

Working with the Media to Address Tuberculosis in Nigeria through Social and Behavior Change

Background and Context

Nigeria has one of the lowest rates of tuberculosis (TB) case detection in the world, reported at only 24% in 2018.¹ Over the years, interventions to address TB have primarily focused on improving services, including diagnostics and clinical services, to improve notification rates. However, individual factors also play a role in determining if, when, and where a person seeks testing and treatment for TB, including knowledge of TB, how likely they think they are to contract the disease (perceived susceptibility), how serious they think it would be if they were diagnosed with TB (perceived severity), their perception of the available health services, their confidence in their ability to seek those services, and TB-related stigma and discrimination, among others. The Government of Nigeria has actively sought strategic, evidence-based social and behavior change (SBC) interventions that address these determinants to improve case notification rates.

Nigerians trust mass media, including radio, television, and social media, as reliable sources of information.² As such, mass media channels are highly effective for sharing accurate information that addresses and shifts factors influencing why and how people seek TB testing and treatment. In turn, this access to information can help shorten a TB patient's journey to treatment and recovery.



Breakthrough ACTION, a global SBC project working in Nigeria, teamed up with the National TB, Leprosy, and Buruli Ulcer Control Programme (NTBLCP), state, and nongovernmental partners to explore how it might improve TB case-finding in the country, using several approaches, including how to leverage mass media channels to such efforts.

¹Nigeria—Tuberculosis case detection rate (All forms). (n.d.). Retrieved October 25, 2023, from <https://tradingeconomics.com/nigeria/tuberculosis-case-detection-rate-all-forms-wb-data.html>

²Ozohu-Suleiman, Y. O., & Dahiru, J. M. (2018). A survey of public trust in mass media as democratic building institution in Nigeria. *KIU Journal of Humanities*, 2(2A), 97–104. <https://www.ijhumas.com/ojs/index.php/kiuhumas/article/view/189>

The Intervention

While Nigerians trust TV, radio, and social media, the producers of health-related media content do not always have access to experts to inform the messages they share in print and on air. In addition, producers do not necessarily create messages with behavior change in mind. Therefore, Breakthrough ACTION-Nigeria worked with media outlets to increase their TB and SBC literacy. The project also connected media stations directly with experts who could speak with authority and ensure messaging aligned with NTBLCP guidelines.

The project carried out initial orientations on TB and SBC then worked with the NTBLCP, State Tuberculosis and Leprosy Control Programs (STBLCPs), other partners, and the media to develop and broadcast campaigns using messages inspired by insights generated during a human-centered design process. Over time, the media became sources of reliable information and messaging that sparked community dialogue. The producers themselves became dedicated advocates for TB prevention, testing, and treatment.

Implementation Story

Breakthrough ACTION-Nigeria worked with government and local partners to identify and invite public and private radio and television stations and print media houses that produced health content, as well as stations with large audiences, to training workshops. These workshops aimed to cultivate participants' ability to apply SBC approaches to their media programming. Participants also learned about the host of complex issues around TB case-finding and care-seeking. The project and its partners mentored media stations with no existing health programs, providing them support to create health shows, which in turn became channels for TB information. Breakthrough ACTION-Nigeria brokered sessions that brought together the STBLCP, local government area TB Supervisors, and other government personnel, encouraging them to strengthen relationships and build partnerships to ensure media houses had access to accurate, validated content about TB—something they otherwise would not have.

Breakthrough ACTION-Nigeria has since facilitated ongoing, quarterly and semiannual review meetings with STBLCP personnel, health producers, and health news reporters to review updates in TB priorities at the national and state levels, TB case-finding and treatment data, and myths and misconceptions held by the public. Using this information, participants have generated production schedules, which include TB campaign and public service announcements, and responded to concerns tied to data and TB myths and misconceptions.

These collaborative sessions bridge perceived gaps between the media and government representatives (such as misconceptions that one wants to discredit the other) and highlight their shared and vested interest in serving the community. Media producers and government partners stay in touch, build relationships, and continue to co-create content using platforms like WhatsApp.



“ We got [media and government] to understand that they are working together as one to change people’s health behavior, to help people to live healthier. We told them [working together] is a win-win situation. This is going to be your contribution to the community. Everybody wants to belong to the team.

- **Nkoyo Umoh**, Breakthrough ACTION-Nigeria, Program Officer II, Social & Behavior Change

State and media personnel—particularly, creative staff from media houses and partner offices and government experts—collaborated to produce radio and television spots that air on national stations. During the process of refining their audience engagement strategies, the group of collaborators understood that a given media spot has more traction if it covers a specific facet of TB testing or treatment, such as identifying TB symptoms in a child or where to get tested, to avoid overwhelming audiences with lengthy or broad statements.

Media staff and partners provide voiceovers for the spots, so the messages are more authentic and give media personnel a sense of ownership. Stations schedule the spots to repeat at least daily or more frequently; usually, about 20 TB messages air a month. Repetition on a single station and amplification by other stations build buzz and listener familiarity with issues surrounding TB.

