

Facing the Enemy Head-On: The Role of Pasimba Radio Program in Promoting the Fight against HIV and AIDS in Malawi

Precious Madula^{1,2*}, Yu Hong¹, Wellman Kondowe²

¹School of Journalism and Information Communication, Huazhong University of Science and Technology, Wuhan, China

²Department of Languages and Literature, Mzuzu University, Mzuzu, Malawi

Email: *preciousmadula@yahoo.co.uk, hongyu@hust.edu.cn, welkondowe@gmail.com

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Abstract

Radio programs are very important in developing countries in informing the masses about public health matters. Their role is quite visible in the fight against HIV/AIDS through dissemination of messages aimed at informing the publics about the dangers of HIV/AIDS and what prevention measures can be employed. Drawing on framing and social learning theory together with readings on media effects, this study aimed at establishing whether *Pasimba* radio program is having an impact in promoting behavioral change among couples in Malawi. Data was collected through a survey (N = 100) and data was analyzed using cross tabulations, chi-square, correlation and regression. Results indicate that there is a significant relationship between respondents who listen to the program and those that have the propensity to undergo HIV test. This implies that *Pasimba* program is having an impact in influencing behavioral change and that there is a correlation between listening to the program and having the motivation to know one's serostatus.

Keywords

Media Campaign, Couple Communication, Behavioral Change, Voluntary Counselling and Testing

1. Introduction

Media effects research is one of the areas that has attracted interesting scholarship for the past five decades. Findings have hovered between no effects and minimal effects. Recently, research has once again shown that mass media effects are very powerful in shaping people's attitudes, values and beliefs. To lend weight on

this, a research by Wakefield, Loken, and Hornik (2010), indicates that the mass media campaigns have significant effects in people's lives and that "they can work through direct and indirect pathways to change behavior of the whole population" (p. 1261). There also seems to be consensus that the mass media messages have the potency to set an agenda for an increase in the frequency of individual's partaking in public health related discourse.

In cognizance to this, the media landscape in Malawi is inundated with media campaigns aimed at promoting healthy living and disease prevention. This is particularly crucial considering the fact that culturally Malawians do not have the liberty and latitude to discuss issues that border on sexuality. Individuals often avoid discussing sexuality and safer sex with their partners, a thing that exacerbates infidelity among couples and increases the spread of sexually-transmitted infections (STIs) including Human Immuno Deficiency Virus (HIV) (Moyer-Guse, Chung, & Jain, 2011). Thus, the involvement of the mass media gives them responsibility to inform Malawians about health and sexuality issues. In light of this, many health campaigns are aired in both public and private radio stations with the overall goal of promoting safer sex and sensitizing the masses about the dangers of HIV. Despite this, there is little or no research that has been conducted to evaluate the efficacy and impact of such campaigns. Thus, there is paucity of data available on the effects of *Pasimba* Radio Program (*Pasimba*) in improving listeners' health and their relationships. The goal of this study therefore, was to fill the existing gap by seeking to establish the impact that *Pasimba* is having in promoting effective couple communication on health issues as well promoting the fight against HIV and Acquired Immuno Deficiency Syndrome (AIDS) in Malawi.

2. Background Information

The media play a huge role in affecting people's lives in our society. In addition to shaping general understanding, mass media play an important role in promoting public health (Abroms & Maibach, 2008; Visnawath, Flynt-Wallington, & Blake, 2009). As Wallack (2003) argues, media "can be a delivery mechanism for getting the right information to the right people in the right way at the right time to promote personal change" and that "they can be a vehicle for increasing participation in civic and political life and social capital to promote social change" (p. 338). Consistent with this, and in tandem with occurrences elsewhere, the media in Malawi have been embarking on campaigns or programs that are aimed at promoting public health and ensuring behavioral change (Wallack, 2003). This is very crucial considering that Malawi just like many developing African countries, is gripped with many health problems namely: malaria, HIV, tuberculosis and others. Principal among these ailments is HIV prevalence which kills many Malawians (UNAIDS, 2013a). Sadly, although the situation is like this, the Malawian public sphere is divided on whether it is "morally" wrong or right for the media to be discussing sexuality issues.

