

**THE ROLE MEDIA PLAYS IN PROMOTING AWARENESS ON THE
PREVENTION OF CANCER IN KAMPALA METROPOLITAN: A CASE STUDY
OF
NEW VISION UGANDA**


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**A RESEARCH REPORT SUBMITTED TO THE FACULTY OF JOURNALISM AND
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DECLARATION

I hereby declare that this research report is due to my own knowledge, effort and it has never been submitted by any other person for a degree or diploma in any institution of higher learning.

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APPROVAL

This research report on **The Role Media of in Promoting Awareness on the Prevention of Cancer in Kampala Metropolitan; A Case Study of New Vision Uganda** has been submitted with my approval as a university supervisor

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CHAPTER ONE: INTRODUCTION

1.0 Introduction

This chapter also covers the background, the problem statement, major and specific objectives, research questions, scope of the study, significance, justification of the study, and definition of key terms.

1.1 Background of the study

In high-income and many emerging economies, the popular media, through a variety of media formats (web, print, television and so on), plays an integral role in influencing the public's awareness and perception of cancer (Passalacqua R et al., 2004). The media purport to provide information that is focused, relevant, and easily understandable, enabling the wider public to identify applicable risk factors and adopt healthy lifestyles and choices, as well as promote research into cancer (directly benefiting charitable funders). This, in turn, can modulate the time lag between symptoms to diagnosis and therefore survival rates (Williamson JM., 2011) However, positivism around the media's role in cancer has been seriously challenged.

Scholars agree that media awareness campaigns should be seen as the cornerstone for health communication interventions. This is because of the myriad of communication techniques and channels that could be used to increase awareness and knowledge of health problems and interventions (Kreps & Sivaram, 2009; DeJong, 2010; Obono, 2011). Day (2011) opines that media awareness campaigns "are varied, multifaceted, highly planned and strategically assembled media symphonies designed to increase awareness, inform, or change behavior in target audiences" (p.79).

Thus, media awareness campaigns are planned communication techniques that are designed to suit target groups in order to tackle diseases and health challenges that negatively affect individuals in the society. Interestingly, DeJong (2010) argues that media awareness campaigns are also known as information campaigns, which are used to raise awareness of health problems, usually with the intent of motivating people to avoid the problems.

Okorie, Oyesomi and Kayode (2014) reasoned that the effective use of media awareness campaigns to promote cancer care recognizes the actual and potential roles of the print media and interpersonal channels. It is also believed that print media channels have the power to

reach and inform large audiences, while interpersonal channels have been more influential in motivating attitudinal change.

Breast cancer is the most common diagnosed cancer in women globally and the second most common cancer in the world. (Azenha, Bass, Caleffi, Smith, Pretorius, Durstine and Perez, 2011; Parkin, Bray, Ferlay and Pisani, 2005; Okobia, Bunker, Okonofua, and Osime, 2006) Its attacks on women is reported to be three times higher in developed parts of the world than in less developed parts, but the death toll is greater in less developed regions (Azenha et al, 2011),

It is however a cancer that originates from breast tissue; hence it is regarded as a cancer of the glandular tissue of the breast. Though the disease is confirmed to be found both in male and female patients, yet the incidence is hundred times more in women than in men. (Russel 2007). Breast cancer is therefore a proliferation of breast cells that is characterized by an abnormal growth and division of the cells to the destruction of the surrounding tissues through the filtration of the cancerous cells into the blood stream (Medical Women's Association of Nigeria, 2011).

However, breast cancer is mostly detected by a painless lump or mass of tissues called tumors, with genetic mutations and age, among the risk factor. (Blugs, Cummings, Spencer, and Palladino, 2009). Historically, according to Russel (2007) breast cancer may be one of the oldest known forms of cancerous tumors in women in Egypt and it dates back to approximately 1600BC. It was first noted and recorded as tumors or ulcers of the breast. During that time, Edwin, Papyrus described eight cases of tumors or ulcers of the breast that were treated by cauterization as 'there is no treatment'. This treatment by cauterization was done with a tool called 'Firedrill'. For centuries, physicians described similar cases in their practices with the same conclusion. It was not until doctors achieved greater understanding of the circulatory system in the 17th century, that they could establish a link between breast cancer and the lymph nodes in the armpit. However, the French surgeon, Jean Lewis Petit (1674 – 1750) and Scottish Surgeon, Benjamin Bell (1749 – 1805) were the first to remove the lymph nodes, breast tissue and chest muscle in an effort to save women from breast cancer. Their successful works were carried on by William Stewart, who started performing mastectomies in 1882. The Halsted radical mastectomy often involved removing both breast associated with the lymph nodes and the underlying chest muscle. This often led to a long term pain and disability, but was seen as necessary, in order to prevent the cancer from

reoccurring. Radical mastectomy therefore remained the standard until in the 1970s, when a new understanding of metastasis led to perceiving cancer as the system illness as well as a localized one. (Rusel, 2007).

Moreover, following the global trend, the incidence and mortality of breast cancer constitute a major public health issue. In the view of the World Health Organization and International Union against Cancer (2005), breast cancer comprises 10.45% of all cancer incidence among women, making it the second most common type of non-skin cancer (after lung cancer) and the fifth most common causes of cancer deaths.

For instance, it was observed in 2004, that the ailment claimed 579,000 lives worldwide. This is evident in Pakistan, an Asian country, which has the highest rate of breast cancer, for any Asian population accounting for 40,000 deaths per year. It is therefore approximated that 35% of Pakistani women suffer from breast cancer at some points in their lives. Every fifth woman, after the age of 40, develops the disease, 77%, after the age of 50, develop invasive breast cancer. (Pielle, 2005). Similarly, it was also reported that it is the most prevalent cancer in American women who have a one to eight lifetime chance of developing the tumour/lump, coupled with 3% chance of the disease causing their death. (Russel, 2007).

Breast cancer in Uganda is the third commonest cancer in women coming only next to cancer of the cervix and Kaposi's sarcoma. The incidence of breast cancer in Uganda has doubled from 11:100,000 in 1961 to 22:100,000 in 1995. Unfortunately the cases are often seen in late stages thus the outcome of treatment is inevitably unsatisfactory. The present day knowledge of this disease does not have any effective primary prevention. It is thus imperative that efforts should be made to detect the disease in its early stages. Mammography has been found to be useful but it is not applicable as a means of mass screening in Uganda (there are only 2 mammography units in Uganda. Public education towards Breast Self Examination (BSE) should be propagated because it is practical and affordable.(African Health Sciences, 2003).

It is against this backdrop, that the media campaigns have indeed been identified as vital strategies to be employed in achieving a much needed quick and prompt compliance from women in the struggle to combat the onslaught of breast cancer. In other words, effective media campaigns for early presentation of breast cancer by women will make the 90 per cent chances of surviving breast cancer a reality.

Media campaigns can therefore be seen as a series of measures taken to influence attitudes and opinions. It can be of short duration or over long periods. They are widely employed to

expose high proportion of large population to messages through existing media such as billboards, radio, television, magazine, newspaper, internet, et cetera. (Wakefield, Loken & Hornik, 2010).

It is believed therefore, that if media campaigns are properly designed and executed, following 'Coffman's (2002) characteristics of effective campaign of delivering understandable and credible messages, capturing the right audience attention and dissemination of messages that are capable of influencing or causing a change in the audience attitudes, will form a major link in the communication processes geared towards achieving attitude or behavioural changes.

1.2 Statement of the Problem

Cancer is one of the deadly diseases that has threatened the world. According to WHO (2005), about 12.5% of all deaths globally are caused by cancer, with the percentage more than the percentage of deaths caused by HIV/AIDS, tuberculosis, and malaria put together. Therefore, the increase in the attacks and deaths of women with breast cancer in Kampala metropolitan poses a pertinent question on the effect of cancer campaigns on people as regards their poor responses to early presentation of cancer. It is in view of the above and given the confirmation of American Cancer Society (2007) that cancer especially breast cancer deaths remain preventable at the early stage, that the researcher critically attempts to evaluate the effectiveness of the media campaign programmes on cancer, in causing a quick and prompt positive changes of the people in performing their Breast Self-Examination and Clinical Breast Examination for the reduction in their mortality rate.

