PRESS COVERAGE OF WOMEN HEALTH ISSUES: A COMPARATIVE ANALYSIS OF VANGUARD AND DAILY TRUST NEWSPAPER, 2011 – 2012

BY

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A THESIS SUBMITTED TO THE SCHOOL OF POSTGRADUATE STUDIES, AHMADU BELLO UNIVERSITY, ZARIA, IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF MASTER OF SCIENCE IN MASS COMMUNICATION

MARCH, 2015

DECLARATION

I declared that this research work entitled "Press Coverage of Women Health Issues: A Comparative Analysis of Vanguard and Daily Trust Newspapers, 2011-2012 has been carried out by me in the Department of Mass Communication under the supervision of Dr. Suleiman Salau and Malam Usman Jimada. The information derived from the literature has been duly acknowledged in the text and a list of references provided. No part of this Thesis has been presented for the award of another degree in any university.

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CERTIFICATION

This Thesis, " PRESS COVERAGE OF WOMEN HEALTH ISSUES: A COMPARATIVE ANALYSIS OF VANGUARD AND DAILY TRUST NEWSPAPERS, 2011-2012", Written by Hussain ALHASSAN meets the regulations governing the award of the degree of Master of Science in Mass Communication of Ahmadu Bello University, Zaria and it is approved for its contribution to knowledge and literary presentation.

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DEDICATION

To Almighty Allah for His grace upon my life and Knowledge

and

My late father, Alhassan Haruna, My mother Halima Umar, my brother Umar Alhassan , Wasila Muhammad (my wife) and my lovely doughter, Hafsah

ACKNOWLEDGEMENTS

Alhamdulillah! I thank Almighty Allah for guiding and protecting me to complete this study. Special thanks to my parents, late Alhassan Haruna and my mother Halima Umar for their support and prayers, without hesitating to thank my elder brother Umar Alhassan, sister, Hajara, Aisha, Hassana and my wife Wasila Muhammad, May Allah reward them abundantly.

My utmost appreciation goes to my supervisor, Suleiman Salau (Ph.D), who found time to assist me, advice and encourage all through the way. Also my second supervisor, Malam Usman Jimada for his useful observation, thank you sir.

I am especially grateful to all other lecturers in the Department of Mass Communication, Ahmadu Bello University Zaria and Nuhu Bamalli Polytechnic lecturers.

Sincere appreciation to Yakubu-Ozuhu Suleiman, (Ph.D) my lecturer, Mahmud Umar (Ph.D), Malam Shamsuddeen Muhammad, Adama Adamu, Jimoh Ibrahim, Hashim and Kabir, including those space could not allow me mention. for their support and advice.

Worthy of mention are my MSc. Class mates, Malam Sada, Ahmed Yahaya, Victor Babatunde, Remi, Malam Abdulmalik, Francis, Glory, Ayo, Vivian, who in one way or the other, impacted on the success of the entire programme, thanks a lot.

I will not forget to acknowledge my good friends, colleagues and brothers, Umar Ismail, Aliyu Hussain, Rabiu Kera, Umar Hanwa, Abubakar and Malam Aminu. I also appreciate the effort of my research assistants, Waziri, Abdullah, Nathaniel, Eugene Aleb, Abdulaziz and Amos Samuel.

May Allah pay all of you and reward you with paradise.

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ACRONYMS

AIID-Amsterdam Institute for International Development

AWMC-African Women's Media Centre

CEDAW- Convention on the Elimination of all Forms of Discrimination against Women

ICPD- International Conference on Population and Development

MDG- Millennium Developmental Goals

NPHCDA-National Primary Health Care Development Agency

MNCH- Maternal New Born and Child Health

UK- United Kingdom

UN- United Nations

UNDP- United Nations Development Programme

UNICEP- United Nations International Children Education Funds

WHO- World Health Organization

ABSTRACT

Women are considered to be the decision makers and health givers in the family across the globe, and hence their health condition is of concern to all including Nigerian print media. The study Press Coverage of Women Health Issues is a Comparative Analysis that is meant to examine the seriousness accorded to women health issues by Vanguard and Daily Trust newspapers as the Millennium Development Goal number five (5) says "to improve maternal health before 2015". The study has four specific objectives among which include: to identify the extent of coverage of women health issues in the two Nigerian newspapers; to identify the level of prominence given to women health issues between the Daily Trust and Vanguard newspapers; to determine the kind of women health issues that has the highest coverage between Daily Trust and Vanguard newspapers and to find out the pattern of coverage of women health issues between Daily Trust and Vanguard newspapers. The study adopted Content Analysis method of research for a period of two (2) years (2011-2012). A total of 1,460 editions were purposively sampled and a coding sheet was used to generate data. The study relied on Agenda-setting theory and media development theory. The findings of the study revealed that women health issues were given limited coverage by print media in Nigeria. Against this, it was recommended that newspapers related to women health issues should be established in order to give specialized report on that aspect. Nevertheless, the existing newspapers should endeavor to provide adequate reportage on women health.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

The press plays a significant role in informing the public about health and medical issues (Moyer, 1995; Alexander, 2005; Thorson, 2006; cited in Rodney, 2010). It is obvious that the press performs necessary functions of providing information about new health dangers, disease outbreaks, domestic and international alerts, and healthy living. In order to learn about health issues, people look to numerous sources of news; newspapers, magazines, television, radio, the internet, friends, relatives or medical related report. (Rodney, 2010)

Women are often considered the healthcare givers in the family across the globe. (National Partnership for women and families, 2007) The multiple roles women play in the home profoundly influence the health of both their families and of themselves (Wyn, Ojeda, Ranji, & Saiganicoff, 2003). Researchers and health professionals argue that women often neglect their own health for a number of reasons, usually associated with their care-giving roles within the family. (Wyn, Ojeda, Ranji, & Saiganicoff, 2003).

Similarly, in the service of any development, media are agents of social change. The specific kind of change they are expected to accomplish is the transition to new customs and practices, and in some cases of different social relationship. For instance, Vescico Virginal Fistula (uncontrolled passage of Urine by young ladies), Fibroid, Genital Mutilation, Ovarian Cancer and Breast Cancer. These are some of the women health issues and their treatments constitute a great physical, psychosocial, and economic challenge. The

hallmarks of the diseases in Africa are patients presenting themselves at an advanced stage for treatment in hospitals. Awareness and knowledge of the said cases vary among communities and population groups worldwide. While studies conducted to assess the knowledge of fibroid and breast cancer among women have revealed satisfactory levels in some places, (Wyn, e tal 2003) other reports – especially from developing countries such as Nigeria – have revealed inadequate knowledge and awareness of the diseases (Adebamowo & Ajayi, , 2003; Adebamowo & Ajayi, 2000). The research (Press coverage of women health issues: A comparative analysis of Vanguard and Daily Trust newspapers, 2011-2012) moves further to know whether the Daily Trust and Vanguard newspapers cover women health issues either positively or negatively. Example of positive portrayal of women health issues include: the establishment of maternity health centers, adequate drugs, good family planning packages, etc. while the negative entails issues such as inadequate maternity health centers, inadequate drugs related to ante-natal, poor family planning packages, etc.

Again, breast cancer which is one of the major issues affecting women, constitutes a major public health issue globally, with over one million new cases diagnosed annually, resulting in over 400,000 annual deaths and about 4.4 million women living with the disease (Bray, McCarron, & Parkin, 2005; Dumitrescu & Cotaria, 2004). However, the mass media play a pivotal role in the development process of a country. They are generally regarded as channels of communication that are capable of reaching heterogeneous audiences simultaneously with uniform messages. In Nigeria, the media regularly cover all sorts of issues such as health, music, fine art, crime, sports, and political events (Soola, 2003).

Also, it has the capabilities of transmitting ideas and new information to target audiences in the society through its function of educating, informing, and entertaining; as well as persuading its audience while serving as a catalyst for social mobilization. In other words, the mass media can be regarded as powerful sources of information because they have the capability to penetrate every segment of the society. They have the ability to disseminate messages about issues, ideas and products.

The traditional mass media usually consist of radio, television, newspaper, and magazine. The print media, like the other media, can be used to educate, enlighten, and mobilize people to a particular issue of national development. The print media primarily refers to newspapers and magazines, though other forms of print media include billboards, posters, handbills, pamphlets, and brochures. Two unique advantages of the print media are its permanence and the possibility of information custody and storage for close reading and future use. (Soola, 2007).

However, journalism as a profession has moved towards specialization in the news coverage of some key areas. It is pertinent to point out that newspapers readers want to be educated not just to be informed about events and social issues in their environment. This creates a lot of challenges for the journalist and journalism as a crucial institution which mediate between the individual readers and his or her society. Newspapers as an aspect of print media have been found to be an effective media in influencing the reading publics as well as opinion leaders on issues of public health (Evans & Ulasevich, 2005; cited in Rodney, 2010). Furthermore, a report evaluating print media reportage of issues like HIV,

AIDS, TB and malaria in five Sub-Saharan African countries by Africa Women's Media Center (AWMC,2004) have found very little coverage of health issues in the newspapers assessed, while newspapers are considered suitable for explanations and in-depth analysis.

The mass media will not only inform individuals about women health issues, but its message can also be used to influence individuals to action. The diffusion of innovation theory holds that the mass media can be a crucial component in influencing beliefs and attitudes that will eventually lead to a change in behavior. For example, magazines and specialized journals can publish photo reports on how women can engage in ante-natal examinations, fibroid examination, or even breast self-examinations. Furthermore, newspapers and magazines can apply the agenda-setting function in publishing news reports of the women health issues on the front and back pages. (Soola,2003).

1.2 Statement of the Problem

The media often take women's health out of context while women are considered the decision-makers and healthcare givers in the family across the globe. (Ruzek, 1997). Similarly, the multiple roles women play in the home profoundly influence the health of both their families and themselves, as such, face a lot of challenges vis-a-vis increase in cases like Eclampsia, VVF (Vescico Virginal Fistula), Breast Cancer, Fibroid, Pelvic Inflammatory Disease, Candidiasis, Dysmenorrea, Genital Mutilation, Cervical Cancer and Ovarian Cancer. However, the rate at which women are dying is of high increase in Nigeria. (NPHCDA, 2014) More than two decades in the war against maternal deaths, Nigeria still has one of the worst maternal mortality statistics in the world, with the

maternal mortality ratio of 545 per 100,000 births. Nigeria is second only to India in the global estimates of maternal death. India's population however is eight times that of Nigeria. (WHO, 2013)

The media in Nigeria has been accused over the years for neglecting developmental issues especially things related to women health, in terms of the prominence given to the issue, the extent of the coverage as well as the pattern (the angle of a report; positive or negative) and focus more on politics and advertisements. Again, indigenous newspapers have been accused for not preparing their readers for the challenges of the 21st century. (Salau, 2006) Thus, the challenges of 21st century are issues of development, including health related issues.

It is against this background, the study therefore examines in comparative nature, the media coverage of women health issues vis-a-vis the positive/negative angle of the report.

1.3 Research Questions

The study is set to answer the following questions:-

1. What is the extent of coverage of women health issues and other health issues by Vanguard and Daily Trust newspapers?
2. What is the level of prominence given to women health issues by Daily Trust and Vanguard newspapers (in terms of size and placement)?
3. What type of women health issues is accorded the highest coverage between Daily Trust and Vanguard newspapers?
4. What is the pattern (positive/negative angle) of coverage of women health issues by Daily Trust and Vanguard newspapers?

1.4 Aim/ Objectives of the Study

The study is aimed at examining the seriousness accorded to the coverage of women health issues by Nigerian print media. The specific objectives are as follows:

1- The extent of coverage of women health issues and other health matters in two Nigerian newspapers. (Vanguard and Daily Trust)

2- The level of prominence given to women health issues between the Daily Trust and Vanguard newspapers (in terms of size and placement).

3- The kind of women health issues that has the highest coverage between Daily Trust and Vanguard newspapers.

4-The pattern (positive/negative angle) of coverage of women health issues by Daily Trust and Vanguard newspapers

1.5 Significance of the Study

Several researchers have used content analysis to study health related research issues for instance, Bonnie and George 1975 discussed the role of radio and television in the announcements of family planning. Singh Archna 2007 studied the role of mass communication in prevention and control of AIDS using content analysis. Faber 1974. Marianne, 1991, Rodney, 2010 conducted studies on some aspect of reproductive health issues without analyzing the pattern as well as the extent of the coverage by the researchers. This therefore, indicates the gap in knowledge of the study. However, there is a greater demand and need for relevant analysis of public health information about issues generally affecting women in terms of prominence and the pattern of coverage towards

bridging the gap in knowledge. (Gupta and Sinha, 2010:7). Bryant and Thompson, cited in Gupta and Sinha, 2010) are of the view that "news coverage of health matters take on considerable significance, in that it has the potential to shape the impressions of average citizens and powerful policy makers alike. This can be done inline with the agenda setting theory.

Similarly, this study is in line with the strategic objectives of the WHO, USAID and MDGs' whose mission is to improve maternal health before 2015. It will also move further to promote effective advocacy for women health issues in print media.

1.6 Scope of the study

This study, press coverage of women health issues in some selected newspapers involved the assessment of two purposively selected Nigerian newspapers namely: Daily Trust and the Vanguard newspapers. The study covered a two-year period from January 2011 to December 2012 as MDGs' targeted year approaches. Similarly, Nigeria is one of the world's countries whose mission is to accomplish MDGs goals before 2015. The two years period of study falls within the targeted years, thus, the media are expected to cover women health issues and other health issues towards achieving the MDGs goals as indicated in goal number five (5), which says "to improve maternal health".

The basis of conducting the study is to see the extent to which women health issues are covered and portrayed by the identified newspapers. More specifically, the study has concentrated on parameters such as frequency of coverage, prominence accorded women health issues, format of presenting, and the nature of the coverage, excluding advert.

The researcher covered the editions of the newspapers published for 24 months, which is from January 2011 to December 2012.The study is delimited to the coverage of women

health issues. The sampling technique adopted is that of the **nth** element whereby a skip interval of six edition is adopted, and the seventh edition is selected.

1.7 Limitation of the study

The researcher was not able to analyze the whole issues related to women, rather, limited the research to ten common issues related to women health; during pregnancy or child birth. This is due to constraint of time and money. Also the researcher used two coders to analyze the newspapers. In the process of gathering the data one of the coders found the filling of the coding sheet very difficult as such, the coder was replaced by another well trained coder.

1.8 Operational Definition

Maternal Death. Death in pregnancy or child birth

Eclampsia (EC) It is disorder seen in 6% of pregnant women. It is characterized by symptom complex of Hypertension (sustained rise in blood pressure), proteinurin (protein in urine) and edema (swelling of the body due to fluid accumulation).

Pelvic Inflammatory Disease (PID) Is a common disorder characterized by pelvic pain, tendencies, fever and vaginal discharge resulting from infection.

Breast Cancer (BC): This is cancer of the breast and it is the most common cancer seen in women.

Genital Mutilation (GM): Female genital cutting; female circumcision.

Vesico Vaginal Fistula (VVF): A female acquired diseases of fistula (open connection) mostly between the bladder and vagina caused by child birth, resulting to uncontrolled passage of urine.

Candidiasis (CD): It is an infection of mucocutaneous membranes (skin) mostly warm and moist surface. When it affects the mouth it is called Oral thrush. When it affects the vagina it is called Vaginitis.

Dysmenorrea (DY): This is a pain in the pelvic experienced by 20-25% of menstruating women. It is also called menstrual pain.

Cervical Cancer (CC): It is cancer of the cervix which may be caused by many factors such as multiple sexual partners, contraceptive pills and could also be inherited.

Fibroid (FB): These are benign (non cancerous) tumors typically found in middle aged later reproductive years in female.

Ovarian Cancer (OC): Cancer of the ovary.

Diabetes Mellitus (DM): This is a disease characterized by elevated sugar in the blood mostly seen in elderly people and pregnant women.

Hypertension (HP): It is a sustained blood pressure more common in elderly people and pregnant women.

Malaria Fever (MF): A fever caused by plasmodium parasite transmitted by female anopheles mosquito bite.

OsteoArthritis (OA): Joint pain mostly seen in obsessed, elderly and sport people.

P**neumonia (PN):** A respiratory track infection caused by many micro organisms mostly as a result of exposure to cold.

Tuberculosis (TB): A respiratory track infection caused by micro organism as a result of drinking unpasteurized cow milk and inhalation of micro organism from duplets from infected person.

Sexually Transmitted Disease (STD): Infection mostly acquired through unprotected sex with and infected individual. Eg gonorrhea, HIV, syphilis, etc.

Ulcer (UC): A wound in the gastro-intestinal system (stomach intestine) which may be caused by many factors such as stress, infection by helicobacter pylori or use of Non Streoidal antro inflammatory drugs (NSAID) analgesics eg ibuprofen, paracetamol.

Sickle Cell anaemia (SC): An inherited disease of the blood which presents with systematic symptom.

Hepatitis (HP): Infection of the liver mostly caused by virus. (Kumar, Abbas and Fausta, 2006).

Women health issues: For this study, we are referring to Eclampsia, VVF (Vescico Virginal Fistula), Breast Cancer, Fibroid, Pelvic Inflammatory Disease, Candidiasis, Dysmenorrea, Genital Mutilation, Cervical Cancer and Ovarian.