They also strive to produce a variety of creative content, from storytelling to special news reports, to invite curiosity and sustain interest. The collaborators also diversified content to sensitize audiences; for example, a person who hears similar information from a testimonial, a Facebook post, and a jingle will be more likely to remember and trust it; whereas, if they just hear the jingle repeatedly, they may find it tedious.

Collecting personal testimonials is a powerful strategy because it combines storytelling with relatability. The stories can serve as supporting content for live radio shows and often inspire more listeners to reach out for help. Interactive content, such as radio call-in shows, is also effective at several levels. Opportunities to ask questions lower barriers between members of the public and TB experts, allowing learning and exchange through dialogue—especially as community members directly receive advice from public health officials and government representatives. Breakthrough ACTION–Nigeria and stakeholders harvest insights from the talk shows about audience concerns and use that information to further tailor messaging.

Additionally, media messages have amplified information and opportunities created by Breakthrough ACTION–Nigeria’s other TB activities, such as motorized campaigns and training religious leaders to give correct TB information and willing to record radio spots and testimonials that are aired on local radio stations.

“ [A] health producer [from a university radio station we work with], recognized TB symptoms in someone he just met. He was trying to buy something by the roadside, and he saw that there was a man coughing. [...] He said the man had been coughing for some months. And he [...] spoke with the man, linked him up with [the appropriate facility for] testing. Now, the man is already receiving treatment.

- **Adebisi Adetunji**, Breakthrough ACTION-Nigeria, Program Officer I, Social & Behavior Change



“ Breakthrough ACTION has a robust relationship with media partners in our states. [It is] beginning to be like the go-to organization to get media support.

- **Adebisi Adetunji**, Breakthrough ACTION-Nigeria, Program Officer I, Social & Behavior Change



Lessons Learned and Recommendations

Working with communities on this issue requires careful attention to certain issues. Based on its experience, Breakthrough ACTION–Nigeria recommends the following:

[Train media and government personnel in SBC and health issues, and help them work with one another](#)

Breakthrough ACTION–Nigeria invited health producers and other relevant media personnel to training sessions on SBC approaches and TB strategies, including countering myths and misconceptions. These sessions engaged producers to deepen their understanding of how content can inspire change, not just simply inform, and work to tailor content by exploring who their specific audiences are and what their needs and barriers are. Media outlets have sought Breakthrough ACTION–Nigeria’s guidance so they can train their own staff to sustain health content beyond the life of the project. The availability of these trainings motivates media personnel, which reinforces their commitment to participating in SBC activities.

Breakthrough ACTION–Nigeria also conducted media engagement training sessions with STBLCP and local government area personnel. Officials learned about the power of media and the production process from the media’s perspective, which encouraged them to assign appropriate personnel and obtain permission to clear bureaucratic roadblocks to production scheduling that may result in a failure to broadcast. The media engagement sessions also helped allay the officials’ and experts’ anxiety about speaking on the air.

[Leverage members of the media’s commitment to corporate social responsibility](#)

Media personnel are not necessarily versed in language commonly used by government officials or SBC practitioners. Training programs need to relate SBC concepts to terminology members of the media are familiar with and use. Many reporters feel a sense of corporate social responsibility (i.e., an organizational social obligation to serve a community). Framing the work of SBC in light of this concept helps media staff collaborate and shoulder production and broadcasting costs.

Integrate TB messaging with other health technical areas

Weaving TB information into material about other health challenges amplifies the need for behavior

change. Breakthrough ACTION–Nigeria’s training sessions with media members address many health concerns impacting Nigerians, including maternal, newborn, and child health; family planning; and malaria, as well as cross-cutting issues like gender. Producers can identify opportunities where local, contextual concerns and events intersect.

Infectious disease care-seeking is a challenge, especially because of stigma. For example, people afraid to be diagnosed with COVID–19 were not seeking care for cough, causing a downturn in TB case-finding. Media spots addressed this fear, and care-seeking behaviors for TB increased.

[Mobilize through social online platforms like WhatsApp](#)

In Akwa Ibom and Oyo States, Breakthrough ACTION–Nigeria and its partners set up WhatsApp groups for media partners, public health experts from the government, and implementing partners. This facilitated co-production of content. Platforms like WhatsApp enable collaboration and make scheduling broadcasts easy and low cost. Group discussions extend beyond what participants might achieve at quarterly or semiannual planning meetings. Experts and media personnel interface often and directly, which means they can update messaging as necessary to comply with the latest information and national guidelines.

[Establish follow-up and documentation procedures](#)

Breakthrough ACTION–Nigeria documents its media work monthly, with attention to all the health areas it develops content for, including TB. Social media hashtags help the project track buzz generated by a particular spot or activity. Connecting with national health helplines has led to more calls since the spots started airing.

Finding a way to encourage the media houses to document successful SBC activities remains a challenge. Documentation would aid in tracking cost sharing, logistics, and difficulties airing due to economic downturns. Following up with media outlets to document their work and track audience engagement must occur frequently.

Interviews with Breakthrough ACTION–Nigeria staff informed this story’s development. The interviewees were Nkoyo Umoh, Program Officer II, Social & Behavior Change; and Adebisi Adetunji, Program Officer I, Social & Behavior Change.