As the foregoing paragraph indicates, Malawi is one of the countries in the

world that is heavily affected by the HIV pandemic. However, despite a tremendous reduction in the number of new infections in recent years, HIV still remains a major public health menace. A total number of 1.1 million people were living with HIV in Malawi in 2012, representing a prevalence rate of 10.8, among them were 180,000 children under the age of 14 and 11,000 of them were newly infected with the virus (UNAIDS, 2013b). Within the same year, an estimated number of 770,000 children were orphans due to HIV (UNAIDS, 2013b). Globally, there are 35.5 million people infected with HIV and 25 million of them are from the sub-Saharan region (UNAIDS, 2013a). A total number of 3.3 million children are infected with the virus globally with Sub-Saharan Africa having a large proportion of 2.9 million (UNAIDS, 2013a). In as much as these statistics can easily be accessed through UNAIDS, Lwanda (2003) observed that “sex and sexuality are not as publicly prevalent as one would expect for a nation under siege from a pandemic” (p. 114). He further contends that: at the public level HIV/AIDS has at times seemed an almost invisible presence, overshadowed by louder issues of politics and poverty (cf. Msukwa, Thomas-Konyani, & Bamusi, 1994). Even when acknowledged it tends to be referred to as *zomwezi* (the usual) or *matenda a boma* (the government disease), rather than being mentioned by name. Public discussions of and expressions of sexuality, two decades after the arrival of HIV/AIDS remain circumscribed and circumspect. Literate and oral public discussions of HIV/AIDS are generally in government or Non-Governmental Organizations’ sponsored public arenas, with substantive western viewpoints and perspectives (p. 114).

Although it is over a decade ago since Lwanda (2003) made this observation of low visibility in some public arenas, the “HIV/AIDS has nevertheless intensified the post-colonial cultural and political debates” (p. 114). This observation has been reflected in a sanction that the Malawi and Communications and Regulatory Authority (MACRA) imposed on Malawi Institute of Journalism Radio Station (MIJ FM) obliging it to change its programming schedule from 9:30 pm to watershed period due to “questionable” content which some Malawians were not comfortable with and did not want their children to be privy to.

As the Malawian media landscape continues to grow, there has been a diversified way of programming and the media content invariably depends on the source of information one is exposed to. This influx of media platforms in Malawi has resulted into a cascade of mass media campaigns being staged by different practitioners both from the state and private media divide. cursory look at these campaigns, points to a deliberate attempt by the mass media to promote public health and specifically foster change in health-related attitudes and behaviors so as to curb the spread of the HIV pandemic by applying western ideologies to the Malawian publics (Lwanda, 2003). One such media house involved in this “battle” is the MIJ FM through its program called *Pasimba* (Counsellors’ Court).

The history of *Pasimba* dates back to the year 2013 when its first production was made. It was launched following partnership between MIJ FM and Bridge Project Malawi [Couple Communication Project (CMP)] whose main aim was to help improve interpersonal communication between couples—whether married

or not though the former seems to be the targeted consumer. The rationale for such a project was the assumption that if the consumers were fed with right information on sexuality, there could be a high correlation between behavioral change and reduction in HIV infection rate. To add weight on this premise, findings on CMP Report indicated that absence of couple dialogue on issues of reproductive health was one of the precursors for the promiscuous behaviors hovering in some marriages and relationships. In agreement with [Lwanda \(2003\)](#), it was learnt that culturally, issues to do with sexuality amongst married couples remain a taboo in the Malawian society as a result it has accelerated the rate of HIV infections because some individuals who do not get “sexual gratification” within their homes or relationships realm tend to seek solace elsewhere thereby increasing chances of HIV transmission based on the assumption that the more partners one has, the more likely he or she will catch the virus ([Patterson, 2013](#)). Since then, the program has maintained its trajectory and continues with its vision of minimizing infection rates in this heavily affected country ([UNAIDS, 2013b](#)). Although the status quo remains the same, it remains to be seen whether such an effort is paying dividends or not. Sadly, to my knowledge, literature is dearth in Malawi to assess *Pasimba*'s efficacy and the impact the program is having in promoting behavioral change. Within the public sphere, the program continues to wear a binary outlook—is it promoting behavioral change or playing its inverse? No answers have been found yet and it is their absence that forms the crux of this study.

