



Uses of Facebook Videos in Promoting Awareness of Cervical Cancer in Makurdi Metropolis, Benue State, Nigeria

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Abstract

This research examined the role of Facebook videos in raising awareness of cervical cancer within the Makurdi metropolis, the capital of Benue State. The study utilised two theories: the Theory of Reasoned Action and the Health Belief Model. A survey research method was employed to collect data from a sample of 340 respondents. The data were analysed using descriptive statistics, particularly frequency counts and simple percentages. The findings indicated that Facebook videos are effective in promoting awareness about cervical cancer and help dispel misconceptions surrounding the disease. The study concluded that Facebook videos play a significant role in increasing awareness of cervical cancer. It recommended, among other things, the incorporation of other social media platforms and the updating of the Facebook app to the latest version to improve the usability of videos.

Keywords: Facebook, Videos, Awareness, Cervical Cancer

Introduction

Cervical cancer is a significant public health concern. According to UNAIDS (2019) and WHO (2019), cited in Ukangwa and Ojomo (2022), cervical cancer ranks as the fourth most common cancer in women globally, with 570,000 new cases accounting for 6.6% of all female cancers and 311,000 deaths from the disease recorded in 2018. Nigeria ranks fifth in the world for cervical

cancer mortality, following India, China, Brazil, and Bangladesh (Cervical Cancer Global Crisis Card, 2013). According to Ukangwa and Ojomo (2022), the current statistics show that each year, 14,943 women are diagnosed with cervical cancer and 10,403 die from the disease out of a population of 50.33 million women aged 15 and above, who are at risk. This is a concerning situation, as this age group is crucial to any society's development; these women are often at the peak of their careers and are expected to make meaningful contributions to the social and economic growth of their communities. UNAIDS (2019), as cited in Ukangwa and Ojomo (2022), estimates that if cervical cancer prevention, screening, and treatment are not urgently scaled up, there could be a 50% increase in mortality by 2040, compared to 2018 levels.

The World Health Organization (2021) defines cervical cancer as a type of cancer that develops in the cells of the cervix, the part of the uterus that connects to the vagina. It is caused by the Human Papillomavirus (HPV), particularly serotypes 16 and 18. This virus is sexually transmitted, and persistent infections can lead to cervical cancer if not detected and treated early. HPV infections typically progress slowly, taking about 10–20 years to develop from normal cells to pre-cancerous cells, and then finally to invasive cancer (WHO, 2021). The 10–20 year interval between pre-cancer and cancer provides sufficient time to screen, detect, and treat pre-cancerous conditions and prevent them from developing into full-blown cancer. However, the progression is usually faster in immune-compromised women, such as those living with HIV.

The best approach to scaling up cervical cancer prevention, screening, and treatment is through creating awareness. Awareness campaigns can help reduce the incidence of the disease by using platforms such as Facebook videos, especially among young, sexually active women who are highly dependent on social media. According to Sobaih, Hasanein, and Abu (2020), Facebook videos have proven to be effective communication and information dissemination tools. In the context of this study, Facebook videos refer to recorded or live audio-visual content created to both entertain and educate the audience. The intended message is carefully embedded in the video, allowing viewers to both enjoy the content and absorb the educational message, which can encourage behaviour change.

Several campaigns on Facebook aim to create awareness and provide essential knowledge to combat cervical cancer. For example, the *Cervical Cancer Awareness Campaign 2020*, an educational video by Zulekha Hospital Dubai, highlights that early detection of precancerous cells can prevent cervical cancer, and HPV vaccination can reduce its occurrence in girls. Another campaign, *Smear My Woman*, initiated by Chain Reaction Nigeria, educates women about cervical cancer and offers free screening to help detect the disease early. Existing research has highlighted the importance of the internet and social media in facilitating access to cervical cancer information (Banik, Naher, Rahman, & Gozal, 2020).

According to WHO (2013) statistics for 2000 to 2012, Nigeria experienced 69,200 cancer-related deaths, with 30,400 in men and 38,800 in women. Of these, cervical cancer alone accounted for 13,270 deaths (34.2% of all cancer-related deaths), while the remaining 25,530 deaths were attributed to other types of cancer. Erhabor et al. (2016) noted that cervical cancer accounted for about 16% of all cancer-related deaths, with a dismal 5-year survival rate of just 10% for Nigerian victims, compared to over 85% in the United States. More recent research by Muanya and Ogune (2019) found that four out of five people diagnosed with cancer in Nigeria die, with only one in

five surviving. This indicates that Nigeria's cancer situation is worse than that of many other developing countries, such as India. The statistics underline the serious public health threat posed by cervical cancer in Nigeria, and the situation shows no signs of abating, with the prevalence continuing to rise. WHO (2018), in line with Ferlay et al. (2015), attributes the increasing death rate to low awareness of early cervical cancer detection methods, poor adherence to screening practices, and diagnosis at advanced stages. Erhabor et al. (2016) suggested that the rise in cervical cancer cases in Nigeria may be linked to changing demographics, the adoption of Western lifestyles, environmental pollution, and inadequate control measures, compounded by a focus on HIV/AIDS and tuberculosis rather than cancer prevention.

