to worse health outcomes and higher mortality rates. Factors contributing to these health disparities include remote geography, increased rates of health risk behaviors, lower population density, decreased health insurance coverage among the population, lack of health infrastructure, and work force demographics (Scheil-Adung, 2015). Settlers in rural areas also tend to have less education, lower socioeconomic status, and higher rates of alcohol and smoking when compared to their urban counterparts.

Furthermore, the rate of poverty is higher in the rural population globally, contributing to health disparities due to the inability to access healthy foods, healthcare and housing. Versace et al. (2021) referred to population size, density, cultural barriers, and distance to a specialist or advanced referral health service as some characteristics used to describe rurality related to healthcare services. Adeyi (2016) opines that the experience of Nigeria's past health systems has led to its underperformance and its present delivery remains challenging, there are grounds for

measured optimism about the future of health in Nigeria. The characteristics referred to by Versace et al (2021) are even more peculiar with the Nigerian healthcare challenges. No doubt, successive governments in Nigeria at the national, state and local government levels across the country have put in place one form of healthcare delivery system or the other. Though, these may not be adequate enough to meet the healthcare needs of the rural dwellers in Nigeria.

A keen observation show that reasonable number of the healthcare facilities sited in rural areas of Nigeria are not completely in use by the rural dwellers, either because the rural people do not know the value and presence of the healthcare facilities in their environment rather, they seek traditional herb therapy as alternative medicine to combat their health challenges. For instance, a pregnant woman who should register for antenatal in a health centre or facility provided in the rural community, rather prefers to register with traditional birth attendant (TBA) or Maternity centres. This is because there may be huge communication gap between the pregnant women, the health officials and other residents of rural communities in Nigeria. Hence, the need for more sensitization and awareness campaign on the benefit of modern medicine for better health.

Consequently, it is rarely possible for any development programme such as rural healthcare delivery to survive in the rural environment without proper media campaign and sensitisation of the people on the need and use of the programme to their personal health. Asadu (2012 as cited in Okigbo, 1995) assert that development connotes improvement and if the improvement is only temporary and not sustained over time or if it is obtained by disproportionate use of factor input without regard for stock replenishment, the society will worse-off in the long run. In the same vein, development should be made sustainable, as sustainable means making development equitable and broad-based; enabling people to be active participants and ensuring that current achievements are not attained at the expense of the future generations (Human Development Report, 2010 as cited in Asadu, 2012).

One local government area in Nigeria where either government agencies or multi-national oil exploration companies operating in the area have provided healthcare facilities and development programmes and projects is Ukwa West Local government area of Abia state. The inhabitants of the rural communities in this area are agrarian in nature and depends more on their herb therapy for healthcare than the use of healthcare facilities provided for them which are currently being under-utilized. A health care delivery system includes all the people, institutions, and services that assist in care coordination, patient flows, diagnosis, disease management, and promotion of health maintenance programs. This is near absent in Ukwa West Local Government Area of Abia State. As Laswell (1948) as cited in Ukaegbu (2018) asserts that the mass media should inform the people on development and societal matters which includes; surveillance of the society (news function), correlation of different part of the society, transmission of cultural heritage from one generation to another and persuasion of audience in society on issues relating to their wellbeing and existence. Hence, the motivation of this study is to investigate how communication strategies can be deployed to close the information gap in order to achieve healthcare delivery which is paramount to the wellbeing of the rural dwellers Ukwa West Local Government Area.

Theoretical Review

This work is founded on Development Media Theory propounded by Danis McQuail in 1987 as the sixth normative theories of the press. This theory came to existence to meet the development needs of the third world countries of Africa Asia and Latin America. This theory hold that the development needs and challenges of these third worlds are associated with poverty, illiteracy, violence, ethnic and religious difference etc. In the same vein, Ukaegbu (2017) described development as a totality of change in human conduct, altitude, behavior, value beliefs, as well as physical environment and quality of life in general. In other-words, development media theory

put the media in charge of human and societal development, and popularizing new innovations that will instigate awareness and change as intended. The idea is to elucidate the ideology and engage the audience members of the society on the development stride which include sensitization and the people's participation. Communication plays a central role in development with a two-way interactive path where the stakeholders define priorities and perspectives capable of influencing decision-making process.