Since its main objective is to improve interpersonal communication (IPC) within families (and relationships), *Pasimba* is hosted by experts from the media, medical and other spheres of the Malawian population. Using “straight” talk by Malawian standards, the host panel freely discusses issues of sexuality in a vivid manner, detailing acts that are confined to the bedroom, For instance, the panel talks about how to make love from the preamble to the closure of the sex act itself. Featuring highly here is an elaborate discourse on how each level on the sex-act-ladder is carried out with the primary aim of “satisfying each other” in bed. In some quarters, such blunt sexual discourse is very “unMalawian” and is modelled on theories of cultural hybridization that do not apply in Malawi and that they only act as precursor for moral decadency in the Malawian society ([Lwanda, 2003](#)). On the other hand, those on the other side of the divide claim that MIJ FM is simply exercising its media freedom and in fact its program content is appropriate and does not infringe on Malawi's traditional values, attitudes and beliefs.

It is argued that *Pasimba* is strictly for married people and those in serious relationships. However, some commentators have “alleged” that the program is not mutually exclusive to the target audience and that even children are partaking in the program's content. Since invariably the program uses explicit language on sexuality, some people fear that it has the potential to erode the moral campus of the young people especially children below 10 years because, apart from the program schedule, there is no mechanism put in place to ensure that checks and balances are weighed in to dissuade kids from listening to the program ([Biagi & McKie,](#)

1999; Bandura, 2009). As seen here, the *Pasimba* content adds extra responsibility to parents since they are obliged to consistently check on what their children are listening to and any lapse in the monitoring system is seen as a potential danger in the child's socialization process (Noar, 2009; Gallagher & Updegraff, 2012). This line of thinking seems to show a positive correlation between consuming media content and indulgence in immoral behavior. The media industry is thus, vilified for neglecting its role to act as the watchdog and custodian of our national values, attitudes and beliefs (Lwanda, 2003). This might be the case because Malawi wears a *God-Fearing Nation* tag, as such, anything that seems to deviate from the "expected" norms and values is greeted with disproof. Notwithstanding, in the absence of a written report or minutes from the country's regulatory body—MACRA, it may "wrongly" be extrapolated that religiosity and not *Pasimba's* content, influenced the change of the program line-up that was imposed. Before the sanction, *Pasimba* was occupying a 21:30 - 23:00 program slot (Malawi's local time, GMT +2 hours) however, MACRA's action has pushed it forward. It is now aired from 23:00 - 01:00 hours. This move was triggered by the assumption that by late hours most children and adolescents would have gone to bed hence allowing the targeted consumers to freely listen to the program. Whether this is true remains to be seen and forms the crux of this study (Bandura, 2009). It remains to be seen though whether there was any statistical evidence suggesting need to change the time slot or whether the decision was purely based on incidental cases or hearsays.

3. Methods

This is a cross-sectional study that used quantitative research method. Data was collected in Mzuzu, the main city in northern Malawi. We employed a survey method to collect data from the participants. A self-administered questionnaire containing both open and closed-ended questions was used. Randomly sampled respondents took part in the study. Questionnaires were also administered to the Deputy Director of Broadcasting at MACRA and the Station Manager at MIJ FM Radio covering topics on program content, change in schedule, and effects of the change among others. This was done in order to obtain detailed information as much as possible. Informed consent was sought from the study participants prior to data collection. Data collection took place during February and March, 2017.