1.3 General objective

To examine the role media play in promoting awareness in the prevention of cancer in Kampala Metropolitan; a case study of New vision Uganda.

1.3.1 Specific objectives

To explore the common types of cancer covered by media

To identify the common media platforms used in creating awareness in the prevention of cancer

To examine the contribution of media in creating awareness in the prevention of cancer

1.4 Research questions

What are the common types of cancer covered by media?

What are the common forms of media that can be used in creating awareness in the prevention of cancer?

What is the contribution of media in creating awareness in the prevention of cancer?

1.5 Scope of the study

1.5.1 Geographical Scope

The study was carried out in New Vision Uganda. New Vision is one of two main national English-language newspapers in Uganda, the other being the Daily Monitor. It is published by the Vision Group, which has its head office on First Street, in the Industrial Area of Kampala, Uganda's capital and largest city in that East African country.

1.5.2 Content scope

The subject scope was limited on examining the role media plays in promoting awareness on the prevention of cancer in Kampala Metropolitan; a case study of New vision Uganda. It explored the common types of cancer covered by media, the common forms of media that can be used in creating awareness in the prevention of cancer and the contribution of media in creating awareness in the prevention of cancer.

1.5.3 Time Scope

The research was conducted with in a period of seven months. That is February, 2018 to August, 2018.

1.6 Significance of the study

1. This study has both theoretical and practical significance. Theoretically, it will contribute to the articulation of the media campaign role in solving the problem of cancer.
2. It will serve as a data base to mass communication researchers who may be interested in learning the global fight on cancer and future researchers, who may embarking on similar research in future.

3. It practical will serve as a document for government and non-governmental organizations, policy makers and media campaigns planners in the field of breast cancer.

1.7 Definitions of key terms

Media Campaigns

Media campaigns are intensive and organized form of persuasive communication sponsored by an authority and packaged in the form of jingles, commercials, press release, articles, news stories, and dramas and so on. These are published or disseminated through the various mass media like newspaper, radio, television or internet, to the different targeted audiences, with the mind to sensitize and mobilize the people into action or towards a desired goal.

Women Responses/Compliance

Women's responses are the way and manner the women who are exposed to the media campaigns programmes or who are reached with the media campaigns messages react or respond to the messages, to performing breast self examination (BSE) or clinical breast examination (CBE) or acting otherwise.

Print media; means of mass communication in the form of printed publications, such as newspapers and magazines.

Creating Awareness: It means making it known to the public or popular.

Mass Media: These are means of communication to a larger audience. These are represented by radio, television, newspaper and magazine.

Media: It refers to various means of communication.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter consists of subject of the study and it is based on the findings of other researchers in regard to their scholarly views and opinions and this chapter is sectioned according to the specific objectives of the study.

2.1 Context: the rising tide of cancer

Cancer is a major public health issue in our society. Currently, one in four deaths in the United States is due to cancer (Siegel R, et al., 2011). A total of 1,596,670 estimated new cancer cases and 571,950 cancer-related deaths occurred in the United States in 2011 (Siegel R, et al., 2011). Early detection of cancer greatly increases the chances for successful treatment. There are two major components of early detection of cancer: 1) education to promote early diagnosis (e.g. education on early signs of cancer such as lumps, sores that fail to heal, abnormal bleeding, persistent indigestion, and chronic hoarseness) and 2) screening, which refers to the use of simple tests across a healthy population to identify individuals who have the disease, but do not yet have symptoms (WHO, 2013).

Even though screening is paramount for early detection of cancer, people remain largely under-screened (Vedel I et al., 2011). This under-screening can be linked to patients' lack of knowledge or awareness of screening tests and their lack of motivation to undergo screening (Meissner HI et al., 2007). Thus, increased awareness of possible warning signs of cancer and the existence of and benefits to screening among the general public can have a great impact on the disease trajectory.

There are many decisions that need to be made by both clinicians and patients with regards to screening or cancer treatment options. Many guidelines thus point out the importance of informed decision-making in cancer screening (Smith RA et al., 2009). Since there is no "best" option for everyone, decisions are defined as being of higher quality when they are informed with the latest scientific evidence and are based on patients' informed values associated with outcomes of the treatment options. However, clinicians are not good judges of patients' values, and patients often have inadequate knowledge, unrealistic expectations, and decisional conflicts that interfere with their involvement in decision making (Stacey D et

al., 2008). At the same time, it is recognized as important to support patients with day-to-day problems associated with cancer and treatment (Carlson LE, et al., 2012); this information and support can help friends and relatives cope with different stages of the illness better (Foster C, 2010).

The use of the print media in creating awareness: the print media can serve as an effective way to create awareness, or to remind the public of critical information about cancer. The print media are unique in being able to quickly reach a mass audience with a standard message. The print media can thus create awareness of an innovation and may be able to provide “how-to” information. For example, magazines and specialized journals can publish photo reports on how women can engage in breast self-examinations. Based on one of the constructs of the health belief model, young women can receive reminder cues to action in the form of pamphlets that create awareness of breast cancer. Furthermore, newspapers and magazines can apply the agenda-setting function in publishing news reports of breast cancer on the front and back pages. In addition, public service advertisements on breast cancer can be published at vital parts of the front and back pages.

The use of rural community newspaper: We have international and national newspapers and magazines, yet there is a dire need for rural community newspapers. Soola (2003) declares that “a rural /community newspaper is a regular publication which carries news stories, features, editorials, illustrations, and pictures, as well as advertisements for rural and urban people. It is put together and published by rural folks in their own place...” (p. 58). Rural community newspapers have a great potential for stimulating literacy and social development and for helping to integrate rural dwellers into national life. There are various rural newspapers in Nigeria published in the local languages of the people in their various communities. Breast cancer issues can be published in the forms of news reports, articles, and editorials as they relate to rural circumstances to aid understanding, assimilation, and ultimately create the needed knowledge in the rural areas to aid the prevention of cancer.

2.1.2 Media

The term media is defined as “one of the means or channels of general communication in society, as newspapers, radio, television etc.” (Dictionary.com, 2015)

The beginning of human communication through designed channels, i.e. not vocalization or gestures, dates back to ancient cave paintings, drawn maps, and writing.

The Persian Empire (centred on present-day Iran) played an important role in the field of communication. It has the first real mail or postal system, which is said to have been developed by the Persian emperor Cyrus the Great (c. 550 BC) after his conquest of Medes. The role of the system as an intelligence gathering apparatus is well documented, and the service was (later) called *angariae*, a term that in time turned to indicate a tax system. The Old Testament (Esther, VIII) makes mention of this system: Ahasuerus, king of Medes, used couriers for communicating his decisions.

The word communication is derived from the Latin root *communicare*. This was due to the Roman Empire also devising what might be described as a mail or postal system, in order to centralize control of the empire from Rome. This allowed for personal letters and for Rome to gather knowledge about events in its many widespread provinces. More advanced postal systems later appeared in the Islamic Caliphate and the Mongol Empire during the Middle Ages.

The term media in its modern application relating to communication channels is traced back to its first use as such by Canadian communications theorist Marshall McLuhan, who stated in *Counterblast* (1954): "The media are not toys; they should not be in the hands of Mother Goose and Peter Pan executives. They can be entrusted only to new artists, because they are art forms." By the mid-1960s, the term had spread to general use in North America and the United Kingdom. (Mass media, in contrast, was, according to H.L. Mencken, used as early as 1923 in the United States.) (John Robert Colombo, 1994)

2.2 The common types of cancer covered by media

Lung cancer

Lung cancer, also known as lung carcinoma, is a malignant lung tumor characterized by uncontrolled cell growth in tissues of the lung. This growth can spread beyond the lung by the process of metastasis into nearby tissue or other parts of the body. Most cancers that start in the lung, known as primary lung cancers, are carcinomas. The two main types are small-cell lung carcinoma (SCLC) and non-small-cell lung carcinoma (NSCLC). The most common symptoms are coughing (including coughing up blood), weight loss, shortness of breath, and chest pains. (Horn L, 2015).