It was on this note that world congress on communication for development (Asadu, 2012 cited in WCCD Report, 2007) sees communication for development as a social process based on dialogue, using broad range of tools and methods such as listening building trust, sharing knowledge and skills in building policy, debating and learning for sustainable and meaningful change. Ogaraku and Ogaraka (2019) assert that media effort should be such that would bring about national development through a partnership relationship between the government and the media, whereby the information dissemination function of the media contributes to the realization of the development goal of the government.

Similarly, communication for development offers the people the chance of assessing problems and needs, put in motion machinery to solve them. It makes development an integral, multidimensional and dialectical process, which differs from people to people, community to community, or context to context (WCCD Report, 2017). The communication school of thought on development interplays with the needs of the people as development media is used to carryout development task. The development task is carried out in line with the national establishment policy on development like; poverty, alleviation, population control, healthcare, agricultural development, increase in food supply, literacy drive, infrastructural development and employment generation programmes (Ukaegbu, 2018). In a similar view, Ukaegbu (2018 as cited in Ndimele & Innocent 2006):

In other to tackle this problem, proponents of development media theory message can be deliberately being designed to enable members of the audience to acquire needed skills to transform their society. It is believe that media message can be used to package in such a manner as stimulated a systematic socio-economic transformation of the developing nations in direction of models of industrial society (p. 154).

However, development media theory is about third world perspectives structured to strike development and instigate rapid growth in the society of man. On this, this chapter espouse that the media can facilitate rural healthcare delivery system as part of development by galvanizing the government, stakeholders and the general public into the national and global focus to ensure the rural areas enjoy good healthcare services.

Review of Related Literature

Rural healthcare delivery plays a major role in human life and wellbeing. They say health is wealth and wealth is power. According to Ekpu and Udokop (2018 as cited in Fountin, 1989): George) opines that for individual and group to have a better health status, they must be health informed and empowered to use health information as they have to exhibit positive health attitude and behaviour. Health campaign gives citizenry's room of eliciting health information to improve their lives.

George (2018 as cited in Winslow, 1920) put that public health is the art of preventing diseases, prolonging life and promoting health through the organized effort and informed choices of the society, organization, public and private, communities and individuals. Bad health is a threat

against the overall health of the entire rural communities, based on population health analysis. The focus of healthcare delivery is an intervention to prevent and manage diseases, injuries and other health conditions through surveillance (media check) of the case and healthy behaviour, community and environment.

Nevertheless, it is obvious that rural healthcare delivery cannot function effectually in the absence of communication, the activation of mass media or any form of trade-communication will engage the people's mind into health participation and also own the project. On other hand, rural healthcare delivery system has suffered neglect and continuity in the rest years past. Having health workers on ground and continues media campaign, rural sensitization and awareness campaign on the rural residents of Ukwa West LGA on the importance of health and the need for constant medical check-ups will avert ailment like malaria, typhoid, prostate cancer (Men), urinary tract infection (Women), antenatal and postnatal challenges.

According to Nserekaan (2014 as cited in Etukudo, 1989) averses that in spite of the benefits of the modern media, the traditional media are more dependable in rural communities in Nigeria. And that traditional media varies from one rural community to the other, some appears to cut across all rural areas. The traditional media for such a rural campaign include; town criers, age grade setup, traditional religious groups, symbol of traditional rulership such as the staff of authority and trade-communication system.

In alliance with Udoaka (1999) sees rural areas are undeveloped zones in the locality where about 80% of African population resides in the village, hamlet and hideous. He further established that, the rural African village and hamlets are deprived of electricity and pipe-borne water –Their major roads are foot paths and earth roads as well as maker-shifts school and hospital. The features of rural deficiencies are malnutrition, abject poverty, mud house and huts and centuries of criminal's negligence of colonial and post-independence governments.

