

Audience Response to the Need for Periodic Blood Pressure Check Among Working Class Residents of Lagos State, Nigeria

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Received: 04 Mar 2024

Accepted: 29 Apr 2024

Published: 04 May 2024

J Short Name: AJSCCR

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Citation:

Njoku C. Audience Response to the Need for Periodic Blood Pressure Check Among Working Class Residents of Lagos State, Nigeria.
Ame J Surg Clin Case Rep. 2024; 7(14): 1-9

1. Abstract

This work focused on “Audience response to the need for periodic blood pressure check among working class residents of Lagos State Nigeria” focuses on the sustainable development goal 3 which is on “Good health and well being It is a cross sectional study of 384 respondents in Lagos State, Nigeria. The general objective is to ascertain audience response to periodic blood pressure check amidst busy professionals in the domicile where the investigation was carried out. The work was anchored on Health Belief Model. The general objective is to ascertain the level of awareness towards blood pressure check relevance amongst select population easily prone to heart attack because of busy schedules. The work was Results reflects the moderate degree to which residents pay attention to blood pressure issues despite their work toxicity. The work was analysed using SPSS version 25.0. Findings show how receptive Lagos residents are towards public health knowledgeable of blood pressure and its health implications. However, the work faults the media for negligence in playing their traditional role of educating the public as required in other to stay healthy. The level of regular check for blood pressure is moderate. He media is creating awareness but needs to be more intentional in the information dissemination of public health education especially among busy workers.

2. Introduction

The need to be deliberate on public health concerns recently calls for media concern. It is pivotal to ensure health enlightenment is a call for all and sundry. The health sector and concerned stake-

holders usually prioritise endemic diseases and the outbreak of health disorders whereas, solution of human wellness resides in the consciousness of educating people on general wellbeing. Ironically, the health engagements in Nigeria usually lose sight of how dangerous high blood pressure triggers lots of health issues. It is essential to dwell on health concerns that can shut down the human organs at the speed of light of which high blood appear to be among the top list of killer diseases especially among mid-age population. The sensitive nature of blood pressure requires intentional enlightening to enable the masses cope under work intense pressure in busy cities like Lagos, (Kreps 2023).

Sadly in Africa, High blood pressure is killing people in their thousands with more cases triggering daily without deliberate measures in place. Hence, one of the most common health challenges in Africa today threatening many lives is high blood pressure (BP) which often is a major cause of cardiovascular diseases. Ironically, many people are ignorant of their blood pressure status whereas many struggle to survive without their health status. The rate at which people suffer high blood pressure causing many deaths in Nigeria today has become a major fear a reason this investigation was carried out, (WHO, 2020)

The need to ensure individuals working under tight schedules indulge in regular BP checks to enable them manage their health properly becomes the interest of the researchers of this inquiry. BP affects the middle aged and ageing population the most if unchecked and managed promptly. Blood Pressure simply means a public health condition that forces the blood artery walls to collapse thereby making blood flow very tight and difficult especially

in critical state when there is crisis and can kill at the speed of light. This health condition is rampant in Africa and Nigeria share major health burden resulting from this anomaly especially in cases where the media is not adopting aggressive approach to educate the people. (Kreps, 2023).

Unfortunately, those living and working under intense pressure in cities like Lagos have become the victims of BP as they are prone to spending an average of five hours daily on boisterous traffic. There are also constant cases of people slumping at work because they were not conscious in handling their blood pressure. More so, those in major cities like Lagos working under intense job conditions are more susceptible, They are easily prone to BP because most of their time is spent on boisterous traffic almost on daily basis. Available statistics show 30% of the world population in Nigeria are constantly in conditions attributed to BP at a high risk because they do not have the clue of their BP status. Being susceptible to this condition requires utmost intentionality. This poses great challenge and constitute to the triggers of heart attacks by many. As a public health challenge, many are suffering without knowing because there is no deliberate measure that compel regular checks. Although, there are factors that hinder awareness of which many are ignorance of. Unfortunately, exerting working routines that puts pressure on individuals contributes a great deal to this. In many places, about 30% of the adult population seem to be at the receiving end of this condition. Sadly, more people in their middle age are suffering from this and do not pay close attention to their diet which could go a long way in helping them manage the condition appropriately, (Kreps, 2023).