The vast majority (85%) of cases of lung cancer are due to long-term tobacco smoking. About 10–15% of cases occur in people who have never smoked. These cases are often

caused by a combination of genetic factors and exposure to radon gas, asbestos, second-hand smoke, or other forms of air pollution. Lung cancer may be seen on chest radiographs and computed tomography (CT) scans. The diagnosis is confirmed by biopsy which is usually performed by bronchoscopy or CT-guidance. (Lu C, Onn A, et al., 2010).

Avoidance of risk factors, including smoking and air pollution, is the primary method of prevention. Treatment and long-term outcomes depend on the type of cancer, the stage (degree of spread), and the person's overall health. Most cases are not curable. Common treatments include surgery, chemotherapy, and radiotherapy. NSCLC is sometimes treated with surgery, whereas SCLC usually responds better to chemotherapy and radiotherapy. (Chapman S, et al., 2014).

Worldwide in 2012, lung cancer occurred in 1.8 million people and resulted in 1.6 million deaths. This makes it the most common cause of cancer-related death in men and second most common in women after breast cancer. The most common age at diagnosis is 70 years. Overall, 17.4% of people in the United States diagnosed with lung cancer survive five years after the diagnosis, while outcomes on average are worse in the developing world. (Majumder S, 2009).

Breast cancer

Breast cancer is cancer that develops from breast tissue. Signs of breast cancer may include a lump in the breast, a change in breast shape, dimpling of the skin, fluid coming from the nipple, a newly inverted nipple, or a red or scaly patch of skin. In those with distant spread of the disease, there may be bone pain, swollen lymph nodes, shortness of breath, or yellow skin. (Saunders, et al., 2009)

Risk factors for developing breast cancer include being female, obesity, lack of physical exercise, drinking alcohol, hormone replacement therapy during menopause, ionizing radiation, early age at first menstruation, having children late or not at all, older age, prior history of breast cancer, and family history. About 5–10% of cases are due to genes inherited from a person's parents, including BRCA1 and BRCA2 among others. Breast cancer most commonly develops in cells from the lining of milk ducts and the lobules that supply the ducts with milk. Cancers developing from the ducts are known as ductal carcinomas, while those developing from lobules are known as lobular carcinomas. In addition, there are more than 18 other sub-types of breast cancer. Some cancers, such as ductal carcinoma in situ, develop from pre-invasive lesions. The diagnosis of breast cancer is confirmed by taking a

biopsy of the concerning lump. Once the diagnosis is made, further tests are done to determine if the cancer has spread beyond the breast and which treatments it may respond to. (NCI, 2014)

Cervical cancer

Cervical cancer is a cancer arising from the cervix. It is due to the abnormal growth of cells that have the ability to invade or spread to other parts of the body. Early on, typically no symptoms are seen. Later symptoms may include abnormal vaginal bleeding, pelvic pain, or pain during sexual intercourse. While bleeding after sex may not be serious, it may also indicate the presence of cervical cancer. (Tarney, et al., 2014)

Human papillomavirus infection (HPV) causes more than 90% of cases; most people who have had HPV infections, however, do not develop cervical cancer. Other risk factors include smoking, a weak immune system, birth control pills, starting sex at a young age, and having many sexual partners, but these are less important. Cervical cancer typically develops from precancerous changes over 10 to 20 years. About 90% of cervical cancer cases are squamous cell carcinomas, 10% are adenocarcinoma, and a small number are other types. Diagnosis is typically by cervical screening followed by a biopsy. Medical imaging is then done to determine whether or not the cancer has spread. (NCI, 2014)

Kidney cancer

Kidney cancer, also known as renal cancer, is a type of cancer that starts in the cells in the kidney.

The two most common types of kidney cancer are renal cell carcinoma (RCC) and transitional cell carcinoma (TCC) (also known as urothelial cell carcinoma) of the renal pelvis. These names reflect the type of cell from which the cancer developed.

The different types of kidney cancer (such as RCC and TCC) develop in different ways, meaning that the diseases have different long term outcomes, and need to be staged and treated in different ways. RCC is responsible for approximately 80% of primary renal cancers, and TCC accounts the majority of the remainder. (Mulders PF, 2008).

Overall five year survival rate in the United States is 73%. For cancers that are confined to the kidney, the five year survival rate is 92%, if it has spread to the surrounding lymph nodes it is 65%, and if it has metastasized, it is 12%. (NCL, 2016)

Prostate cancer

Prostate cancer is the development of cancer in the prostate, a gland in the male reproductive system. Most prostate cancers are slow growing; however, some grow relatively quickly. The cancer cells may spread from the prostate to other area of the body, particularly the bones and lymph nodes. It may initially cause no symptoms. In later stages, it can lead to difficulty urinating, blood in the urine or pain in the pelvis, back, or when urinating. A disease known as benign prostatic hyperplasia may produce similar symptoms. Other late symptoms may include feeling tired due to low levels of red blood cells. (National Cancer Institute, 2014)

Factors that increase the risk of prostate cancer include older age, a family history of the disease, and race. (World Cancer Report, (2014) About 99% of cases occur in males over the age of 50. Having a first-degree relative with the disease increases the risk two to threefold. In the United States, it is more common in the African American population than the White American population. Other factors that may be involved include a diet high in processed meat, red meat or milk products or low in certain vegetables. An association with gonorrhea has been found, but a reason for this relationship has not been identified. An increased risk is associated with the BRCA mutations. Prostate cancer is diagnosed by biopsy. Medical imaging may then be done to determine if the cancer has spread to other parts of the body. (National Cancer Institute, 2014)

Skin cancer

Skin cancers are cancers that arise from the skin. They are due to the development of abnormal cells that have the ability to invade or spread to other parts of the body. There are three main types of skin cancers: basal-cell skin cancer (BCC), squamous-cell skin cancer (SCC) and melanoma. The first two, along with a number of less common skin cancers, are known as nonmelanoma skin cancer (NMSC). Basal-cell cancer grows slowly and can damage the tissue around it but is unlikely to spread to distant areas or result in death. It often appears as a painless raised area of skin, that may be shiny with small blood vessel running over it or may present as a raised area with an ulcer. Squamous-cell skin cancer is more likely to spread. It usually presents as a hard lump with a scaly top but may also form an ulcer.

Melanomas are the most aggressive. Signs include a mole that has changed in size, shape, color, has irregular edges, has more than one color, is itchy or bleeds. (NCI, 2014)

2.3 The common forms of media that can be used in creating awareness in the prevention of cancer

The use of electronic media in creating awareness: The radio and television can be used in the vanguard of creating awareness of breast cancer. Effective broadcast media use requires that both program type and time of airing be given due consideration. In other words, radio and television use for breast cancer awareness must be targeted at peak periods or “primetime,” when most audience members stay tuned to their sets. In essence, the electronic media can apply its agendasetting function by spearheading a campaign that would create the awareness of breast cancer in the Nigerian society. For example, television can be used to set an agenda by creating awareness of breast cancer through scrolling messages on primetime news bulletins and programs. The radio can also be used to set an agenda by introducing musical commercials about breast cancer during prime-time periods. Furthermore, the television can be used to create cues to action by showing documentaries that focus on the nature, causes, and consequences of breast cancer. Also, a program could feature an episode in which a character gets cancer, which could help to enlighten and educate persons on the nature and causes of breast cancer.

The use of community media: The Asia Institute of Journalism (1983) defines community media as those media that are developed and managed by people who share common values and aspirations in a small, geographically defined area and that promote access and participation for development. Community media are essential to bridge the gaps in knowledge between literate and illiterate people, as well as the appreciable differences in learning in both urban and rural settings. Community media comprises rural community newspapers, community radios, and community viewing centers. Community media provide alternative channels through which people’s needs and interests can be articulated.