Given that poor knowledge of cervical cancer significantly impacts the health of Nigerian women, early detection is essential for effective treatment (WHO, 2018). However, early detection methods are only effective if the population is adequately informed and motivated to seek medical attention. Therefore, efforts to reduce or eliminate cervical cancer in Nigerian states represent a serious public health challenge. Furthermore, limited studies have explored the use of video interventions as an informational technique, particularly in developing countries (Abazie & Oluwatosin, 2014; Anaeto & Solo-Anaeto, 2010; Ferlay et al., 2015). This research seeks to explore the potential of Facebook videos in promoting awareness of cervical cancer in Benue State as a means of alleviating the burden of the disease through improved communication.

Statement of the Problem

Several studies have demonstrated the effectiveness of using Facebook videos in promoting awareness of cervical cancer (Wei-Wen, 2014; Okorie and Salawu, 2016; Adekoya and Chinanu-Akpuh, 2021). However, the effectiveness of cervical cancer campaigns using Facebook videos faces numerous challenges in developing countries such as Nigeria. These challenges include the high cost of internet data, poor internet access, the cost of acquiring smartphones, and lack of technical knowledge, among other issues, all of which continue to hinder the effectiveness of Facebook videos in cervical cancer campaigns (Ali, 2011). This study, therefore, seeks to investigate the use of Facebook videos in promoting awareness of cervical cancer in Benue State, Nigeria.

Objectives of the Study

The broad objective of this study is to investigate the use of Facebook videos in promoting awareness of cervical cancer in Benue State. Specifically, the study aims to:

- i. Identify the sources of Facebook videos used in promoting awareness of cervical cancer in Benue State;
- ii. Determine the types of Facebook videos used in promoting awareness of cervical cancer in Benue State;
- iii. Assess the effectiveness of Facebook videos in promoting awareness of cervical cancer in Benue State;
- iv. Examine the challenges faced by Facebook users in accessing Facebook videos used in promoting awareness of cervical cancer in Benue State.

Literature Review

Awareness of Cervical Cancer

A review of studies in this area has shown that awareness is possibly the biggest challenge faced by public health and medical professionals in the battle against cervical cancer worldwide. In Nigeria, studies have revealed that this challenge still exists in various regions and zones of the country. For example, Oluwole et al. (2017) surveyed 400 rural women in Lagos, Nigeria, with an average age of 38.9 ± 9.51 years, and found an awareness rate of 15%, while only 13.3% of these women had ever undergone screening for the disease (none of which had been done within the previous three years). These findings were consistent with those of Abiodun et al. (2017), cited in Ukangwa and Ojomo (2022), who surveyed 318 women in Oyo State, another south-western Nigerian state, and discovered that only 22.6% were aware of cervical cancer. Furthermore, 17.9% were aware of screening tests as a preventive measure for the disease, while only 1.6% had ever undergone screening, although 5.7% believed they may be at risk of cervical cancer.

In a related study, Akanbi, Iyanda, Osundare, and Opaleye (2015) sampled 737 women randomly selected from the general population in two south-western states of Nigeria and found that the awareness level of HPV among women in south-west Nigeria was low (18.5%). Respondents were more knowledgeable about cervical cancer than HPV (64.3%) and were aware that the primary cause of cervical cancer is HPV (27.5%). This aspect of the study, where participants showed more awareness of cervical cancer, contrasts with the findings of Bisi-Onyemaechi (2018), which reported that participants' awareness of cervical cancer was low. The study also revealed that respondents' primary source of information was the media, while access to information through the healthcare system was very poor. Health workers have the opportunity to educate their clients when they visit the hospital for consultations. However, this study revealed that much of this education is not being provided. Based on the results that knowledge of HPV and cervical cancer is low in south-west Nigeria, the researchers recommended that Nigerian women of childbearing age should be educated about cervical cancer, as they are unlikely to get regular Pap smear tests. There is also a need to increase the availability of immunisation facilities across the country (Akanbi et al., 2015).