As one of the public health challenges faced the world over, the most affected regions of Africa deserve to be educated on the best practices that can alienate them from being perpetually held bound. The staggering 30% of the adult population globally ought to know that the major cause of cardiovascular diseases, emerging health challenges with great health burden and risk factor leads to coronary heart diseases, stroke, chronic kidney, hearth failures and dementia in older population occur as a result of this condition, (2023).

Ironically, the burden and prevalent of hypertension is more on the low income Countries where medical attention is not easily given owing to poor health care practices. The middle income terrains also suffer the truck loads of blood pressure as many of the population are not intentional about what lifestyle that triggers hypertension. The increased factors of hypertension have become a great concern to scholars as urban population tends to suffer more from the disorder in the last few decades. Unfortunately, the incessant hypertension cases have drawn more attention leading to investigations to uncover the factors triggering the condition, (WHO, 2024).

Sadly, two-third of the population living with the condition is clueless and only discover in times of diagnosis that is so critical.

Some chronic stage of this health challenge contributes the major cause of death, World Health Organisation (2020).

The work looked at three critical objectives;

- Ascertain audience awareness to media messages on blood pressure checks among working population in Lagos residents.
- Find out audience exposure of blood pressure check amongst working population in Lagos State, Nigeria.
- To determine audience level perception on media message s on blood pressure amongst working population in Lagos State, Nigeria.

3. The Media and Promotion of Knowledge: A Review

The media, serves as a powerful tool for knowledge production and dissemination (Choudhury, 2011; Bondi & Cacchiani, 2021; Khan, 2023). Used broadly, media encompasses traditional channels like print, broadcast and modern platforms such as social media. A plethora of studies have been conducted on the impact of the media on knowledge acquisition, emphasizing the role of newspapers, radio, television and cinema in shaping public opinion and awareness. Scholars have also delved into the impact of indigenous communication systems in Africa and beyond (UNESCO, 2023). All of these studies point to the intersection of the media and promotion of knowledge, and a reflection of the dynamic role the media plays in awareness creation and shaping public understanding. This literature review aims to provide an overview of key findings and perspectives within this realm.

The promotion of knowledge through media is not confined to traditional news outlets alone; social media and entertainment media also plays a significant role (Khan, 2023; Nwabuzor & Onyike, 2015). Scholars have examined the impact of television programmes, documentaries, and films on public awareness and education. Whether through informative content or fictional narratives, media have the capacity to shape perceptions, attitudes, and understanding of various topics (Amadi (2017; Ajuzieogu, 2023).

Scholars have delved into the role of traditional media, such as newspapers and television, in disseminating information and shaping public opinion. Early research emphasized the gatekeeping function of media organizations, highlighting their influence in determining which information reaches the public. Additionally, studies examined the framing effects, where media presentations impact how audiences interpret and understand issues (Shoemaker & Reese, 2014; Herman & Chomsky, 2002; Shoemaker & Vos, 2009; Welbers & Opgenhaffen, 2018).

Educational media, such as documentaries and online courses, has emerged as a significant area of study. Cultural and entertainment media also play a role in knowledge promotion. Literature, films, and television shows have the power to shape societal narratives and influence perceptions (Onyike, Okoye & Ogbob, 2023). Studies have investigated how these mediums contribute to cultural

awareness, historical understanding, and social issues, highlighting their potential to educate and foster empathy. Onyike, Okoye & Ogbob, (2023, p. 3) argues within the context of the imitative media that, “creation of new norms, and new patterns of interaction or consumption is the direct consequence of the media in any society”. Thus, the authors support research outcomes on the hypnotic influence of the media, especially television on the audience, thereby conforming them into a desired pattern of behavior. The television and film has been argued to possess the powerful effect to plant, support or supplant individual or societal values. Bandura (1977) cited in Payne (2023, p.23) underscores the significance of observing, modeling, and emulating attitudes, behaviors, and emotional reactions of others.

On the other hand, sociologists and media researchers have explored how these mediums contribute to knowledge acquisition and retention. The effectiveness of educational media in reaching diverse audiences and enhancing learning outcomes has been a central focus, with implications for the design and implementation of educational programmes. Okoro and Emakpor (2008) cited in Ekwueme (2011, p.123) posit that:

No other medium can deliver as large and instantaneous an audience to politicians or government as broadcasting can. And secondly, rightly or wrongly, the belief persists all over the world that broadcasting is an eminently persuasive medium, omnipresent in people’s homes, work place, even in transit.