The use of rural community newspaper: We have international and national newspapers and magazines, yet there is a dire need for rural community newspapers. Soola (2003) declares that “a rural /community newspaper is a regular publication which carries news stories, features, editorials, illustrations, and pictures, as well as advertisements for rural and urban people. It is put together and published by rural folks in their own place...” (p. 58). Rural community newspapers have a great potential for stimulating literacy and social

development and for helping to integrate rural dwellers into national life. There are various rural newspapers in Nigeria published in the local languages of the people in their various communities. Breast cancer issues can be published in the forms of news reports, articles, and editorials as they relate to rural circumstances to aid understanding, assimilation, and ultimately create the needed knowledge in the rural areas to aid the prevention of breast cancer

The use of rural community radio: According to Ememaku (2003), a community radio is “a system of radio broadcasting whereby a community establishes, operates and manages a radio station for the ultimate objective of meeting the communication needs of its members” (p. 126). The content of community radio programs originates from the local community people; it is community-specific and situation-relevant. In addition, indigenous radio dramas can be used to educate people about the nature, causes, and consequences of breast cancer in Nigeria.

Community viewing centers: These are effective forums for explaining efforts of rural development to the rural populace. Onabanjo (2003) noted that the community viewing center is a controlled theater for imparting knowledge and also serves as a rallying point for people in rural areas to be adequately informed. Importantly, the effectiveness of the community viewing centers is in carefully selecting the materials to be viewed relative to the peculiar needs of a given local area. For example, the community viewing center can serve as a platform for showing documentary programs aimed at creating awareness of breast cancer. These documentary programs should be produced in the indigenous languages of the audiences.

2.4 The contribution of media in creating awareness in the prevention of cancer

There is wide agreement that awareness leads to knowledge, and knowledge leads to behavior modification (Rimal, 2000). Various theories and models acknowledge the importance of the print media in creating awareness in society. One such theory is the agenda-setting theory, which holds that the media have the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda. They can achieve this by choosing what stories to consider newsworthy and how much prominence and space they give those stories (Folarin, 1998). In other words, this theory explains that the print media through their presentations of event(s) and other kinds of information selected for publication ascribe prominence to the stories selected. The underlying assumption is that the print media force attention to certain

issues; they build up public images of political figures, they constantly present objects, suggest what we should think about, know about, have feelings about, agitate about, and eventually call for legislation about (McCombs & Shaw, 1972; Folarin, 1998; Anaeto, Onabajo, & Osifeso, 2008). However, Davis and Robinson criticized previous agenda-setting research for neglecting possible effects on what people think concerning who is important, where important things happen, and why things are important. In sum, the print media has the influence to pre-determine issues that people should be aware of in society. The precaution adoption model also recognizes that the media plays a major role in disseminating information and raising awareness. According to this theory, awareness is an essential component that moves an individual in various stages. For example, stage one stresses when an individual becomes aware of a health issue; stage two focuses on when an individual decides to act or not to act. In stages three and four, the individual either acts or does not (Weinstein and Sandman, 2002).

The print media not only informs individuals about health issues, but its message can also be used to influence individuals to action. The diffusion of innovation theory holds that the print media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behavior. Similarly, one of the major constructs of the health belief model is the cue to action that helps trigger a particular behavior. A cue to action is something that helps move someone from wanting to make a health change to actually making the change. These cues to action range from bodily events to environmental factors that stimulate an individual to act. The health belief model recognizes media campaign and promotion as one of the effective environmental cues to action (Janz, Champion, & Strecher, 2002). It should be noted that the knowledge gap theory proposes that there can be appreciable differences in learning as a result of exposure to media information. Individuals with distinct backgrounds frequently demonstrate differential learning from the print media. Individuals with prior information to media and higher education frequently learn more when exposed to media information. In contrast, individuals with lower education and less prior information tend to learn less, thus representing an increase in the knowledge gap.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter presents the methodology that was used in the study. This chapter covers the research design, area of the study, population of the study, sample size, sampling procedure, and sources of data, data collection techniques, and analysis. It further presents data quality control as well as research procedure, research ethics that were considered in this study. Finally, limitations and de-limitations of this study were discussed.

3.1 Research Design

A research design is an arrangement of conditions for collection and analysis of data in a manner that aims to combine relevance to the research purpose with economy in procedure (Fred, 2009). The researcher used a case study research design so as to collect and present data. A case study research design is an approach for collecting data aimed at exploring in depth analyses. Data was obtained through structured interview; structured question with both closed and opened ended questions. This involved qualitative and quantitative research methods.

3.2 Area of Study

The study was carried out in New Vision Uganda. New Vision is one of two main national English-language newspapers in Uganda, the other being the Daily Monitor. It is published by the Vision Group, which has its head office on First Street, in the Industrial Area of Kampala, Uganda's capital and largest city in that East African country.

3.3 Study Population

Mugenda (2003), referred to population as “an entity group of individuals, events, or objectives having common observable characteristics”. A sample size of 75 respondents was considered in the study. These included 60 community members (both male and female), 3 journalists, 4 editors, 4 media houses and 4 officials from the ministry of communication.

3.4 Sample size and selection

3.4.1 Sampling

Sampling is a process of selecting elements from the population such as a way that the sample elements represent the population (Martin, 2005). The researcher used non random sampling techniques because the design is both qualitative and quantitative. And under the probability approach the study employed simple random sampling to select respondents in order for every member in the study population to get an equal chance to be selected. In the non-probability sampling, purposive sampling technique were employed to select respondents who are knowledgeable about the topic. This is because the technique is cheap, easy to identify the respondents.

3.4.2 Sample Size

Sekaran, (2003) contends that a sample size is a subject of the population. From the study a sample size of 75 respondents were considered in the study. This population composition was selected with great expectation about their knowledgeableness and concern on the study variables in the region which helped in acquiring relevant and genuine responses to the study questions that were probed to them for ripostes and responses.

3.5 Source of data

Primary Data

Primary data was obtained through questionnaires, interviews and during focused group discussions. This is important because it captures first-hand information from the source and host (Someth, et al. 2005).

Secondary Data

This was obtained through documentary review whereby literature on related studies were analyzed and presented. The method is useful as it complements with primary data sources (Someth, et al. 2005).

3.6 Data Collection techniques

The study employed a combination of methods including questionnaires and interviews. These are discussed in details below;

3.6.1 Questionnaires

These are self-administered questions that are both structured and semi structured formalized questions used in the survey to collect information which is later analyzed to provide results necessary for solving a given research problem. The research will use self-administered questionnaires. These are expected to allow respondents to choose from alternative that were provided by the researcher and also answer the dash essayed questions targeted to achieve personal opinions of the respondents.

3.6.2 Interviews

Interviews with the study respondents were conducted in order to get their information on the study. This method is very important in that it allows the respondents to clearly give out their views clearly with confidence and narration (Kothari, 2004).

3.7 Data Analysis and interpretation

The data collected was edited for accuracy, completeness in order to find out how well the questionnaires were answered and this was done in line with the questionnaires. The edited data was coded.

Coding involved assigning numbers to similar questions in order to get unique answers and thus make the work easier. In this case SPSS (Statistical Package for Social Scientists) was used to analyze the coded data.

Presentation of data involved use of tables that were generated from the questions relevant to the study variables. Interpretation and discussion of the results were done as the researcher explained the strength of the study variables basing on the frequencies

3.8 Research Procedure

The researcher developed the idea and formulated the research title on the problem. Then a proposal prepared was taken for approval by Institute Supervisor for further proceedings. Once approved, the researcher attained an introductory letter from the head of department St. Lawrence University. This letter was presented to the selected respondents and served as conformance on the academic propose of the study. After data collection was done and then editing followed to eliminate errors thus presentation of the final dissertation.