Other Health Issues: For this study, we are referring to Diabetes Mellitus, Hypertension, Malaria Fever, OstheoArthritis, Pneumonia, Tuberculosis, Sexually Transmitted Diseases, Ulcer, Sickle Cell Anaemia, and Hepatitis.

Empowerment: Free medical care.

Positive angle: For this study, a positive angle entails a report in favour of women health; whether a report portrays, the establishment of maternity health centers, adequate drugs, good family planning packages, etc. For instance, **Vanguard of February, 2012 page 12 reads as "*Delta archives 48.5 % reduction on maternal mortality ratio*"**.

Negative Angle While the negative angle entails issues covered by the newspapers not in favor of women health, such as inadequate maternity health centers, inadequate drugs related to ante-natal or poor family planning packages. for instance, Daily trust of Tuesday, February-28, 2012, page 39 edition. The headline reads as ***"Why maternal infant deaths still high?***." Another negative angle covered on 21st May, 2012 reads as "***50% of Abia population hypertensive***"

Coverage: The number of percentage of columns, pages covered by the newspapers, position or placement of story in the newspaper (prominence)

Framing: refers to the selection and emphasis of certain aspects of issues.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

This chapter seeks to review women health issues, other health issues and media and health coverage. Issues related to this field were reviewed with the aim of discussing the weaknesses and the strength in which the study seeks to fill. The theoretical frameworks chosen to serve as guide in the research were also analyzed.

Communication is the bridge that brings together the different parts of a society or nation. The news media are charged with covering issues in a fair, balanced, and informative manner. However, there is constant tension between the social impact versus the economic health and well-being of society (Parrott, 1996). In news, because resources are scarce, decisions are made about what stories to cover and how they are presented. News framing refers to this selection and emphasis of certain aspects of issues. For magazines and other aspects of print media (for example, newspapers), these issues include elements of timeliness, which some critics argue are intended to increase profits rather than offer balance (Parrott & Condit, 1996)

2.2 Media and Development

Kayode & Adeniran: (2012:1) noted that:

> Development is a widely participatory process of social change, intended to bring about both social and material advancement. It involves greater numbers of people gaining control over their environment, empowering people to be self-reliant and creating the right environment for people to improve their living conditions.

Journalists have to adapt to new ways of covering developmental issues being the ears and the eyes of society, and the voices of the voiceless through bottom-up reporting which brought "watchdog" role, reportages on development issues that bring attentions to issues that are overlooked or under- represented including women health issues . The approach of media on promotion and development issues raises a kind of questions on how journalists report on development. The Nigerian government came to realize the importance of involving the media in achieving developmental targeted goals. (MDG-Monitor, 2008).

Looking at the responsibilities expected from the media specifically towards the MDGs, certain questions may come in; whether the Nigerian media are living up to responsibilities in line with the development media and agenda setting theories. The agenda setting theory posits that the mass media may have powers that shape public opinion whereby development media theory portrays that mass media should give priority to news that address positive development efforts of government and the people (Kayode & Adeniran, 2012)

Media is saddled with certain responsibilities in achieving development within a particular system of a government or within any given society. At one point in time, policy makers, governments, civil societies, development organizations and the private sector acknowledge the important role the mass media can play in achieving developmental goals or targets.

A number of roles have been assigned to the media in achieving development within any society. A senior executive of the United Nations Development Programme (UNDP) ,Aggarwala, (1979), noted that "a journalist covering the development beat is expected to critically examine, evaluate and report on the relevance of a development project to

national and local needs" Aggarawala's description of development journalism emphasizes the watchdog role of the press.

Similarly, for their parts in achieving development, media outlets (print, radio or broadcast media) can act as conveyors of new ideas and information. Typically, they facilitate the flow of information among the many actors of the society, community, or nation and inform its constituents, including key policy or decision-makers, about ongoing events, new developments or emerging challenges which can be done through investigative reporting, they may also provide precious background on how pervasive social issues may be in specific settings, for example women health challenges, human trafficking or violence against women, and they may be able to call for better resources, data or services to address these issues. (kayode & Adeniran, 2012)

Again, international organizations reach out to their key audiences oftentimes through the media. The way media portray an issue has an important impact on how that very issue is regarded. Media influence public opinion and attitudes. The media also typically foster debates in the public arena, challenging ideas/status quo, debunking myths and discussing taboo topics. Most importantly, they may also question prevailing attitudes and norms which may be detrimental to certain vulnerable groups, like women, persons with disabilities, youth, etc.

Development means a new stage in a changing situation to become more advanced, development includes three factors such as: economic growth self reliance and social justice. Development is a quantitative change, which entails changes in the structure of the economy, social environment and political disposition The overall objective of national development is to enlarge people's choices for greater access to knowledge, better

nutrition, health services more secure livelihoods, security against crime and physical violence political and cultural freedom and sense of participation in community (UNDP, 2012)

2.3 Women Health Issues; Global Challenges

Women health issues have generated a lot of concern around the globe. The issues are linked with pregnancy, childbearing, and even post-natal condition of the women. For many women in Nigeria, a country with one of the highest maternal death rates in the world, the prospect of giving birth can be scary. This has also affected the entire life of the born babies as Angela Morgan (Founder life for African mothers) highlighted in an interview with Aljazeera televised on 20/05/2014 where she portrays that, Nigeria has been rated as the country with the highest case of new born death, followed by Pakistan, India and Republic of Congo. According to the U.N. children's organization, UNICEF, more than 150 women die every day in pregnancy-related cases in Nigeria, an average of one death every 10 minutes, which makes many pregnant women worry about coming out of the hospital or clinic alive.

Below is the maternal mortality ratio (model estimate per 100,000 live birth-2010-2013 which is presented, in an attempt to understand Nigeria's effort towards women's health position.

A- Sub-Saharan Africa.

Country	2010	2013
Chad	1,100	960
Nigeria	610	560
Niger	690	630

Cameroon	640	560
Benin	370	340

B- Asia

Country	2010	2013
India	220	190
China	36	32
Pakistan	190	170
Malasia	31	29
Indonesia	240	190

C- Europe

Country	2010	2013
Australia	5	6
Denmark	9	5
France	12	12
Italy	4	4
Germany	7	7

(See World Bank Report, 2014)

It is quite disturbing when we look at the ratio of maternal mortality in sub-Saharan Africa, compared to Europe and Asia; Chad for instance, a country with very small population, in 2010 had 1,100 cases of maternal death which was reduced to 30 cases in 2013, Niger, Cameroon and Benin, almost the same experience. In Asia, China and India, despite their large population, China had maternal death cases 36 in 2010 which reduced to 32 in 2013. Similarly in India, maternal death was reduced from 220 to 190. While Nigeria with a

population of 1/10 of both China and India had more than 200 cases in 2010 increase to 540 in 2013. Thus, Nigeria's cases of maternal death are very high and should be an issue of utmost concern.

However, in Europe, decrease in maternal death has remained consistent. Even though Nigeria's maternal mortality statistics are among the world's worst, the country has no standardized recordkeeping practices in rural communities and settlements — places where women rarely visit a hospital or clinic for pre-natal care or delivery and as such many pregnancy-related deaths which doctors say, are preventable may occur unreported, while many of Nigeria's public hospitals are ill-equipped and under-staffed, rural areas have few health facilities to speak of.

Some say the ability to save lives is simply a matter of government agencies making it a top priority. In order to reduce the challenges, Nigerian government hired an additional 6,000 midwives and health workers to curb the nation's maternal death rate under the Midwives Service Scheme. (NPHCDA, 2014) Under the scheme, newly qualified, unemployed and retired midwives are engaged and sent to undertake one or two years community service in selected rural communities, the new hires will join 4,000 others already serving rural areas. The expectation is that the lives of about 1.2 million expectant women — or nine million people — would be saved under the scheme by 2015. (Muhammad, 2014)

Current efforts indicate that Nigeria is making progress in addressing issues affecting women's health, but the pace is too slow for the country to attain the Millennium Development Goals of reducing maternal mortality by 2015 (seefile://D:NigeriaTacklesmaternalmortali.htm)

As being observed, improving maternal health is one of the 8 Millennium Development Goals (MDGs) adopted by the international community in 2000. Under MDG5, countries committed to reducing maternal mortality by three quarters between 1990 and 2015. Since 1990, maternal deaths worldwide have dropped by 45%.

> In sub-Saharan Africa, a number of countries have halved their levels of maternal mortality since 1990. In other regions, including Asia and North Africa, even greater headway has been made. However, between 1990 and 2013, the global maternal mortality ratio (i.e. the number of maternal deaths per 100, 000 live births) declined by only 2.6% per year. This is far from the annual decline of 5.5% required to achieve MDG5. (See MDGs' Reports, 2014).

The maternal mortality ratio in developing countries in 2013 is 230 per 100 000 live births versus 16 per 100 000 live births in developed countries. There are large disparities between countries, with few countries having extremely high maternal mortality ratios around 1000 per 100, 000 live births. There are also large disparities within countries, between women with high and low income and between women living in rural and urban areas. This is captured clearly in Ban's statements, (2010) a secretary to United Nations.

> Women in developing countries have on average many more pregnancies than women in developed countries, and their lifetime risk of death due to pregnancy is higher. A woman's lifetime risk of maternal death – the probability that a 15 year old woman will eventually die from a maternal cause – is 1 in 3700 in developed countries, versus 1 in 160 in developing countries.

Ruzek, Olesen, and Clarke (1997:67) stated that the media often take women's health out of context, presenting unrealistic views of cures and prematurely reporting progress. Salau (2006) posits that indigenous newspapers are not preparing their readers for the challenges

of the 21st century. The challenges of 21st centuries include developmental issues; women health inclusive. This was discovered while analyzing the extent of coverage of health issues. The media pay little attention to the downside of medicine, such as treatments that carry more risks than benefits or those that contribute little to health conditions. (Smith, 1996) While in a study produced by the Amsterdam Institute for International development (AIID) on Nigeria's health sector, it was observed that Nigeria's health sector has stagnated or may have even worsened during the past decade. (AIID, 2010)

Firmansyah, Hegazi, Darwisyah and Amaliah (2001) posit that "The media, which has traditionally been male dominated, often neglects issues that affect women's lives" The health of women is of great concern because of several negative lifestyle behaviors, issues like higher intake of animal and hydrogenated fats and lower intake of fiber. These negative lifestyle behaviors are placing women at an increased risk of lifestyle-influenced causes of death. The Center for Disease Control and Prevention (2007), identifies ten leading causes of death among women: cancer (27.2%), heart disease (22%), stroke (7.5%), chronic liver (3.9%), eclampsia (5.2%), 3.9%), unintentional injuries (3.3%), diabetes (3.1%), influenza and pneumonia (2.7%), kidney disease (1.8%) VVF (1.5%). The top four categories – diseases of the heart, all forms of cancer, stroke, and respiratory diseases – are considered to be chronic lifestyle-influenced diseases.

There should be a growing sense of urgency among international communities to intensify efforts on the global challenge on the women's health condition, as the millennium development goals (MDGs) target date 2015 approaches. Women's cancers, including breast, cervical and ovarian cancer are among the crucial issues affecting women, lead to

hundreds of thousands of premature deaths among women. Investments and programmes to prevent and treat women's cancers such as cervical cancer have improved and led to strong reductions in high income countries, while the challenge is against the developing countries.

For instance, cervical cancer is the second most common cancer in women worldwide. Yet, because of poor access to screening and treatment services, the vast majority of deaths occur in women living in low- and middle-income countries. However, competing health care priorities, insufficient financial resources, inadequate information and awareness by the media, weak health systems, and limited numbers of trained providers have made high coverage for cervical cancer screening in most low- and middle-income countries difficult to achieve. (WHO, 2013)

Cervical cancer is caused by the sexually transmitted HPV (Human Papillomavirus), which is the most common viral infection of the reproductive tract. Almost all sexually active individuals will be infected with HPV at some point in their lives and some may be repeatedly infected. The peak time for infection is shortly after becoming sexual active.

Implementation of cervical cancer prevention and control programmes contributes to the attainment of the Millennium Development Goals through universal access to sexual and reproductive health services to improve women's health, as in 2010 UN Secretary-General's Global Strategy for Women and Children's Health and also in the 2011 Political Declaration of the UN General Assembly High level Meeting on Non- Communicable Diseases. (UN, 2013)

Similarly looking at Nigeria's effort towards women health development, 2012 MDG progress report again, level of maternal mortality which is a serious threat as women health issues is concerned remain far from the 2015 target. In achieving the MDG target in reducing global maternal mortality by 75%, progress in Nigeria could prove pivotal, in 2010 an estimated 40,000 Nigerian women die in complications related to pregnancy or child birth. The country accounts for an estimated 14% of maternal deaths world wide. (Cooke & Tahir, 2013)

Nigeria has made a progress in the last two decades in reducing maternal deaths, but the number of women who die in pregnancy remains high. This was noted by (Cooke & Tahir:3: 2013)

> The country has the highest maternal mortality ratio (MMR) in the world. According to US estimates, with 630 women dying per 100,000 births, a higher proportion than in Afghanistan or Haiti.

It is observed that within Nigeria there are significant disparities among regions, and Northern Nigeria has higher maternal mortality ratio than the South. The North-East alone has an estimated maternal mortality rate of 1,549, more than five times the global average. (Tahir, 2013)

2.4 Women and Health; Global Commitments

The Beijing Platform for Action reiterates the agreements reached at the 1994 International Conference on Population and Development (ICPD), in particular with regard to women's reproductive health and rights, and added new commitments addressing the right of women to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence.

Taking a holistic and life-cycle approach to women's health, the Beijing Platform for Action proposed actions toward five strategic objectives. These objectives include increasing women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services. Strengthen preventive programmes that promote women's health. (UN, 2005)

Article 12 of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) commits States parties to take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning and to ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation.(CEDAW, 2006).

The Millennium Development Goals (MDGs) adopted in 2000 address women's health in two of the eight goals. MDG5 focuses on improving maternal health by reducing by three quarters, between 1990 and 2015, the maternal mortality ratio. MDG6 focuses on combating HIV/AIDS, malaria and other diseases (MDGs, 2000).

In 2004, the World Health Assembly adopted its first strategy on reproductive health, intended to help countries stem the serious repercussions of reproductive and sexual ill-health. The strategy targets five priority aspects of reproductive and sexual health: improving antenatal, delivery, postpartum and newborn care; provides high-quality services for family planning, including infertility services; eliminating unsafe abortion; combating sexually transmitted infections, including HIV, reproductive tract infections, cervical

cancer and other gynecological illness and disease; and promoting sexual health. (UN, 2005)

In 2005 at its fiftieth session, the Commission on the Status of Women reached conclusions on enhanced participation of women in development that will provide enabling environment for achieving gender equality and the advancement of women in the fields of education, health and work. The Commission underlined the importance of incorporating a gender, human rights and socio-economic perspective in all policies relevant to education, health and work. It also called upon Governments to incorporate gender perspectives and human rights in health-sector policies and programmes, pay attention to women's specific needs and priorities, ensure women's right to the highest attainable standards of physical and mental health and their access to affordable and adequate health-care services, (WHO, 2007)

Numerous health agencies and researchers agree that the major causes of death among women have shifted away from diseases such as tuberculosis, malaria, and cholera, to more chronic lifestyle-related diseases such as heart diseases, cancer, and stroke. This dramatic shift has largely been influenced by human behaviors and lifestyle choices that are non-conducive to health (Belaal, 2006).

There have been various qualitative and quantitative studies on reproductive health by mass media, for instance coverage of eclampsia or breast cancer in Nigeria. Some have reported the rise and fall of media coverage on breast cancer in Nigeria (Okobia, Bunker, Okonofua

& Usifo, 2006; Salaudeen, et al., 2009) Most studies often focus on how the public, as receivers of mass media messages, understand the women health issues.

Among issues related to women also is complications related to pregnancy and child birth, which includes maternal mortality which poses as the greatest health and gender inequity in the world. Today, 99 per cent of maternal and newborn deaths occur in developing countries. Each year, more than two million women and newborns die needlessly due to preventable causes related to pregnancy, childbirth, etc. Millions more suffer disabilities. When a woman dies, her children are less likely to receive nutritious food and education. Infant mortality, sexually transmitted diseases and fistula are among others health conditions that affect the women. The issue of fistula (which is the uncontrolled passage of urine by young women), may be as a result of injuries during early childbirths. (AWMC, 2004).

Genital mutilation which is also harmful to women's health causes a lot of challenges in developing nations. Similarly, a disease like Vesico-Vaginal Fistula (VVF), and the problem of girl child hawking along the streets that exposes them to a host of problems including: physical and psychological danger, physical and psychological abuse, rape and sexually transmitted diseases, as well as unwanted pregnancies are becoming rampant (Weekly Trust, 2006:7)

According to a 2009 World Health Organization (WHO) study, an estimated 30,625 million women and girls, or about 60 percent of the nation's total female population, have undergone one of these forms. A 2010 United Nations Development Systems study reported a similar number of 32.7 million Nigerians.

