



Radio Healthcare Messages and Application of Safety Measures in Response to the Resurgence of HIV/AIDS in Abakaliki Local Government Area, Ebonyi State, Nigeria

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ABSTRACT

Background: The Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS) has long remained a significant global public health challenge. In response, sustained efforts involving medical advancements and social mobilisation have been deployed to curb its spread through the promotion of preventive measures. However, recent signs of resurgence in parts of Nigeria amid a growing sense of complacency due to earlier successes have raised fresh concerns. In Ebonyi State, the State Action Committee on HIV/AIDS (EBOSACA) reported, in the last quarters of 2025, a resurgence of HIV/AIDS in three Local Government Areas, with Abakaliki LGA recording the highest prevalence. This trend is particularly troubling given the continued dissemination of HIV/AIDS awareness messages through radio broadcasts in the state. Although numerous studies have examined media campaigns on HIV/AIDS, there remains a paucity of research assessing the effectiveness of radio health messages in influencing preventive behaviours within specific local contexts such as Abakaliki LGA.

Objectives: This study investigated the level of knowledge and application of radio messages on preventive measures against HIV/AIDS among residents of Abakaliki Local Government Area, Ebonyi State, Nigeria.

Method: The study adopted a descriptive survey design. The population comprised adult residents of Abakaliki LGA. Using the 2006 Census data, the projected population of residents aged 12 years and above was estimated at approximately 269,000 as of December 31, 2025. Using the Australian online sample size calculator, a sample size of 400 was determined. A multi-stage sampling technique with a clustering approach was employed, and a 5-point Likert-scale questionnaire served as the instrument for data collection.

Results: The findings indicate that respondents possess significant knowledge of radio messages on HIV/AIDS preventive measures. However, they rarely apply these measures. Furthermore, the belief that HIV/AIDS prevalence has significantly declined in Ebonyi State-based on government announcements-emerged as a major inhibitor to the effectiveness of radio campaigns against the resurgence of the disease.

Unique Contribution: This study advances existing knowledge on media campaigns against HIV/AIDS by identifying key inhibitors to the translation of knowledge into practice during periods of disease resurgence.



Conclusion: Radio messages on HIV/AIDS preventive measures in Abakaliki LGA are not fully effective, as residents demonstrate low levels of adoption of the recommended practices.

Key Recommendation: The Ebonyi State Government and relevant development agencies, such as WHO, should adopt a more strategic approach in communicating progress made in HIV/AIDS control. Information on reduction rates should be carefully managed until there is reasonable certainty that the risk of resurgence has been effectively mitigated.

Keywords: radio health messages, application, preventive measures, resurgence, HIV/AIDS.

INTRODUCTION

The outbreak of HIV/AIDS epidemic in Nigeria is traced to 1986 when the first cases were recorded in two people from Lagos State. The epidemic showed rapid development during its initial phase which began with the first national HIV/AIDS sentinel survey that took place in 1991 and it was found that 1.8% of women visiting antenatal clinics at that time had the virus. The prevalence rate increased consistently reaching 3.8% in 1993 and 4.5% in 1996 and 5.4% in 1999 before reaching its highest point at 5.8% in 2001, (Federal Ministry of Health 2013; Awofala and Ogundele, 2018). Heterosexual transmission has remained the dominant mode which accounts for more than 80% of infections according to the National Agency for the Control of AIDS (NACA. nd). National trends showed a continuous decline which reached approximately 5% by the 2001 because of enhanced prevention messages and activities, (Federal Ministry of Health 2019). By 2013 the rate of prevalence had reduced to 3.4% and it further decreased to 1.4% in the 2018, Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS, 2019). Nigeria faces a major HIV problem because it has about 1.9 to 2 million people living with HIV/AIDS and problem is compounded by the fact that there has been cases of inconsistent preventive practices and stigma and different regional patterns, (UNAIDS 2023).

Sub-national data in recent years have pointed out the existence of continuous difficulties; which among others include, the resurgence in particular places, which some attribute to factors such as lack of comprehensive knowledge about the disease, inconsistent use of preventive measures (e.g., condom use, abstinence, voluntary testing), and the existence of barriers like cultural norms, limited access to health services, and reduced funding for sustained campaigns (Okeke, Egbosiuba, Nweke, Okafor, Ilo, Okafor and Egbosiuba, 2023). While national prevalence has stabilized at around 1.3%–1.4% among adults aged 15 to 49 years, some studies suggest potential underestimation or upward trends in specific contexts, (Adeleke, Balogun, Ogunnowo, Adejumo, Oluwole, Aina, and Adejumo, 2023).