3.9 Research Ethical Consideration

To ensure ethics of research in this study,

- a) The researcher explained the purpose of the study with a consent paper.
- b) Kept a representable and professional attitude in the field.
- c) Pledged total confidentiality and deliver on the promise.
- d) Interpersonal respect and fairness in moderating the participants.

3.10 Limitations of Research

During the study, the researcher experienced a couple of challenges however, he sought ways of dealing with them as discussed bellowed;

Financially, the research proved expensive in terms of costs e.g. printing, binding, transport since the researcher has no source of income, the researcher sought for funds from family and friends so as to finance the study

The researcher faced a challenge of expanding technical terms to the respondents. However, during the design of the questionnaires, simple and understandable language which was easily understood by the respondents was used.

Also, the question of time was a serious constraint in the bid of accomplishing this study. Since the study was required to be done coherent with lectures, course works among other academic routines this made the study a bit challenging; the researcher however worked his way around the clock to accomplish this study by creating time on the weekends and evenings to ensure that the study is completed on time.

There was also high levels of confidentiality in Most of the stakeholder institutions that the researcher visited as well as bias from the respondents, the researcher always had to present the Introductory letter to the various institutions and persons he visits so as to access information in most cases.

CHAPTER FOUR

DATA ANALYSIS, INTERPRETATION AND PRESENTATION OF THE FINDINGS

4.0 Introduction

The study examines the role media play in promoting awareness in the prevention of cancer in Kampala Metropolitan; A case study of New vision Uganda. The study adopted three research objectives which included exploring the common types of cancer covered by media, identifying the common media platforms used in creating awareness on preventive measures against cancer and examining the contribution of media in creating awareness on preventive measures against cancer. The study presents research findings; analysis and interpretation of data collected on study objectives.

The response rate was 80% because 75 respondents actually participated in questionnaires out of the 60 which was the sample size. This response rate was good since it was above the recommended 60% response rate as per Guttman Institute, (2006) which states that for a study to be considered with good results it should have a response rate that is not less than 60% in the overall study. The study results can therefore be relied upon for academic and non-academic purposes by readers and users.

4.1 Background information of respondents

To establish the background characteristics of the respondents, the study focused on gender of respondents, age bracket, level of academic qualification, position held, and work experience. The study looked at the gender of respondents as this helped to establish the majority sex of respondents that participated in the study and the age group gave an overview on peoples' experience, level of academic qualification helped to establish whether respondents would give views that are relevant and useful to the study.

4.1.1 Gender of respondents

The study sought to establish the gender of respondents which was categorized as male and female. The Respondents were asked about their gender and the findings were analysed using descriptive statistics as presented below.

Table 1: Showing gender of respondents

	Frequency	Percent	Cumulative Percent
Female	20	33.3	33.3
Male	40	66.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table above shows that 66.7 % of the respondents were male and 33.3% were females. This implies that the males participated in giving information than females because the males were more enthusiastic about the topic and therefore indicating that more males than females work in media industry more so New vision Uganda.

4.1.2 Age of respondents

The research wanted to ascertain the age of respondents which is categorized as; 22-30 years, 31-50 years, 51-60 years, and above 60 years. The respondents were requested to indicate their age bracket and the findings were analysed using descriptive statistics and are presented below.

Table 2: Showing age of respondents

	Frequency	Percent	Cumulative Percent
22-30	11	18.3	18.3
31-50	39	65.0	83.3
51-60	6	10.0	93.3
Above 60	4	6.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table above, shows that the highest percentage of the respondents 65% fall in the age bracket of 31-50 years followed by 22-30 years at 18.3%, followed by those in age bracket of 51-60 at 10% and lastly the least number of respondents fell in the age bracket of above 60 years and represented 6.7%. The research shows that all age groups are catered for in the study.

4.1.3 Level of academic qualifications

The study sought to establish the education level of respondents which is categorized as Masters Level, Degree level, Diploma level, UACE certificate level and UCE certificate Level. The respondents were requested to indicate their education level and the findings were analysed using descriptive statistics and are presented as below:

	Frequency	Percent	Cumulative Percent
Masters	6	10.0	10.0
Degree	14	23.3	33.3
Diploma	32	53.3	86.7
UCE certificate	5	8.3	95.0
UACE certificate	3	5.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The results in table above shows that a big number of respondents are diploma holders at 53.3%, followed by degree holders at 23.3%, followed by those who had masters degrees at 10%, followed by those who had attained O' Level education at 8.3%, those with A' Level education represented 5%, and they represented the least number of respondents. The study implied that the research obtained information from respondents of considerable level of education and therefore they were in very much position to understand the study variables and respond appropriately as required by the researcher.

4.1.4 Position held by respondents

Respondents were further asked to reveal the positions held and their responses are presented in the table below;

	Frequency	Percent	Cumulative Percent
Executive officials	35	58.3	58.3
Employees	25	41.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study sought to find out the position held by the respondents. According to the findings, 58.3% of the respondents were executive officials while 41.7% were employees.

4.1.5 Work experience of respondents

	Frequency	Percent	Cumulative Percent
Less than 1 year	5	8.3	8.3
1-2 years	10	16.7	25.0
3-4 years	34	56.7	81.7
More than 4 years	11	18.3	100.0
Total	60	100.0	

Source: Primary data, 2018

From the study analysis in table 5 above, the largest number of respondents representing 56.7% of the total respondents have spent 3-4 years at New Vision company, followed by those who have been at the company for more than 4 years at 18.3%, those who had work experience between 1-2 years represented 16.7% of the respondents and lastly the least number of respondents have been at the company for less than 1 year at 8.3%. This implied that the respondents were more experienced about the study topic basing on the time spent at the New vision Uganda Company.

4.2 Findings on the common types of cancer covered by media

Table 3: Showing responses on whether breast cancer is one the common types of cancer covered by media

	Frequency	Percent	Cumulative Percent
SD	3	5.0	5.0
D	4	6.7	11.7
N	5	8.3	20.0
A	27	45.0	65.0
SA	21	35.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The analysis in table 6 above indicates that majority of the respondents agreed with the argument that breast cancer is one the common types of cancer covered by media accounting for 45% of the total respondents. These were followed by those who strongly agreed at 35%, those who were not sure about the argument were 8.3%, those who disagreed represented 6.7% and 5% strongly disagreed with the argument and represented the least number of respondents. This implied that breast cancer is one the common types of cancer covered by media since majority either agreed or strongly agreed with the argument.

Table 4: Showing responses on whether lung cancer is a type of cancer covered by the media

	Frequency	Percent	Cumulative Percent
SD	7	11.7	11.7
D	6	10.0	21.7
N	3	5.0	26.7
A	17	28.3	55.0
SA	27	45.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 7 above shows that majority of the respondents strongly agreed with the argument that lung cancer is a type of cancer covered by the media and were represented by 45% of the total respondents, they were followed by those who agreed with the argument at 28.3%, next came those who strongly disagreed at 11.7%, followed by those who disagreed with the argument at 10% and lastly the least number of respondents decided to remain neutral with the argument at 5%. This implied that lung cancer is a type of cancer covered by the media since majority of the respondents either strongly agreed or agreed with the argument.

Table 5: Showing responses on whether kidney Cancer is also one the common types of cancer covered by media

	Frequency	Percent	Cumulative Percent
SD	4	6.7	6.7
D	8	13.3	20.0
N	4	6.7	26.7
A	25	41.7	68.3
SA	19	31.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 8 above indicates that the biggest number of respondents totalling 41% agreed with the argument that kidney Cancer is also one the common types of cancer covered by media, these were followed by those who strongly agreed with the argument at 31.7%, 13.3% of the respondents disagreed with the argument, 6.7% of the respondents strongly disagreed with the argument and equally those who chose to remain neutral about the argument also shared the same percentage of 6.7% and were the least number of the respondents. This implied that kidney Cancer is also one the common types of cancer covered by media since majority of the respondents either strongly agreed or agreed with the argument that kidney Cancer is also one the common types of cancer covered by media.

