



An Examination of Television Messaging as the Most Influential Medium of Communication in Addressing Young Women's Vulnerability to HIV/AIDS in Kenya: A Case Study of Mlolongo Township, Machakos Country, Kenya

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Received 29 September, 2014; Accepted 20 December, 2014 © The author(s) 2014. Published with open access at www.questjournals.org

ABSTRACT:- Since its discovery over 25 years ago, HIV/AIDS has become a challenge globally more so in developing countries, Kenya included. Young women are particularly vulnerable to HIV/AIDS compared to men due to other underlying factors and not just because they are promiscuous. The study set out to establish whether television messaging, as a medium of communication, was the most effective method of preventing HIV/AIDS among young women in Kenya with specific reference to Mlolongo Township in Machakos County, Kenya. The study targeted women aged between 15 and 24 in the study site. The age group was chosen because it is relevant in that women at this age are sexually active and have the desire to experiment and discover more about their reproductive health issues. Women are particularly vulnerable because of issues such as culture, gender, poverty and illiteracy. The study site, Mlolongo township, was chosen as suitable because the town is situated along the busy Nairobi-Mombasa highway, where the weighbridge is situated, making the town a sexual hub for truck drivers who spend days in the town as they wait for their trucks to be weighed; thus making it a rich spot for the spread of HIV/AIDS. The truck drivers are known to sexually exploit young and vulnerable girls because the girls are poor and in need of economic support and hence the truck drivers take advantage of their poverty situations. The study employed descriptive research design to collect data from the sample population. Data collection was through the use of the questionnaire method administered on a face-to-face basis to the respondents. The sample size was 60 respondents who were selected using simple random sampling method. The study findings indicated that awareness on the mode of transmission, prevention and management of the HIV/AIDS was almost 100 percent among the respondents. Majority of the respondents had had access to TV programs that contained messages on HIV/AIDS. However, the TV viewing a-lone was not sufficient enough to help change the women's sexual behavior; other underlying factors such as cultural beliefs, gender, poverty, peer pressure, economic dependence on male partners made the women more vulnerable to HIV/AIDS and not necessarily lack of knowledge on HIV/AIDS. The study concluded that there was therefore need for change of strategy on the fight against HIV/AIDS and not merely awareness creation and prevention through television messaging. There was need for stakeholders to address the issues at which young women are vulnerable to HIV/AIDS and not necessarily creating awareness, which, according to the study, was not effective enough

I. BACKGROUND

Over twenty-five years have passed since the first diagnosis of HIV, the virus that causes AIDS in the world. While there were a handful of women among the first AIDS cases, they (women) have emerged as another group hard hit by the HIV and AIDS epidemic (KAIS, 2007, KDHS, 2003). HIV/AIDS has claimed more than 20 million lives worldwide and some 37 million people are living with the virus. Each year, one million people die of the virus. According to figures from UNAIDS 2003, Sub-Saharan Africa accounts for about 70 percent of the world's HIV/AIDS infection, 25 million of the 37.8 million people living with the HIV/AIDS worldwide. In Kenya 2 million are people are infected (NACC, 2000).

Since HIV/AIDS was discovered in 1981, it has become one of the most devastating infectious diseases globally. It is the fourth most common causes of premature death in the world, and the leading cause of death in

Africa. Of approximately 60 million people who had been infected with HIV since the beginning of the epidemic, more than 20 million had died of AIDS by the end of 2003 (UNAIDS/WHO, 2003).

In 2004, there were about 3.1 million AIDS deaths worldwide. In the same year, about 4.9 million new infections occurred, approximately 14,000 people per day- resulting in more than 39.4 million people living with HIV/AIDS worldwide. In that year, 60% of some 25.4 million on the infected people were living in Sub-Saharan Africa where the epidemic is causing particular devastation. The average HIV prevalence among adult population across Sub-Saharan Africa is 7.4% (UNAIDS/WHO, 2004).

Africa bears much of the burden of these devastating statistics, with 25 million people living with HIV/AIDS. Various strategies towards the eradication/management of the virus have put several intervention strategies in place. Among them, include abstinence, condom use, faithfulness to one partner of known HIV status and addressing stigma Spearheaded largely by the government, non-governmental organizations, health professionals and the media.