However, some studies have reported high levels of awareness of cervical cancer, screening, and HPV vaccines in their areas of study. For example, Okunowo, Daramola, Adaiah, and Soibi-Harry (2018) reported a high level of awareness of cervical cancer and the Pap smear test, at 80% and 55.1%, respectively, among a sample of 205 pregnant and non-pregnant women attending antenatal and gynaecological outpatient clinics in Lagos. This high level of awareness is attributed to the fact that the majority of the participants were educated. This was not the case in the study by Olubodun et al. (2019), which reported low awareness of cervical cancer because most of the study subjects had only secondary education. However, the high level of awareness of cervical cancer in this study did not translate into knowledge, as the study recorded a low level of knowledge, with only 40.0% and 15.6% able to identify the symptoms and risk factors of cervical cancer, respectively. Okunowo et al. (2018) also recorded a low level of Pap smear uptake, with only 22.9% of respondents having ever undergone a Pap smear test. The most common reasons given for this were lack of awareness and non-recommendation from doctors.

Existing literature, as provided by Ukangwa and Ojomo (2022), shows that knowledge of cervical cancer is a major challenge in the fight against the disease. Studies conducted in and outside Nigeria reveal that knowledge of cervical cancer, including its risk factors, symptoms, and preventive

measures, is low. Since knowledge of cervical cancer and its risk factors is important for deciding whether to undergo screening, most women lack this knowledge and do not perceive themselves as being susceptible to the disease.

Further literature shows that most women lack knowledge of cervical cancer, which has translated into poor attitudes and negative perceptions towards preventive measures. For example, Olubodun et al. (2019) surveyed a total of 305 women, and only 12.8% had heard of cervical cancer. Only a few respondents could identify the risk factors and symptoms of the disease. This low level of knowledge could be attributed to the respondents' education level, as most had attained only secondary school education. Aweke et al. (2017) investigated women of childbearing age in Ethiopia and found that 46.3% of respondents lacked comprehensive knowledge of cervical cancer. Ogbonna (2017), cited in Ukangwa and Ojomo (2022), also revealed that only 10.8% of respondents reported having knowledge of cervical cancer, and 42.5% of students were unable to recognise the risk factors for cervical cancer, while others were only somewhat confident in identifying them. However, some studies, as reported by Ukangwa and Ojomo (2022), have indicated high knowledge of cervical cancer, its risk factors, symptoms, and preventive measures. For instance, Neji et al. (2019) and Toye et al. (2017) reported that many respondents in their study areas had good knowledge of cervical cancer and its associated risk factors and preventive measures.

Facebook Videos as Tool for Cervical Cancer Intervention

Facebook videos are educational, informative, and entertaining. This is because, in the process of watching the video and being entertained, the viewer(s) also become familiar with the messages embedded within it, thereby developing a greater tendency to adopt the intended behaviour change. Television programmes, such as soap operas and other audio-visual entertainment programmes, as well as video dramas posted on Facebook, fall into the category of tools and strategies that constitute entertainment-education. In general, Singhal and Rogers (1999) defined entertainment-education as a process in which a media message is purposively designed and implemented to both entertain and educate an audience in order to increase its members' knowledge about an educational issue (cervical cancer in this case) and create the intended favourable attitudes and behavioural changes.

Consequently, the Facebook video tool, whether it is a drama, film, game, or home video, has recently gained ground in Nigerian society (Abiodun, Olu-Abiodun, Sotunsa, & Oluwole, 2014). The authors noted that Facebook videos are known as communication strategies or tools for attracting an audience to real-life events, operations, and practices of any given subject of interest. Scholars have opined that Facebook videos are prestigious, credible, and highly persuasive mediums for encouraging people to adopt new lifestyles because they have the ability to arouse interest, clarify concepts, aid retention, and stimulate the quest for additional knowledge due to their audiovisual quality.

It is also well-established that videos aid deeper understanding of any subject to which their message is related. Moreover, this is made easier because of the usual playback feature (Chignell, 2014). This playback feature is one of the reasons why Abiodun et al. (2014) perceive video as an irreplaceable information medium with a high level of effectiveness for all types of health interventions. Furthermore, video messages are specifically attractive, colourful, and can be watched in any given environment. The messages can also be appropriately packaged to align with the cultural characteristics of the target audience (Nwadike, 2018).

Efforts towards Cervical Cancer Awareness in Nigeria

It has been reported that 8.2 million people worldwide died from cancer in 2012 (GLOBOCAN, 2012), with 60% of the world's total new annual cases occurring in Africa, Asia, and Central and South America. Furthermore, it is estimated that 30% of cancers could be prevented. Okorie (2011) highlighted that cervical cancer is a common cancer among women worldwide and a major cause of death among women aged 30 and above. It is the most prevalent form of cancer among women in both high- and low-resource countries. As a result, cervical cancer is a major public health concern globally. Cancer and its treatment present significant physical, psychological, and economic challenges in resource-limited societies, such as those found in Africa. The increasing danger of this disease affecting women has sparked considerable interest among communication and health researchers, leading to numerous studies centred on cancer.