4. Participants

100 respondents of the age group between 15 and 48 years participated in the study ($M = 29$, $SD = 9$). Of these respondents, 54 were males and 46 were females. They were all randomly sampled and came from diverse backgrounds and were involved in different occupations.

5. Analyses

Data were analyzed using SPSS Version 22. The analyses involved descriptive sta-

tistics, and comparison between categories using Pearson's Chi-Square tests for independence. When the overall Chi-Square test was significant, standardized residuals were examined to determine which groups differed significantly. For all analyses, significance level was set an alpha of 0.05. Association between variables was tested using simple correlation and regression analysis.

6. Results

The purpose of this study was to assess the impact of *Pasimba* in promoting behavioral change among couples.

Demographic characteristics. One hundred participants took part in this research of which 54% were males and 46% were females. 41% of the respondents were married while 54% were single and 5% were divorced. 1% of the participants had Primary School education, 7% Junior Certificate of Education, 29% had Malawi School of Certificate of Education, 39% had diplomas, 22% had Bachelor's Degree while 2% indicated that they possessed a master's degree. In terms of occupation, 5% indicated farming, 56% were under different forms of employment, 18% were unemployed, 5% were engaged in business, 14% were students while 2% indicated that their source of income was provision of casual labor to those in need. The participants came from different age groups as shown in **Table 1** below.

In order to have a clear picture of respondents' age according to sex, a cross tabulation was carried out. See **Table 2** below.

Listening to the radio. Of the one hundred respondents, 35% indicated that they listen to the radio, 40% said they do not listen to the radio while 25% indicated that they sometimes listen to the radio. Listening to the radio shows an interesting pattern. Thus, the difference in the respondents who indicated that they listen to the radio and its frequency is statistically significant. The respondents who listen to the radio indicate regular frequency in which they listen to the radio ($X^2 = 114.072$, $df = 8$, $p < 0.01$).

Listening to Pasimba. Thirty three per cent of the respondents indicated that they listen to *Pasimba* while 67% said they do not listen to the program. The difference between those who listen and do not listen to the program was not statistically significant in terms of sex, education background and marital status ($p > 0.05$). There was also no association between one's age and his or her preference to listen to *Pasimba* ($r_s = 0.32$ $N = 100$, $p > 0.05$).

Relationship between respondents who listen to Pasimba and their frequency to do so. The difference between respondents who listen to *Pasimba* and their frequency for listenership is statistically significant. This implies that respondents who indicated that they listen to *Pasimba* were more likely to listen to it frequently ($X^2 = 44.899$, $df = 4$, $p < 0.01$), see **Table 3** and **Table 4** below.

Is Pasimba good? Thirty three per cent of the respondents indicated that the content of *Pasimba* is good for public consumption while 67% said that it is not good. This huge difference is very crucial because it will be reflected on how the public views and rates the program.

Table 1. Age of respondents.

	Frequency	Percent	Valid Percent	Cumulative Percent
	15	11	11.0	11.0
	22	26	26.0	37.0
	25	4	4.0	41.0
	30	7	7.0	48.0
	31	5	5.0	53.0
	32	12	12.0	65.0
Valid	33	14	14.0	79.0
	34	2	2.0	81.0
	35	7	7.0	88.0
	36	2	2.0	90.0
	45	5	5.0	95.0
	47	3	3.0	98.0
	48	2	2.0	100.0
Total	100	100.0	100.0	

Table 2. Age of respondents * sex of respondents cross tabulation.

		Sex of Respondents		Total
		Male	Female	
Age of Respondents	15	6	5	11
	22	13	13	26
	25	0	4	4
	30	2	5	7
	31	4	1	5
	32	6	6	12
	33	7	7	14
	34	0	2	2
	35	6	1	7
	36	2	0	2
	45	3	2	5
	47	3	0	3
	48	2	0	2
Total		54	46	100

Do listeners of Pasimba discuss with their partners issues raised in the program? All the 33% of the respondents who listen to *Pasimba* indicated that they discuss with their partners whatever issues are raised in the program. This response is statistically significant ($X^2 = 100.000$, $df = 1$, $p < 0.01$).