It is estimated that 7000 young people aged between 10 and 24 are infected with the virus daily; that is about 5 young people every minute. About 1.7 million young people in Africa are infected with HIV every year, with 700, 000 being Asia and the Pacific. (UNAIDS, 2001). In Kenya, 80-90 percent of infections are among people aged between 15 – 24 years, (AIDSCAP/FHI 1996). HIV/AIDS infections are concentrated in the least developed countries (LCD) with 89% of people with HIV/AIDS living in Sub-Saharan Africa and Asia. Over 2/3 of all the people living with the virus, 22 million live in Africa. It is estimated that 87% of children living with HIV/AIDS in the world live in Africa (NACC, 2000).

II. WOMEN'S VULNERABILITY TO HIV/AIDS

Women are about half of all people living with HIV/AIDS worldwide, but sub-Saharan Africa women are 58 percent of the people living with HIV/AIDS. Young women aged 15 to 24 were 2.5 percent are more likely to be infected than young men, (UNAIDS 2009).

In another study that was carried out by Nyambane and Dr Ndeti, *et al* (2014), it was established that young women are particularly a vulnerable population in Kenya, a country where majority of the population becomes sexually active between ages 15 and 24. This is due mainly to vulnerability and not necessarily that the young women are promiscuous. Majority of them are sexually active and desire to experiment due to peer pressure. The study also found out that young women get infected with HIV/AIDS not because of their own behavior but because of other underlying issues such as gender-based violence, culture, economic dependence, poverty, gender-based violence including rape, economic dependence and cultural practices and beliefs. These and many under underlying issues makes the young women's vulnerability grave. Among young women, HIV infections are sexually transmitted or associated with pregnancy, childbirth and breast-feeding health initiatives, women with violent or controlling male partners are at increased risk of HIV infection, partner violence, male-dominance in relationships, physical violence, sexual coercion and cultural beliefs where the society tolerates male promiscuity and the woman is supposed to abide by that, hence endangering her life. There should be an acknowledgement that there is linkages between HIV/AIDS and sexual and reproductive health, and explain their relationship within the broader issues of public health, development and human rights. Coupled with living in high-risk areas like Mlolongo, makes them a relevant unit of study, (Nyambane *et al* 2014).

African girls and women are particularly vulnerable to HIV infection and the poverty levels to which these women are exposed make matters worse for the women. A report by GAVI (2001) points out that cultural beliefs and gender issues are particularly responsible for the high numbers of new HIV infections being reported among married women in Kenya. Innocent women could be married and remain faithful to their husbands but who are promiscuous. However, the society condones men's promiscuous behavior does not allow a woman to divorce him or complain because that is the norm among many cultures in Kenya; it is ok for a man to have many sexual partners but the wife is not expected to raise a finger because that is interpreted as being disrespectful to her husband. Besides, this woman depends on her husband for economic support and therefore she has to stick to the marriage thereby endangering her own life, (GAVI 2001).

III. STUDY OBJECTIVE

The main objective of the study was to establish whether HIV/AIDS prevention through television messaging is the most effective methodology of addressing the vulnerability of young girls to HIV/AIDS in Kenya.

3.1. Research Questions

Is HIV/AIDS prevention messaging through television as a medium of communication the most effective method of addressing vulnerability factors among girls?

How many television programs carry messages on HIV/AIDS?

Have the messages helped change behavior?

IV. LITERATURE REVIEW

Over twenty-five years have passed since the first diagnosis of HIV, the virus that causes HIV/AIDS in the world. While there were a handful of women among the first AIDS cases, they (women) have emerged as another group hard hit by the HIV/AIDS epidemic (KAIS, 2007, KDHS, 2003). HIV/AIDS has claimed more than 20 million lives worldwide and some 37 million people are living with the virus. Each year, one million people die of the virus.

In 2006 UNAIDS estimated that there were 5.6 million people living with HIV in India which indicated that there were more people with HIV in India than in any country in the world (UNAIDS, 2006). In 2007, following the first survey of HIV among the general population UNAIDS and NACO agreed on a new estimate—between 2 million and 3.1 million people living with HIV (UNAIDS, 2007). In 2008, the figure was estimated to be 2.4 million people were living with HIV in India which equates to a prevalence of 0.3% (UNAIDS, 2010).