The attributes noted above, make the media a formidable and indispensable platform for education, enlightenment, knowledge acquisition and mobilization. Exposure is a precursor to the powerful effect. Before the media can succeed in educating the audience on any issue, for instance blood pressure checks, the messages must be available to the audience (Onyike, 2019). The term, exposure is viewed from two perspectives - potential exposure and encoded exposure (Southwell, Barnada, Hornik, & Maklan, 2002). According to Southwell, et al (2002, p. 446) encoded exposure “generates at least a minimal memory trace in individuals”. In this instance, scholars argue that exposure overlaps with attention, because “attention is the medium that makes information appear in consciousness” (Csikszentmihalyi as cited in Onyike, 2019). There is an ongoing debate on whether physical exposure to a message without addressing the amount of attention paid to it is enough to conclude on the effectiveness of the messaging. Slater (2004, p.168) speculates that “exposure may leave an affective, if not a cognitive impression of some kind, even if the messages have not been attended to well enough to be remembered”. However, in the case of an intervention, encoded exposure requires enough attention to engender a memory trace that supports a respondent to recognize the intervention.

Apart from limited exposure, there are other factors that challenge

the influence of the media on knowledge production and acquisition in any society. The challenges that persist, especially in developing economies, include issues of media literacy, accessibility, and the potential for echo chambers. Research continues to explore strategies for mitigating these challenges and enhancing the positive impact of media on knowledge promotion.

4. Influence of the Media on Information Seeking and Health Behavior

Several studies highlight the critical role of the media as a major source of health information. The media such as television, radio, newspapers, and recently digital platforms disseminate a wide range of health-related messages to the audience daily. Scholars emphasize the role of the media in providing information and as well framing and shaping the narrative around health issues. Health campaigns and educational initiatives planners leverage the media to disseminate information aimed at promoting healthy behaviors (Onyike, 2019).

Research indicate that media-driven campaigns can effectively raise awareness about specific health issues, promote preventive measures, and contribute to positive health outcome (Shang, 2014; Onyike, 2019; Wakefield, Loken, & Hornik, 2010). Diseases, especially epidemics spread in an atmosphere of ignorance. Thus, Onyike (2019) citing Ogundipe and Olawale (2016) infer that diseases spread when people are not aware of the causes, symptoms, prevention and treatment. The role of the media in disease control is to prioritize awareness, knowledge and the right attitude towards prevention. The media’s ability to set the public agenda and frame health issues significantly influences what the audience perceives as important. Essentially, people decide to attend to specific health messages if the perceived severity and their susceptibility to it is high (Rosenstock, Strecher, & Becker, 1994). Under circumstances like this, individuals go all out in seeking information about the disease and or protection.

In the area of information seeking, the media serves as a primary channel for health-related information, playing a crucial role in public health communication. Studies like Smith (2017) and Brown and Witherspoon (2002), show that accessibility and reach of media platforms contribute significantly to individuals’ health information-seeking behaviors. Events during the peak of the COVID-19 pandemic proves news media, online platforms, and social media as go-to sources for the latest health updates and advice. While hospitals, clinics and public places were shut down during the pandemic, people turned to the traditional media and digital platforms for health information advisory. Apart from raising awareness which is the primary concern of health campaigns, they are also designed promote positive health behaviors (Shang, 2014). These campaigns, ranging from anti-smoking initiatives to blood pressure check drives, leverage the persuasive power of media to encourage behavioral change.

Despite media influence, exposure to unverified information poses some challenges. Researchers warn about the potential pitfalls, highlighting the prevalence of misinformation and its impact on audience perception, as well as the need for media literacy to discern credible sources (Yusuf, Gusau & Maiyaki, 2020; Allington, Duffy, Wessely, Dhavan, & Rubin, 2020). For instance, the right information could also be miscommunicated when handled by the wrong persons. Imagine, a scenario where a citizen journalist without basic training in health education dishes advice on symptoms and treatment of an infection? The Covid-19 campaign in Nigeria was weakened by unreliable claims and data (Onyike, Ndolo, Okoye, & Obi, 2023).