Table 6: Showing responses on whether prostate cancer is equally one of the common types of cancer covered by media

	Frequency	Percent	Cumulative Percent
SD	8	13.3	13.3
D	11	18.3	31.7
N	3	5.0	36.7
A	27	45.0	81.7
SA	11	18.3	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 9 shows that the largest number of respondents accounting for 45% of the total respondents agreed with the argument that prostate cancer is equally one of the common types of cancer covered by media, 18.3% agreed with the argument and equally those who disagreed with the argument tied at the same percentage of 18.3, 13.3% of the respondents strongly disagreed, whereas the least number of respondents representing 5% of the total respondents preferred to remain neutral as far as the argument is concerned. This implied that prostate cancer is equally one of the common types of cancer covered by media since majority of the respondents either agreed or strongly agreed with the argument.

Table 7: Showing responses on whether cervical Cancer is a type of cancer covered by the media

	Frequency	Percent	Cumulative Percent
SD	7	11.7	11.7
D	11	18.3	30.0
N	5	8.3	38.3
A	25	41.7	80.0
SA	12	20.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The study finding in table 10 above indicates that majority of the respondents representing 41% of the total respondents agreed with the argument that cervical cancer is a type of cancer covered by the media, 20% of the respondents strongly agreed with the argument, 18.3% of the respondents disagreed, 11.7% of the respondents strongly disagreed and the least number of respondents equaling 8.3% out the total respondents were not sure about the argument and therefore they preferred to remain neutral about the argument. This implied that cervical cancer is a type of cancer covered by the media since majority of the respondents either strongly agreed or agreed with the argument.

Table 8: Showing responses on whether skin cancer is a common type of cancer covered by the media

	Frequency	Percent	Cumulative Percent
SD	4	6.7	6.7
D	8	13.3	20.0
N	4	6.7	26.7
A	28	46.7	73.3
SA	16	26.7	100.0
Total	60	100.0	

Source: Primary data, 2018

From table 11 above, the study findings reveals that the biggest number of respondents equaling to 46.7% agreed with the argument that skin cancer is a common type of cancer covered by the media, 26.7% of the respondents strongly agreed, 13.3% of the respondents disagreed with the argument, 6.7% of the respondents preferred to remain neutral alongside those who strongly disagreed with the argument and they represented the least number of respondents. This implied that skin cancer is a common type of cancer covered by the media since majority of the respondents either strongly agreed or agreed with the argument.

4.3 Findings on the common media platforms used in creating awareness on preventive measures against cancer

Table 9: Showing responses on whether print media is one of the common media platforms used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	5	8.3	8.3
D	8	13.3	21.7
N	3	5.0	26.7
A	25	41.7	68.3
SA	19	31.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 12 above shows that the largest number of respondents representing 41% of the respondents agreed with the argument that print media is one of the common media platforms used in creating awareness on preventive measures against cancer, 31.7% of the respondents strongly agreed, 13.3% of the respondents disagreed with the argument, 8.3% of the respondents strongly disagreed with the argument, 5% of the respondents decided to remain neutral and they represented the least number of respondents accounting. This implied that print media is one of the common media platforms used in creating awareness on preventive measures against cancer since majority of the respondents either agreed or disagreed with the argument.

Table 10: Showing responses on whether electronic media is commonly used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	4	6.7	6.7
D	9	15.0	21.7
N	2	3.3	25.0
A	36	60.0	85.0
SA	9	15.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 13 above reveals that majority of the respondents representing 60% of the respondents agreed with the argument that electronic media is commonly used in creating awareness on preventive measures against cancer, 15% of the respondents strongly agreed, 15% of the respondents disagreed, 6.7% of the respondents strongly disagreed while 3.3% and the least number of respondents were not sure about the argument. This implied that electronic media is commonly used in creating awareness on preventive measures against cancer since majority of the respondents strong agreed and agreed with the argument.

Table 11: Showing responses on whether internet is commonly used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	5	8.3	8.3
D	10	16.7	25.0
N	4	6.7	31.7
A	21	35.0	66.7
SA	20	33.3	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 14 above shows that the biggest number of respondents representing 35% of the respondents agreed with the argument that internet is commonly used in creating awareness on preventive measures against cancer, 33.3% of the respondents strongly agreed, 16.7% disagreed with the argument, 8.3% of the respondents strongly disagreed with the argument and the least number of respondents decided to remain neutral with the argument at 6.7%. This implied that internet is commonly used in creating awareness on preventive measures against cancer since the biggest number of respondents either agreed or strongly agreed with the argument.

Table 12: Showing responses on whether social media is among the common media platforms used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	8	13.3	13.3
D	11	18.3	31.7
N	5	8.3	40.0
A	23	38.3	78.3
SA	13	21.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 15 above indicates that the largest number of respondents accounting for 38.3% of the respondents agreed with the argument that social media is among the common media platforms used in creating awareness on preventive measures against cancer , 21.7% of the respondents strongly agreed with the argument, 18.3% disagreed with the argument, those who strongly disagreed represented 13.3% and 8.3% of the respondents decided to remain neutral and they represented the least number of respondents. This implied that social media is among the common media platforms used in creating awareness on preventive measures against cancer since majority of the respondents were in support of the argument.

Table 13: Showing responses on whether rural community radio is commonly used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	5	8.3	8.3
D	7	11.7	20.0
N	3	5.0	25.0
A	23	38.3	63.3
SA	22	36.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 16 portrays that the largest number of respondents representing 38.3% agreed with the argument that rural community radio is commonly used in creating awareness on preventive measures against cancer, 36.7% of the respondents strongly agreed, 11.7% of the respondents disagreed with the argument, 8.3% of the respondents strongly disagreed with the argument, and the least number of respondents chose to remain neutral at 5%. This implied that rural community radio is commonly used in creating awareness on preventive measures against cancer since the biggest number of respondents voted in favour of the argument.

Table 14: Showing responses on whether community viewing centers is commonly used in creating awareness on preventive measures against cancer

	Frequency	Percent	Cumulative Percent
SD	7	11.7	11.7
D	8	13.3	25.0
N	3	5.0	30.0
A	21	35.0	65.0
SA	21	35.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 17 above portrays that majority of the respondents accounting for 35% of the respondents strongly agreed and equally agreed respectively with the argument community viewing centers is commonly used in creating awareness on preventive measures against cancer, 13.3% of the respondents disagreed with the argument, 11.7% of the respondents strongly disagreed with the argument, while the least number of respondents preferred to remain neutral with the argument at 5%. This implied that community viewing centers is commonly used in creating awareness on preventive measures against cancer since majority of the respondents either strongly agreed or agreed with the argument.

4.4. Findings on the contribution of media in creating awareness on preventive measures against cancer

Table 15: Showing responses on whether the media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda

	Frequency	Percent	Cumulative Percent
SD	8	13.3	13.3
D	9	15.0	28.3
N	2	3.3	31.7
A	24	40.0	71.7
SA	17	28.3	100.0
Total	60	100.0	

Source: Primary data, 2018

The study analysis in table 18 above reveals that the biggest number of respondents accounting for 40% of the respondents agreed with the argument that the media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda, these were followed by those who strongly agreed with the argument at 28.3% of the total respondents, 15% of the respondents disagreed with the argument, those who strongly disagreed were 13.3%, while the least number of respondents preferred to remain neutral at 3.3%. This implied that the media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda since the biggest number of respondents either strongly agreed or agreed with the argument.

Table 16: Showing responses on whether the media force attention to certain issues; they build up public images of political figures, they constantly present objects

	Frequency	Percent	Cumulative Percent
SD	5	8.3	8.3
D	6	10.0	18.3
N	4	6.7	25.0
A	24	40.0	65.0
SA	21	35.0	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in the table 19 above shows that majority of the respondents representing 40% of the total respondents agreed with the argument that the media force attention to certain issues; they build up public images of political figures, they constantly present objects, these were followed by those who strongly agreed with the argument at 35%, next came in those who disagreed with the argument at 10%, 8.3% of the respondents strongly disagreed with the argument, and the least number of respondents accounting for 6.7% of the respondents remained neutral about the argument. This implied that the media force attention to certain issues; they build up public images of political figures, they constantly present objects since majority of the respondents were in agreement with the argument.