Cervical cancer is also observed to be a lifestyle disease affecting women in both developing and developed countries, contributing to the deaths of many women across the globe (Okorie, 2011). The various risk factors associated with cancer can be categorised into epistemological and lifestyle factors. Consequently, there is a snowball effect of cancer incidences worldwide, making it a major cause of death among women in both developing and developed countries. Okorie, Oyesomi, and Kayode (2014) noted that the rise in cervical cancer incidence has prompted several agencies to spearhead media awareness campaigns in Nigerian society. These agencies include Care Organization Public Enlightenment (C.O.P.E), Princess Nikky Foundation, Cervical Cancer Association of Nigeria (CCAN), Pink Pearl Foundation, among others. These organisations have led health communication campaigns across the country, mobilising women to raise awareness of breast cancer and practice preventive screening measures. Within the field of health communication, several scholarly works have addressed the nature and dangers of breast cancer in Nigeria. Scholars and social scientists have reached a consensus that the incidence of breast cancer has grown to an alarming rate in Nigerian society (Amosun, 2009; Salaudeen, Akande & Musa, 2009; Okorie, 2011; Okorie, 2013).

Cancer research and statistics related to Nigerian women have been documented since the 1980s. Current statistics indicate an increase in both the incidence and mortality rates of cancer among Nigerian women over the past thirty years. Social scientists and researchers predict that cancer will soon become the most feared disease among women in Sub-Saharan Africa due to the continuing rise in cervical and other cancer cases and mortality among women (Salaudeen et al., 2009). Existing cancer research and literature concerning Nigerian women consistently report five key phenomena: (1) cervical and breast cancer are the most common cancers among women in Nigerian society (Krep & Sivaram, 2009; Salaudeen et al., 2009; Okorie, 2011); (2) cancer is the second leading cause of death among women aged 30 to 50 years in Nigeria (Salaudeen et al., 2009; Okorie, 2011; Okorie, 2013); (3) Nigerian women with cancer face twice the risk of dying compared to Caucasian women, as they tend to present to hospitals at an advanced stage of the disease (GLOBOCAN, 2012; Okorie, 2013); (4) one in eight women faces the risk of developing cancer (Kreps & Sivaram, 2009); and (5) the peak age of cancer incidence in Nigeria is between the ages of 25 to 50 years, in contrast to Europe and America, where it is between 65 to 75 years (Okorie, 2011; Okorie, 2013).

Previous studies have highlighted the significance of information sources used in media awareness campaigns for cervical cancer communication interventions in Nigerian society, but have not

thoroughly discussed them. There have been several qualitative and quantitative studies on the role of health communication in raising awareness of cervical cancer. Some have reported the fluctuating media coverage of cervical cancer in Nigeria (Lee, 2010; Amosun, 2011). However, the importance of information sources in creating awareness and knowledge about cervical cancer among Nigerian women has not been extensively debated. Specifically, Facebook videos as a tool for promoting health awareness about cervical cancer have not been adequately explored, thus highlighting the gap that this study intends to fill.

Theoretical Framework

This study is anchored in the Health Belief Model and is further supported by the Theory of Reasoned Action (TRA).

Health Belief Model

This study is anchored on the Health Belief Model by Lewin (1951). The Health Belief Model is an attempt to clarify the relationship between belief, attitude, and behaviour in relation to health matters. Its origin can be traced to a group of social scientists at the United States Public Health Service in the 1950s, who were concerned with designing psychological health belief models to enhance the effectiveness of health education programmes (Abraham & Sheeran, 2016). Lewin (1951) significantly outlined the relationship between health beliefs and behaviours, using the idea of valence, explaining that beliefs can make behaviours more or less attractive. This promotes the expectancy-value model of belief-behaviour relationships, which causes events to appear more or less positive or negative to different individuals (Abraham & Sheeran, 2016). The Health Belief Model claims that belief is necessary for laying the foundation for attitude, which leads to taking a certain position and engaging in a specific kind of behaviour. The model combines stimulus-response theory and cognitive theory, as well as a blend of the concepts of classical conditioning and instrumental conditioning, which attempts to explain human social behaviour under conditions of uncertainty (Lordo, 2018).

Basically, the model strongly assumes that an individual's course of health-related action will often depend on his or her perception of the benefits and barriers associated with the intended health behaviour. Unless the perceived benefits outweigh the perceived barriers, the individual is unlikely to adopt the intended behaviour change. Thus, health awareness and intervention can only be effective enough to lead to a change in behaviour when the message of such promotions justifies perceived susceptibility, perceived severity, perceived benefits, barriers to action, cues to action, and self-efficacy. This means that Facebook videos should influence a change of attitude in the target audience by filling the health messages with authentic and reliable information. Moreover, the video's style of communication should incorporate evidence-based, well-informed audiovisual plays (video dramas) to convincingly convey the necessary health messages meant to persuade participants of the need to adopt and maintain a healthy lifestyle. The features of the message should align with the characteristics of the target audience.