Studies (Valente, & Kwan, 2001; Wakefield et al., 2010) emphasize the effectiveness of strategically designed media campaigns in shaping public attitudes and motivating health-conscious actions. Petrella, Speechley, Kleinstiver, Ruddy (2005). Studied the “impact of a social marketing media campaign on public awareness of hypertension”, and reports that in the short-term, their media awareness programme increased the number of respondents claiming to have high BP and patient self-efficacy for BP control.

The research method consisted of three random-digit telephone surveys conducted in two mid-sized Ontario cities to determine high blood pressure awareness, knowledge, and treatment behavior. Prior to the study, the researchers developed a social marketing hypertension awareness programme to determine baseline awareness, knowledge, and treatment behavior, and then studied the impact of a targeted, media intervention among randomly surveyed adults at risk in a representative urban community compared to a control community immediately and 6 months after the intervention (Petrella, et al, 2005).

Using baseline knowledge and attitudes toward high blood pressure in both communities, a social marketing awareness strategy and mass media intervention campaign incorporating television, radio, print, direct to patient, and interactive techniques was developed and implemented in the test city only. Both test and control cities were resurveyed immediately after and at 6-months post-media intervention to detect change and decay (Petrella, et al, 2005).

According to Petrella, et al (2005), “a sample of 6873 men and women more than 35 years old who were aware of their high BP demonstrated a high prevalence of high BP in the general population (approximately 34% in both communities)”. They further states:

At baseline this population had poor knowledge of their own BP numbers and poor understanding of the diseases related to high BP”. Although few considered high BP a health concern, they had good understanding of lifestyle interventions for high BP prevention and control. The number of the respondents who claimed to have high BP increased immediately after intervention in the test city (38%; $P < .02$), whereas the number of respondents who were

treated and uncontrolled decreased ($P < .05$) compared to control (Petrella, et al, 2005).

This research outcome is in consonance with the effectiveness of media campaigns on awareness, knowledge and attitude to the public towards any given public health concern. That the researchers witnessed improved understanding of BP numbers and better knowledge of diseases related to hypertension within six months of the campaign, shows that they not only exposed to the campaign, but also, attended to it. The reason communication campaigns fail is due to insufficient exposure by the target population. Thus, when the audience are sufficiently exposed to a health campaign, it enhances their knowledge of the health concern (Onyike, 2019).

Petrella, et al (2005), also observe a significant increase in patients’ knowledge of consequences and in their perception that they were most responsible for high BP control in the test city ($P < .005$) compared to control”.

5. Materials and Methods

This study adopts survey as the research design using structured questionnaire as the measuring instrument. This is because the study focuses on getting quantitative data on audience response to mass media messages on the need for periodic blood pressure check among working class residents of Lagos state. The population of the study consists of the 16,536,000 residents of Lagos State (United Nations World Population, 2024) (source: www.macrotrends.net) A sample size of 384 was drawn from the population using online sample size calculator (<http://www.surveysystem.com/sscalc.htm>).

The questionnaire consists of two sections. The section A contains demographic data on the respondents based on sex, age, educational qualification, marital status and religion. The section B contains information on the subject under study. The section B is designed to ensure that only relevant questions that addressed all the research questions were accommodated. A provision was made 25 close ended questions with 1 open ended question in the questionnaire, so as to make categorization and analysis of generated data easier.

5.1. Sampling Techniques

The multi-stage sampling technique was used to carry out the study. The sampling process was done in four stages as stated below.

Stage One: The state was first divided into senatorial districts which are: Lagos West, Lagos Central and Lagos East. Out of these three (3) senatorial districts, two (2) were randomly chosen using simple random sampling technique. They are Lagos East and Lagos West senatorial districts respectively.

Stage Two: Three LGAs were randomly selected in each of the selected senatorial districts in the state. This was done using simple random sampling technique to give each of the LGAs equal chance of being selected.

Stage Three: In the selected local government areas three (3) communities were randomly selected using simple random sampling technique. The process was done in a way that gave all the communities an equal chance of being selected. This process is repeated in all the selected LGAs in the selected senatorial districts of Lagos State. In all 18 communities were studied across the select-

ed LGAs in both Lagos West and Lagos East senatorial districts. StageFour: Convenience sampling technique (strict intercept) was used to locate each of the respondents in the selected communities in the study areas in Lagos state. This was done considering the busy lifestyle of residents in the state and for ease of data collection for the study (Table 5.1.).