According to UNAIDS 2009, more than 34.3 million people worldwide are now living with HIV/AIDS. An estimated 15000 new infections occurred daily in the year 2000, with the majority aged between 15-49 years. Currently more than 95% of all HIV-infected people come from the developing world and more than two thirds live in Sub-Saharan Africa. The region has 10% of the world's population, but has experienced 90% of the world's AIDS mortality. Most of the countries in Sub-Saharan Africa are now facing a growing HIV/AIDS epidemic in their adult and pediatric populations that is fuelled by poverty, lack of general and health-related knowledge, inadequate health services, high-risk sexual behavior and a high prevalence of classical sexually transmitted diseases (Ngugi 1999).

In Kenya, the first case of HIV was diagnosed in 1984. Since then, the epidemic has continued to wreck havoc in the productive population. The highest rates of infection were concentrated in marginalized and special-risk groups, including women sex workers and their clients, and men in mobile occupations, such as long-distance truck drivers (KAIS, 2007). New infections are occurring both in the general population and in vulnerable, high-risk groups. Two million people are infected according to NACC (2000). The Kenya AIDS Indicators Survey (2007) estimated the average HIV prevalence among the general population aged 15-49 at 7.4 percent while the Kenya Demographic and Health Survey (KDHS, 2008-09) estimated prevalence for the same population at 6.3 percent. Women still have a higher prevalence compared to men: women 8.4 percent against 5.4 percent for men (KAIS, 2007) and women 8 percent compared to 4.3 percent for men (KDHS 2008-09). Sex differential is more pronounced among young women 15-24 age group who tend to have HIV prevalence four times higher than young men - 5.6 percent against 1.4 percent respectively (KAIS, 2007) and 4.5 percent and 1.1 percent respectively (KDHS, 2008-09).

4.1 Study Design

The study adopted the descriptive research, also known as statistical research, because it describes data and characteristics about the population or phenomenon being studied. Descriptive research answers the questions *who, what, where, when and how*. Thus, on the basis of the above, this research design was appropriate for the present study as it was important to gauge the levels of awareness among the study subjects (women aged between 15 and 49 years) and try to explore how much they knew, what the knowledge had helped them with and how they have or will utilize that knowledge to change behavior, (A. Sharma PHD Thesis 2011).

Further, descriptive research is designed to "describe, rather than explain a set of conditions, characteristics, or attributes of people in a population based on measurement of a sample" (Alreck & Settle, 1985, p. 408). Descriptive research methods range from the survey, which describes the status quo of variables, to the correlation study, which investigates the relationship between variables (Babbie, 1995, p.406). Isaac and Michael (1981) contend that descriptive research is often used to describe existing phenomena, identify problems, or justify current conditions and practices. According to Babbie (1995), descriptive research "is probably the best method available to the social scientist interested in collecting original data for describing a population too large to observe directly," (p. 257).

The descriptive research approach was chosen for this study because it can help in understanding the relationship between women's beliefs and perceptions about the conditions that face i.e. their vulnerability to HIV/AIDS. A descriptive study can help identify common implementation problems and other pressing problems in current practice, (Ellis & Fouts, 1993).

The design was also found suitable because this type of design is used to answer the question 'why' and 'how' things happen the way they do. It establishes a cause and effect relationship between two variables. It is used to explain any behavior in the market through the use of questionnaires, interviews, random sampling

etc. and that is the method employed by this study, hence making the research design the most suitable, Frick and Hansen (1997). The objective of this study was to examine the relationship between T.V viewership and personal behavior change among young women in Mlolongo Township and therefore research design was found to be the most suitable to yield the best results based on the research questions and objectives to establish whether there was correlation between TV viewership and behavior change.

4.2 Theoretical framework

Social Cognitive Theory (Bandura A. (1996) and Perry C. *et al* (1990) guided the study. According to the theory, Bandura's Social Cognitive Theory proposes that people are driven not by inner forces, but by external factors. This model suggests that human functioning can be explained by a triadic interaction of behavior, personal and environmental factors. This is often known as *reciprocal determinism*. Environmental factors represent situational influences and environment in which behavior is preformed while personal factors include instincts, drives, traits, and other individual motivational forces. Several constructs underlie the process of human learning and behavior change, Bandura (1986). These variables may also intervene in the process of behavior change Perry *et al* (1990).