An axiom has it that health is wealth and good health is life, the need for health facilities is important to human habitation. The physical health structure is as important as the media campaign on the need for the project and its benefits to the people. A typical example is the healthcare centres built in the 23 Local Government Areas of Rivers State by His Excellency Rt. Hon. Rotimi Chibuike Amaechi, former governor of Rivers State. The purpose of the healthcare centres was to bring health closer to the people but overtime some of the healthcare centres sited at the rural areas downsized and some failed completely. The failure could be attributed to a faulty development approach adopted for the project such as poor manpower services and absence of communication strategy. However, the role of the media in in this regard is to create health awareness, sensitization and to encourage rural participation as described by McQuail (1987) ensure that the people of the society are involved in the exchange of information instead of being a recipient of communication from especially the government and that communication should be interactive to inspire development.

Methodology

Descriptive survey research design was adopted for this study. The choice for this method was to generate a wide range of feedback from respondents within a shortest period of time in Ukwa West LGA. The survey design has the tendency to generate a representative sample for the study. The population of this study comprises the entire residents of Ukwa West Local Government Area with a 2.5 percent growth rate. The total population of Ukwa West Local Government Area as at 2006 is 127, 200 (NPC, 2006). The projected growth rate of 2.5 percent from 2006 to 2023 put the population of Ukwa West Local Government Area at 135,850. This therefore is the

population of this study from the sample size. The sample size was determined using Krejci and Morgan statistical table to justify the population which was put at 335. The nature of this study requires the use of accidental sampling technique. In this regard, accidental sampling technique was used to administer the instrument to the respondents because it allows every member of the population the opportunity to be selected and the research instrument used for this study was questionnaire.

Data Presentation, Analysis and Findings

Research Question 1: To what extent are Ukwa West Local Government residents aware of healthcare delivery services in their area?

Table 1: Ukwa West Local Government residents' awareness of healthcare delivery services in their area.

S/N	Item	SA	A ₃	D ₂	SD ₁	Aggregate	Mean	decision
1.	We are aware of healthcare delivery services in Ukwa West LGA	60	70	80	150	760	2.1	Disagree
2.	We are not aware of healthcare delivery services in Ukwa West LGA	210	70	60	20	1,340	3.7	Agree
3.	Some of us are aware, while some are not aware	80	60	150	70	870	2.4	Disagree
	Cumulative	350	200	290	240	2,970	2.7	Agree

Source: Researchers' Computation

Table 1 reveals that residents of Ukwa West Local Government Area are not aware of healthcare delivery services in their area. Majority of the residents are not privy to healthcare services either provided by the Federal, State or Local Governments in their area despite government's effort to provide same. It is evident from the responses shown on the table that enough enlightenment campaign was not carried out to make the residents be aware of the availability of healthcare delivery services in the area for their use. Based on respondent feedback, the study concludes that Media Campaigns Regarding Rural Healthcare Delivery has a relatively low impact among the residents of Ukwa West Local Government Area of Abia State.

Research Question 2: What healthcare delivery services do rural dwellers in Ukwa West Local Government Area use?

Table 2: Healthcare delivery services rural dwellers in Ukwa West LGA use.

S/N	Item	SA	A ₃	D ₂	SD ₁	Aggregate	Mean	Dcns
1.	We are helpless in healthcare Services in Ukwa West LGA	100	40	120	100	740	2.0	Disagree
2.	We use traditional medicine for our healthcare	200	100	50	10	1,210	3.4	Agree
3.	We use road side medicine dealers and chemists for our healthcare needs.	50	60	150	100	780	2.2	Disagree
	Cumulative	350	200	320	210	2,730	2.5	Agree

Source: Researchers' Computation

From Table 2, the data show that rural residents of Ukwa West Local Government Area resort to traditional medicine for their healthcare needs. This no doubt is due to their non-awareness of modern healthcare services in their area. The table further revealed the ignorance of the rural dwellers about the essence of using modern healthcare facilities in their area, rather, even when they seek alternative to their traditional medicine, they patronise roadside medicine dealers. This obviously is as a result of non-awareness of the presence of modern healthcare facilities in their area. From the responses it can be concluded that rural dwellers depend on traditional medicine for their healthcare, rather than modern healthcare services.