The Inter-African Committee of Nigeria on Harmful Traditional Practices Affecting the Health of Women and Children has provided some statistical data. For instance, it is estimated that between 100,000 and 1,000,000 Nigerian women live with the fistula condition; even the training of new fistula surgeons has not reduced the number of cases (Malmood). According to UNICEF report (2011), 0n cases of maternal and child deaths in Nigeria, it is indicated that one Nigerian woman dies every 10 minutes, while about five hundred (500) newborns die daily in Nigeria as a result of child birth. (UNICEF, cited in Malmood, 2001).

2.5 Nigerian Health Sector Vis-À-Vis Health Policy

The National Health Policy and Strategy to Achieve Health for All Nigerians, promulgated in 1988, has been acclaimed as a good document. The National Health Policy represents the collective will of the governments and people of Nigeria to provide a comprehensive health care system that is based on primary health care. It describes the goals, structure, and strategy and policy direction of the health care delivery system in Nigeria. It defines the roles and responsibilities of the three tiers of government without neglecting the non-governmental actors. Its long-term goal is to provide the entire population with adequate access not only to primary health care but also to secondary and tertiary services through a well-functioning referral system. (Lambo, 2004)

Since the Health Policy document serves as the point of reference in providing a sound foundation for the planning, organization and management of the nation's overall health system, its review became essential when there was a widely perceived urgency for change

following the health summit of 1995. In response, the Federal Ministry of Health organized the review of the policy during 1996 – 1997. (FMH, 2010)

It is also pertinent, at this juncture, to explain that the National Health Policy constitutes a suitable framework for the design and successful implementation of a government-led comprehensive health sector reform in Nigeria. The new policy tends to provide adequate and comprehensive information to viewers, readers or listeners on concise statements on ancillary policies of the main health programmes such as Women Health Issues, HIV/AIDS, Malaria, Immunization, Population, Health Management Information System, and Traditional Medicine.

In a National Health Summit organized in 1995. Participants which included health experts, journalists, leaders, policy makers, health providers, health planners and administrators as well as representatives of health-related sectors examined the factors that had militated against improvement in Nigerian health status and tried to chart a course of remedial action that would take Nigerians into the 21st Century and beyond in good health. The recommendations that emerged from the Summit and other subsequent activities called for the need to take a critical look at the National Health Policy with a view to effecting those changes that would accelerate health development in Nigeria. The Federal Ministry of Health organized the review of the policy during 1996 and 1997. (National Health Summit Report, 1995).

Similarly, there were a lot of efforts by professional organizations (media and Non-Governmental Organizations) and other stakeholders in which they made some written submissions to the Health Ministry on how government and non governmental organization

should serve as partners, press inclusive. This serves as part of their contributions to the development of the health sector reform programme,

After several consultations and submissions by several bodies aimed at providing their possible contributions towards developing the Nigerian heath sector, the health policy came up with a certain conclusion by given special attention to women health issues. Therefore, the overall goal of the National Reproductive Health Policy is there to create an enabling environment for appropriate action and provide the necessary impetus and guidance to national local initiatives in all areas of reproductive health. (FMH, 2010).

The specific objectives are to:-

 Reduce maternal morbidity due to pregnancy and childbirth by 50%, prenatal and neonatal morbidity and mortality by 30%, the levels of unwanted pregnancies in all women of reproductive age by 50%, reduce the incidence and prevalence of STIs including HIV infections, limit all forms of gender-based violence and other practices that are harmful to the health of women and children, reduce gender imbalance on available RH services and reduce the incidence and prevalence of reproductive cancers and other non-communicable diseases.

Furthermore, increase knowledge of reproductive biology (using mediated and interpersonal communication) and promote responsible behavior of adolescents regarding prevention of unwanted pregnancy and STIs.

The major thrusts for achieving the goals and objectives of the National Reproductive Health Policies are:-

1. Advocacy and Social Mobilization (through newspapers, radio, televisions and opinion leaders) to establish the support of policy and decision makers, community members and organizers of Reproductive Health issues.

2. Promotion of Healthy Reproductive Health lifestyle by process of appropriate knowledge to bring about appropriate behavioral change and improve participation in the use of reproductive health services.

3. Equitable Access to Quality Reproductive Health (RH) Services to assure availability of RH issues in the community.

4. Capacity Building and updating the knowledge and skills of healthcare providers and ensuring availability of appropriate materials for effective RH services.

5. Research Promotion to be undertaken to provide information for employing new methods of addressing emerging issues affecting women.

The availability of accurate, timely, reliable and relevant health information is the most fundamental step to be used toward informing the people about public health. Therefore, for effective management of health and health resources, governments at all levels have overriding interest in supporting media and ensuring the availability of health data and information as a public good for public, private and NGOs utilization. (AWMC, 2004)

The planning, monitoring and evaluation of health services are hampered by the dearth of reliable data on a national scale. Until recently, the basic demographic data about the size, structure and distribution of the population were unreliable in Nigeria. The system for the registration of births and deaths including maternal deaths on a national scale are not satisfactory. (CEDAW, 2006)

Again, the system of collecting basic health data on births, deaths, the occurrence of major diseases and other health indicators on a country-wide basis is still developmental. The available estimates are obtained from some centers where such data are collected, from national surveys, from institutional records and from special studies.

Public health Information System can be used:-

(a) To assess the state of the health of the population, to identify major health problems and to set priorities on the local, state and national levels;

(b) To monitor the progress towards stated goals and targets of the health services (For instance, MDGs, goal no 5)

(c) To provide indicators for evaluating the performance of the health services and their impact on the health status of the population;

(d) To provide information to those who need to take action, those who supplied the data and the general public through various media outlets.

It is pertinent to point out that during the second half of the Eighties; some successes were recorded with regards to the state of the health systems and, to some extent, the health status of Nigerians. The primary health care system was developed and strengthened and this helped to improve some of the health status indicators. Among other things, routine immunization coverage increased and this led to reduction in infant and child mortality rates. Unfortunately, this success was not sustained. There has been a downward trend in health development since 1993.

According to World Health Organization in (2000) Nigeria's overall health system performance was ranked 187th among the 191 Member States (World Health Report, 2002). Most of Nigeria's disease burden is due to preventable diseases and poverty is a

major cause of these problems. The maternal mortality rate (about one mother's death in every one hundred deliveries) is one of the highest in the world. Some other health status indicators like under mortality rate and adult mortality rate are higher than the average for sub-Saharan Africa.

It is worrying that, there is no health act describing the national health system and defining the health functions of each of the 3-tiers of government. Health service delivery and quality of care disease programmes like HIV/AIDS, TB, and malaria and other programmes like reproductive health are mostly implemented within a weak health system and have had little impact. (World Bank Report, 2014)

Similarly, a very high proportion of primary health care facilities serve only about 5-10% of their potential patient load, due to consumers' loss of confidence in them, among other causes. (UNICEF, 2013)

2.6 Historical Development of the Print media in Nigeria and its Antecedents in News Delivery

The history of the press in Africa, particularly Nigeria centers on the activities of the colonialists. The British missionaries contributed immensely to the development of education and press in Nigeria. In Badagry, an Anglican priest, Reverend Henry Townsend worked assiduously to establish a vernacular newspaper titled "*Iwe Irohin*." (Omu, 1985).

According to Nwuneli (1985:12) "One of the instruments of African nationalism was the press. Its birth and growth in different colonies depended on such factors as the fear of the nationalism spirit, commitment to the nationalism course and the state of the economy". In a number of instances, introducing what turned out to be the foundations of the "nationalist press" was an European idea but such a beginning served only as a catalyst. In any case, the

African press seemed to have materialized first in the British colonies of West Africa. The Ghanaians in 1857 had one of their earliest African-owned newspapers The *West African Herald*, Nigeria posted its first newspaper, *Iwe Irohin* in 1859. (Okonkwo, 1985)

In Nigeria, the first printing press was installed by the Presbyterian Mission when they arrived in Calabar in 1946. Eight years later, Rev. Henry Townsend fitted up a printing press and inaugurated a printing school in the mission compound at Abeokuta. Townsend, an Anglican, came from England. He was asked to proceed to Abeokuta by the Mission authorities in Calabar to help in ministering the spiritual needs of many Siera Leonian immigrants who were emancipated from slave trade. He arrived Badagry and worked with Sierra Leonian immigrants at his headquarters at a place known as English Town. It is said that during the publication of *Iwe Irohin*, there were at least 300 people in CMS compound who had learnt to read and write, and this generated the need for English man to set the newspaper. (Ekwelie, 1989)

Historical records showed that indigenous newspapers started from Western Nigeria, particularly Badagry, the headquarters of *Iwe Irohin*. Gradually, the nationalist consciousness spread to the East and North with the publication of many newspapers by easterners and northerners. (Omu, 1989)

Some of these newspapers contributed immensely to the actualization of Nigeria as a nation.

Gaskiya Tafi Kwabo and *Citizen*, these two newspapers belonged to the northern-based political party, the Northern Peoples' Congress (NPC). They also emerged as rivals to the *Party* newspapers established by the NCNC and Action Group. *'Gaskiya Tafi kwabo'* an Hausa language newspaper was founded on 1st January, 1939 by the Gaskiya Corporation

which later added to its stable, the *Citizen*, another weekly that (later) metamorphosed into the *New Nigerian Newspaper* on 1st January, 1966. The newspaper was taken over by the Federal Government alongside the *Daily Times* in 1975. (Onuoha, 2012)

The Northern Nigerian government controlled by the NPC had them as its mouthpiece in the struggle for the control of the machinery of the Federal Nigerian Government still under colonial rule. *Gaskiya Tafi Kwabo* means "Truth is worthier than money." While the NCNC used the *West African Pilot* and its group to fight the battle for political supremacy over its counterparts, the Action Group used the *Nigerian Tribune* and the resurrected *Daily Service* to fight its course. The NPC was relying on the *Citizen* and *Gaskiya Tafi Kwabo* for national leadership among its rivals. (Uka, 1989)

The *Comet* newspaper was set up in 1933 by Duse Mohammed Ali, an Egyptian who lived in northern Nigeria. This Egyptian Moslem proprietor had earlier founded the newspaper in London but decided to transfer it to Nigeria in 1933. *The Comet*'s objective was the advancement and promotion of the level of nationalism in Africa through its news reports and editorials. To achieve this objective, the newspaper set out to become militant and nationalistic indeed. It supported and promoted the cause of Nigerian workers as was evidenced by its role in the 1945 worker's strike which led to its ban and proscription by the colonial authorities. (Alozie, 2003)

The *Messenger,* This newspaper established and edited by Ernest Ikoli began publication on 10th March 1921 in Lagos. It was a weekly newspaper sold for three pence and published by the Nigerian Printing and Publishing Company (NPPC) owned by Ikoli. The editorial office of the newspaper was at 24 Odunlami Street, Lagos while it was printed at the Awobola Press, Pearse Square, Olowogbowo, Lagos. It published for some period, and

was briefly interrupted until 1926 when it suspended publication and transformed into the Nigeria *Daily Times* when Ikoli was unable to fund the newspaper alone.

The *Daily Service* was published in 1933 by Ernest Ikoli who had earlier founded the *African Messenger* and edited the *Nigerian Daily Times*. The *Daily Service* later became the official organ of the organization known as the Nigeria Youth Movement (NYM). The newspaper was published under the proprietorship of a lawyer, Mr. Olatunji Caxton-Martins. (Azikwe, 1964)

Other publications include the *West African Advertiser* (1935) published jointly by J.T. John, a surveyor M.O. and Hiege, a businessman, the Eastern *Nigerian Mail* (1933), the *Calabar Observer* (1902). In addition, there are several religious journals founded in the early part of the 20th Century. They include the *Leisure Hours* published by CMS Bookshop in Lagos (1917), the *Nigerian Methodist* (1925), the *African Christian* (1931), the *African Church Chronicle*, 1934 and the *Catholic Life* published in Calabar in 1936 to the 1970s. (Duyile, 1979)

The early 1980's witnessed the emergence of modern newspapers in Nigeria. One significant factor about these newspapers was the availability of trained and skilled manpower to undertake the task of informing, educating and entertaining the people. Moreover, individual businessmen rather than government established them all.

The *Guardian* newspaper is one of the outstanding newspapers in Nigeria. It was established on the 27th of February 1983 by Alex Ibru from Delta State; among those who weaned the paper at the cradle stage were Dr. Dele Cole, Dr Stanley Macebuh and Segun Osoba who were all former executives of *Daily Times*. The motto of the paper is

"Conscience, Nurtured by Truth" and to some reasonable extent, it tries to live up to this motto.

The *Guardian* being an independent newspaper will at all times uphold the need for justice, probity in public life, equal access to the nation's resources and equal protection under the law of Nigeria for all citizens. It aims at presenting balanced coverage of events and of promoting the best interest of Nigeria. It is committed to the best traits and ideals of republican democracy and to the principle of individual freedom. The newspaper believes that all citizens have duties as well as rights. (Alozie, 2003)

Concord newspaper is based in Ikeja, Lagos. The newspaper is published by business mogul and politician Chief Moshood Abiola. The *National Concord* was published along with its weekly edition, *Sunday Concord* on 1st March, 1980. A few years later, he added three vernacular newspapers to its stable in Nigeria's three languages. The newspapers were *Isokan* (Yoruba), *Udoka* (Igbo) and *Amana* (Hausa). (Abiola, 1981). The Concord group later added four more publications to its stable - *Business Concord*, *Weekend Concord*, *African Science Monitor* and *African Concord*. Abiola's *National Concord was* known for its fearlessness and attack on political opponents. The role it played in support of the National Party of Nigeria (NPN) against Chief Obafemi Awolowo's Unity Party of Nigeria (UPN) in the Second Republic politics is still fresh in people's mind.

The *Sun*, which began publication in 2003, has become more influential than some of its older counterparts. It is published in Lagos by Chief Orji Uzor Kalu, former Governor of Abia State. Its style of page design makes it unique among other Nigerian newspapers. The *Sun* is known for its distinct method of reporting news events and its fearlessness. It made a great mark through its detailed reporting of the Tsunami disaster of 26th December, 2004.

The *Sun's* courageous and consistent reporting of the celebrated removal of former Inspector General of Police, Mr. Tafa Balogun as well as the dramatic and controversial "resignation" of Chief Audu Ogbeh as chairman of the ruling Peoples Democratic Party (PDP), is believed to have won *The Sun* larger readership. (Akinfeleye, 1981)

There is also *This Day* newspaper which is noted for centralization of its masthead, a feature that distinguished it from most other Nigerian newspapers. Other newspapers that exist today in Nigeria include *National Interest* published in Lagos, the *Examiner* also published in Lagos but out of circulation at present, *Eastern Voice* (Jos) The publishers of the *Guardian* and *Concord* -Chief Ibru and Chief Moshood Abiola respectively actually paved the way for other newspapers to emerge for instance, Vanguard and Daily trust. Their newspapers were detribalized in content and they employed skilled journalists to cover specialized areas such as health related reports, politics, sports, education, agriculture, science and technology, etc. Despite political challenges also, the *Guardian* is still working strong. (Alozie, 2003).

2.7 Media and health education

Health education is increasing people's knowledge about health issues. This is concerned with the enhancement of health as well as the prevention of ill health. Akinsola, (2010:4) posits that "health education is a carefully planned method to influence or change the attitude and behavior of individuals and communities by increasing their knowledge and understanding of health and diseases".

Bradley cited in Anaeto (2012:6) is of the view that:

> Health education involves teaching individuals' families and communities what to do to be healthy and avoid illness. It involves teaching good health habits and has the following aims: to promote health of mind and body; to promote the use of preventive health services; to enable people change their attitude and behavior and adopt better health habits; to present health teaching in an attractive and acceptable way; to assist individuals and communities to take responsibility for their own health as well as encouraging people to use the curative services.

The mass media play crucial role in the area of health by informing the people about health and medical related issues. In the United Kingdom (UK), according to Wilson, Booth Eastwood, and Watt, (2008), cited in Rodney (2010) daily national newspapers remain a major source of news for clinicians and consumers alike, with about 10 million newspapers sold every day.

Health education in the media is important because to a large extent, it determines the health status of the individuals in the society. The media are to perform the following roles in health education as noted by Silverfine (1991) cited in Anaeto (2010):

The role of mass media is also to create awareness about health issues and problems for the society. It is to teach people so that they may understand health issues (women health issues inclusive)

The mass media is to establish and create forums where health issues will be discussed. Common health problems affecting people will be brought forward. The mass media is to

act as a bridge between health agencies/organizations and the people or community. It is to link individuals or community with resource agencies or group.

The mass media provides formal or informal opportunities to transfer skills and attitudes regarding the promotion of good health to individuals and community members as well as health and development workers**.**

The main purpose of newspapers is to spread information. The print news which is usually consists of reports of events and activities, including articles on a particular topic, and editorial that can share more light on issues affecting women in one way or the other. Health discussions can fit into any of these categories. (Gupta and Sinha, 2010). Health reports in newspapers might be a report of a launching of immunization campaign, family planning campaign, ante-natal campaign, or a speech about health made by a well-known official. A health feature might be an article by a doctor about a certain disease or health practice. A health editorial might urge people to take part in a clean water programme. Newspapers reach many people very quickly. The press can play a very important part in increasing people's knowledge about health; that news coverage tends to ascribe the power to control individual's health to medical experts.