The southeastern Nigerian state of Ebonyi has a significantly lower HIV burden in comparison to the high-prevalence states of Rivers, Benue and Akwa Ibom (National Agency for the Control of AIDS (NACA, 2025). The NACA 2024 projections estimate that approximately 14,151 people with HIV will live in Ebonyi State which makes it one of the states with the lowest HIV cases (NACA 2024). However, as the State Government and Development agencies are working towards ensuring that the state further reduces the number of victims, investigation reveals that Abakaliki LGA principally hosting the state capital exhibits ongoing localized resurgence of the disease. This may be attributed to urban-rural dynamics and youth vulnerabilities, (Eze, Ossai, Akamike, Alo, and Nwali, 2025)).



Mass media, especially radio, have been instrumental in HIV/AIDS prevention in Nigeria by delivering messages on preventive measures like condom use, being faithful, abstaining from sex, and testing to rural and semi-urban populations (Keating et al., 2006). Resource-limited environments use radio campaigns to improve knowledge and foster personal communication while motivating people to adopt protective actions (Wakefield et al., 2010). The local stations in Ebonyi State, including Ebonyi Broadcasting Corporation, present HIV-related messages consistently, but their actual impact on people by way of influencing safety practices has not been adequately studied and documented. This study, therefore, examines the role of radio messages in promoting and impacting knowledge and eliciting the application of HIV/AIDS safety measures in Abakaliki LGA, Ebonyi State. Whereas several studies exist on media campaigns against HIV/AIDS, there is still paucity of studies that have investigated the effectiveness or otherwise of radio healthcare messages on preventive measures against the resurgence of HIV/AIDS in specific local Nigerian environment like Abakaliki LGA. This study therefore, tried to ascertain the major inhibitor to the effectiveness of Ebonyi Broadcasting Corporation (EBBC) radio messages on the preventive measures against the resurgence of the pandemic.

GENERAL OBJECTIVE

To examine the role of radio messages in promoting safety measures and their adoption in preventing the resurgence of HIV/AIDS in Abakaliki LGA, Ebonyi State.

Specific Objectives are to:

1. ascertain level of knowledge among the people of Abakaliki LGA on radio HIV/AIDS prevention messages.
2. determine the people's level of application of radio messages on preventive measures against HIV/AIDS in Abakaliki LGA
3. determine the major factors contributing to the resurgence of HIV/AIDS in Abakaliki LGA.
4. ascertain the major inhibitors to the people's knowledge and application of radio messages on preventive measures against HIV/AIDS in Abakaliki LGA.

REVIEW OF RELATED LITERATURE

The study by Keating, Meekers and Adewuyi (2006) titled "Assessing effects of a media campaign on HIV/AIDS awareness and prevention in Nigeria: results from the VISION Project" had the objectives: to measure how USAID's VISION mass media project reached people and how it changed their understanding of HIV/AIDS and their knowledge about prevention and their usage of condoms and their discussions with partners. The study was anchored on health communication models as its foundation. The research utilized a quasi-experimental design through two waves of household surveys that took place in 2002 and 2004 across three states of Bauchi Enugu and Oyo while using logistic regression to determine how dosage affected results. The research discovered that the campaign achieved high reach because 59% of people who



participated in the study listened to radio spots which led to increased awareness of prevention methods including condom use and abstinence and it created positive relationships between people and their understanding of condom use and their condom perceptions. The research identified two target groups which included people who live in rural areas and women and unmarried individuals while recommending that organizations should continue their multi-channel campaign efforts. This study is highly relevant to this research as it demonstrates radio's role in promoting HIV safety measures in Nigeria, supporting current focus on radio campaigns against resurgence in Abakaliki LGA. The knowledge gap which it leaves is the lack of localized, recent assessment in southeastern Nigeria (e.g., Ebonyi/Abakaliki), where sub-national resurgence risks and radio-specific adoption rates remain limited and scarce.