Research Question 3: What strategy is used to sensitize rural dwellers on the use of healthcare facilities provided by government in Ukwa West Local Government Area?

Table 3: Strategy Used to Sensitize Rural Dwellers on the Use of Healthcare Facilities in Ukwa West LGA

S/N	Item	SA	A ₃	D ₂	SD ₁	Aggregate	Mean	Dcns
1.	We hear about healthcare facilities through our traditional town crier In our language.	50	70	120	120	770	2.1	Disagree
2.	We do not hear about healthcare Facilities provided in our area.	80	100	80	100	880	2.4	Disagree
3.	We hear about healthcare facilities through radio announcements and news in our area	250	60	30	20	1,260	3.5	Agree
	Cumulative	380	230	230	240	2,910	2.7	Agree

Source: Researchers' Computation

Data presented in table 3 show that the strategy deployed to enlighten the rural dwellers was that of radio announcements, which are mainly in, English language and requires the use of electricity most times. This obviously will impede effective communication among the residents of Ukwa West Local Government Area because they are mostly Igbo language speakers and may not have frequent power supply that enable them turn-on their radio sets to receive broadcast messages on the availability of healthcare services in their area. From the foregoing, it is discovered that the strategy used to sensitize rural dwellers on the use of healthcare facilities provided by government in Ukwa West LGA was defective and lacks proper articulation.

Conclusion

The rural healthcare delivery system was created for the rural dwellers to tackle their health-related matters and not for decoration but it is now obvious that the people doesn't not know the core reasons for this project. Thus, there is need for media campaign and sensitization program through various media channel to correlate all nook and crannies of the rural areas in Nigeria. This way the people will own the project and protect the project. The findings in the study revealed that the people of Ukwa West LGA are not aware of healthcare delivery services and facilities provided by government for their well-being in their area. Also, that due to non-awareness of the healthcare facilities and services provided, the people resort to their traditional medicine and treatment for their healthcare needs. Furthermore, that the communication strategy used to sensitize the people was defective and not well articulated.

Recommendations

The study recommends that:

1. Prior and after the provision of rural development projects and programmes, adequate media sensitization and enlightenment campaign should be embarked upon to ensure high-level of awareness among the beneficiary rural dwellers in order that the motive behind such projects will be fully achieved.
2. Communication strategy for the sensitization and enlightenment of rural dwellers should involve existing traditional communication medium and language in the area to ensure effective transfer of messages to the people concerned.
3. Strategic communication should be deployed to educate and persuade rural dwellers against the dependence on traditional medicine for their healthcare needs, so that they will depend on and resort to the use of the healthcare facilities provided by government.

References

- Asadu, C. (2012). *Anatomy of communication for development*. University Port-Harcourt Press.
- Adeyi, O. (2016). Health System in Nigeria: From Underperformance to Measured Optimism. *Health Systems & Reform* 2(4), 285-289,
- Ukaegbu, M. (2018). *Understanding models and theories of mass communication*. Justman Publishers International.
- Nwabueze, C. (2014). *Introduction to mass communication: media ecology in the global village*. Top Shelve Publishers.
- George, S.T., Ekpu, F.S., & Udokop, C.A. (2018). Health promotion strategies for healthy living and well-being for sustainable health across the life span. *The institution journal*. 8(1) 2276-9692.
- McQuail, D. (1987). *Mass communication: An introduction*. (3rd ed.). Sage Publications.
- Nwosu, I. (1996). *Public relations management: Principles, issues and application*. Dominican Publishers.
- Igwe, F.O. (2016). Rural development needs assessment of Odegnu clan: The fogo process approach. (Masters dissertation). Rivers State University. Port-Harcourt, Nigeria.
- Nsereka B.G. & Sarah M. Anele. (2014). Folk media in sensitization of Nigerian's rural population: A NOA's feedback perspective. *In Review of Communication and media Studies*.11.