Editors and reporters often dwell more on political issues while pay little attention on issues coming from teaching hospitals, primary health care congressional hearings. There is still not enough good investigative digging. For instance, women's groups in some developing nations not the media raised the issue why so much medical research deals with the medical problems of men and slight those of women. (Otten, 2010).

It’s not possible to think of developing a country without improving public health, journalists have a role to play though it is limited by scientific and technical complexity of medical terms, huge importance of the economy and policy in these topics.

For a journalist to improve public health reports, this means not only to collect information but also to verify it and to make it understandable to all. Spreading false information could be very dangerous.

2.8 Why health communication is important in public health

Health communication is seen to have relevance for virtually every aspect of health and well being, including disease prevention, health promotion and quality of life. Health communication can lead to social and psychological influences on behaviour and health. Given the global challenges posed by major threats, health communication scholars and practitioners recognize the importance of prevention and, with it, the need to understand human behaviour and perceptions. According to Rimal, (2003:5)

> Communication is at the heart of who we are as human beings. It is our way of exchanging information; it also signifies our symbolic capability. Health communication serves an instrumental role (e.g. it helps one acquire knowledge) but it also fulfils a ritualistic function, one that reflects humans as members of a social community. Thus, communication can be defined as the symbolic exchange of shared meaning, and all communicative acts have both a transmission and a ritualistic component.

Intervention efforts to change behaviors (for instance, encouraging women to patronize reproductive health packages) are communicative acts. In adopting the transmission view of communication, it is reasonable to think carefully about the channels through which intervention messages are disseminated, to whom the message is attributed, how audience

members respond and the features of messages that have the greatest impact. These considerations reflect the essential components of the communication process: channel, source, receiver and message, respectively. In this view, however, target audiences are conceptualized as members of social networks who interact with one another, engage in social ceremony and derive meaning from the enactment of habitual behaviours. (Parrot. 1996).

Communication is a dynamic process in which sources and receivers of information continuously interchange their roles. One of the central tenets of health communication interventions–the need to conduct extensive formative evaluation, audience needs assessment and message pretesting – is the direct offshoot of this understanding.

Use of these health communication principles in public health presents challenges. First, the evaluations of communication interventions, especially those using national mass media, print media inclusive-need to know the prominence given to the issue. The responsive and transactional nature of health communication interventions also means that modification in intervention content may occur, adding an additional challenge to the evaluation process. This complexity of health behaviour determinants also requires a multidisciplinary approach for effectively promoting change, which further means that interventions need to incorporate expertise from a variety of professional backgrounds. Finally, because of the rapidly changing communication channels, health communication interventions need to make extra efforts to meet their audiences at their level through various media. (Rimal, 2003)

Health communication has much to celebrate and contribute. The field is gaining recognition in part because of its emphasis on combining theory and practice in

understanding communication processes and changing human behaviour. This approach is pertinent at a time when many of the threats to global public health (through diseases and environmental calamities) are rooted in human behavior by bringing together researchers and practitioners from diverse disciplines and adopting multilevel theoretical approaches, health communicators have a unique opportunity to provide meaningful input in improving and saving lives. (WHO, 2009).

In an attempt to understand the above discussions, some studies have revealed that, the media in Nigeria are under reporting issues relating to health education or even those related to sexual and reproductive health among adolescent and young people. A base line survey has found a pointer to this as discovered during the survey that 1,882 copies of newspapers analyzed, featured 746 stories on sexual and reproductive health, making the results known, media researcher, (Fatade, 2013) revealed that:

> Only 50 of these stories amounting to 6.7% of total stories touched on a adolescent sexual and reproductive health. Most of the 746 stories were from events and workshops, with only one investigative piece; meaning that the findings portrayed journalist are still fixated on figures.

Further findings from the survey have also shown that the use of stigmatizing expressions is still rampant among the media in Nigeria. It is also worthy of note that in the research, media is still using stigmatizing expressions like HIV/AIDS victims, among others. Again, (Falade, 2013) added that:

> Analysed articles in Daily Trust, Guardian, Daily Sun, Punch, Tribune, Aminiyya… individuals from the organization, non of the organizations, the respondents worked for has an explicit policy on covering sexual and reproductive health, nor on HIV issues. Some even thought that abortion, condom and other contraceptive use among adolescent, and young people were still controversial, as such, the developmental agencies should engage different levels of staff in news rooms to improve coverage of the issue.

Contrary to developing nation's figures-there has been a study in the U.S which was meant to address the extent to which health news has been a part of the national news agenda. The study on how health news can be part of the national news agenda revealed that in US health topics often get the most coverage. Also the research reveals that health news was among the biggest eight subject in American national news, comprising 3.6% of all coverage. This is more than 3 times the amount of coverage for education or transportation, but much less than the coverage about foreign affairs, crime or natural disasters. (See http://www.journalism.org "Americans learned health care")

It was also discovered by the researchers (Americans learned health care, 2007) that network evening news viewers were the most likely to find health news in their programming. Looking at every news cast in US (Monday-Friday) on the three evening news programmes, from January 2007 through June 2008 reveals that fully 8.3% of air time was devoted to health related issues, with heavy emphasis on specific ailment. The single disease to get the most attention was cancer, accounting for 10.1% of all health coverage. Some of this attention was driven by announcement of cancer in to public figures which make it an issue of discussion. The number two condition was diabetes/obesity at 5.2% of coverage, followed by heart disease, at 3.9% and HIV/AIDs at 2.2%.

In a work titled "Nigeria Media (print media) should provide better Coverage of health issues" Ibeh (2014) says that "Majority of our health stories are hidden where our expected audience cannot access them"

In March, 2014, a coalition of civil society organizations called for an improved relationship with the media on issues surrounding maternal, new born and child health (MNCH). In related issue the bodies committed to promoting accountability and

transparency in the health sector through regular media engagement, generating evidence and using such to advocate to government for better accountability that will reduce the maternal and child health in Nigeria. (See http://mediareportinghealth.bl)

The above aforementioned statement is in line with the Regional Coordinator, North (Evidence for Action) Magashi who also noted that:

> Our stories must be written from the human angle; from the angle of women in our hospitals; from the wheel barrow pusher's angle and not always from the minister's or commissioner's angle, such angles hold public office holders accountable.

As such, Nigerian media must learn to focus on the people affected by health issues; treating people as statistics come to an end. There is need for sharing their personal stories. Journalist reporting on health issues should be powerful to take the public office holders out of their offices to the streets. (Magashi, 2014)

Coverage occurs as journalists "select some aspect of a perceived reality and make it more salient in a communicating text, in such a way as to promote a particular problem definition, causal interpretation, moral evaluation, and or treatment recommendation for the item described" (Entman, 1993:52), also noted that "Frames emerge as the presence or absence of certain key words, sources of information, and sentences that are straight forward". Media scholars have argued that it is important to understand the ways in which journalistic framing of issues occurs, because framing influences public understanding and, consequently, policy formation.

In the realm of health-policy formation, framing may have a large impact on public health (Walsh-Childers, 1994). How health and risk issues are framed is important because the

media may affect the nature of regulation, the course, or the direction of research and development" (Nelkin, 1989).

For instance, during the 1990s, several policy changes related to breast cancer and implants were enacted, in part as a result of raised public concern and media coverage of that concern across the globe. Media coverage of controversial technologies has a tendency to highlight competing interests of the policy actors through disputed data and opposing judgments about risk. When scientists are identified as policy actors, they are perceived as "the source of authoritative evidence and definitive solutions" (Nelkin, 1989). However, if the media did not explore scientific issues involving health risk disputes, the public would be left with little or no basis for making meaningful judgments about policy actors'.

2.9 The Influence of the Mass Media on Health Policy

A lot of questions were raised whether the media-newspapers, magazines, radio, and television-influence governmental health policy, the answer should be "of course." Ask just how the media do it, and you will get a dozen different answers. Some people say the all-powerful media essentially set the governmental agenda. No, say some, press coverage simply moves higher on the agenda on issue already growing at the grassroots. Other respondents suggest that the media act merely as a conveyor belt for interest groups seeking government action, while some still note that by exposing shoddy or illegal behavior, the media impel governments to corrective steps.

The media's role in health policy is not essentially different from their role in foreign policy or energy policy or labor policy, except that health policy may be a more intimate concern for most people. A steady stream of medical advances and a steady rise in medical costs have made health and health policy a major subject of news and feature coverage.

Some newspapers have regular health beats and special health sections or health pages, staffed by well-informed reporters, while some do not. Radio and television stations offer regular medical programs, often presented by doctors. Several university programs expand journalists' background on health topics. (Otten, 2010)

According to Powers and Fico (1994:12) "The availability of numerous information sources, journalists' decisions to use them may be influenced by concerns other than audience needs or adherence to professional standards". Results from a survey of journalists from top-circulation newspapers indicate that news content was most powerfully shaped by journalists' own orientation toward source qualities.

Others have suggested that news is written for the political and economic interests of men. For example, distinction has been drawn between hard news which is serious, important, and masculine in nature, while soft news is likely to be written by female reporters for female readers (Rakow & Kranich, 1991).

Holland (1987) added that two prominent themes in television news—excitement and seriousness—are both based on masculine values. This is why news is not one of women's favorite categories of television programming. Both television news and newspapers, the media outlets are directed at general audiences; it appears that male interests tend to dominate those presumed of the general audiences. However, women's magazines should not be as subject to this criticism because their writers may be more likely to be female, and their audiences are clearly dominated by female readers. For instance little research has examined news framing of breast cancer; early studies on implant coverage suggest that the media were biased against their use (Anderson & Larson, 1995).

2.10 Theoretical Framework

Agenda-Setting Theory The link between health and in our case, women health issues, and the media does have theoretical bases. The Agenda- Setting Theory does provide the framework for explaining the coverage of women health issues in Nigeria. (Hanson and Maxcy cited in McCombs and Shaw, 1972) as having stated that, "readers learn not only about a given issue, but also how much importance to attach to that issue from the amount of information in a news story and its position". They add that, the media exert considerable influence on certain issues by persistently presenting objects suggesting what individuals in society should think about, know about, and have feelings about. Rogers and Dearing's' (1987) model provides for (i) media agenda, (ii) public agenda, and (iii) policy agenda. This study is not about determining public agenda, but it would be interesting to find out whether the policy agenda on women health issues in Nigeria has impacted on media agenda seen through newspaper coverage and portrayal of the same subject matter.

The use of media to deal with public health issues is an important aspect of coverage. It is obvious that selection of news stories is well recognized as an agenda setting function of the media, and by it, they serve as the forum for the consideration, and also presentation of public health issues. Hence the media are regarded as powerful mechanisms to promote and educate the public on health issues, including women health issues. (Holder and Treno, 1997; cited in Rodney, 2010).

Thus, for the purpose of the on-going discussion on women health issues, the Agenda-setting media theory is relied upon. Agenda-setting as (Mc Quail, 2005:426) puts it, is a process by which the relative attention given to items in news coverage influences the rank

order of public awareness of issues and attribution of significance. It assumes that the more the media attention on the issue, the greater the importance attributed to that issue by the audience.

It is a noticeable element that the major accusation against the media is that "powerful accredited" sources, such as government departments or courts enjoy privileged access to the media. Mc Combs (1973) elaborates further that the power of the news media to set a nation's agenda, to focus public attention on few public issues; is an immense and well documented influence. Not only do people acquire factual information about public affairs from the news media, society also learns how much importance to attach to a topic on the basis of emphasis placed on it in the news. Newspapers provide a host of cues about the salience of the topic in daily news, lead stories on page one, how it has been displayed through the usage of large headlines, etc. (Oladunde & Ajibola, 2009).

Agenda building is accelerated when well-known individuals begin to speak out on an issue (Severin & Tankard, 1992, cited in Soola & Alawode, 2007). The theory holds the assumption that there is a relationship between news coverage and public perception of the importance of issue. Finally, a prominent dimension in agenda-setting is the suggestion that the press rather than reflects societal realities is more like a search light, and where the search light is shinning can be affected by groups with special interests in an issue. (Shoemaker & Mayfield, 1984, cited in Severin & Tankard, 1992).

Development Media Theory. This is seen relevant in treating women health issues problems in Nigeria. The main assumption of the theory was that communication serves as

an engine-wire for development, there can be no development without communication. Therefore McQuail posits that the media must accept and carry out positive development tasks in line with national established policy (McQuail, 1987).

Similarly, the theory paves ways for policy makers to design certain strategies towards improving public health as well as women health issues. Despite the strength of the theory some of the weaknesses cannot be ignored. As scholars do not seem to agree on one of the assumptions of the theory which says "in the interest of development, the state has a right to intervene in, or restrict media operation and devices and direct control can be justified". (Anaeto, Onabajo & Osifeso, 2012). Scholars still argue that the assumption goes again the working of press freedom which distracts the principal idea of development.

Women health issues being an issue of development has become a global issue, giving attention to it by the media, stake holders such as policy makers, government and NGOs will make them feel that women health issues is a crucial issue which needs to be given attention.

2.10.1Theory Justification

This study is anchored on the Agenda-setting theory and Development media theory. However, regardless of its criticism and certain constraints, Agenda-setting theory cannot be ignored, as the theory has some practical relevance in the way and manner in which press cover issues, especially those related to women health. Newspaper can publish reports consistently on how women can engage in ante-natal examination, fibroid examination, and breast-self examination through the application of agenda setting function

in publishing news reports on the said issues on the front pages, inside pages or back pages (Soola, 2003).

The agenda-setting theory allows us to study the kind of prominence press is given to a particular issue; this makes us to understand how Vanguard and Daily Trust cover issues related to women health. Similarly, journalism as a profession has moved towards specialization in the news coverage of some key areas, women health inclusive. It is pertinent to point out that newspapers readers want to be educated, not just to be informed. And that, print media have been found to be effective media in influencing the reading public as well as opinion leaders on issues of public health through the constant application of agenda-setting (Evans and Ulasevich, 2005).

Similarly, development media theory is seen relevant in treating women health issues in Nigerian newspapers. Primarily, the theory is rooted towards assessing the mass media in achieving development in developing nations. McQual is of the view that since the four theories of the press (Authoritarian, Libertarian, Soviet/Communist and social responsibility) by Schramm, Peterson and Siebert are considered inadequate in explaining the media system of developing nations, thus the need for another theory becomes necessary.

Furthermore, in the service of any development, media are agents of social change. The kind of change they are expected to accomplish is the transition to new customs and practices. A consistent report on ante-natal issues is a good transition to new custom, and reportage on cases of VVF or Fibroid has also become essential. Breast cancer is one of the

women health issues which its treatment constitutes a great physical, psychological, economic and developmental challenge that demands special attention by the Nigerian press. (Wyne, et al 2003).

The press also played a pivotal role in the development process of a country, making newspapers channels of communication that are capable of reaching heterogeneous audience simultaneously with uniform massages. In Nigeria, press regularly covers all sorts of issues such as health, crime, sports or political news (Soola, 2003).

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The method adopted for this study is content analysis; it is a method of communication research for analyzing media content. According to Babbie, (2005:328) Content analysis is "the study of recorded human communication such as books, websites, paintings, and laws". Among the forms suitable to use is mass newspapers. It is also a systematic method of analyzing message content of certain communicators. (Soola & Alawode, 2007).

3.2 Newspapers Analyzed

Vanguard newspaper was established in 1983 and fully operated in 1984. As a kind of development, the maiden copy of Vanguard hit the news stands as a weekly paper on Sunday June, 3rd 1984 with the motto: "Towards a better life for the people" Gradually, the paper went daily on July, 15th 1984. The motive behind the establishment of the paper is to serve the people through unflinching commitment to free, enterprise, the rule of law and good governance.

Between 1988 and 1995, it published among others, Mr. & Mrs. Magazine (a compilation of popular comic cartoons on the front page of the paper). As at today, the paper has the daily Vanguard, Saturday Vanguard and Sunday vanguard all in circulation. The paper is also to take care of specialized interests. These include: financial vanguard, sweet crude, hi-tech, sports vanguard and cyber life. Major among vanguard features include: sport, advertising, management and marketing, maritime, energy, Hi-tech and computer, aviation,

business, banking, tourism, health, labour, human angle and women affairs, politics, education and insurance.

Vanguard is considered as one of the leading newspapers in Nigeria today. It has developed a rich heritage as the most entertaining, refreshing, authoritative and reader friendly newspaper in Nigeria. In order to meet the growing demands of the market, the paper circulates 20,000 copies daily in Lagos, Abuja 12,000 copies, South-South 25,000 copies, South-East 15,000 copies, North Central 18,000, North-East 7,500 copies. These total 120,000 copies with a print run of 130,000 copies daily.

The internet address reads as http:/www.vanguardngr.com. The paper's Vision is to be the best media group with the widest reach, highly motivated human capital and latest technology. The Mission is to impact positively on their readers/clients and society by providing high quality, reliable and affordable media products for promoting knowledge, political stability, and economic prosperity. The core values are: equity and fairness, integrity, people centeredness and excellence. (See Vanguard online-about us at http://www.vanguardngr.com)

The Daily Trust is published in conjunction with Weekly Trust newspapers and together they represent the widest circulating newspaper in Northern Nigeria, even though the newspaper is produced locally in Nigeria; it is distributed locally and internationally.

Media Trust is a privately held Nigerian Newspaper publishing company based in Abuja that publishes the English Daily Trust, Weekly Trust, Sunday Trust and Hausa language Aminiyya newspaper.