Has your sex life improved due to listening to Pasimba? All the 33% of the respondents who indicated that they listen to *Pasimbas* aid that their sex life had improved due to listening to the program. Here it can be seen that the program is bringing about a change in the listeners' sexuality ($X^2 = 100.000$, $df = 1$, $p < 0.01$).

Does Pasimba help you to improve your communication with your partner? All the 33% of the respondents that listen to *Pasimba* indicated that the program has helped them to improve communication with their partners. This response is statistically significant ($X^2 = 100.000$, $df = 1$, $p < 0.01$).

Evaluating whether Pasimba is a good program or not. All the 33 respondents who listen to *Pasimba* indicated that it was a good program that is informative and insightful while 67 respondents (67%) who do not listen to the program said that they did not know whether the program was good or bad.

Does Pasimba promote the fight against HIV and AIDS? All the 33 respondents (33%) who listen to *Pasimba* indicated that the program was promoting the fight against HIV and AIDS. 30 respondents (30%) said the program was not promoting the fight against HIV and AIDS while 37 respondents (37%), indicated that they were not in the know as to whether the program was promoting the fight against HIV and AIDS or not. These responses are statistically significant ($X^2 = 100.000$, $df = 2$, $p < 0.01$) as can be seen in **Table 5** below.

This result also indicates that there is a correlation between respondents who listen to *Pasimba* and those that indicate that the program is promoting the fight against HIV and AIDS. Thus, the independent variable *Listening to the Pasimba* program accounts for 76.3% of the variance in the responses of those who indicated that *Pasimba* program is promoting the fight against HIV and AIDS. **Table 6** below, is the model summary for the foregoing.

Table 3. Respondents listen to Pasimba program * frequency of listening to radio cross tabulation.

		Frequency of Listening to Radio					Total
		0	4	5	8	30	
Respondents Listen to Pasimba Program	Yes	0	9	6	3	15	33
	No	40	13	9	3	2	67
Total		40	22	15	6	17	100

Table 4. Chi-square tests.

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	44.899 ^a	4	0.000
Likelihood Ratio	56.245	4	0.000
Linear-by-Linear Association	36.438	1	0.000
N of Valid Cases	100		

It can thus, be concluded that the regression test above is statistically significant-F (1,98) = 53.273, $p < 0.01$ as shown in **Table 7** below.

Did you go for HIV test after listening to Pasimba? All the 33 respondents (33%) who listen to *Pasimba* indicated that they underwent an HIV test after listening to the program. This response gives us a statistical difference between the mean value of the respondents who listen or do not listen to *Pasimba* and those that went for HIV test [$t(90) = -2.029, p < 0.05$].

Here, it can also be seen that there is a positive correlation between listening to *Pasimba* and having the propensity to undergo an HIV test ($r = 1.000, N = 100, p < 0.01$). It can thus, be concluded that the program motivates listeners to undergo voluntary counselling and testing (VCT). This result gives us a regression statistic of $F(1,98) = 22.110, p < 0.01$. This regression is statistically significant.

Is language for Pasimba appropriate? Twenty five out of the thirty three respondents who listen to *Pasimba* indicated that language used in the program is appropriate for the intended audience, 8 respondents said that it was not appropriate while 67 respondents who indicated that they do not listen to the program said that the language was not appropriate. This response is statistically significant ($X^2 = 91.587, df = 2, p < 0.01$).

Pasimba is not appropriate for children. Eight respondents (8%) indicated that *Pasimba* is appropriate for everyone even children while 92 respondents (92%) said that the program is not appropriate for children.

Table 5. Chi-square tests.

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	100.000^a	2	0.000
Likelihood Ratio	126.836	2	0.000
Linear-by-Linear Association	75.516	1	0.000
N of Valid Cases	100		

Table 6. Model summary.

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.873^a	0.763	0.760	0.411

a. Predictors: (Constant), Respondents listen to Pasimba Program.