- *Self-efficacy* — A judgment of one's ability to perform the behavior.
- *Outcome Expectations* — A judgment of the likely consequences a behavior will produce. The importance of these expectations (i.e., *expectancies*) may also drive behavior.
- *Self-Control* — the ability of an individual to control their behaviors.
- *Reinforcements* — something that increases or decreases the likelihood a behavior will continue.
- *Emotional Coping* — the ability of an individual to cope with emotional stimuli.
- *Observational Learning* — the acquisition of behaviors by observing actions and outcomes of others' behavior.

The theory was relevant to the study in that there is stigma and fear that is attached to HIV/AIDS thereby preventing many women from taking steps towards its prevention such as going for testing and having protective sex. Therefore to increase levels of self-efficacy it may be important to provide resources and support to raise individual confidence. Others have suggested that to raise self-efficacy behavior change should be approached as a series of small steps, Perry C. (1990).

Bandura (19986) writes that even when individuals have a strong sense of efficacy they may not perform the behavior if they have no incentive. This seems to suggest that if we are interested in getting others to enact behavior change it may be important to provide incentives and rewards for the behaviors. Shaping the environment may encourage behavior change. This may include providing opportunities for behavioral change, assisting with those changes, and offering social support, (*ibid*). It is important to recognize environmental constraints that might deter behavior change. There is need to increase awareness on HIV/AIDS prevention but also demonstrate the rewards of abstaining or going for testing. For instance, when one changes behavior, there are the reward of enjoying good, longer and health life on top of avoiding the opportunist infections besides saving money for buying drugs to treat the infections.

V. THE IMPORTANCE OF TELEVISION MESSAGING AS A SUITABLE MEDIUM OF COMBATING HIV/AIDS

According to One TV World Booklet (2012), the television has tremendous strengths that can be harnessed to create awareness on HIV/AIDS. Its intrusive impact, audio-visual characteristic, persuasively uses, sight/sound/motion, maximum reach, ability to target the consumer, and the fact that it can leave a lasting impact in the viewer's mind made it relevant medium of choice for this study. Kenya media audiences are fragmented along various television channels. Over 395 OF THE Kenyans watch television. Over 3.2 million households have television sets across the country. There are more television viewers in urban areas than in rural areas. This is because urban areas enjoy higher standards of living than in the rural areas and have therefore better access to television and hence the reason why it was chosen as a medium of study in this research, (Oriare, Ogango and Okello, 2010).

5.1. Television programs in Kenya with messages on HIV/AIDS

The study sampled a few television programs aired in Kenyan television that contain messages on HIV/AIDS. In Kenya there are various television programs aired on various television channels that contain messages on HIV/AIDS with an aim of creating awareness among the vulnerable groups especially the youth and more so women. The study sampled a few of those programs for analysis:

5.1.1 Shuga

Shuga is a Kenyan television soap opera that was first aired in November 2009 on MTV as part of an initiative dubbed "MTV Staying Alive Ignite!". It was commissioned by MTV Networks Africa in association with The MTV Staying Alive Foundation, PEPFAR (The US President's Emergency Fund for Aids Relief), the Partnership for an HIV-Free Generation (HFG) and the Government of Kenya, as part of a ground-breaking multimedia campaign to spread the message about responsible sexual behavior and tolerance among young people especially those in college. The program later became a hit and was aired in 40 different African countries before it was aired internationally in over 70 television stations (Stay Alive retrieved 27/06/2014). It was thought to be a very controversial series by the senior generation of Kenyans because it contained some scenes that contained sexually explicit content (www.worldmediafestival.org, retrieved 27/06/2014). It bagged a Gold award in May 2010 at the World Media Festival in Hamburg, Germany in the Public Relations Health category for its vivid and uncompromising focus on love, emotions and sexual behavior amongst the Kenyan youth (www.archive/worldmediafestival.org retrieved 27/06/2014).