The Weekly Trust was established in March 1998 and the Daily Trust was launched in January, 2001. The two newspapers are the largest circulating newspapers in Northern

Nigeria and the group of newspapers ranks among the top seven in Nigeria in advertising. The newspaper has online editions, accessible through www.dailytrsut.com and the content of the newspaper is republished by all Africa and Gamji.

The company presents the "Daily Trust African of the Year" award, recognizing and celebrating Africans who have made positive contributions that impact the lives of other people and elicit a Pan-African attention during the award year. (see About Media Trust at www.dailytrust.com)

3.3. Rationale for the selection of the newspapers:

The Newspapers in Nigeria are categorized into "Lagos-Ibadan axis" and the Abuja-Kaduna axis" representing the northern and southern part of the country, (Yusha'u, 2010). The regional dichotomy is obvious, and is reflected in the way Nigerian newspapers report issues. The justification for the selection of the two newspapers was based on four important considerations. The first reason was based on existing newspapers in the country during the period of the study. The second reason was based on frequency of publication (how often the papers are in circulation). The third reason was based on mass circulation. The fourth reason was based on the consideration that the two selected newspapers can serve the interest of both north and the south.

3.4 Study variables

According to Ujo (2004:47) "The dependent variables is the expected outcome of the independent variable while independent variable is the cause of change in the values of the dependent variable.

The study has two variables (dependent and Independent), the dependent variable for this study is "media coverage" while the independent variable for the study is "women health issues"

3.5 Population

Universe of the study were the issues of Daily Trust and The Vanguard newspapers published and circulated in Nigeria between January 1, 2011 and December 31, 2012 (24 months). These publications were chosen for inclusion of health and medical content. These two newspapers were selected from the top ten national dailies in Nigeria namely: *Daily Trust, The New Nigerian, Champion, The Punch, Vanguard, The Guardian, The Sun, Daily Independent, Tribune, and This Day.* The two newspapers purposively selected from the ten above are: *Daily Trust (*to represent Northern Nigerian ownership, *The Vanguard* to represent elite readership and popular readership and the South. This population amounted to a total of 1460 issues of the two purposively selected national dailies.

3.6 Sampling technique and size

Assessment of the content of all national dailies for their coverage of women health issues is impracticable. For this reason, a purposive choice of two national dailies was made. The two purposively selected papers as mentioned are: *Daily Trust and the Vanguard.* Each of

the two newspapers contributed 730 issues (for 24 months editions) while the two newspapers contributed a total of 1460. (The entire population) The study employed 14.25 percent sampling rate to make up the sample size. Kerlinger, 1979 and Babble, 1990, cited in Batta, 2012) recommended a sampling rate of 10 to 20 percent for the purpose of determining sample size. Consequently, 14.25 percent of 1460 newspaper issues gave us 208 issues of the two selected papers as the sample. This meant that each of the two publications contributed 104 issues to the sample i.e. 52 issues per year and 104 for the two years of the study period. The selection or method employed in picking the sample is in line with some scholars view as Berelson (1962) stated, a small representative sample of a certain population will produce exactly as realistic a result of analysis of a larger one. To select the 208 issues in the sample from a population of 1,460 involve dividing the population by the sample size and obtaining the skip interval of seven. (Stacks and Hocking, 1999)

The researcher attempts to adopt systematic random sampling technique which is the selection of every **nth** element out of a total population size. The first category is always obtained by a random selection while subsequent entries are selected based on interval or equal chance. (Kombo and Tronp, 2006).

The study is restricted to newspaper coverage of women health issues between 2011and 2012 (Two years coverage). The two newspapers are purposively selected after rationalizing the papers for availability, continuous existence and national coverage. From the total population of 1460 editions, 208 issues were analyzed.

3.7 Unit of Analysis

Unit of Analysis constitutes the single unit about which or whom descriptive and explanatory statements are made. (Babbie, 1990) It is, really what the researcher counts and categorizes. According to Akpan (1990:12) "could be a word or symbol, the theme (both straight news and in-depth reports), sentence or paragraph of the item". In this study, the newspaper story or article which may come in the form of news, feature, editorial, letter, or column is considered as the unit of analysis. (Hocking and Stacks, 1999). The following units of analysis were analyzed: Feature, Straight news, Editorials and Opinions.

3.8 The content Coding Categories used to guide this Study are as follows:

According to Berelson (1962:147) "Content analysis stands or falls by its categories. Particular studies have been productive to the extent that the categories were clearly formulated and well adapted to the problem and to the content."

The following content categories were constructed for the Purpose of generating answers to the research questions:

-**Women health issues** (such as breast cancer, vesico vigial fistula, candidiasis, eclampsia, pelvic inflammatory disease, dysmenorrea, genital mutilation, fibroid, ovarian cancer and cervical cancer)

-Other health issues (such as malaria, hypertension, ulcer, diabetes, pneumonia, tuberculosis, osteoarthritis, sexual transmitted diseases and sickle cell anemia).

-Positive angle of women health issues report. For instance, a positive angle entails whether a report portrays, the establishment of maternity health centers, adequate drugs and good family planning packages.

-Negative angle of women health issues report. This negative angle entails issues covered by the newspapers such as inadequate maternity health centers, inadequate drugs related to ante-natal and poor family planning packages.

3.9 Instrument for Data Collection

Coding Sheet:

The coding Sheet as an instrument for data collection was designed from the content categories in order to elicit data in a tally format which will be later analyzed. Coders were used to code the data within eight weeks from the date of commencement of data gathering. The coding sheet was self-designed to take care of the four main categories and subcategories (see appendix i).

3.10 Analysis of Data

The data obtained were analyzed using tables, simple percentage and the Computer Statistical package for the social science (SPSS) in an attempt to answer the research questions raised by the researcher.

3.11 Validity and Reliability

Validity is the extent to which an instrument measures what it is intended to measure. The coding sheet was also field-tested using 20 editions of the newspapers which were not part of the study sample during the pilot study.

Similarly, reliability and adequate sampling are necessary (Ramallo, 1966). Intercoder reliability is known as the terms used to understand the extent to which independent coders evaluate a characteristics of a message in order to reach the same conclusion (Lombard, Synder-Duch and Bracken, 2002).

It is also noted that when human coding is employed intercoder reliability is necessary and essential criterion for valid and useful research (Neuendorf, 2002).

The researcher in an attempt to achieve reliability in the study used of percentage agreement between coders. The agreement includes the percentage of all coding decision made by the coders (Lombard, et al, 2002).

For quality control two HND II students were selected and trained by the researcher. The newspapers content analyzed are: Vanguard and Daily Trust. Also from the date of the commencement of the data gathering each of the coder made a total of 730 codes making a total of 1460 from the total editions of the newspapers. The inter-coder reliability coefficient is 89.97, which meets the required standard acceptance as suggested by Lambard, etal 2002).

The formula of inter-coder reliability coefficient (ICRC) used is

$$CR = \frac{2m(100)}{N_1 + N_2} \%$$

Where M = Number of coding agreed by both coders

N = Total number of coding decision made by each codes.

CHAPTER FOUR

DATA PRESENTATION, INTERPRETATION AND ANALYSIS

4.1 Introduction

This chapter presents the data generated, analyzes them and interprets same for the purpose of answering the research questions. The chapter also covers data presentation analysis and interpretation of results which leads to answering the research questions vis-as-vis the objectives of the study.

4.2 Data Presentation

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Table 1: Coverage of Women Health Issues by *Vanguard and Daily Trust*

Women Health Issues	**Vanguard**		**Daily Trust**		**Total**	
	F	%	F	%	F	%
Eclampsia	2	3.70	1	0.96	3	1.84
Pelvic Inflamatory Disease	--	--	1	0.96	1	0.61
Breast Cancer	12	20.68	22	21.15	34	20.86
Vesico Viginal Fistula	4	7.41	7	6.73	11	6.75
Candidiasis	3	5.56	--	--	3	1.84
Dysmenorrea	--	--	1	0.96	1	0.61
Genital Mutilation	--	--	11	10.57	11	6.75
Cervical Cancer	1	1.85	--	--	1	0.61
Fibroid	2	3.70	9	8.65	11	6.75
Ovarian Cancer	6	11.11	21	20.19	27	16.56
Others	28	44.44	31	29.80	59	36.81
Total	**58**	**100.0**	**104**	**100.0**	**163**	**99.99**

The above table shows slight difference between Vanguard and Daily Trust vis-as-vis the coverage of women health issues. However, Daily Trust had the higher coverage than Vanguard when considering each aspect of the coverage. In the case of Female Genital

Mutilation, Daily Trust coverage constitutes 10.57%, while Vanguard discovered nothing in that case. Candidiasis, vanguard had the higher frequency, because Daily trust did not cover a single item in respect of candidiasis. In terms of the other women issues both the two papers almost covered the issue the same way.

Table 2: Coverage of Other Health Issues by *Vanguard and Daily Trust*

Other Health Issues	**Vanguard**		**Daily Trust**		**Total**	
	F	%	F	%	F	%
Diabetes Mellitus	22	9.91	19	8.72	41	9.32
Hypertension	11	4.95	16	7.33	27	6.14
Malaria Fever	22	9.91	27	12.39	49	11.14
OstheoArthritis	1	0.45	--	--	1	0.23
Pneumonia	2	0.90	3	1.38	5	1.14
Tuberculosis	10	4.54	10	4.59	20	4.55
Sexually Transmitted Diseases	29	13.06	30	13.76	59	13.41
Ulcer	--	--	1	0.46	1	0.23
Sickle Cell Anaemia	3	1.35	5	2.29	8	1.81
Hepatitis	8	3.60	3	1.38	11	2.50
Others	114	51.35	104	47.70	218	49.55
Total	**222**	**100.0**	**218**	**100.0**	**440**	**100.0**

Table two indicates no much difference in terms of coverage of other health issues between Daily Trust and Vanguard newspapers. In fact, there are some aspects of the coverage of other health issues in which Vanguard had the higher frequency than Daily Trust and vice versa. It is a noticeable element in respect of the disease Osteoarthritis where a single item was not covered from the side of Daily Trust while Vanguard covered just an issue in respect of the diseases. In the case of Ulcer the same thing happened. This time, Daily Trust covered the issue once, while from the side of Vanguard, nothing was discovered. In

terms of the remaining cases, almost both the papers covered the cases without much difference.

Table 3: Positive/Negative perspective of the Coverage of women Health Issues by *Vanguard and Daily Trust*

Perspective	**Vanguard**		**Daily Trust**	
	F	%	F	%
Positive	48	82.75	22	21.15
Negative	10	17.24	82	78.85
Total	**58**	**99.99**	**104**	**100.0**

Table three reveals that Vanguard recorded higher frequency than Daily Trust. The coverage constitutes 82.75%, while Daily Trust coverage constitutes only 22.15%. This might be in line with the assertion that Daily Trust attaches prominence to the issues related to Northern part of Nigeria, in which the part is considered as the one with the highest cases of maternal and infant mortality. As such, the pattern of the coverage of Daily trust deviates from the positive angle. (A positive angle entails whether a report portrays, the establishment of maternity health centers, adequate drugs, good family planning packages, etc. For instance, Vanguard of February, 2012 page 12 reads as "*Delta archives 48.5 % reduction on maternal mortality rati*o")

Table 4: Positive/Negative perspective of the Coverage of Other Health Issues by *Vanguard and Daily Trust*

Perspective	**Vanguard**		**Daily Trust**	
	F	%	F	%
Positive	109	49.09	111	50.92
Negative	113	50.09	107	49.08
Total	**222**	**99.99**	**218**	**100.0**

Table four reveals not much difference in terms of positive/negative angle of the report of other health issues by the two newspapers. Vanguard has 49.09, Daily Trust 50.92 positively.

Table 5: Size of the Coverage of Women Health Issues

Size	**Vanguard**		**Daily Trust**	
	F	%	F	%
Full Page	6	10.71	6	5.77
Half page (1/2)	12	21.43	20	19.23
Quarter Page (1/4)	8	14.29	32	30.77
Other Sizes	30	53.57	46	44.23
Total	**56**	**100.0**	**104**	**100.0**

Table five shows that Daily Trust covered the women health issues majorly on other sizes (sizes that are neither full page, half page nor quarter page), followed by half pages, quarter pages and full pages respectively, while majority of Vanguard reportage on women health issues were on other sizes, followed by quarter pages, half pages and full pages respectively. However, both the two papers had six coverage reflected on full pages. This is clear indication that they almost treated the issue the same way vis-as-vis length of the reports.

Table 6: Page Placement of the Coverage of Women Health Issues

Size	**Vanguard**		**Daily Trust**	
	F	%	F	%
Front Page	2	3.45	13	12.50
Inside Page	56	96.55	90	86.54
Back Page	--	--	1	0.96
Total	**58**	**100.0**	**104**	**100.0**

The above table portrays that with Vanguard, majority of its women health coverage were placed in the inside pages with about 96.55%. While majorly with Daily Trust, women health issues placed also inside pages. However, it seems to be clear that Vanguard had only 3.45% of its report on women health issues placed on the front page, while Daily Trust had 12.50% allocated to front page..

Table 7: Source of the Coverage of Women Health Issues

Sources	**Vanguard**		**Daily Trust**	
	F	%	F	%
Government	12	20.69	28	26.92
NGOs	16	27.59	10	9.62
Journalist	12	20.69	26	25.00
Medical Practisioners	6	10.34	32	30.77
Other Sources	**12**	**20.69**	**8**	**7.69**
Total	**58**	**100.0**	**104**	**100.0**

Table seven reveals that Vanguard acknowledged most of its report on women health issues to NGOs followed by both government and journalist sources, but little issues were attributed to medical practitioners.

Contrary to the above, Daily Trust had majority of its report on women health issues from medical practitioners, followed by government sources, journalists and NGOs. This implies that medical practitioners contributed more in Daily Trust than Vanguard newspaper.

In March, 2014, a coalition of civil society organizations called for an improved relationship with the media on issues surrounding maternal, new born and child health (MNCH). In related issue, the bodies committed to promoting accountability and transparency in the health sector through regular media engagement, generating evidence

and using such to advocate to government for better accountability that will reduce the maternal and child health in Nigeria. (See http://maternalmortalityratio.hbl)

Table 8: Type of Reports on the Coverage of Women Health Issues

Nature of Coverage	**Vanguard**		**Daily Trust**	
	F	%	F	%
Straight News	16	27.59	54	51.92
Features	16	27.59	20	19.23
Editorial	0	--	0	-----
Opinion	10	17.24	9	8.65
Others	16	27.59	19	18.27
Total	**58**	**100.0**	**104**	**100.0**

The table shows that Vanguard reported women health issues as straight news, features and other stories all at 27.59% followed by opinion with 17.24%, while Daily Trust overwhelmingly reported women health issues as straight news by 51.92%, features the issues by 19.23%, others nature of coverage at 27.59 and opinion with 8.65%.. On the other hand, a single issue was not discussed by the decision makers of Vanguard as editorial or Daily Trust. This signifies that the Daily Trust attach importance to the issue.

Table 9: Size of the Coverage of other Health Issues

Sizes	**Vanguard**		**Daily Trust**	
	F	%	F	%
Full Page	58	26.13	42	19.27
Half page (1/2)	69	31.08	100	45.87
Quarter Page (1/4)	68	30.63	50	22.94
Other Sizes	27	12.16	26	11.93
Total	**222**	**100.0**	**218**	**100.0**

The above table reveals that vanguard covered other health issues majorly as half pages and quarter pages with 31.08% and 30.63% respectively, followed by full page which is

unusual in this case. Further more, Daily Trust reported the other health issues majorly on half pages, followed by quarter pages, full pages and other sizes.

The figures signify that Vanguard did very well in respect of the coverage of other health issues by devoting significant number of sizes of half pages, quarter pages as well as full pages.

Table 10: Page Placement of the Coverage of Other Health Issues

Size	**Vanguard**		**Daily Trust**	
	F	%	F	%
Front Page	10	4.50	20	9.17
Inside Page	212	95.49	198	90.82
Back Page	--	--	--	--
Total	**222**	**100.0**	**218**	**100.0**

Table 10 reveals that there is no difference between the placement of other health issues by Vanguard and Daily Trust. The two newspapers give prominence to inside pages, while placing only few cases of other health issues on front pages. In respect of back pages nothing was discovered from the two newspapers.

Table 11: Source of Coverage of Other Health Issues

Source	**Vanguard**		**Daily Trust**	
	F	%	F	%
Government	101	45.49	45	20.64
NGOs	48	21.62	32	14.68
Journalists	54	24.32	38	17.43
Medical Practisioners	9	4.05	21	9.63
Other Sources	**10**	**4.50**	**82**	**37.61**
Total	**222**	**100.0**	**218**	**100.0**

Table 11 points out that there is significant difference as far as the source of the report is concerned; vanguard attributed most of its report on other health issues to government, journalists acknowledge the issues with 24.32%, followed by NGOs, medical practitioners and other sources. Daily Trust however overwhelmingly got its other health issues report from other sources (neither NGOs, journalists, government nor medical practitioners)

Being the government had the highest figures related to the sources of report by Vanguard newspaper, this might attributed to the fact that the paper covered the issues from places in which their governments are doing better in terms of health matters, even though some pointed out that most of the reports were politically motivated.