Table 7. ANOVA ^aresults.

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	53.273	1	53.273	315.126	0.000^b
1 Residual	16.567	98	0.169		
Total	69.840	99			

a. Dependent Variable: Pasimba promotes fight against HIV; b. Predictors: (Constant), Respondents listen to Pasimba Program.

Did the change in schedule for broadcasting Pasimba affect you? Thirty three per cent of the respondents (all participants who indicated that they listen to the program) said that the change in the broadcasting schedule from its original time to watershed period affected them. This response is statistically significant when we consider the frequency for listening to *Pasimba* ($X^2 = 95.544$, $df = 3$, $p < 0.01$).

Was MACRA wrong to change Pasimba broadcasting schedule? Thirty per cent of the respondents indicated that the decision by MACRA to enforce a change in broadcasting schedule was wrong. 60% said MACRA was not wrong while 7% indicated that they were not in the know as to whether the decision was wrong or not. These responses are statistically significant ($X^2 = 79.038$, $df = 6$, $p < 0.01$).

Should MIJ continue broadcasting Pasimba? Thirty per cent of the respondents indicated that MIJ should continue broadcasting *Pasimba*. This percentage constitutes the number of respondents who said that they listen to the program. 3% said that MIJ should not continue broadcasting the program while 64% of the respondents said that they did not know whether MIJ should continue broadcasting the program or not.

Do you face some challenges when listening to Pasimba? Nine per cent of the thirty per cent of those respondents who listen to *Pasimba* indicated that they face a challenge in listening to the program. This challenge emanated from the change in broadcasting schedule from its original time to the current watershed period saying currently the program is broadcast very late. Sixty seven per cent of the respondents said that they did not know about any challenges. See **Table 8** below.

How do you rate Pasimba program? Sixty seven per cent of the respondents said that they do not know how to rate *Pasimba*. This was quite obvious because those respondents had indicated that they did not listen to the program. The respondents who listen to the program rated it positively with twenty one per cent saying that it was good while twelve per cent indicated that it was very good. These responses are statistically significant ($X^2 = 96.939$, $df = 6$, $p < 0.01$). These responses also indicate that there is correlation between ones frequency for listening to *Pasimba* and how he or she rates it. As can be seen in the Model Summary (**Table 9**) below, the independent variable *Frequency for listening to*

Table 8. Do you face some challenges when listening to Pasimba?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	9	9.0	9.0
	No	24	24.0	33.0
	Don't Know	67	67.0	100.0
	Total	100	100.0	100.0

Pasimba program accounts for 70.8% of the variance in the rating of the program.

To underscore the fact that frequency for listening to *Pasimba* program determines its rating the ANOVA results shown in **Table 10** below, indicates that this regression test is statistically significant- $F(1,98) = 92.864, p < 0.01$.

7. Discussion

The aim of this study was to establish the efficacy and impact of *Pasimba* in the fight against HIV and AIDS. Findings from this study indicate that not a large share of the Malawian population listen to MIJ FM Radio and specifically the *Pasimba* program. Notwithstanding, this study has shown that those respondents who are listening to the program have increased their awareness and knowledge about HIV and AIDS, behavioral change and interpersonal communication among others.

The findings also indicate that *Pasimba* seems to be enjoying listenership due to credibility of its presenters, accuracy and consistency in the information that is presented to the audience. According to the Station Manager of MIJ FM, *Pasimba* program features credible spokespersons that balance trustworthiness and expertise something that enhances authenticity of the information that is conveyed to the audience and this is in conformity with previous studies which indicated the way messages are framed and packaged motivate the audience to listen to a radio program (University of Twente, 2013; White 1950; Fairhurst & Sarr, 1996; Snyder, 2007).

Through this study, it has also been established that effective media accounts provide the final motivational factors for individuals to change their behavior. Thus, evidence suggests that *Pasimba* promotes behavioral change by motivating people to undergo VCT and remain faithful to their partners. This is in conformity with previous studies which underscore the importance of the media in

Table 9. Model summary.