Table 5.1: Selected Senatorial Districts and LGAs in Lagos State

Lagos State			
S/N	Senatorial Districts	Name of LGAs in Each senatorial District	Selected LGA
1	Lagos West	Agege, Alimosho, Amuwo – Odofin, Badagry, Ifako-Ijaye, Ikeja, Mushin, Oshodi / Isolo, Ojo, Ajeromi / Ifelodun,	Oshodi / Isolo LGA, Ojo LGA and Ajeromi / Ifelodun LGA
2	Lagos East	Epe, Ibeju-Lekki, Ikorodu, Kosofe and Somolu	Ibeju-Lekki LGA, Kosofe LGA and Somolu LGA
	TOTAL = 2	15 LGAs	6 selected LGAs

6. Results and Discussion

The results of data analysed in this study are presented in this section and the implication of each of the results are examined in the light of the objectives of the study. The results are presented in tables showing frequencies and percentages as well as means and standard deviations. Out of a total of 384 copies of questionnaire distributed in the study, 381 copies were returned which gives a response rate of 99% to the questionnaire distribution.

The result in Table 1 above shows a preponderance of male respondents from 38years and above, who had First Degree as their highest educational qualification, most of whom are Self-employed and are also married Christians. What this means is that their responses will shape the tone of this study and form the basis for making generalization within the context of this study.

The result as shown in Table 2 reveals that majority of the respondents (Lagos residents) (86.6%) are aware of media messages on the need for periodic blood pressure check. Conversely, the number of respondents that are not aware of such media messages are low (51) representing 13.4% of the total respondents.

The implication of this result is that residents in Lagos State are active audience and they engage the mainstream media to elicit information and messages relevant to their needs as explained by the health Belief Model as people intentionally listen to information that is o great benefit to them.

The result as shown in Table 3 reveals how often respondents are exposed to the content of the media messages on routine blood pressure checks especially those that work under intense pressure. Findings reveal that most of the respondents (98 representing 25.7%) do get information on health messages to a very large extent as against 176(46.2%) respondents who said they get information on the blood pressure to some extent whereas about 20 representing 5.3% do not have get information on regular blood pressure promptings.

The implication of this result is that the rate at which people get information on blood pressure would determine their knowledge on how best to respond to symptom of heart attack when noticed or to the degree to which they can enlighten their close network.

The analysis of the results as shown in Table 4 above used the Limit of Real Numbers as a determinant for the decision rule based on the mean scores of each responses. It is given below:

Strongly Agree (SA) = 5.00 – 4.45 = 5 Points

Agree (A) = 4.44 – 3.45 = 4 Points

Disagree (D) = 3.44 – 2.45 = 3 Points

Strongly Disagree (SD) = 2.44 – 1.45 = 2 Points

Undecided (U) = 1.44 – 0.45 = 1 Point

From the results, out of eight (8) responses, one had mean score that fall within the Limit of Real Numbers for Strongly Agree (SA) decision rule (i.e. 5.00 – 4.45). The response is an expression of feeling from the respondents that media messages on the need for periodic blood pressure check should get to the villages. It is believed that the aged reside mostly in the hinterlands, hence, this perception help among residents in Lagos State.

The implication of the result is that care for the aged is on the increase especially now that the situation in Nigeria has the capacity of causing high blood pressure among residents especially the aged ones. Ironically, the current situation in Nigeria is enough to trigger more heart attacks and many are likely to be susceptible to this health prone issues that can cause death if not properly tackled promptly through the media.

Furthermore, three (3) of the responses had mean scores that fall within the Limit of Real Numbers for “Agree” decision rule (i.e. 4.44 – 3.45). These responses include:

- “I feel media messages on periodic blood pressure check is educative” (Mean = 4.41)
- “I believe the contents of media messages on the need for period-

ic blood pressure check” (Mean = 3.71)

- “I feel media messages on the need for periodic blood pressure check is timely” (Mean = 3.69)

Findings reveal that the above responses show a general perception of the timeliness of media messages on the need for periodic blood pressure check and the educative nature of its content which elicits believability in the message among residents in the study area.

The implication of this result is that people easily believe in media contents that addresses urgent need in their lives and their perception of such media messages are seemingly positive and such messages has an enduring impression it leaves on the target audience.