The aforementioned statement is in line with the position of the Regional Coordinator, North (Evidence for Action) –(Magashi, 2014)

> Our stories must be written from the human angle; from the angle of women in our hospitals; from the wheel barrow pusher's angle and not always from the minister's or commissioner's angle, such angles hold public office holders accountable.

As such, Nigerian media must learn to focus on the people affected by health issues; treating people as statistics to come to an end. There is need for sharing their personal stories. Journalist reporting on health issues should be powerful to take the public office holders out of their offices to the streets.

Table 12: Type of Reports of the Coverage of Other Health Issues

Nature of Coverage	**Vanguard**		**Daily Trust**	
	F	%	F	%
Straight News	120	54.05	77	35.32
Features	50	22.52	29	13.30
Editorial	2	0.90	0	--
Opinion	26	11.71	8	3.67
Others	24	10.81	104	47.71
Total	**222**	**100.0**	**218**	**100.0**

Table 12 has also shown that there is difference between Vanguard and Daily Trust on type of reports of other health issues. It is clearly shown that straight news dominated the report on the two papers. Vanguard also features the other health issues higher than Daily Trust. Further more, Vanguard also editorialized the issue twice which is very unusual.

TABLE:13 CROSS TABULATION OF WOMEN/OTHER HEALTH ISSUES BY VANGUARD AND DAILY TRUST FOR 24 MONTHS-2011-2012

Vanguard												Daily Trust												Level of Significance		
EC	PID	BC	VVF	CD	DY	GM	CC	FB	OC	OTHERS	TOTAL	EC	PID	BC	VVF	CD	DY	GM	CC	FB	OC	OTHERS	TOTAL	X^2	DF	P (P<0051)
2	--	12	4	3	--	4	1	2	6	20	58	1	1	22	7	--	1	11	--	9	21	31	104	18.307	10	0.000
DM	HD	MF	OA	PN	TB	STD	UL	SCA	HT	OTHERS	TOTAL	DM	HD	MF	OA	PN	TB	STD	UL	SCA	HT	OTHERS	TOTAL	X^2	DF	P (P<0051)
24	11	34	5	5	10	29	--	3	8	114	222	19	16	27	--	3	10	30	1	5	3	104	218	2.558	10	0.000

Table Keys (Women Health Issues)

EC=Eclampsia
PID=Pelvic Inflammatory Disease
BC=Breast Cancer
VVF=Vesico Viginal Fistula
CD=Candidiasis
DY=Dysmenorrhea
GM=Genital Mutilation
CC=Cervical Cancer
FB=Fibroid
OC=Ovarian Cancer

Keys (Other Health Issues)

DM=Diabetes Mellitus
HP=Hypertension
MF=Malaria Fever
PN=Pneumonia
TB=Tuberculosis
STD=Sexually Transmitted Diseases
UL=Ulcer
SCA=Sickle Cell Anemia
HT=Hepatitis
OA=OstheoArthritis

Table 14: TABULATION OF VANGUARD AND DAILY TRUST TYPE OF REPORTS ON WOMEN HEALTH ISSUES

(Level of Significance)

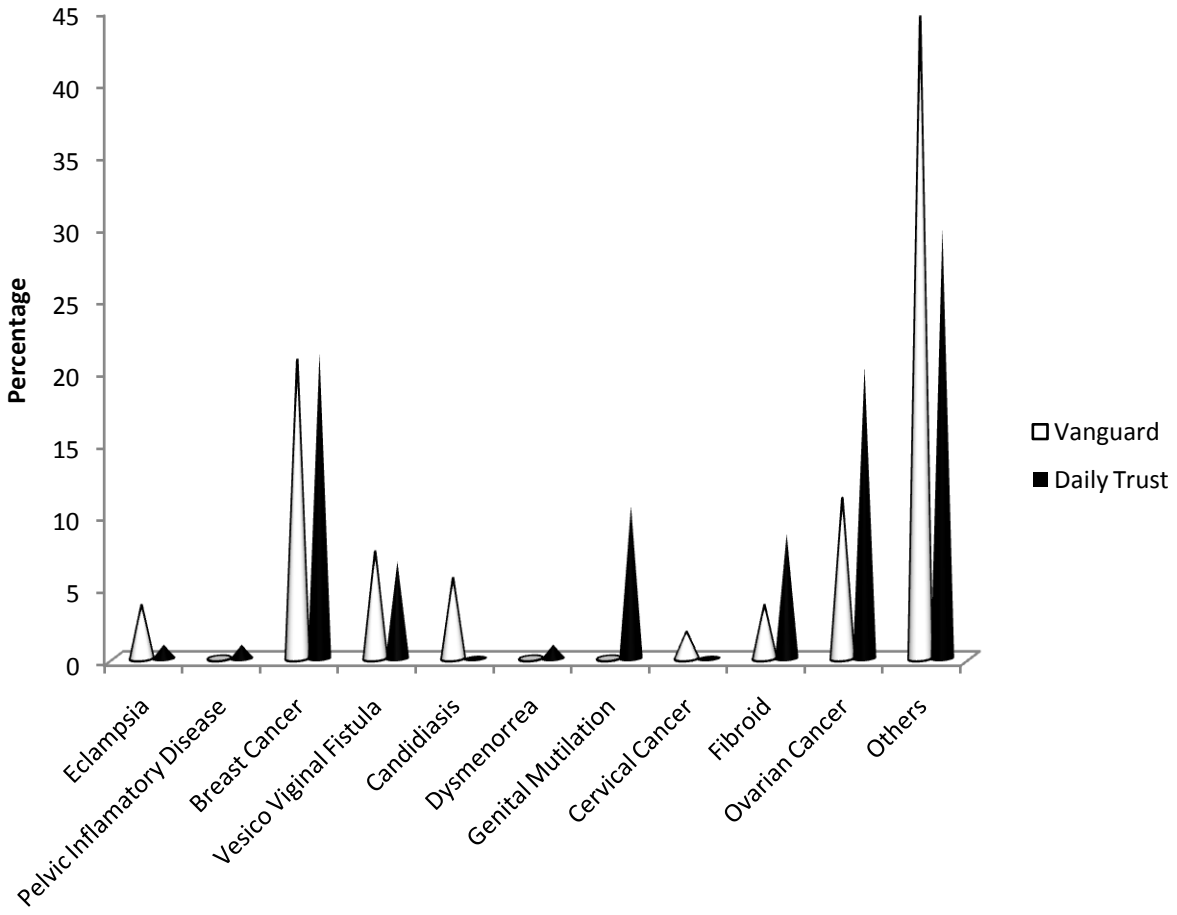
Types of Reports		Straight News		Features		Opinion		Editorials		Others		X^2	DF	P (P<0051)
Frequency		F	%	F	%	F	%	F	%	F	%			
Vanguard		16	27.59	16	27.59	10	17.24	--	--	16	27.59	0.711	4	0.000
Daily Trust		54	51.92	20	19.23	9	17.24	2	1.2	19	18.27	0.297	4	0.001
Total		70	79.59	36	46.82	19	34.48	2	2	35	95.86			

Table 15: TABULATION OF VANGUARD AND DAILY TRUST SIZE OF REPORTS ON WOMEN HEALTH ISSUES

(Level of Significance)

	Full Page		Half Page		Quarter Page		Others		X^2	DF	P (P<0051)
Frequency	F	%	F	%	F	%	F	%			
Vanguard	6	10.71	12	21.43	8	14.29	30	53.57	0.115	3	0.000
Daily Trust	6	5.7	20	19.23	32	30.77	46	44.23	0.352	3	0.000
Total	12	16.48	32	40.66	40	45.06	76	97.8			

Figure 1: Women Health Issues by Vanguard and Daily Trust



From Figure one above, it is indicated that there is no much difference in terms of coverage of women health issues by both Vanguard and Daily Trust, though Vanguard had the higher coverage when we look and analyze each aspect of the coverage. Nevertheless as for the motive behind why the two newspapers almost share the same coverage but with little differences, this may be due to increasing trend which shows a structural break between the years, this might be attributed to the issue of 2011 election; hence, much interest was turned to election issues around that period. Therefore, this might be the possible explanation for the structural changes in the trend.

Also, the figure shows that Vanguard gave better coverage to other women health issues that were not among the popular ten women health issues highlighted above.

Figure 2: Other Health Issues

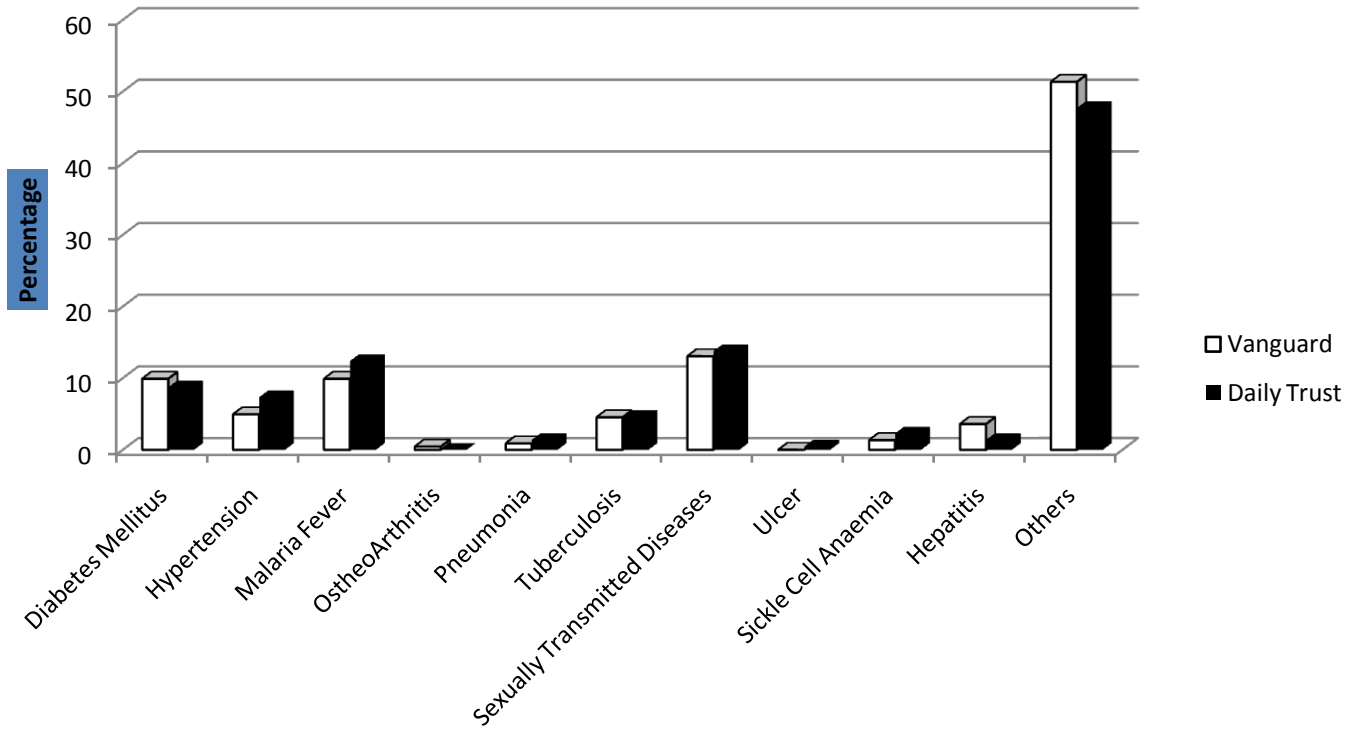
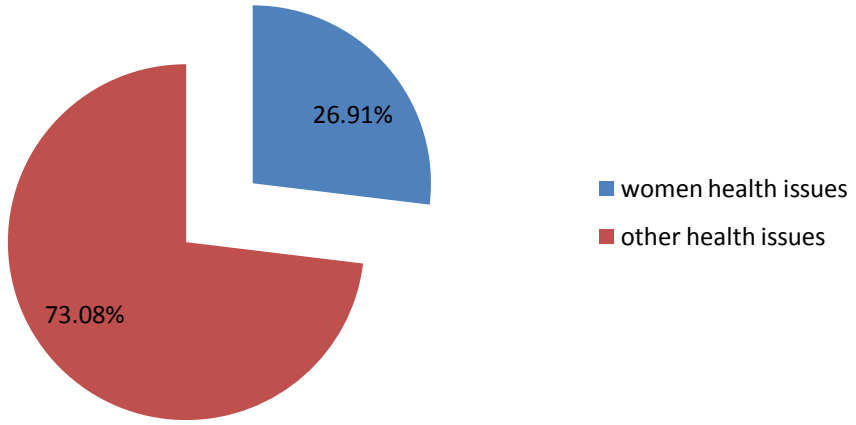


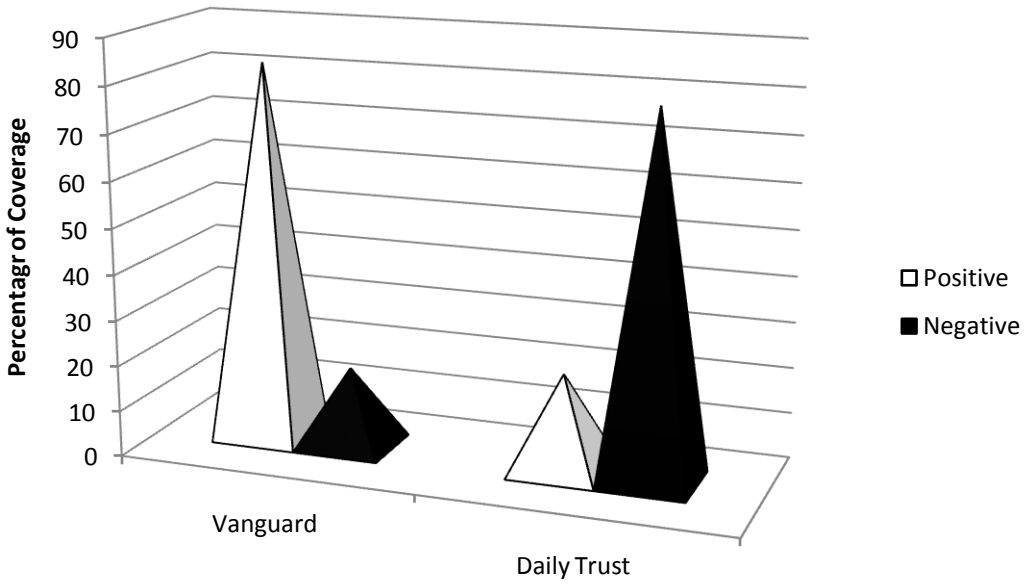
Figure two has shown that both the two papers shared almost the same amount of coverage to other health issues.

Figure 3: Total coverage of women health issues and other health issues by Vanguard and Daily Trust



The above figure indicates that, the entire reports both on women health issues and other health issues by Vanguard and Daily Trust constituted 602. While the coverage of other health issues was 440 (73.08%), the coverage of women health issues constituted 162 (26.91%). This is clear indication that both papers combined together, gave little coverage to women health issues to the benefit of other health issues. (for instance, Vanguard report of other health issues reads as "***malaria control under threat from insecticide resistance"***) This is in line with the report published by Daily Independent (2014) that media in Nigeria was continuously ranked as under-reporting issues, relating to sexual and women health among adolescent and young people. The report reveals that only 6.7% of total stories analyzed on some selected newspapers touched adolescent sexual and reproductive health. Also, the position of Salau (2000) cited in Jimoh (2007) confirms that politics has become the major and primary focus of both English and indigenous papers for the main reason of protecting the interest of the owners.

Figure 4: Positive/Negative Perspective of the Coverage of Women Health Issues by Vanguard and Daily Trust



From Figure four above, it is clear that Vanguard newspaper covered women health issues from positive angle higher than Daily Trust newspaper which had little coverage of women health issues from positive perspective. Also, the figure shows that Daily Trust angle of report vis-as-vis women health issues were majorly negative angle. For instance, Daily Trust of August 8th 2011 had this story, ***"There are about 10 pregnant women, and only one staff to attend the delivery"*** Nevertheless, the positive angle of the coverage by Vanguard signifies that most of the reports portrayed the establishment of maternity health centers, provision of adequate drugs, good family planning packages, commissioning of new hospitals, reduction in maternal and infant mortality, etc, for instance, Vanguard of Friday 7th 2012 had this story ***"Delta achieves 48.5% reduction of maternal mortality ratio."*** Again, the negative perspective of Daily Trust signifies lack of improvement in maternal/infant programmes.

4.3. Discussion of Findings

This part of the study was done in order to relate the research questions/objectives with the findings from the analysis. Therefore, in order to answer the research questions accordingly, the four questions were itemized:

Research Question 1 (What is the extent of coverage of women health issues and other health issues?). The results of the analysis of table two and figure three were relied upon. Table 2 shows that both Vanguard and Daily Trust covered other health issues than women health issues significantly. Nevertheless, figure three has shown clearly that the coverage of other health issues by both newspapers was higher than the coverage of women health issues with 73.08% as against 26.91%. However, table two also reveals that Vanguard got the higher coverage of other health issues than Daily Trust.