In another study by Ifeyinwa, et al., (2014), titled "The Nigerian Perspective of Social Marketing Campaigns: A Study of Ebonyi State Action Committee on Aids (EBOSACA)". It had the following objectives: to evaluate the impact of broadcast media campaigns on behavioral change related to HIV/AIDS in Ebonyi State. The project followed social marketing principles which guide its implementation. The research used descriptive survey methods to collect data through questionnaires from residents who experienced EBOSACA campaigns which were broadcast on radio and other media. The study discovered that participants developed moderate knowledge improvements and positive attitude changes about prevention methods which included condom use and testing, yet their actual prevention behavior remained unchanged because of stigma and accessibility challenges. The study recommended that organizations need to increase their community engagement through collaborative media campaigns to achieve improved results. This study is directly relevant as it examines media campaigns (including radio) in Ebonyi State, aligning with your focus on radio in Abakaliki LGA. It highlights early evidence of media influence but leaves a gap that demands an update in knowledge; a post-2020 quantitative assessment of specific radio-promoted safety measures, adoption rates, and influencing factors amid resurgence concerns.

Another study conducted by Orji, Ifebunandu, Joe-Akunne, Chidiebere, Echefu and Eze (2025) aimed to measure HIV knowledge levels among students in Abakaliki New Nigeria through their research program. The research used a knowledge adequacy framework as its main guiding principle because it did not select any specific scientific theory. The study used a cross-sectional survey design which included 1,200 participants from public schools in Abakaliki who completed questionnaires that were analyzed using logistic regression. The study found that 48.6% of participants possessed adequate understanding of the topic because their knowledge level depended on their age and socioeconomic background and their media consumption patterns. The study recommended that schools should implement educational programs which should be supported by media campaigns. The study examines current HIV knowledge gaps in Abakaliki LGA through its recent findings which directly support your investigation into how radio broadcasts promote safety measures. The gap exists because the research investigates adolescents' knowledge but it fails to study how radio messages contribute to protective behavior adoption and how specific obstacles such as stigma and accessibility problems affect the entire community of residents.



THEORETICAL FRAMEWORK

Health Belief Model by Irwin M. Rosenstock, Godfrey M. Hochbaum, S. Stephen Kegeles, and Howard Leventhal (1950s). The Health Belief Model (HBM) serves as a basic social cognitive framework for health psychology which demonstrates why people either practice preventive health measures or do not. The model states that people develop their behaviors based on six elements which include their beliefs about personal health threat risks and the potential impacts of those threats and the advantages of taking recommended safety measures and the difficulties they face when they try to execute those measures and the external signals which prompt them to act and their belief about their capacity to execute the required behavior. The United States Public Health Service developed this model during the 1950s to address the problem of people not participating in complimentary tuberculosis X-ray testing and disease prevention programs.

The Health Belief Model serves as a strong framework which researchers can use to study how radio broadcasts impact Abakaliki LGA residents' implementation of HIV AIDS protection methods. The radio broadcasts function as primary external triggers which lead listeners to perceive their likelihood of contracting HIV during the local outbreak while they learn about the serious effects of AIDS and the transmission reduction and early detection advantages of preventive actions and the common social obstacles which include stigma and access issues through materials which match their cultural background. Exposure to these messages can enhance self-efficacy by modeling feasible actions and building confidence in adopting them. The Health Belief Model serves as a strong framework which researchers can use to study how radio broadcasts impact Abakaliki LGA residents' implementation of HIV AIDS protection methods. The radio broadcasts function as primary external triggers which lead listeners to perceive their likelihood of contracting HIV during the local outbreak while they learn about the serious effects of AIDS and the transmission reduction and early detection advantages of preventive actions and the common social obstacles which include stigma and access issues through materials which match their cultural background.

RESEARCH METHODOLOGY

Research Design

This study adopted a qualitative research design. This design allowed for the collection of data from the respondents which enabled the researchers to describe the patterns of exposure, knowledge acquisition, adoption and of preventive/ safety measures against HIV/AIDS as canvassed by EBBC radio messages. 5-point structured Likert-Scale questionnaire served as instrument for data collection.

Area of Study

The study area was Abakaliki Local Government Area (LGA). The area constitutes the bulk of the capital city of Ebonyi State. Nevertheless, the LGA still has many rural communities that share boundary with Cross River State and other LGAs in the state. The residents of the area predominantly speak Igbo and majority of them are Christians. Abakaliki LGA serves as the converging point for people from far and wide making the area highly vulnerable to resurgence of HIV/AIDS. Moreover, the area is home to many government and privately owned educational,



healthcare, bank, market, motor parks, hotels, industries, churches, among other facilities. All these help to bring people in and out of the area, thereby, making the job of mobilizing the people against the pandemic more demanding and complex.