The Theory of Reasoned Action

The Theory of Reasoned Action (TRA) has its roots in the field of social psychology. It was first developed in the late 1960s but was revised and expanded by Ajzen and Fishbein in the early 1970s (Fishbein & Ajzen, 1975; Mojaye, 2008). There are two important changes. First, the Theory of Reasoned Action adds another element to the process of persuasion, behavioural intention. Rather than attempting to predict attitudes, as does Information Integration theory (and several others),

Reasoned Action is explicitly concerned with behaviour. However, this theory also recognises that there are situations (or factors) that limit the influence of attitude on behaviour. For example, if our attitude leads us to want to go to a restaurant for a meal, but we have no money, our lack of money will prevent our attitude from causing us to go to the restaurant. Therefore, Reasoned Action predicts behavioural intention, a compromise between stopping at attitude predictions and actually predicting behaviour. This is because it separates behavioural intention from behaviour.

The key concepts of TRA are: (1) Behaviour: this is a specific behaviour that is defined by a combination of four components, namely action, target, context, and time. (2) Intention: this is the intent to perform behaviour. It is usually the best predictor that a desired behaviour will actually occur. Intention is also defined using the same components that are used to define behaviour, which are action, target, context, and time. (3) Attitude: this is the positive or negative feeling towards performing the defined behaviour. (4) Behavioural beliefs: these are the combination of a person's beliefs regarding the outcomes of a defined behaviour and the person's evaluation of potential outcomes. (5) Norms: these are a person's perception of other people's opinions regarding the defined behaviour. (6) Normative beliefs: these are a combination of a person's belief regarding other people's views of a behaviour and a person's willingness to conform to those views.

As it relates to this study, when women are informed about cervical cancer and the need to perform cervical examinations as a major preventive measure to tackle cervical cancer, women who perceive that the outcome of performing the examination will be positive will have a positive attitude. Concomitantly, the opposite will happen if the behaviour is thought to be negative. A woman's intention to live a healthy lifestyle in diet and physical well-being can only be triggered by information and knowledge of cervical cancer. Furthermore, a major determinant preventing or supporting women in performing cervical examinations is their beliefs. These beliefs can be cultural, professional, or religious. Furthermore, women can be persuaded to change their eating habits, sexual lifestyle, and engage in the practice of cervical cancer examination.

Method

To carry out this research study successfully, the survey method was used, with the questionnaire serving as the instrument for data collection. The rationale for using the survey method is to elicit responses from the sampled respondents. The survey is the most appropriate method for this study because the issue under investigation seeks to assess audience perception of Radio Benue's reporting of kidnappings. As Frey, Carl, Botan, and Kreps (1991, p. 179) note, "survey research is particularly useful for gathering descriptive information about populations too large for every member to be studied."

The population for this study is drawn from the entire population of Makurdi metropolis, which is 407,000 (NPC, 2020). However, such a number would pose a problem, as it is too large and any result obtained would likely be unrealistic. Therefore, a sample population will be selected from this total population. The sample size for this study is three hundred and eighty-four (384). The sample population was statistically determined using Keyton's (2001) sample determination table, which provides a 95% confidence level and a 5% sampling error for each sample deduced from the predetermined population range. The table below shows how the sample was drawn:

Figure 3.1: Sample size for different population at 95% confidence level and 5% sampling error

Population	Sample size	Population	Sample size
50	44	260	155
75	63	280	162
100	80	300	169
120	92	400	196
130	97	500	217
140	103	1000	278
150	108	1500	306
160	113	2000	322
170	116	3000	341
180	128	4000	351
190	127	5000	357
200	140	10,000	381
240	143	100,000 & above	384

Source: Keyton, 2001

Therefore, the sample size for this study is 384. This number falls within the range of one hundred thousand (100,000) and above in Keyton's sample determination formula. The sample size of three hundred and eighty-four (384) is therefore adopted as the sample size for this study. To arrive at the respondents from the study population, a multistage sampling procedure, involving a combination of cluster, purposive, and simple random sampling techniques, was used to provide a relatively equal opportunity for the respondents. The researchers first used the cluster sampling technique to divide the population into twelve (12) units of clusters based on the major settlements in Makurdi metropolis. Cluster sampling, according to Yates, David, and Daren (2008), is a sampling technique where the entire population is divided into groups, or clusters, and a random sample of these clusters is selected. The selected clusters were: High-Level, North Bank, Akpehe, New G.R.A, Old G.R.A, Gboko Road, Kanshio, Wadata, Ankpa Ward, Modern Market, Wurukum, and Nyiman.