Table 17: Showing responses on whether the media has the influence to pre-determine issues that people should be aware of in society

	Frequency	Percent	Cumulative Percent
SD	6	10.0	10.0
D	7	11.7	21.7
N	4	6.7	28.3
A	27	45.0	73.3
SA	16	26.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 20 above reveals that the biggest number of respondents representing 45% of the respondents agreed with the argument that the media has the influence to pre-determine issues that people should be aware of in society, 26.7% of the respondents strongly disagreed, 11.7% of the respondents disagreed, 10% of the respondents strongly disagreed while the least number of respondents at 6.7% were not sure about the argument. This implied that the media has the influence to pre-determine issues that people should be aware of in society since majority of the respondents were in support of the argument.

Table 18: Showing responses on whether the media not only informs individuals about health issues, but its message can also be used to influence individuals to action

	Frequency	Percent	Cumulative Percent
SD	7	11.7	11.7
D	6	10.0	21.7
N	5	8.3	30.0
A	26	43.3	73.3
SA	16	26.7	100.0
Total	60	100.0	

Source: Primary data, 2018

The study findings in table 21 above shows that majority of the respondents accounting for 43.3% of the total respondents agreed with the argument that the media not only informs individuals about health issues, but its message can also be used to influence individuals to action, 26.7% of the respondents strongly agreed with the argument, 11.7% of the respondents strongly disagreed with the argument, 10% of the respondents disagreed with the argument, and the least number of respondents representing 8.3% of the respondents decided to remain neutral. This implied that the media not only informs individuals about health issues, but its message can also be used to influence individuals to action since majority of the respondents were in support of the argument.

Table 19: Showing responses on whether the media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behaviour

	Frequency	Percent	Cumulative Percent
SD	5	8.3	8.3
D	9	15.0	23.3
N	3	5.0	28.3
A	24	40.0	68.3
SA	19	31.7	100.0
Total	60	100.0	

Source: Primary data, 2018

From table 22 above, the study findings indicates that the largest number of respondents representing 40% of the respondents agreed with the argument that the media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behaviour, 31.7% of the respondents strongly agreed with the argument, those that disagreed with the argument were 15%, 8.3% strongly disagreed with the argument and the least number of respondents chose to remain neutral about the argument at 5%. This implied that the media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behaviour since majority of the respondents either strongly agreed or agreed with the argument.

Table 20: Showing responses on whether individuals with distinct backgrounds frequently demonstrate differential learning from the media

	Frequency	Percent	Cumulative Percent
SD	7	11.7	11.7
D	6	10.0	21.7
N	3	5.0	26.7
A	29	48.3	75.0
SA	15	25.0	100.0
Total	60	100.0	

Source: Primary data, 2018

From table 23 above, the study analysis indicates that the biggest number of respondents amounting to 48.3% of the total respondents agreed with the argument that individuals with distinct backgrounds frequently demonstrate differential learning from the media, 25% of the respondents strongly agreed with the argument, 11.7% of the respondents strongly disagreed, 10% of the respondents disagreed with the argument and the least number of respondents accounting to 10% were not sure about the argument. This implied that individuals with distinct backgrounds frequently demonstrate differential learning from the media since majority of the respondent were in support of the argument.

CHAPTER FIVE

SUMMARY CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

This chapter presents a summary of the findings on the role media play in promoting awareness in the prevention of cancer in Kampala Metropolitan; A case study of New vision Uganda. The findings presented in the previous chapter following the objective of the study on exploring the common types of cancer covered by media, identifying the common media platforms used in creating awareness on preventive measures against cancer and examining the contribution of media in creating awareness on preventive measures against cancer. The recommendations and suggestions for further research are also explored.

5.1 Summary of the findings

From the findings on the common types of cancer covered by media can be summarized as follows;

The analysis indicated that majority of the respondents agreed with the argument that breast cancer is one the common types of cancer covered by media accounting for 45% of the total respondents and 5% strongly disagreed with the argument and represented the least number of respondents.

The study analysis showed that majority of the respondents strongly agreed with the argument that lung cancer is a type of cancer covered by the media and were represented by 45% of the total respondents, and the least number of respondents decided to remain neutral with the argument at 5%.

The study analysis also indicated that the biggest number of respondents totalling 41% agreed with the argument that kidney cancer is also one the common types of cancer covered by media while 6.7% of the respondents strongly disagreed with the argument and equally those who chose to remain neutral about the argument also shared the same percentage of 6.7% and were the least number of the respondents.

The study findings showed that the largest number of respondents accounting for 45% of the total respondents agreed with the argument that prostate cancer is equally one of the common types of cancer covered by media whereas the least number of respondents representing 5% of the total respondents preferred to remain neutral as far as the argument is concerned.

The study finding indicated that majority of the respondents representing 41% of the total respondents agreed with the argument that cervical cancer is a type of cancer covered by the media and the least number of respondents equaling 8.3% out the total respondents were not sure about the argument and therefore they preferred to remain neutral about the argument.

Last but not least, the study findings revealed that the biggest number of respondents equaling to 46.7% agreed with the argument that skin cancer is a common type of cancer covered by the media while 6.7% of the respondents preferred to remain neutral alongside those who strongly disagreed with the argument and they represented the least number of respondents.

The findings on the common media platforms used in creating awareness on preventive measures against cancer are summarized as follows;

The study findings showed that the largest number of respondents representing 41% of the respondents agreed with the argument that print media is one of the common media platforms used in creating awareness on preventive measures against cancer and 5% of the respondents decided to remain neutral and they represented the least number of respondents accounting.

The study analysis revealed that majority of the respondents representing 60% of the respondents agreed with the argument that electronic media is commonly used in creating awareness on preventive measures against cancer while 3.3% and the least number of respondents were not sure about the argument.

The study findings showed that the biggest number of respondents representing 35% of the respondents agreed with the argument that internet is commonly used in creating awareness on preventive measures against cancer and the least number of respondents decided to remain neutral with the argument at 6.7%.

The study analysis indicated that the largest number of respondents accounting for 38.3% of the respondents agreed with the argument that social media is among the common media platforms used in creating awareness on preventive measures against and 8.3% of the respondents decided to remain neutral and they represented the least number of respondents.

The study analysis portrayed that the largest number of respondents representing 38.3% agreed with the argument that rural community radio is commonly used in creating awareness

on preventive measures against cancer, and the least number of respondents chose to remain neutral at 5%.

Last but not least, the study findings portrayed that majority of the respondents accounting for 35% of the respondents strongly agreed and equally agreed respectively with the argument community viewing centers is commonly used in creating awareness on preventive measures against cancer while the least number of respondents preferred to remain neutral with the argument at 5%.

The study findings on the contribution of media in creating awareness on preventive measures against cancer are summarized as follows;

The study analysis revealed that the biggest number of respondents accounting for 40% of the respondents agreed with the argument that the media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda while the least number of respondents preferred to remain neutral at 3.3%.

The study findings showed that majority of the respondents representing 40% of the total respondents agreed with the argument that the media force attention to certain issues; they build up public images of political figures, they constantly present objects and the least number of respondents accounting for 6.7% of the respondents remained neutral about the argument.

The study findings revealed that the biggest number of respondents representing 45% of the respondents agreed with the argument that the media has the influence to pre-determine issues that people should be aware of in society while the least number of respondents at 6.7% were not sure about the argument.

The study findings showed that majority of the respondents accounting for 43.3% of the total respondents agreed with the argument that the media not only informs individuals about health issues, but its message can also be used to influence individuals to action and the least number of respondents representing 8.3% of the respondents decided to remain neutral.