Furthermore, there seem to be a general believe among residents in Lagos that media messages on the need for periodic blood pressure check does not come promptly. It is believe that the media as tool for health education should strategically focus on the importance of economic meltdown and inflation effect on busy population like Lagos. Ironically, some are of the opinion that busy population to a large degree look out for healthy preventive measures especially the deliberate ones. Hence, some opine rather that such messages are not meant for the working class since high or low blood pressure can affect people from all walks of life. All these were found in the remaining four (4) responses; three of which had mean scores that fall within the Limit of Real Numbers for “Disagree” decision rule (i.e. 3.44 – 2.45); leaving 1 response with mean score that fall within the Limit of Real Number for “Strongly Disagree” decision rule (i.e. 2.44 – 1.45).

The analysis of the result in Table 5 above also used the Limit of Real Numbers as stated earlier in the study. Findings from the result revealed that out of the eight (8) responses on audience response to media messages on the need for periodic blood pressure check, five (5) responses had mean scores that fall within the Limit of Real Numbers for “Agree” decision rule (i.e. 4.44 – 3.45).

Top among these responses is: “I have learnt to seek medical attention early if I notice any warning sign”. This response ranked highest with (Mean = 4.41). This response is more of a proactive response based on the understanding among residents that periodic blood pressure check reveals early warning signs of heart attack. This is followed by this response that: “I encourage family and friends to check their blood pressure regularly”. This ranked second with (Mean = 3.95). This is another proactive response with preventive motive which shows care and concerns for loved ones. Other responses include:

- “I learn to safeguard my health through periodic checks and quality diets” (Mean = 3.55)

- “Media messages on periodic blood pressure checks have enlightened me on early warning signs” (Mean = 3.50)

- “I check my blood pressure regularly” (Mean = 3.49)

The implication of the above results is that knowledge about the dangers of not responding to health-related media messages urgently triggers in audience a proactive approach in their response to such media messages. The need for periodic blood pressure check as emphasized in the contents of media messages on health-related issues has increased audience response to health issues especially as it relates to preventing heart attacks from early warning signs arising from periodic blood pressure check.

Further findings reveal that the remaining three (3) responses had mean scores that fall within the Limit of Real Numbers for “Disagree” decision rule (i.e. 3.44 – 2.45). They include:

- “Media messages on the need for periodic blood pressure check have made me to be careful with what I eat” (Mean = 3.12)

- “With media messages on the need for periodic blood pressure check, I now keep health routine checks” (Mean = 3.07)

- “I check my blood pressure as a habit” (Mean = 2.95)

The implication of the above results is that knowledge about the dangers of not responding to health-related media messages urgently did not amount to residents checking their blood pressure as a habit; neither did it make them keep health routine check or become careful about what they eat. It only instilled in residents of Lagos State a sense of responsibility in preventing the possibility of heart attacks arising from high blood pressure based on information in media messages on the need for periodic blood pressure checks. What this means is that people don’t easily form habits as a response to media messages on health-related matters. They only take proactive response to guide against dangers of health neglect.

Conclusively, health intervention programs should be the pivotal focus of media gatekeepers. Prompt health education should be floated without restraint to ensure audience understand better and educate other. In fact, triggering high blood pressure conversation surface more in Nigerian’s current economical downturn. Policies to ensure both public and private enterprises are consciously held accountable in safeguarding lives of the residents at all course becomes critical issue of discourse. Institutions and stakeholders should also engineer continuous processes through seminars and interactions to ensure staff are deliberate about their health status. Again, scholars are responsible for ensuring their various health investigations are distributed across all channels of information dissemination to enable the ease of spreading such beneficial health concern to many.