Population of the Study

The target population for this study is the entire adult residents (those aged 12 and above) who are residents in Abakaliki LGA. According to the 2006 Population and Housing Census by the National Population Commission (NPC), the population of adult residents of Abakaliki LGA was 149,603 (National Population Commission, 2006). This figure was projected to 2025 using a compound annual growth rate of 3.0%, applying the formula $P = P_0 \times (1 + r)^t$, where $P_0 = 149,603$, $r = 0.03$, and $t = 19$ years: $P = 149,603 \times (1.03)^{19} \approx 269,000$. This entire resident population is suitable for the study, as radio messages from local stations (e.g., Salt 98.1 FM) reach households across Abakaliki LGA, where exposure and application of HIV/AIDS safety measures can be measured.

Determination of Sample Size

The Australian online sample size calculator was used to compute a sample size of 400.

Sampling Technique

The study made use of multi-stage sampling method to choose participants from the Abakaliki Local Government Area which exists in Ebonyi State. The researchers conducted their work through four distinct stages. The researchers selected Abakaliki LGA as their study area because EBOSACA (2025) reveals that it currently has the highest case of HIV/AIDS resurgence. The researchers used simple random sampling to obtain eight wards from fourteen registration areas which the official list contained and which they obtained from INEC and Ebonyi State records. The selected wards were: Abakpa, Amachi (Ndegu), Amagu (Enyigba), Azuiyiokwu Layout, Azuiyi Udene, Edda, Ndiagu, and Timber Shed. The researchers then sampled households in the selected wards and communities through systematic sampling methods. The researchers selected one eligible respondent from each household who admitted to have reached 18 years and above.

DATA PRESENTATION AND ANALYSIS

Section A: Demographic Information

The demographic profile of the 400 respondents in Abakaliki LGA shows age group, 32% were in the 18–22 years category, 27.2% in 23–27 years, 24% in 28–32 years, and 16.8% in 33 years and above, with the majority (84%) falling within the younger age brackets (18–32 years). The study showed that respondents had almost equal gender distribution because 51.3% identified as male and 48.7% identified as female. The study found that 60% of participants were single while 32.9% were married and 7.1% had divorced or become widowed, which showed that most people who participated were either unmarried or had just entered marriage.



Section B: People’s Level of Knowledge of radio messages on preventive measures against HIV/AIDS in Abakaliki LGA

Table 1

S/N	Questions	SA	A	N	SD	D
1.	Radio messages in Abakaliki frequently promote consistent and correct condom use as a key way to prevent HIV transmission.	127 31.8%	94 23.5%	104 21.5%	27 6.7%	48 12%
2.	Radio broadcasts in this area often encourage sexual abstinence or delaying first sexual intercourse to avoid HIV infection.	142 35.5%	121 30.3%	86 21.5%	32 8%	19 4.7%
3.	Radio programs commonly promote voluntary HIV testing and counseling as an essential safety measure against HIV/AIDS.	177 44.3%	89 22.3%	55 13.7%	58 14.5%	21 5.2%
4	There was a time it was announced on air that Ebonyi State is almost free of HIV/AIDS	179 44%	87 22%	54 14%	59 15%	20 5%

Field survey, 2025.

The survey results show that majority of the people admitted that they have commendable knowledge of radio messages on preventive measures against HIV/AIDS. Over 55% of the respondents strongly and ordinarily agreed with the questionnaire items in the table.

Section C: The Level of Application of radio messages on preventive measures against HIV/AIDS in Abakaliki LGA.

Table 2

S/N	Questions	SA	A	N	D	SD
1.	I consistently use condoms correctly during every sexual encounter to prevent HIV.	112 28%	12 3%	54 13.5%	33 8.2%	189 47.3%
2.	I practice sexual abstinence or limit sexual activity to one faithful, uninfected partner.	78 19.5%	38 9.5%	111 27.7%	47 12%	126 31%
3.	I have voluntarily tested for HIV in the past 12 months and know my status.	69 17.3%	31 7.7%	98 24.5%	79 19.8%	123 30.7%
4	.I have continued to apply safety measures, though, govt has announced that Ebonyi is almost free of HIV/AIDS	69 17%	32 8%	97 25%	80 20%	122 31%

Field survey, 2025

The data in the table show that majority of the people admitted low or non-application of radio messages on preventive measures against HIV/AIDS. Over 50% of the respondents disagreed



and strongly disagreed with the questionnaire items in the table. This result is further buttressed by admittance that the spread of information that Ebonyi State is almost free of HIV/AIDS made them to relapse. Moreso, significant percentage of the respondents admitted neutrality to the questionnaire items. This further indicates the gap between the knowledge and the application of the said radio messages.