The study findings indicated that the largest number of respondents representing 40% of the respondents agreed with the argument that the media can be a crucial component in

influencing beliefs and attitude that will eventually lead to a behaviour and the least number of respondents chose to remain neutral about the argument at 5%.

Lastly, the study analysis indicated that the biggest number of respondents amounting to 48.3% of the total respondents agreed with the argument that individuals with distinct backgrounds frequently demonstrate differential learning from the media and the least number of respondents accounting to 10% were not sure about the argument.

To explore the common types of cancer covered by media

To identify the common media platforms used in creating awareness on preventive measures against cancer

To examine the contribution of media in creating awareness on preventive measures against cancer

5.2 Conclusions

Basing on the study objective one, the study was intended to explore the common types of cancer covered by media, it is therefore concluded that these common types of cancer covered by media are; breast cancer, lung cancer, kidney cancer, prostate cancer, cervical cancer and skin cancer

According to the second study objective that was to identify the common media platforms used in creating awareness on preventive measures against cancer, it is concluded that these are; print media, the use of electronic media in creating awareness, internet, social media, the use of rural community radio and community viewing centers

On objective three which was to examine the contribution of media in creating awareness on preventive measures against cancer, it can be concluded these contributions are; the media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda, the media force attention to certain issues; they build up public images of political figures, they constantly present objects, the media has the influence to pre-determine issues that people should be aware of in society, the media not only informs individuals about health issues, but its message can also be used to influence individuals to action, the media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behaviour

and individuals with distinct backgrounds frequently demonstrate differential learning from the media

5.3 Recommendations

The study offers some recommendations to the media and health practitioners. The newspapers under consideration need to increase their coverage of cancer in terms of the all the elements of the cancer control continuum throughout the year.

The publications should seek to give greater salience to the issue of cancer by having a dedicated beat that may push more stories linked to current happenings through the news genre

There is need for the media to regularly and consistently provide information about the prevention of cancer in order to positively facilitate the adoption of cancer screening behaviors and its overall prevention. In essence, the media should pay more attention to the cancer prevention agenda in their coverage of cancer.

The study recommends that health campaign developers and health practitioners give more prominence to this aspect of the cancer control continuum for cancer in other forms of mass media, alternative media and community platforms

5.4 Suggestion for further research

From the findings and conclusions generated from the study, recommendations for further studies are as follows. There is need for a comprehensive research on the role of media on linking the people to cancer health care services.

REFERENCES

- Adebayo, F. (2010 April). Cancer goes commercial. Tell magazine. Pp. 12. American Cancer Society (2007) Global cancer facts and figures. Atlanta: ACS
- Azenha, G. Bass, L.P. Caleffi, M. Smith, R. Pretorius, L. Durstine A. and Perez CP. (2011). The role of breast cancer civil society in different resources settings. Retrieved on 26 April , 2011.
- Blug, W.S, Cummings, M.R, Spencer, C.A and Palladino, M.A (2009). Concepts of genetics. America: Pearson Prentice Hall.
- Breast Without Spot (BWS). <http://www.internationalcancerweekinitiativecan/index.php?>. Retrieved on 26 February , 2011.
- Coffman, J. (2002). Public communication campaign evaluation: An environment scan of challenges, criticism, practice, and opportunities. Cambridge, M.A. Harvard family Research Project. Retrieved from www.thelancet.com
- Kayode, F.O, Akande, T.M. and Osagbemi, G.K (2005). Knowledge, attitude and practice of breast self examination among female secondary school teachers in Ilorin, Nigeria. European journal of scientific research. Vol pp42.
- King .S., (2006). Pink Ribbons Inc: Breast cancer and the politics of philanthropy. Minneapolis: Institute of Minnesota press.
- Majumder S (2009). Stem cells and cancer (Online-Ausg. ed.). New York: Springer. p. 193. ISBN 978-0-387-89611-3. Archived from the original on 18 October 2015.
- Medical Women's Association of Nigeria, Edo State (2011). Breast self examination. Edo State: Medical Women, Association of Nigeria. Nigeria Television Authority (2011, February 4) 7am Network News.
- Okobia, M.N., Bunker, C.H., Okonofua, F.E and Osime, U. (2006). Knowledge, attitude and practice of Nigeria women towards breast cancer, a cross-sectional study. Retrieved from <http://creativecommons.org/licenses/by/2.0>.
- Parkin, D.M., Bray, F., Ferlay, J. and Pisani, P. (2005). Global cancer statistics, 2005, CA . A cancer journal for clinicians, 55(2), 74-108.

Pielle, (2005). Public service: breast cancer awareness campaign- Pakistan. Retrieved on 26 February, 2011. The scourge of cancer (2011,February 7). Tell magazine pp 5.

Udoudo, A.J, (2008) Rising cases of cancer and media social responsibility. International journal of communication. Vol. 2 pp 364 – 373.

Wakefield, M.A. Loken, B. and Hornik R.C. (2010). Use of mass

WHO/UICC (2005) Global action against cancer, New Switzerland:

WHO|UICC Russell, M. (2007) Understanding Diseases.

<http://EzineArticle.com/?expert=micheal> <http://www.answers.com/topic/massmedia>

APPENDIX I: QUESTIONNAIRE

INTRODUCTION

Dear respondent, my name is **Nanyanzi Asumputa**, a student of Kampala International University, pursuing a bachelor's degree in mass communication and would like you to fill in this questionnaire to enable me investigate the role of print media in promoting awareness on preventive measures against breast cancer; a case study of New vision Uganda.

Please feel free to answer the items below as honestly as possible. All your responses will be treated with confidentiality and will be used for academic purposes only.

Thank you for your co-operation.

Instructions:

Please fill in the spaces, Tick the answer of your choice as applicable.

SECTION A: BIO DATA / PERSONAL INFORMATION

1.0 Socio-economic background

1.1 Gender

Female ☐

Male ☐

1.2 Age

(a) 22-30 ☐ (b) 31-50 ☐

(c) 51-60 ☐ (d) Above 60 ☐

3. Level of Education you have attained

(a) Masters ☐

(b) Degree ☐

(c) Diploma ☐

(d) UCE certificate ☐

(e) UACE certificate ☐

4. Position Held (department)

5 Work Experience

(a) (Less than 1 year) ☐

(b) 1-2 years ☐

(c) 3-4 years ☐

(d) More than 4 years ☐

SECTION B

In this section you are required to give your opinion on the following statements about Conscientiousness, Openness to experience and Agreeableness on a scale of strongly disagree (S.D), disagree (D), neutral (N), agree (A) and strongly agree (S.A).

(i) THE COMMON TYPES OF CANCER COVERED BY MEDIA

	STATEMENT	SD	D	N	A	SA
1	Breast cancer					
2	Lung cancer					
3	Kidney Cancer					
4	Prostate Cancer					
5	Cervical Cancer					
5	Skin cancer					
7	Cancer of the blood.					

(ii) THE COMMON MEDIA PLATFORMS USED IN CREATING AWARENESS ON PREVENTIVE MEASURES AGAINST CANCER

	STATEMENT	SD	D	N	A	SA
1	Print media					
2	The use of electronic media in creating awareness					
3	The use of community media					
4	The use of rural community newspaper					
5	The use of rural community radio					
6	Community viewing centers					

(iii) THE CONTRIBUTION OF MEDIA IN CREATING AWARENESS ON PREVENTIVE MEASURES AGAINST CANCER

	STATEMENT	SD	D	N	A	SA
	The media has the ability to advise or tell audiences what issues are major and relevant, thus setting the agenda					
	The media force attention to certain issues; they build up public images of political figures, they constantly present objects					
	The media has the influence to pre-determine issues that people should be aware of in society					
	The media not only informs individuals about health issues, but its message can also be used to influence individuals to action					
	The media can be a crucial component in influencing beliefs and attitude that will eventually lead to a behaviour					
	Individuals with distinct backgrounds frequently demonstrate differential learning from the media					