The results of the findings in table 1 comparatively shows that women health issues was given limited coverage by Vanguard compare with Daily Trust which had higher coverage in that aspect. Despite the fact that women health related issues occur on daily basis, in hospitals, homes, and everywhere around the globe.

Research Question 2 (What is the level of prominence given to women health issues by Vanguard and Daily Trust in terms of size and placement?) This is determined through the analysis on table 5 and six. Table five reveals that very few reports on women health issues were published on full page. While most of the stories on women health issues were published either on other sizes, half pages or quarter pages by both Vanguard and Daily Trust. However, it is a clear indication that, there was no significant difference in the length of the reports allotted to the

issue by both papers. Contrary to this, table six portrays a significant difference in regards to page placement of women health issues by the two papers; Vanguard mostly of its women health coverage was placed in the inside pages with about 96.55%. Equally, Daily Trust majorly of the paper's coverage was placed in the inside pages. Further more, it is clearly indicated that Vanguard had only 3.45% of its coverage on women health reports placed on front pages, while Daily Trust had up to 12.50% on front pages, which signifies a lot in terms print media placement allocation or prominence.

Research Question 3 (What type of women health issues is given the highest coverage between Daily Trust and Vanguard newspapers?) For this question, the findings in table one and figure one were also relied upon. Table 1 shows that breast cancer as an aspect of women health issue was reported more than any other issue, even though other diseases that are not common among women named "others" in the table got the highest figures, but looking at the common diseases affecting women as itemized in the table, breast cancer was given much coverage by both the two papers, although Daily Trust got the higher frequency than Vanguard, which also clearly showed in figure one. This may be also due to the fact that most of Daily Trust reportage on women health was sourced from medical doctors where by they attach importance to a disease like breast cancer as indicated in table seven. The result also portrays that the relative attention given to items in news coverage influence the rank order of public awareness of issues and attribution of significance. (See MacQuail, 2005)

Research Question 4 (What is the pattern that is positive or negative angle of coverage of women health issues?). The analysis in table three and figure 4 revealed the facts about the question. The result shows that Vanguard overwhelmingly covered women health issues from

positive angle than Daily Trust which did little in that aspect. Figure four makes it clearer that Daily Trust coverage of women health were majorly negatively reported. However, the positive angle of the coverage of women health issues by Vanguard connotes that, most of its reports on the issue portrays the coverage of positive things like good family planning programmes, adequate drugs in primary health centers, commissioning of new primary health centers, etc. Again, the negative perspective of Daily Trust coverage on women health shows things like inadequate maternal health centers, inadequate drugs related to ante-natal, poor family planning packages, etc. For instance, Daily Trust of Tuesday, Feb. 28, 2012, page 39 had this headline "Why maternal infant death still high?"

However, the results of the findings comparatively show that women health issues were given limited coverage by the two newspapers analyzed (Vanguard and Daily Trust). This is in conformity with the report published by Daily Independent (2014) that press in Nigeria was continuously ranked as under-reporting issues relating to sexual and women health among adolescent and young people. The reports reveals that only 6.7% of total stories analyzed on some selected newspapers in Nigeria touched adolescent sexual and reproductive health, despite the fact that women health related issues occur on daily basis in hospitals, homes and everywhere around the globe.

Similarly, the agenda-setting theory implies that mass media pre-determined what issues are regarded as important at a given time in a given society. This is done through the quantity or frequency of reporting, prominence given to the report through placements, sizes and headlines display (McCombs and Shaw, 1973).

Again, the findings of the study have revealed that very few reports on women health issues were published on full page, while most of the stories on women health were published either on quarter pages or half pages.

Indeed, both the newspapers analyzed, treated the other health issues much than women health issues which still confirm the report which says, Nigerian newspapers are under reporting issues relating to women health.

It is clearly shown that the results go contrary to the assumption of development media theory in which MacQuail sees that the media must accept and carryout positive development issues in line with national established policy.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter came-up with the summation of the entire study. The chapter gives a detailed summary, conclusion of the research which came from the findings and related literature reviewed. And also provides recommendation for better media coverage of women health issues.

5.2 Summary of Findings

The study was conducted in order to find out press coverage of women health issues with focus on comparing how the two newspapers selected for the study (Vanguard and Daily Trust) portray women health issues.

In order to know the possible answer to stated objectives and research questions, related literature were reviewed. It was also discovered that, the media coverage of women health issues was not adequate compared to other health issues, most of the papers' reportage focused on other health issues.

In line with the above, Agenda Setting theory and Development Media theory were chosen as theoretical guide for the study.

Agenda-setting, as (Mc Quail, 2000:426) puts it is a process by which the relative attention given to items in news coverage influences the rank order of public awareness of issues and attribution of significance. It assumes that the more the media attention on the issue, the greater the importance attributed to that issue by the audience.

Mc Combs (2008) elaborates further that the power of the news media to set a nation's agenda, to focus public attention on few public issues; is an immense and well documented influence. Not only do people acquire factual information about public affairs from the news media, society also learns how much importance to attach to a topic on the basis of emphasis placed on it in the news. Newspapers provide a host of cues about the salience of the topic in daily news, lead stories on page one, either display large headlines, etc. (Oladunde & Ajibola, 2009).

The development media theory is also relied upon which is a normative theory of mass media designed to a address the imbalance in development and information flow of third world countries; and provide solutions to the technological problems facing them. McQuail (1983: 95) highlights the main principles of this theory. The researcher limits these to three points that relate to the present study

• Media should accept and carry out positive development tasks in line with nationally established policy;

• Media should give priority in news and information to links with other developing countries, which are close geographically, culturally or politically;

• Journalists and other media workers have responsibilities as well as freedoms in their information gathering and dissemination tasks.

Based on the agenda setting and development media theories, the researcher examined the Nigerian media's contribution to achieving the MDGs.

In order to determine the findings of the study, the content analysis method of research was employed. The instrument of a self-designed coding sheet was used with the support research assistants for data gathering.

The data gathered were analyzed through Statistical Packages for the Social Sciences, (SPSS) and excel. Also the frequency and percentage measure were used.

Finally, the findings and discussions indicated the following in line with the research questions

i- The findings showed that women health issues were given in adequate coverage by both Vanguard and Daily Trust compare the way both the two papers covered other health issues. The extent of coverage of other health issues was 73.08%, while the coverage of women health issues constitutes only 26.91% (see figure 3).

ii- There are indications that very few stories on women health published on full pages; thereby much of the reports on women health were published as other sizes, half pages or quarter pages. However, significant difference existed in terms of placement, whereby Daily Trust did better (see table 5 and 6).

iii- It seems reportage of breast cancer as an aspect of women health was given more coverage, even though the non-common women diseases tagged as "others" in the presented tables got the highest figures. (see table 1 and figure 1).

iv- Vanguard was discovered to have significantly portrayed women health issues from positive angle, while Daily Trust majorly covered the issue from negative perspective.

5.3 Contribution to Knowledge

The researcher having gone through the exiting body of literature discovered that, previous studies conducted and analyzed by the researcher show that many Nigerian newspapers only portray and pay attention to women health issues in terms of placement and page sizes. However they do not specify and emphasis the various pattern of the coverage of the said women health

issues. Hence, they do not clearly state whether the reports is in favour of women health issues (positive) or otherwise.

For instance, Vanguard of February, 2012 page 12 reads "Delta archives 48.5% reduction on maternal ratio". For the purpose of the study, the report is tagged as "positive" (in favour of women health). Similarly, Daily Trust headline of February 28, 2012 reads as "why maternal mortality still high"? For the purpose of the study also, the report is tagged as negative (not in favour of women health). Thus the research intends to fill this gap in knowledge by assessing the two newspapers report from the angle of positive or negative pattern (in favour or not in favour) vis-a-vis women health issues.

However, at the end of the study, the researcher discovered that Vanguard portrayed most of its report from positive angle (in favour of women health) while Daily Trust portrayed the issues majorly from negative angle (not in favour of women health), and makes finding to be closely related to where the media is sited. Thus, forming a fertile ground for researchers on media coverage on health to explore whether there is a relationship between the media coverage on women health issues and the socio-political setting of the society in which its operate.

5.4 Conclusion

As a result of the above discussions, there is clear indication that the two newspapers, Vanguard and Daily Trust give little coverage to women health issues, though the focus of the study is an area that need to be given much attention in order to assist policy makers as well as saving the lives of mothers. Instead, other health issues were given more attention. Again, Daily Trust covered most of its reports on women health with negative perspective than vanguard, which implies that most of the reports focused on issues like inadequate facilities in hospitals, high rate

of maternal death, poor family planning awareness, etc. As such, this makes it imperative to the policy makers to create awareness through media towards achieving the MDGs (5) as well as providing better health packages for women.

Finally the findings of this study have shown that other health issues still dominate the reportage of Nigerian Print media compare to women health issues.

5.5 Recommendations for improved coverage of Women Health Issues

a-Inline with the findings of this study, it is recommended that specialized newspapers (gender based) should be established which will assists policy makers to understand the condition of women health. Similarly this will help such papers to report women health alone.

b-Both papers and Nigerian press in general should place women health issues on their back pages for quick reader attention as none of them did so in the whole two-year period under review.

c- More health reporters should be employed from among women..

d- The newspapers should devote more full pages to women health issues, there were indications that very few stories on women health issues published on full pages.

5.6 Suggestion for further studies

1. It is suggested that a study should be done on the Assessment of Knowledge and Awareness of Newspaper's reporters on Women Health Issues

2. One major limitation of this study is that, it did not include any south-eastern Nigeria newspaper, which may affect the generalization of its findings, it is therefore, recommended that a similar study could be done by extending the study to newspapers for the south eastern Nigeria.

3. Another similar study should be done with focus on the relationship between ownership of newspapers and coverage of women health issues.

4. As the study focused on print media, there is a need to study broadcast media in order to find out the challenges in the coverage of women health issues.

5. Another study should also focus on the relationship between place of publication of newspaper and coverage of women health issues.

6. Since the study was on women health, there is a need to understand the relationship between coverage of men and women issues in some selected newspapers in Nigeria.

REFERENCES

Abiola, M.K.O. (1981). "How I set up National Concord" An Address at the Mass Communication Week held by the Mass Communication Department, University of Lagos.

Adebamowo, C. A., and Ajayi, O.O. (2000). Breast cancer in Nigeria. *African Journal of Medicine, 19(3),* 179-191.

Akinfeleye, R.A. (1981). "Pre and Post Independence Nigerian Journalism (1859-1873). An Unpublished M.Sc. Thesis, School of Journalism, University of Missouri, USA.

Anaeto, M.S. (2010). Content Analysis of Health Related Issues in two Nigerian Newspapers. *Journal of Communication and Media Research.* 2. (1). 56-53

Alozie, V.O. (2003) "The History of the Nigerian Mass Media" A lecture to Mass Communication Students of Madonna University, Okija.

Anaeto, S.G. (2012). *Models and theories of Communication*. Maryland: African Renaissance Books.

AIID (2010) *African health sector*. Retrieved from httpwww.aiid.org/2020/focus. On 3rd March, 2011.

AWMC (2004). *Media coverage of health issues.* Retrieved from http/www.awmc.org. on 6th August, 2012.

Azikiwe, N. (1964). "*Pioneer Heroes of the Nigerian Press*." An Adress to the First Graduating Students of the Jackson College of Journalism. Nsukka: University of Nigeria.

Babbie, E. (2005). *The basic of social research.* Belmont: Wadsworth.

Ban, K. (2014). *The Global Strategy for Women's and Children's Health*. Newyork:NY-SS

Batta, H. E. (2012). Press Coverage of Traditional Medicine in Nigeria. *The Nigerian Journal of Communication,* 3. (2): .75-89 (2012).

, Belal, A. (2006). Non-communicable disease prevention: The way to prevent the rapidly growing public health problem in the developing world. *Sudanese Journal of Public Health, 1(3),* 230-234.

Berelson, B.(1962) *Content Analysis in Communication Research*. Glencoe, Illinois: Free Press.

Bernstein, S, & Charlotte J. H (2006). *Public Choices, Private Decisions: Sexual and Reproductive Health and the Millennium Development Goals.* Millennium Project.www.unmillenniumproject.org/reports/srh_main.htm (accessed 24 September, 2014).

Brand, J. D. and Steel, I. R. (1997). *Sexual Education and the Mass Media: An Over view.* Dushkin: Mc Graw.

Bray, F., McCarron & Parkin, D. (2005). The Changing Global Patterns of Female Breast Cancer Incidences and Mortality. *Breast Cancer Research*, 6, 229-239.

Cannon, G. (2001). *Diet-related chronic disease*. Retrieved in January 19, 2009 from www.Ifpi.org/2020/focus

CEDAW (2006). *Discrimination against women in the field of health*. Retrieved http://equalityofmen&women. On 6th October, 2014.

Chelimsky, E. (1989). *Content Analysis: A methodology for Structuring and Analyzing written material:* GAO Publishers.

Cooke, J.G & Tahir, F. (2013). *Maternal Health in Nigeria: With leadership Progress is Possible*.Washigton: CSIS.

Daily Independent (2014). *Media in Nigeria* retrieved from http://dailyindependentnig.com on 20/05/2014.

Duyile, D. (1979). *Media and Mass Communication in Nigeria*. Ibadan: Gong-Duyison Publishers

Ekwelie, S.A. (1989). "The Rise of the African Press". *In Journal of Humanities.* University of Nigeria, Nsukka.

Entman, R. M. (1993). Framing: Toward clarification of a fractured paradigm. *Journal of Communication, 43*(4), 51–55.

Fatade, F. (2013). *Population Council Survey*. Retrieved from http://analyzedarticlesin printmedia. On 10th October, 2013.

Firmansyah, H. (2010). *Increasing Coverage of Reproductive Health Issues in Indonesian Print Media.* Jakarda: Dale.

Fisher, J., Gandy, O. H., Jr., & Janus, N. Z. (1981). The role of popular media in defining sickness and health. In E. G. McAnany, J. Schnitman, & N. Janus (Eds.), *Communication and social structure: Critical studies in mass media research* (pp. 240–257). New York: Praeger.

Gubbels, JAA et al (2010) *Journal of Ovarian Research* (3), 8

Gupta, A. and Sinha, A. K. (2010). *Health Coverage in Mass Media: A Content Analysis*. Delhi: J. Communication Press.

Holland, P. (1987). When a woman reads the news. In H. Baehr&G. Dyer (Eds.), *Boxed in: Women and television* (pp. 133–150). New York: Pandora.

Hoffmann, F. (2007). *Dictionary of Mass Communication.* New Delhi: Academic Publishers.

WHO, (2009) *Global challenges* Retrieved from http://www.who.int/bulletin/volumes/87/4/08-056713/en/index.html**.** on 11th Sept 2012.

Jimoh, I. (2007). *Press Coverage of Rural Development: A Comparative Study of Weekly Trust and Gaskiya Tafi Kwabo Newspaers, 1999-2003*. to the Department of Mass Communication, BUK, Kano. An unpublished M.A. Thesis.

Kayode, J. & Adeniran, R. (2012). Nigerian Newspapers Coverage of the Millennium Development Goals: The Role of Media. *Itupale Online Journal of African Studies*, Volume IV,2012

Kombo, D.K. and Tronp, C. I. (2006). *Proposals and their Writngs.* Africa: Paulines Publication.

Kumar, K. (2006). *Robins and Cortains:Pathological Basis of Disease*. (7th ed). India:Elsevier.

Lambard, M, Snyder-Dutch, J and Bracken, C. C. (2002). Content Analysis in Mass Communication: Assessement and Reporting of Intercoder Reliability. *Human Communication Research.* Vol. 28 N0 4 International Communication Association.

Mac Dougall, C.D. (1977). *Interpretative Reporting* (7th ed). New York: Macmillan Publishing Company.

Malmood (2001). *Towards Strengthning Primary Health Care Services*. Michigan: AITA Publishers.

McCombs, M. E., and Shaw, D. L. (1972). The agenda-setting function of mass media. *Public Opinion Quarterly, 36 (Summer)*, 176-187.

McCombs, M. E., and Shaw, D. L. (1973). The agenda-setting function of mass media. *Public Opinion Quarterly, 55 (Summer)*, 176-187.

McQuail, D. (2005). *McQuail's Mass Communication Theory* (5th Ed.). London: Sage

MDG (2014). Reducing maternal deaths. Retrieved from http://reducingmaternaldeath1/3 /hbm. on 7th September, 2014.

Magashi, N. (2013). *Evidence for Action.* Retrieved from http://mediaan21stcenturies/hbm. on 10th March, 2014.

Nelkin, D. (1989). Journalism and science: The creative tension. In M. Moore (Ed.), *Health risks and the press* (pp. 53–71). Washington, DC: Media Institute.

Nwuneli, O.E. (1985). *Communication in Nigeria: A Book of Readings*. Enugu: Fourth Dimension Publishers.

NPHCDA (2014). *Maternal mortality: A Challenge to Developing Nations.*Retrieved from http://nigeriatackles maternal mortali/htm. On 7th September, 2014

Nnennah, Ibeh. (2014). *Nigerian Media Should Provide Better Coverage of Health Issues.* Retrieved from http://www.premiumtimes.com on 05/03/2014.

Oladunde, R. M. and Ajibola, O. A. (2009). The Dialectics of Media Framing in Niger Delta Crisis. *Babcock journal of Mass Communication.* 2 (1)

Olatunui, R. W. (2006). *The Nigerian Journal of Communication.* 4(182).