Section D: Factors Inhibiting Application of Safety Measures

Table 3

Field survey, 2025.

S/N	Questions	SA	A	N	SD	D
1.	Stigma and discrimination in my community discourage me from applying HIV safety measures like HIV testing.	79 19.7%	89 22.3%	23 5.7%	41 10.23%	168 42%
2.	Limited access to free condoms, testing services, or health facilities hinders my ability to apply promoted safety measures.	49 12.3%	77 19.2%	73 18.2%	97 24.3%	73 18.2%
3.	Cultural or religious beliefs in Abakaliki make it difficult for me to openly discuss or practice HIV/AIDS prevention measures.	83 20.7%	128 32%	46 11.5%	29 7.3%	46 11.5%
4.	There was no need practicing safety measures since it has been officially announced that Ebonyi State is almost free of HIV/AIDS pandemic	82 21%	126 32%	48 12%	31 7%	45 12%

The data show that fear of stigmatization, belief that Ebonyi has been declared almost free of HIV/AIDS, limited access to preventive facilities and cultural norms and values are the major inhibitors to the acquisition and application of radio messages on HIV/AIDS prevention in the area.

DISCUSSION

The result in table 1 above suggests that people in Abakaliki LGA have significant knowledge about radio messages on preventive measures against HIV/AIDS. A total of 55.3% of the respondents admitted that condom is a means of prevention, sexual abstinence or delayed sexual debut scored 65.8%, voluntary HIV testing and counseling received 66.6% and admittance of earlier knowledge that the prevalence of the disease has been significantly reduced scored a total of about 66%, while, only a few of them strongly disagreed and disagreed with the questionnaire items.



These findings show that radio stations like Salt 98.1 FM and Unity FM bring essential HIV/AIDS prevention information to listeners in Abakaliki LGA through their easy-to-understand broadcasts. This finding is in tandem with the results of previous researches like Nwankwo and Orji-Egwu (2017). Also, an earlier study undertaken in Owerri Metropolis, Imo State, Nigeria demonstrates that radio sensitization programs decrease stigma while improving the public's understanding of prevention methods (Okafor et al., 2023).

Therefore, this finding aligns with earlier findings by confirming radio's effectiveness in mobilizing people against public health hazards, particularly in tackling the resurgence of the HIV/AIDS in Abakaliki LGA and beyond. Meanwhile, it should be noted that neutral responses in the table partly suggest some variability in message recall or exposure intensity. Consequently, this draws attention to need for innovation and creativity in craft the messages to enhance comprehension and longtime memorability. On the other hand, neutrality as contained the table under discussion could also be indicative of respondents' deliberate intention not divulge the truth about their low or non-application of preventive measures as the disease. This idea implied in the 44% and 22% strongly agree and agree responses to the questionnaire item probing to determine if the people would admit knowledge of one time radio announcement that the prevalence of HIV/AIDS has been significantly reduced in Ebonyi State. Regardless of whatever factors are behind the people's responses, it suffices to opine that this micro-research-area endeavor reinforces the ongoing effort to consolidate on the gains so far made in the fight against HIV/AIDS at both the national, regional and local levels Nigeria. It therefore suffices to say that the concerns about resurgence demands consistent and targeted broadcasts to reinforce and sustain the already cultivated positive attitude and the culture of apply preventive measures by the people.

Meanwhile, the data in table two obviously indicated the respondents' admittance that they rarely apply the radio messages on HIV/AIDS preventive strategies. Perhaps, this is the major reason why HIV/AIDS prevalence is resurging the area. The statistical figures in the table show that 47% and 8% respectively strongly disagreed and disagree that the currently use condom during sexual engagement. Again, 31% and 11% respectively strongly disagreed and disagreed that they practice abstinence. A significant number of the respondents translating to 21% admitted neutrality. In the context of the questionnaire item, neutrality could be taken to mean admittance of non-practice of abstinence as a preventive measure. A total 50% of the respondents are not ready to voluntarily submit themselves for HIV free testing. 24% of them kept mute about voluntary testing. This again, indicates unwillingness to practice voluntary testing as contained in radio messages. Moreover, is striking to note that the last questionnaire item in the table sought to determine the people's expected cultivated attitude and behavior of continuing the application safety measures, even though, the government of Ebonyi State had announced the state is at the threshold of being declared HIV/AIDS free. The responses generated suggested proved otherwise. 31% and 20% strongly disagreed and disagreed. 25% were neutral.