Table 1: Distribution of responses showing the demographic details of respondents

S/N	Variables	Responses	Frequency	Percentages (%)
1	Sex	Male	212	55.6
		Female	169	44.4
2	Age range	18 – 22 years	52	13.6
		23 – 27 years	-	0
		28 – 32 years	57	15
		33 – 37 years	126	33.1
		38 years and above	146	38.3
3	Educational Qualification	Primary Education	-	0
		Secondary Education	12	3.2
		First Degree	189	49.6
		Masters	96	25.7
		Ph.D	82	21.5
4	Occupation	Student	-	0
		Civil Servants	70	18.4
		Self-employed	173	45.4
		Public Servants	118	31
		Unemployed	20	5.2
		Artisans	-	0
		Retired	-	0
5	Marital Status	Single	119	31.2
		Married	239	62.7
		Widowed	23	6.1
		Separated	-	0
		Divorced	-	0
6	Religion	Christianity	381	100
		Islam	-	0
		ATR	-	0
		Total	381	100

Table 2: Distribution of responses showing respondents' level of awareness of media messages on the need for periodic check of blood pressure

S/N	Variable	Responses	Frequency	Percentage (%)
1	Are you aware of media messages on the need for periodic blood pressure check?	Yes	330	86.6
		No	51	13.4
		Can't Say	-	0
		Total	381	100

Table 3: Distribution of responses showing extent of exposure to contents of media messages on the need for periodic blood pressure check among residents in Lagos State

S/N	Variables	Frequency	Percentage (%)
1	To a very large extent	98	25.7
2	To a large extent	87	22.8
3	To some extent	176	46.2
4	Not at all	20	5.3
	Total	381	100

Table 4: Distribution of responses showing respondents’ perception towards media messages on the need for periodic blood pressure check among residents in Lagos State

S/N	Variables	SA	A	D	SD	U	Mean	St.D	Dn
1	I feel media messages on the need for periodic blood pressure check is timely	104	169	44	12	52	3.69	1.284	A
2	I feel media messages on periodic blood pressure check is educative	191	178	-	-	12	4.41	0.788	A
3	I think media messages on periodic blood pressure check is coming rather too late	-	20	223	46	92	2.45	0.915	D
4	I feel media messages on periodic blood pressure check should get to villages	240	125	-	8	8	4.52	0.793	SA
5	I feel media messages on the need for periodic blood pressure check is not quite detailed	11	80	86	12	192	2.23	1.335	SD
6	I believe the contents of media messages on the need for periodic blood pressure check	82	235	-	-	64	3.71	1.284	A
7	I feel media messages on the need for periodic blood pressure check is just for the working class in Lagos	-	32	211	138	-	2.72	0.608	D
8	I feel media messages on the need for periodic blood pressure check should be for the working class only	8	12	131	230	-	2.47	0.663	D

Key: SA (Strongly Agree); A (Agree); D (Disagree); SD (Strongly Disagree); U (Undecided); Dn (Decision)

Table 5: Distribution of responses showing audience response to media messages on the need for periodic blood pressure check among residents in Lagos State

S/N	Variables	SA	A	D	SD	U	Mean	St.D	Dn
1	I check my blood pressure regularly	63	170	84	20	44	3.49	1.176	A
2	I encourage family and friends to check their blood pressure regularly	185	109	23	12	52	3.95	1.38	A
3	I check my blood pressure as a habit	63	95	94	19	110	2.95	1.456	D
4	Media messages on the need for periodic blood pressure check have made me to be careful with what I eat	55	170	27	22	107	3.12	1.482	D
5	With media messages on the need for periodic blood pressure check, I now keep health routine checks	43	145	79	22	92	3.07	1.362	D
6	Media messages on periodic blood pressure checks have enlightened me on early warning signs	81	194	12	23	71	3.5	1.385	A
7	I learn to safeguard my health through periodic checks and quality diets	78	213	11	-	79	3.55	1.38	A
8	I have learnt to seek medical attention early if I notice any warning sign	103	250	-	-	28	4.05	0.965	A

Key: SA (Strongly Agree); A (Agree); D (Disagree); SD (Strongly Disagree); U (Undecided); Dn (Decision)