Season one told the story of a modern girl Ayira, (Lupita Nyong'o) who knew what she wanted and how to get it. She developed passion with an older man at the expense of a longtime lover. The storylines were rape, transactional sex and homosexuality plus a bunch of other issues to be explored included HIV testing, stigma, condom use, gender inequity and the role of multiple concurrent partnerships in driving the HIV epidemic. The program also aired some gay scenes that were meant to tackle the HIV/AIDs spread among the gay people. According to Georgia Arnold the executive producer of the drama series, the actual plan had to be pulled back to avoid controversy since it was a delicate matter in Kenya, Mukei, Catherine (2012).

5.1.2 Wachana na Mpango wa Kando (Stop Extra Marital affairs)

This is a popular TV advert by Jimmy Gathu's '*Mpango wa Kando*' advert that leaves men — both innocent and cheats alike — bewildered. But it also seems to give weight to the cost of running such illicit affairs more than the risk of contracting HIV/Aids. The advert is aired in most Television channels such as Nation Television, (NTV), Kenya Television Network, and (KTN), Citizen TV to mention a few. A few months back, Jimmy Gathu was singing everywhere '*Wacha Mpango Wa Kando*', a loose translation of 'Be Faithful' to one partner. Despite all the publicity, cheating was still rampant.

Someone had to go back to the drawing board.

This new ad features two women, one of whom innocently enquires about her friend's husband. As is the case with many families in Kenya, the husband is a drunkard who never satisfies his wife in bedroom affairs.

The concerned friend then goes ahead to advise her friend to always use a condom when with Mbugua, the *mpango was kando guy* i.e. the extra man in her life besides her husband who happens to be younger than her husband.

The ad then concludes with a voice saying, "*Chochote umeamua, weka condom mpangoni*; translated to mean, whatever you decide to do, always carry a condom with you."

It's sponsored by USAID, UKaid and the Ministry of Public Health and Sanitation.

(www.nairobi.wire.com [a] 04/07/2014.

The "Weka condom Mpangoni" (roughly translates to, include a condom in your extra marital affairs) message highlights the vulnerability of married couples to HIV & AIDS. A recent report by national Aids Control Council (NACC) revealed that married couples are so vulnerable, the risk is three times that of prostitutes. Unlike single persons who are more accustomed to condom usage, frustrated married partners are most likely to skip the inconvenience of sourcing rubbers out of habit and fear of social scorn. The reality is that what women want these days, they tend to get and they do not require a man's permission, (Kim Media News Group 2013).

5.1.3 Makutano junction

Makutano Junction is a television drama series, broadcast in Kenya, Uganda, and Tanzania, which is produced by the Mediae Trust, a Kenya-based British producer of educational and entertainment TV and radio programmes. The soap opera, based in a fictitious Kenyan village, is designed to reach rural and peri-urban

audiences and covers information on education, sustainable rural livelihoods, and health, abortion, HIV/AIDS but in an informative yet entertaining manner, (Agencyhttp://www.comminit.com/edutain-africa) [a] 05/07/2014). The program has been received well since it does not appear to be condemning or stigmatizing those who might be involved in risky behaviours but rather uses drama and entertainment to show the dangers of HIV/AIDS and the need to avoid behavior that may increase its spread.

5.1.4 No Time to "Chill" for Abstinence Campaign

"*Kuchill*" is a huge television campaign that has been urging young Kenyans to '*chill*' – in other words abstain from sex before marriage - in a bid to curb HIV transmission. '*Nime Chill*' - Swahili-English slang meaning 'I have chilled' or 'I am abstaining' - seeks to reduce peer pressure among urban youths aged between 10 and 15 to have sex early but wait until they get married. The campaign has used media personalities and politicians to promote abstinence, and even President Mwai Kibaki, (the immediate former President of Kenya), had been photographed giving the two-fingered 'V' *Nime Chill* salute.

The campaign aims to create an environment where abstinence is seen as a viable choice for youths. It destigmatises the topic and gets youths to discuss the subject," explained Lucy Mikweki, behaviour change communication programme manager for Population Services International (PSI), a nongovernmental organisation (NGO) involved in family planning and one of the campaign partners.

The programme, funded by the United States Agency for International Development,(USAID), began in September 2004 and the first phase is drawing to a close.