After selecting twelve (12) units based on the major settlements, the researchers used the simple random sampling technique to pick two (2) streets from each of the twelve (12) major settlements. Simple random sampling, according to Yates, David, and Daren (2008), is a subset of individuals (a sample) chosen from a larger set (a population). Each individual is chosen randomly and entirely by chance, such that each individual has the same probability of being chosen at any stage during the sampling process. To achieve this random selection, the researcher wrote the names of all the streets in each of the major settlements on separate pieces of paper, labelled them according to their settlements, and placed them separately in twelve (12) jars. A research assistant, blindfolded, picked two pieces of paper randomly from each jar. This resulted in twenty-four streets being picked, two (2) from each of the twelve settlements. The selected streets were: Ernyi and Yogbo streets from North Bank, Inikpi and Iorkyaa Ako streets from High-Level, Terwase Agbadu and Akange streets from Gboko Road, Doo and Laha streets from Nyiman, Court Road and Mzambe Street in Akpehe, Aernyi and Atume streets in New G.R.A, Bakut and Gebi streets in Old G.R.A, Adikpo and Kuna streets in Wadata, Imande and Torkwase streets in Kanshio, Benue Crescent and Moji streets in Ankpa Ward, Onitsha and Awe streets in Wurukum, and Dogo and Ladi streets in Modern Market. This brings the total number of streets selected to twenty-four (24).

Next, the researchers used the purposive sampling technique to pick four (4) compounds on each of the selected streets—two compounds on the right and two compounds on the left after an interval of seven (7) houses for the study. This brings the total number of compounds selected to ninety-six (96). According to Babbie (2001), a purposive sample, also commonly called a judgmental sample, is one that is selected based on the knowledge of the population and the purpose of the study. The subjects are selected because of certain characteristics. Using purposive sampling again, the researchers selected four (4) respondents from each compound. This resulted in a total of 384 respondents, which the researcher used as a representation of the entire population of the study area.

The researcher employed the use of a questionnaire to elicit relevant information for the study. A questionnaire consisting of ten (10) questions was used to gather information from respondents to help answer the questions raised in Chapter One of this work. A total of three hundred and eighty-four (384) questionnaires were administered through one-on-one contact with respondents in the area. Two days after administration, the questionnaires were collected, collated, and analysed. The method for data analysis used in this study is the percentage method, which analyses and interprets the results presented in tabular form. The analysis was based on the responses to the questions in the questionnaire.

Data Presentation

A total of 340 respondents from a sample size of 384, representing a high response rate of 89%, successfully completed and returned their questionnaires, while forty-four (44) copies, representing 11%, were returned incomplete and thus found unusable. Below is the presentation of the data in tables.

Table 1: Sources of Facebook Videos used in promoting Awareness of Cervical Cancer

Options	Frequency	Percentage
Individuals infected or affected by cervical cancer	95	28
Organizations concerned with cervical cancer	103	30
Federal and state ministries of health	67	20
World Health Organization	75	22
Total	340	100

Source: Field Survey, 2024.

Data in Table 1 explain the sources of Facebook videos used in promoting awareness of cervical cancer. In the Table, 103 (30%) of the respondents agreed that the videos come from organizations concerned with cervical cancer, 95 (28%) of the respondents agreed that the videos come from individuals infected or affected with cervical cancer, 75 (22%) of the respondents agreed that the video come from the World Health Organization, while 67 (20%) of the respondents agreed that the videos come from federal and state ministries of health. This implies that the sources of Facebook videos come from various individuals and organization that have something to do with cervical cancer such as the World Health Organization, federal and state ministries of health as well as foundations established for the purpose of cervical cancer.

Table 2: Type of Facebook Videos used in promoting Awareness of Cervical Cancer

Options	Frequency	Percentage
Live videos on cervical cancer	55	16
Native videos on cervical cancer	95	29
Dance videos on cervical cancer	32	9
Illustrative videos on cervical cancer	85	25
Videos of current events on cervical cancer	42	12
Inspirational videos on cervical cancer	31	9
Total	340	100

Source: Field Survey, 2024.

Data in Table 2 sought to know that type of *Facebook* videos used in promoting awareness on cervical cancer. In the Table, 95 (29%) of the respondents agreed with native videos on cervical cancer, 85 (25%) the respondents agreed with illustrative videos on cervical cancer, 55 (16%) of the respondents agreed with live videos on cervical cancer, 42 (12%) of the respondents agreed with videos of current events on cervical cancer, 32 (9%) agreed with dance videos on cervical cancer, while 31 (9%) agreed with inspirational videos on cervical cancer. This means that the respondents actually view *Facebook* videos on cervical cancer and can readily identify them.