References

- Allington D, Duffy B, Wessely S, Dhavan N, Rubin J. Health-protective behaviour, social media usage and conspiracy belief during the COVID-19 public health emergency. 2020; 51(10): 1763-9.
- Amadi RN. Attitudinal performance of politicians in post-colonial Nigeria through effective television broadcasting. Review of Communication and Studies. 2017; 2(1): 1-7.
- Ajuzieogu R. Influence of radio evangelical messages on attitude and behaviour of Christians in Aba metropolis towards church attendance. MA dissertation. Enugu State University of Science and Technology (ESUT), Enugu. 2023.
- Bondi M, Cacchiani S. Knowledge communication and knowledge dissemination in a digital world. Journal of Pragmatics. 2021; 186: 117-23.
- Brown JD, Witherspoon EM. The mass media and American adolescents’ health. Journal of Adolescence Health. 2002; 31(6 Suppl): 153-170.
- Choudhury PS. Media in development communication. Global Media Journal – Indian Edition. 2011; 2(2): 1-13.
- Ekwueme AC. Media evangelism: A case for effective coverage of the rural areas. International Journal of Research in Arts and Social Sciences. 2011; 3: 116-29.
- Herman ES, Chomsky N. Manufacturing consent: The political economy of the mass media. New York: Knopf Doubleday Publishing Group. 2002.
- Khan J. Social media for rapid knowledge dissemination: early experience from the COVID-19pandemic. 2023.

10. Lewin K. Channels of group life. *Human Relations*. 1943; 1(2): 145.
11. Nwabuzor MN, Onyike IE. Broadcasting via the social media: An evaluation of the use of the social media in news broadcasting among journalists in Nigeria. *International Journal of Media, Security and Development*. 2015; 2(1): 210 -8.
12. Ogundipe S, Olawale G. 18.2m Africans will be diabetic by 2030 – WHO. 2016. Retrieved on 11th May, 2018 from
13. Onyike IE, Ndolo IS, Okoye GC, Obi J. Expectancy value and protection motivation as factors of acceptance and adoption of COVID-19 safety protocols. *International Journal of Advanced Multidisciplinary Research and Studies*. 2023; 3(6): 129-136.
14. Onyike IE. Influence of End Diabetes media campaign on knowledge and prevention of diabetes among residents of South-East, Nigeria. PhD Thesis. University of Nigeria, Nsukka [UNN]. 2019.
15. Onyike EI, Ogboh NM, Okoye GC. Assessment of neo-colonial implications of NETFLIX on Nigeria's popular culture. A colloquium on Media Convergence in Postcolonial Locations, organized by the Department of Mass Communication, Dominican University, Ibadan. 2023.
16. Payne A. Portrayal of drug abuse in popular culture and analyze selected music videos and movies. Undergraduate project. Dominican University, Ibadan (DUI), Nigeria. 2023.
17. Petrella RJ, Speechley M, Kleinstiver PW, Ruddy T. Impact of a social marketing media campaign on public awareness of hypertension. *Am Journal of Hypertension*. 2005; 18: 270-5.
18. Rosenstock IM, Strecher VJ, Becker MH. The Health Belief Model and HIV Risk Behaviour Change. In R. J. DiClemente and JL Peterson (Eds.), *Preventing AIDS: Theories and Methods of Behavioral Interventions*. New York: Plenum. 1994; 25-59.
19. Shang WL. The media and the promotion of health knowledge. *Journal of Media and Health Studies*. 2014; 5(3): 1-19.
20. Shoemaker PJ, Reese SD. *Mediating the message in the 21st Century: A media sociology perspective (Third Edition)*. New York: Routledge. 2014.
21. Shoemaker PJ, Vos TP. *Gatekeeping theory*. New York: Routledge. 2009.
22. Slater MD. Operationalizing and analyzing exposure: The foundation of media effects research. *Journalism & Mass Communication Quarterly*. 2004; 81(1): 168-83.
23. Smith JA. *Textual analysis*. 2017.
24. Southwell BG, Barmada CH, Hornik RC, Maklan DM. Can we measure encoded exposure? Validation evidence from a national campaign. *Journal of Health Communication*. 2002; 7(5): 445-53.
25. UNESCO. UNESCO to report on free and independent Indigenous media. 2023.
26. Valente TW, Kwan PP. Evaluating communication Campaigns. *Public communication campaigns*. 2001; 4: 105-24.
27. Wakefield MA, Loken B, Hornik RC. Use of mass media campaigns to change health behaviour. A Publication of the Centre for Behavioural Research in Cancer, Cancer Council, Victoria, Carlton. Australia. 2010; 376: 1261-71.
28. Welbers K, Opgenhaffen M. Social media gatekeeping: An analysis of the gatekeeping influence of newspapers' public Facebook pages. *New Media & Society*. 2018; 20(12): 4728-47.
29. Yusuf A, Gusau HA, Maiyaki FU. Tracking and modelling of public perceptions towards the reality of COVID-19 pandemic in Nigeria. 2020.