One Nime Chill advert features several youths leaning out of a minibus taxi, with the captions reading: "Sex? No way, *tume chill* [we're chilling]," and "We won't be taken for a ride. *Ni poa kuchill* [it's cool to chill, in other words, it's good to abstain]."

At a government-run high school in the capital, Nairobi, several students told PlusNews they had heard of the campaign through television, radio and billboard advertising, but did not fully understand what it meant.

From the variety of the campaigns and the abundance of messages aired through the television, there is no doubt that the messages were sent, transmitted and probably received by the public. The main objectives of the messages concentrated on awareness creation and abstinence, but did not emphasize behavioral change issues that affect the vulnerable groups. This study identified that without effective behavior change communication strategies, efforts aimed at averting the spread of HIV/AIDS will not be successful and new infections will continue to be reported. Therefore the study sought to identify those gaps and make recommendations that can help shape behavior change strategies in the fight against HIV/ AIDS.

VI. PRESENTATION AND DISCUSSION OF THE RESULTS

The study interviewed girls aged between 15 and 24 years, which was the target population. The population was categorized as follows: between ages 15-19 and 20-24. Between 15 -19 were 33.3% while 20-24 were majority at 66.7%. The Key presentation of the findings was followed by a more detailed discussion of the specific data collected within selected questions in line with research topic and objectives. The study used the Statistical Program for Social Sciences (SPSS) to organize the data collected from questionnaires. Majority at 71.7% were not married while 28.3% were married. Another 76.7% were not in any gainful employment while 23.3% were in gainful employment; bringing into the question, their source of livelihood because they lived in an urban area where they need to pay for utilities. On education, majority 91.7% had attained secondary and college education while a small percentage (8.3%) had attained primary education and below.

6.1 TV Programs watched and behavior change

All the 60 respondents (100%) interviewed said that they had access to Television and indicated that they watched one TV program or another. That means that they got their information on HIV/AIDS through watching various TV programs as illustrated by the research findings. This means that TV is an effective medium to communicate messages on HIV/AIDS.

The programs that were watched mostly by the respondents were drama and soaps. Soaps were the highest at 21.7 % while drama followed with 20%. Advertisements were watched by 10% of the respondents while 8.3% watched all programs. The rest watched a mixture of the programs. Drama and news stood at 5%; drama, news, soaps, advertisements at 3.3%; drama, news advertisements 1.7%; drama, soaps 1.7%; drama soaps, advertisements 1.7%; news, soaps 6.7%; news advertisements 6.7%; soaps and advertisements 3.3%.