Table 3: Form of Presentation of Facebook Videos on Cervical Cancer

Options	Frequency	Percentage
Drama videos	62	18
Discussion videos/documentaries	101	30
Interview videos	38	11
News videos	91	27
News commentary videos	48	14
Total	340	100

Source: Field Survey, 2024.

Table 3 sought to know the form of presentation of *Facebook* videos on cervical cancer. In the Table, it was found that 101 (30%) view discussion videos/documentaries on cervical cancer, as 91 (27%) of the respondents view news videos, 62 (18%) of the respondents view drama videos on cervical cancer, in addition to 48 (14%) and 38 (11%) of the respondents who view news commentary videos and interview videos on cervical cancer respectively. This implies that Facebook videos on cervical cancer appear in various forms of the respondents view them and can readily identify them.

Table 4: Effectiveness of Facebook Videos in promoting Awareness of Cervical Cancer

Options	Frequency	Percentage
Reduce or eliminate apprehension and misconceptions people have about cervical cancer	38	11
Increase awareness in places where one is most vulnerable about cervical cancer	42	12
Generally enlightened the public about cervical cancer	59	17
All of the above	201	59
Total	340	100

Source: Field Survey, 2024.

Data in Table 4 sought to know the effectiveness of *Facebook* videos in promoting awareness of cervical cancer. In the Table, the respondents were of the opinion that *Facebook* videos are effective in promoting awareness of cervical cancer as 340 (100%) of the respondents agreed that *Facebook* videos reduce or eliminate apprehension and misconceptions people have about cervical cancer, increase awareness in places where one is most vulnerable about cervical cancer and generally enlightened the public about cervical cancer. This means that Facebook videos designed to create awareness of cervical cancer are effective.

Table 5: Challenges Faced by Respondents in accessing Facebook Videos Cervical Cancer

Options	Frequency	Percentage
High cost of devices that house Facebook videos	38	11
High cost of data	42	12
Fluctuating and frustrating network	59	17
Pop-ups and in-video advertising during viewership of videos	201	59
Geographical restrictions		
Technical issues		
Total	340	100

Source: Field Survey, 2024.

Data in Table 5 provide us with insights into the challenges faced by Makurdi residents in accessing *Facebook* videos cervical cancer. The respondents 340 (100%) were of the various opinions that they face many challenges in accessing *Facebook* videos on cervical cancer which include; high cost of devices that house *Facebook* video; high cost of data; fluctuating and frustrating network; pop-ups and in-video advertising during viewership of videos; geographical restrictions of some videos and other technical issues. This implies that though *Facebook* videos are effective in promoting health awareness on cervical cancer, they are not without challenges.

Table 6: Ways *Facebook* Users can overcome the Challenges faced in accessing *Facebook* Videos of Cervical Cancer

Options	Frequency	Percentage
Improve internet speed	68	20
Download videos instead of watching it online	77	23
Use VPN services	60	18
Check video settings	63	19
Clear cache and update the app	72	20
Total	340	100

Source: Field Survey, 2024.

Data in Table 6 give insights into ways *Facebook* users can overcome the challenges faced in accessing *Facebook* videos of cervical cancer. In the Table, 340 (100%) of the respondents were of the various opinions that the changes can be overcome by improving internet speed as users can switch to a faster internet connection, upgrade their data plans, or connect to Wi-Fi networks for a better and smoother video streaming experience; downloading videos as *Facebook* allows users to download videos to watch them offline later. By downloading videos when connected to a stable internet connection, users can bypass slow internet speeds or data limitations. Other respondents were of the opinion that users should use VPN services for videos that are geographically restricted. That is if a video is geographically restricted, users can use Virtual Private Network (VPN) services to access video content from different locations or regions; just as others advocate for checking video settings, that is, users could ensure that video auto play settings are properly configured in the *Facebook* app or website. Adjusting auto play settings can prevent unwanted data consumption or unexpected video playback; as others advocated for clearing cache and updating the app, that is clearing the cache and updating the *Facebook* app to the latest version can resolve technical issues, improve video playback performance, and ensure compatibility. This means that Facebook users can actual overcome the challenges they face in viewing Facebook videos on cervical cancer.

Discussion of Findings

Based on the research questions answered, the following emerged as specific findings of the study: Findings show that the sources of *Facebook* videos come from various individuals and organization that have something to do with cervical cancer such as the World Health Organization, federal and state ministries of health as well as foundations established for the purpose of cervical cancer. This is attested to by (30%) of the respondents who agreed that the videos come from organizations concerned with cervical cancer, (28%) of the respondents opined that the videos come from individuals infected or affected with cervical cancer, (22%) of the respondents accepted that the video come from the World Health Organization, and (20%) of the respondents corroborated that the videos come from federal and state ministries of health. This study is also supported by Ching-Yi Lai, and Shu-Yuan Liang's (2014) study which found that *Facebook*-assisted discussion method was more effective than the in-person discussion.