The research shows multiple patterns that validate earlier Nigerian studies which demonstrate that many a time, knowledge does not directly translate to application, (Nwankwo and Orji-Egwu, 2017). The research findings from South-Eastern Nigeria including one done at the military communities in Abakaliki, Ebonyi State, show that people who knew about condoms



and testing procedures used them at a low rate (Okafor et al., 2011; Eze et al., 2025). This study adds nuance by highlighting persistent adoption inconsistencies in Abakaliki LGA, possibly due to urban-rural dynamics and youth vulnerabilities, reinforcing the need for not only sustained effort to prevent resurgence, but, for complementary interventions beyond radio to translate awareness into sustained behaviour change.

Factors inhibiting the application of safety measures present a mixed picture in Abakaliki LGA, with cultural/religious beliefs emerging as a prominent barrier (52.7% agreement), limited access to services showing moderate hindrance (31.5% agreement), and stigma/discrimination perceived as less deterrent (42% agreement, 52.23% disagreement). A total of 21% and 32% strongly agreed and agreed that there was no need for continued application of preventive measures since the state is said to be almost free from the disease. These results indicate evolving community dynamics where stigma may be declining and fear for risk of becoming a victim significantly reducing. The HBM model had earlier warned that people consider the magnitude and severity of disease condition before accepting communication intervention options. In South-Eastern contexts, including Ebonyi State, cultural norms and access gaps have been linked to low HCT uptake among out-of-school youth, (Emmanuel et al., 2025). The lower perceived stigma here supports recent trends of reduced discrimination through sustained campaigns, adding evidence that radio messaging may contribute to norm shifts in Abakaliki LGA. However, the strong influence of cultural beliefs and moderate access barriers align with findings from adjacent areas, where religious views and service availability hinder open prevention discussions. It is imperative to note that perhaps for political reason, government in Nigeria and Ebonyi State has always made the mistake of rushing to announce successful reduction in the prevalence of infectious diseases. It was the case during the outbreak of Ebola, COVID-19, leprosy, tuberculosis, Guinea-worm, HIV/AIDS Lassa Fever. Unfortunately, HIV/AIDS, Lassa Fever and perhaps, tuberculosis have sporadically resurged in parts of parts of Nigeria and Ebonyi State. This therefore, calls for more guided information in this regard as a way of fostering sustainability in the fight against HIV/AIDS in Abakaliki LGA, Ebonyi State and Nigeria at large.

CONCLUSION

Radio messages on preventive measures against the resurgence of HIV/AIDS in Abakaliki LGA are not effective because the people are rarely adopting preventive measures as canvassed by the radio messages.

RECOMMENDATIONS

1. The Ebonyi State Government and concerned development agencies like WHO should be more and systematic in the use of mass media in announcing the success achieved in the fight against HIV/AIDS. The percentage of reduction achieved should be kept as government official secret, pending when the government is sure that there is no possibility of resurgence.
2. Community leaders and religious organizations in Abakaliki LGA should actively support and promote open discussions on HIV prevention, including condom use and testing, to reduce cultural and religious resistance.
3. The Ebonyi State Agency for the Control of AIDS, in partnership with NGOs, should improve the availability of free condoms, HIV testing services, and PrEP in Abakaliki LGA health facilities to enhance practical adoption of promoted safety measures.



Ethical clearance

We hereby declare that ethical consent was sought and obtained from the participants used in this study. They were made to understand that the exercise was purely for academic purposes, and their participation was purely voluntary.

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Conflict of Interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Authors' Contributions

Dr. Simon Ugochukwu Nwankwo conceived the research topic and as well handled the background to the study, the objectives, Dr Agatha Orji-Egwu handled the Literature review and the theoretical framework, Mrs Jennifer N. Nwenyi handled data collation and presentation and Dr Sam Nweze did the discussion of findings and the reference list. All authors have critically reviewed and approved the final draft, and are responsible for the content and similarity index of the manuscript.

Data availability statement

The datasets on which conclusions were made for this study are available on reasonable request.

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