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.841^a	0.708	0.705	0.625

a. Predictors: (Constant), Frequency for Listening to *Pasimba*.

Table 10. ANOVA ^aresults.

	Model	Sum of Squares	df	Mean Square	F	Sig.
	Regression	92.864	1	92.864	237.638	0.000^b
1	Residual	38.296	98	0.391		
	Total	131.160	99			

a. Dependent Variable: How do you rate *Pasimba* Program? b. Predictors: (Constant), Frequency for Listening to *Pasimba*.

informing the audiences about HIV/AIDS and the importance of being faithful to their spouses (Chatterjee, 1999; Myhre & Flora, 2000; Sood, Shefner-Rodgers, & Sengupta, 2006; Haider & Kreps, 2004).

Furthermore, the fact that 33% of the respondents went for VCT after listening to *Pasimba* also confirms the role of the mass media in spurring action and promoting behavioral change. These results lend weight to the body of evidence that mass media promotions can have significant impact in raising awareness about HIV and their preventive interventions (Ross & Nightingale, 2003; O'Hara et al., 2014; Yadavalli & Jones, 2014). Besides, in the model of analysis used in this study, evidence also clearly shows that those who listen to *Pasimba* were positively associated with increased HIV awareness and perception, and had greater propensity to undertake HIV tests.

The study also provides evidence that *Pasimba* provides the listeners with social scripts that enable them to engage in public health discourse including sexuality (Betrand et al. 2006; Entman, 1993; Graber, 1989; Pavelka, 2014). As reported, 33% of the respondents who listen to the program indicated that they discuss with their partners issues that are raised in the program. As can be seen here, the program sets the agenda for the audience to engage in meaningful conversation. This finding is consistent with past research which showed that the media can motivate the audience to discuss health issues which they cover (Sood, Shefner-Rodgers, & Sengupta, 2006).

Lastly, *Pasimba* exposure, discussion of health issues with partner and undergoing VCT were strongly correlated in this study. Broadly, the results suggest two pathways to knowledge an intervention on HIV and AIDS. As shown by the evidence from this study, respondents who listen to the program tend to communicate effectively with their partners on the importance of knowing about their HIV status and tend to adopt VCT option. For those respondents, *Pasimba* is such a useful program that provides them with potent information in the fight against HIV and AIDS. Conversely, respondents who do not listen to the program under appreciate its role and as evidence shows, they are not compelled to change their behavior nor undergo VCT. This echoes previous studies which showed that if health messages are properly packaged, they can influence people to change their behavior (Fairhurst & Sarr, 1996; Kitzinger, 2000; Gallagher & Updegraff, 2012; Harper & Philo, 2016).

In a nutshell, much as this study has succeeded in illuminating the impact that *Pasimba* program is having in promoting behavioral change, these results should be interpreted with limitations in mind. Since, the sample involved was only 100 and confined to the Northern Region of Malawi, the results from this small sample cannot paint a representative picture worth generalization. There is need therefore, to conduct a nationwide survey using a large sample size in order to obtain generalizable results. Notwithstanding, the data gathered in this study showed convincing consistency of association between listening to *Pasimba* and behavioral change.

8. Conclusion

This study has shown that MIJ FM, through its *Pasimba* program, is playing a very crucial role in promoting the fight against HIV and AIDS. As has been seen, this is being done by setting the agenda and providing the audiences with social scripts on which to discuss many important issues that boarded on interpersonal communication, public health and sexuality (Giles, 2010; Giles & Shaw, 2009). Through the program, it has been seen that listeners who get exposed to HIV information are more likely to partake in VCT compared with those who do not listen to the program.

From a policy perspective, this study provides us with overwhelming evidence that it is important to integrate the use of the media in all healthcare services, education and social services in order to reduce HIV and AIDS in Malawi. There is also need for the Malawi Government to recognize private media houses as key stakeholders in the fight against HIV and AIDS.

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