Findings also show that the type of *Facebook* videos are: native videos; illustrative videos on cervical cancer; live videos on cervical cancer; videos of current events on cervical cancer as type of Facebook video; dance videos on cervical cancer, as well as inspirational videos on cervical cancer that appear in the form of discussion videos/documentaries, news videos, drama videos,

news commentary videos and interview videos on cervical cancer. This corroborated by (29%) of the respondents who identified native videos as a type of Facebook video on cervical cancer, (25%) the respondents who identified illustrative videos on cervical cancer, (16%) of the respondents who agreed with live videos on cervical cancer, (12%) of the respondents who accepted videos of current events on cervical cancer as type of Facebook video, (9%) agreed who with dance videos on cervical cancer, and another (9%) who went with inspirational videos on cervical cancer. This study is supported by Ikechukwu, Nnenna, Nwimo and Onwunaka (2015) whose study found that HPV awareness can be increased through brief participation in an online social media platform and receipt of tailored health messages. The study concluded that further investigation that explores how social media can be used to improve knowledge and adoption of healthy behaviours related to cervical cancer is warranted.

Findings further show that Facebook videos are effective in creating awareness of cervical cancer. This is supported by 100%) of the respondents who agreed that Facebook videos reduce or eliminate apprehension and misconceptions people have about cervical cancer, increase awareness in places where one is most vulnerable about cervical cancer and generally enlightened the public about cervical cancer. This study is further supported by Adekoya, Chinwe and Chinanu-Akpuh (2021) study which found that frequent exposure to health based video drama is effective means of enlightening the rural women on breast cancer concerns, while recommending it application on regularly basis.

Findings also show that the challenges Facebook users face in accessing Facebook videos on cervical cancer are; high cost of devices that house Facebook video; high cost of data; fluctuating and frustrating network; pop-ups and in-video advertising during viewership of videos; geographical restrictions of some videos and other technical issues. This is attested to by (100%) respondents who were of the various opinions that they face many challenges in accessing Facebook videos on cervical cancer which include; high cost of devices that house Facebook video; high cost of data; fluctuating and frustrating network; pop-ups and in-video advertising during viewership of videos; geographical restrictions of some videos and other technical issues. Findings also show that the changes can however be overcome by improving internet speed as users can switch to a faster internet connection, upgrade their data plans, or connect to Wi-Fi networks for a better and smoother video streaming experience; downloading videos as Facebook allows users to download videos to watch them offline later. By downloading videos when connected to a stable internet connection, users can bypass slow internet speeds or data limitations. Other respondents were of the opinion that users should use VPN services for videos that are geographically restricted. That is if a video is geographically restricted, users can use Virtual Private Network (VPN) services to access video content from different locations or regions; just as others advocate for checking video settings, that is, users could ensure that video auto play settings are properly configured in the Facebook app or website. Adjusting auto play settings can prevent unwanted data consumption or unexpected video playback; as others advocated for clearing cache and updating the app, that is clearing the cache and updating the Facebook app to the latest version can resolve technical issues, improve video playback performance, and ensure compatibility.

Conclusion

Based on the research discussion, this study concludes that Facebook videos are designed and used in promoting awareness of cervical cancer and the videos have been found to be effective in the creation of awareness on cervical cancer as the videos were found to reduce or eliminate

apprehension and misconceptions people have about cervical cancer, increase awareness in places where one is most vulnerable about cervical cancer and generally enlightened the public about cervical cancer.

Recommendations

Based on the findings from this study and findings of other empirical studies reviewed in this study, the research makes the following recommendations:

- i. To improve internet speed, users can switch to a faster internet connection, upgrade their data plans, or connect to Wi-Fi networks for a better and smoother video streaming experience;
- ii. Download videos as *Facebook* allows users to download videos to watch them offline later. By downloading videos when connected to a stable internet connection, users can bypass slow internet speeds or data limitations.
- iii. Use VPN services for videos that are geographically restricted. That is if a video is geographically restricted, users can use Virtual Private Network (VPN) services to access video content from different locations or regions
- iv. Check video settings, that is, users could ensure that video autoplay settings are properly configured in the *Facebook* app or website. Adjusting autoplay settings can prevent unwanted data consumption or unexpected video playback
- v. Facebook users should often clear cache and updating the app, that is clearing the cache and updating the *Facebook* app to the latest version can resolve technical issues, improve video playback performance, and ensure compatibility.

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