Okonkwo, R.N. (1985). The Role of the Colonial Press in Nigeria. Pan Publishers.

Omu, F. (1985). "Iwe Irohin 1859-1867." *Journal of the Historical Society of Nigeria*, Vol. IV (1).

Oso, L. & Odunlami, D. (2007). *Breath or Depth: A Content Analysis of Health Pages in The Nigerian Press*. A paper presented at African Council of Communication Education (ACCE). A.B.U. Zaria.

Otten, A. L. (2010). *Health Affairs.* Retrieved on 18/12/12 from httphealthaffairs.org/content/11/411.

Parrott, R. L., & Condit, C. M. (1996). Priorities and agendas in communicating about women's reproductive health. In R. L. Parrott & C. M. Condit (Eds.), *Evaluating women's health messages* (pp. 1–11). Thousand Oaks, CA: Sage.

Powers, A., & Fico, F. (1994). Influences on use of sources at large U.S. newspapers. *Newspaper Research Journal, 15,* 87–97.

Rimal,RN, (2003) *Perceived risk and efficacy beliefs as motivators of change: use of the risk perception attitude* (RPA) framework to understand health behaviors. Human Communication Research. Retrieved from http://wwwmotivationofchange. On 22nd March, 2011.

Rakow, L. F.,&Kranich, K. (1991). Women as sign in television news. *Journal of Communication, 41,* 8–23.

Rodney, C. (2010). Newspaper Coverage of health Issues In nigeria. *The Nigerian Journal of Communication,* 8. (1). P.221-225.

Ruzek, S. B., Olesen, V. L.,&Clarke, A. E. (1997). *Women's health: Complexities and differences.* Columbus: Ohio State University Press.

Salau, S. (2006). "Are Vernacular Newspapers preparing their Readers for the 21st Century? Some Preliminary Observations". Being a Paper Presented at the Zaria Conference on the Humanities in Africa in the 21st Century: Prospects and Challenges, A.B.U., Zaria.

Salaudeen, A., Akande, T. and Musa, O. (2009). Knowledge and Attitude of Breast Cancer and Breast Self-Examination among Female Undergraduate in a State in Nigeria. *European Journal of Social Sciences, 7(3),* 161-165.

Severin, W.J. and Tankard, J.W. (1992) *Communication Theories: Origin, Methods and uses in Mass Media* (3rd Ed).New York: Longman Publishing Company.

Soola, E. O. (2003). Development communication: The past, the present, and the future. In E.O. Soola (Ed.), *Communicating for Development Purposes* (pp. 9-28). Ibadan: Kraft Book Limited.

Soola, E. O. and Alawode, S. O. (2007). Content Analysis of Newspaper coverage of Agribusiness in Democratic Nigeria. *Nigerian Journal of Communication.* 5(1),

Stacks, D. W. and Hockings, J. E. (1999). *Communication Research.* Addison: Westley Educational Publishers

Say, K. (2014). Global causes of maternal death: A WHO Systematic Analysis

Terkildsen, N., Schnell, F. I., & Ling, C. (1998). Interest groups, the media, and policy debate formation: An analysis of message structure, rhetoric, and source cues. *Political Communication, 15,* 45–61.

Trends in Maternal Mortality: 1990-2008. Estimates developed by WHO, UNICEF, UNFPA and the World Bank.

Uka, L. (1989). *Mass Media People and Politics in Nigeria*. New Delhi: Concept Publishing Company.

United Nations (1989) *Violence Against Women in the Family.* Vienna: Centre for Social Information. Retrieved from http://viennasummit1989. On 2nd March, 2012.

United Nation Development Programme (2012). *Media prevailing attitudes & norms*. Retrieved from http://debateinthe publicarena,challengingstatusquo/htm on 2nd February, 2012.

Udomisor, I.W. & Bwala, S.J. (2010). Newspaper Coverage of Development and Cultural Issues in Nigeria. *The Nigerian Journal of Communication,* 8. (1). P.28.

United Nations (2005). Review of the implementation of the Beijing Platform for Action and the outcome documents of the special session of the General Assembly entitled "Women 2000: gender equality, development and peace for the twenty-first century." *Report of the Secretary-General.* E/CN.6/2005/2.

UNICEF (2006). *Women and Children: The Double Dividend of Gender Equality. The State of the World's Children 2007*. New York. Retrieved from www.unicef.org/sowc07/docs/sowc07.pdf (accessed 28 June 2013).

UN *Millennium* Project (2005). *Taking Action: achieving gender equality and empowering women.* Task Force on Education and Gender Equality. www.unmillenniumproject.org/reports/tf_gender.htm (accessed 26 July,2013).

Ujo, A. (2004). *Understanding Social Research: A Non-Quantitative Approach*. Kaduna: Anyaotu Enterprises and Publishers Limited.

Vanderford, M. L., & Smith, D. H. (1996). *The silicone breast implant story.* Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

Walsh-Childers, K. (1994). Newspaper influence on health policy development. *Newspaper Research Journal, 15,* 89–104.

WHO, (2009). *Maternal and Infant Mortality*. Retrieved from http://wwwmmr/htb. on 4th May, 2005.

WHO, (2007). *Women, rights, need & priority*. Retrieved from http://policiesandprogrammepayattention. 7th September, 2013.

World Bank Report (2014). Maternal mortality ratio. Retrieved from http://mmr/nbr/2015/report on 3 June, 2014.

Wyn, R., Ojeda, V., Ranji, U., and Salganicoff, A. (2003). *Women, work, and family: A balancing act*. Retrieved September 10, 2010 from www.hff.org/womenhealth.

Yusha'u, M. J. (2010). Regionalism and Ethnicity in the Nigerian Press: An analysis of the coverage of Boko Haram and Niger Delta conflicts in the Guardian and Daily Trust. Paper Presented at the *Racism, Ethnicity and the Media in Africa Conference* University of Westminster, London.

Appendix I

CODING SHEET FOR COVERAGE OF WOMEN HEALTH ISSUES

Date	Coverage of Women health	Page Size					Types of Report					Placement			Source of Reports					
		1	1/2	1/4	others		News report	Features	Editorial	Opinion	Others	Front	Back	Inside	Govt.	Ng0s	Journalist	Medical practitioners	others	

CODING SHEET FOR COVERAGE OF OTHER HEALTH ISSUES

Date	Coverage of Women health	Page Size					Types of Report					Placement			Source of Reports					
		1	1/2	1/4	others		News report	Features	Editorial	Opinion	Others	Front	Back	Inside	Govt.	Ng0s	Journalist	Medical practitioners	others	

APPENDIX II

Keys (Women Health Issues)

EC=Eclampsia
PID=Pelvic Inflammatory Disease
BC=Breast Cancer
VVF=Vesico Viginal Fistula
CD=Candidiasis
DY=Dysmenorrhea
GM=Genital Mutilation
CC=Cervical Cancer
FB=Fibroid
OC=Ovarian Cancer

Keys (Other Health Issues)

DM=Diabetes Mellitus
HP=Hypertension
MF=Malaria Fever
PN=Pneumonia
TB=Tuberculosis
STD=Sexually Transmitted Diseases
UL=Ulcer
SCA=Sickle Cell Anemia
HT=Hepatitis
OA=OstheoArthritis

Appendix III

Editions of Vanguard Content Analyzed-From January, 7th 2011-December, 28th 2012.

1. Vanguard Newspaper of 7th January, 2011
2. Vanguard Newspaper of 14th January, 2011
3. Vanguard Newspaper of 21t January, 2011
4. Vanguard Newspaper of 28th January, 2011
5. Vanguard Newspaper of 7th February, 2011
6. Vanguard Newspaper of 21st February, 2011
7. Vanguard Newspaper of 28th February, 2011
8. Vanguard Newspaper of 7th March, 2011
9. Vanguard Newspaper of 15th March, 2011
10. Vanguard Newspaper of 23rd March, 2011
11. Vanguard Newspaper of 31st March, 2011
12. Vanguard Newspaper of 7th April, 2011
13. Vanguard Newspaper of 14th April, 2011
14. Vanguard Newspaper of 21st April, 2011
15. Vanguard Newspaper of 28th April, 2011
16. Vanguard Newspaper of 9th May, 2011
17. Vanguard Newspaper of 17th May, 2011
18. Vanguard Newspaper of 24th May, 2011
19. Vanguard Newspaper of 1st June, 2011
20. Vanguard Newspaper of 11th June, 2011
21. Vanguard Newspaper of 22nd June, 2011

22. Vanguard Newspaper of 30th June, 2011

23. Vanguard Newspaper of 7th July, 2011

24. Vanguard Newspaper of 21st July, 2011

25. Vanguard Newspaper of 28th July, 2011

26. Vanguard Newspaper of 16th August, 2011

27. Vanguard Newspaper of 23rd August, 2011

28. Vanguard Newspaper of 30th August, 2011

29. Vanguard Newspaper of 2nd September, 2011

30. Vanguard Newspaper of 9th September, 2011

31. Vanguard Newspaper of 24th September, 2011

32. Vanguard Newspaper of 7th October, 2011

33. Vanguard Newspaper of 14th October, 2011

34. Vanguard Newspaper of 21st October, 2011

35. Vanguard Newspaper of 7th November, 2011

36. Vanguard Newspaper of 14th November, 2011

37. Vanguard Newspaper of 21st November, 2011

38. Vanguard Newspaper of 28th November, 2011

39. Vanguard Newspaper of 7th December, 2011

40. Vanguard Newspaper of 14th December, 2011

41. Vanguard Newspaper of 21st December, 2011

42. Vanguard Newspaper of 7th January, 2012

43. Vanguard Newspaper of 14th January, 2012

44. Vanguard Newspaper of 21st January, 2012

45. Vanguard Newspaper of 28th January, 2012

46. Vanguard Newspaper of 6th February, 2012

47. Vanguard Newspaper of 21st February, 2012

48. Vanguard Newspaper of 26th February, 2012

49. Vanguard Newspaper of 7th March, 2012

50. Vanguard Newspaper of 14th March, 2012

51. Vanguard Newspaper of 21st March, 2012

52. Vanguard Newspaper of 28th March, 2012

53. Vanguard Newspaper of 9th April, 2012

54. Vanguard Newspaper of 17th April, 2012

55. Vanguard Newspaper of 30th April, 2012

56. Vanguard Newspaper of 7th May, 2012

57. Vanguard Newspaper of 14th May, 2012

58. Vanguard Newspaper of 21st May, 2012

59. Vanguard Newspaper of 28th May, 2012

60. Vanguard Newspaper of 7th June, 2012

61. Vanguard Newspaper of 14th June, 2012

62. Vanguard Newspaper of 28th June, 2012

63. Vanguard Newspaper of 7th July, 2012

64. Vanguard Newspaper of 14th July, 2012

65. Vanguard Newspaper of 21st July, 2012

66. Vanguard Newspaper of 28th July, 2012

67. Vanguard Newspaper of 7th August, 2012

68. Vanguard Newspaper of 14th August, 2012

69. Vanguard Newspaper of 21st August, 2012

70. Vanguard Newspaper of 28th August, 2012

71. Vanguard Newspaper of 7th September, 2012

72. Vanguard Newspaper of 14th September, 2012

73. Vanguard Newspaper of 21st September, 2012

74. Vanguard Newspaper of 28th September, 2012

75. Vanguard Newspaper of 4th October, 2012

76. Vanguard Newspaper of 13th October, 2012

77. Vanguard Newspaper of 21st October, 2012

78. Vanguard Newspaper of 7th November, 2012

79. Vanguard Newspaper of 14th November, 2012

80. Vanguard Newspaper of 21st November, 2012

81. Vanguard Newspaper of 28th November, 2012

82. Vanguard Newspaper of 7th December, 2012

83. Vanguard Newspaper of 14th December, 2012

84. Vanguard Newspaper of 21st December, 2012

85. Vanguard Newspaper of 28th December, 2012

Editions of Daily Trust Content Analyzed-From January, 7th 2011-December, 28th 2012

86. Daily Trust Newspaper of 7th January, 2011

87. Daily Trust Newspaper of 14th January, 2011

88. Daily Trust Newspaper of 21st January, 2011

89. Daily Trust Newspaper of 28th January, 2011

90. Daily Trust Newspaper of 7th February, 2011

91. Daily Trust Newspaper of 14th February, 2011

92. Daily Trust Newspaper of 28th February, 2011

93. Daily Trust Newspaper of 7th March, 2011

94. Daily Trust Newspaper of 17th March, 2011

95. Daily Trust Newspaper of 22nd March, 2011

96. Daily Trust Newspaper of 29th March, 2011

97. Daily Trust Newspaper of 7th April, 2011

98. Daily Trust Newspaper of 14th April, 2011

99. Daily Trust Newspaper of 21st April, 2011

100. Daily Trust Newspaper of 28th April, 2011

101. Daily Trust Newspaper of 9th May, 2011

102. Daily Trust Newspaper of 16th May, 2011

103. Daily Trust Newspaper of 23rd May, 2011

104. Daily Trust Newspaper of 30th May, 2011

105. Daily Trust Newspaper of 7th June, 2011

106. Daily Trust Newspaper of 14th June, 2011

107. Daily Trust Newspaper of 21st June, 2011

108. Daily Trust Newspaper of 7th July, 2011

109. Daily Trust Newspaper of 14th July, 2011

110. Daily Trust Newspaper of 21st July, 2011

111. Daily Trust Newspaper of 28th July, 2011

112. Daily Trust Newspaper of 8th August, 2011

113. Daily Trust Newspaper of 15th August, 2011

114. Daily Trust Newspaper of 22nd August, 2011

115. Daily Trust Newspaper of 29th August, 2011

116. Daily Trust Newspaper of 7th September, 2011

117. Daily Trust Newspaper of 14th September, 2011

118. Daily Trust Newspaper of 21st September, 2011

119. Daily Trust Newspaper of 28th September, 2011

120. Daily Trust Newspaper of 7th October, 2011

121. Daily Trust Newspaper of 14th October, 2011

122. Daily Trust Newspaper of 21st October, 2011

123. Daily Trust Newspaper of 27th October, 2011

124. Daily Trust Newspaper of 7th November, 2011

125. Daily Trust Newspaper of 14th November, 2011

126. Daily Trust Newspaper of 21st November, 2011

127. Daily Trust Newspaper of 28th November, 2011

128. Daily Trust Newspaper of 7th December, 2011

129. Daily Trust Newspaper of 14th December, 2011

130. Daily Trust Newspaper of 21st December, 2011

131. Daily Trust Newspaper of 28th December, 2011

132. Daily Trust Newspaper of 9th January, 2012

133. Daily Trust Newspaper of 16th January, 2012

134. Daily Trust Newspaper of 23rd January, 2012

135. Daily Trust Newspaper of 30th January, 2012

136. Daily Trust Newspaper of 7th February, 2012

137. Daily Trust Newspaper of 14th February, 2012

138. Daily Trust Newspaper of 21st February, 2012

139. Daily Trust Newspaper of 28th February, 2012

140. Daily Trust Newspaper of 7th March, 2012

141. Daily Trust Newspaper of 14th March, 2012

142. Daily Trust Newspaper of 21st March, 2012

143. Daily Trust Newspaper of 28th March, 2012

144. Daily Trust Newspaper of 9th April, 2012

145. Daily Trust Newspaper of 16th April, 2012

146. Daily Trust Newspaper of 23rd April, 2012

147. Daily Trust Newspaper of 30th April, 2012

148. Daily Trust Newspaper of 7th May, 2012

149. Daily Trust Newspaper of 14th May, 2012

150. Daily Trust Newspaper of 21st May, 2012

151. Daily Trust Newspaper of 28th May, 2012

152. Daily Trust Newspaper of 7th June, 2012

153. Daily Trust Newspaper of 14th June, 2012

154. Daily Trust Newspaper of 21st June, 2012

155. Daily Trust Newspaper of 28th June, 2012

156. Daily Trust Newspaper of 9th July, 2012

157. Daily Trust Newspaper of 16th July, 2012

158. Daily Trust Newspaper of 23rd July, 2012

159. Daily Trust Newspaper of 30th July, 2012

160. Daily Trust Newspaper of 7th August, 2012

161. Daily Trust Newspaper of 14th August, 2012

162. Daily Trust Newspaper of 21st August, 2012

163. Daily Trust Newspaper of 28th August, 2012

164. Daily Trust Newspaper of 7th September, 2012

165. Daily Trust Newspaper of 17th September, 2012

166. Daily Trust Newspaper of 24th September, 2012

167. Daily Trust Newspaper of 8th October, 2012

168. Daily Trust Newspaper of 14th October, 2012

169. Daily Trust Newspaper of 22nd October, 2012

170. Daily Trust Newspaper of 29th October, 2012

171. Daily Trust Newspaper of 7th November, 2012

172. Daily Trust Newspaper of 14th November, 2012

173. Daily Trust Newspaper of 21st November, 2012

174. Daily Trust Newspaper of 28th November, 2012

175. Daily Trust Newspaper of 7th December, 2012

176. Daily Trust Newspaper of 14th December, 2012

177. Daily Trust Newspaper of 21st December, 2012

178. Daily Trust Newspaper of 28th December, 2012