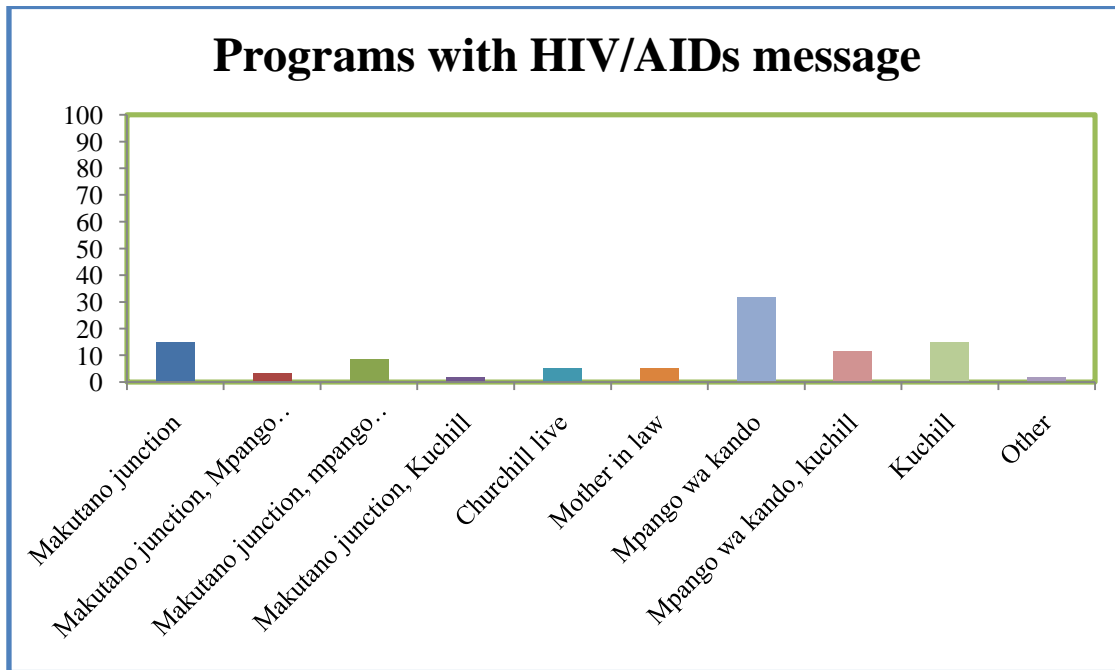


Figure 8: Programs with HIV/AIDS (%)

All the respondents agreed that of the programs they watched, a number had messages on HIV/AIDS but in varied proportions. This means that awareness on HIV and AIDS through TV messaging was almost 100%. However, the study show that TV viewership and behavior change were not in direct positive correlation; implying that TV viewership did not necessarily translate into behavior change. As pointed out by Wyss (2001), mass media messages are an important source of knowledge regarding HIV and AIDS but this knowledge alone does not translate to positive behavior change. Other issues underlying HIV and AIDS infection among vulnerable groups are not taken into account and new infections continue being reported (UNAIDS 2007). Among the programs watched and which had messages on HIV/AIDS are *Mpango wa Kando* which was the leading at 31.7%, followed by *Makutano Junction* and *Kuchill* at 15% each. *Churchill Life* and *Mother in Law* followed at 5% each. The rest of the respondents watched either all or some of the programs at one time or the other. *Makutano Junction* and *Mpango wa Kando* 3.3%; *Makutano Junction, Mpango was Kando* and *Kuchil* 8.4%; *Makutano Junction* and *Kuchil* 1.7%; *Mpango wa Kando* and *Kuchill* 11.7%. Others that were not specified stood at 1.7%.

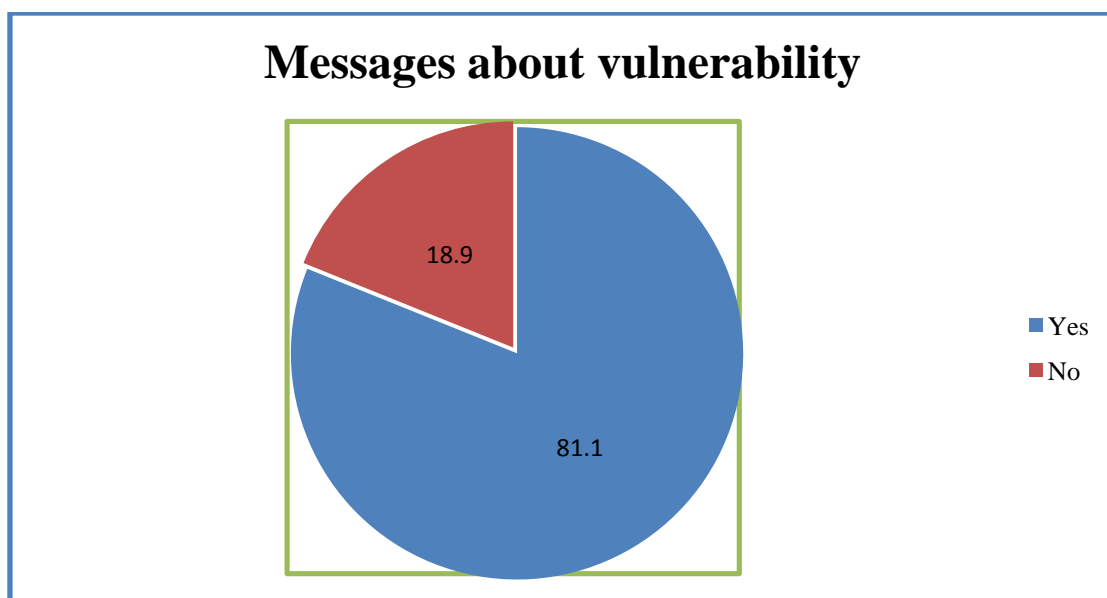


Figure 9: Message on vulnerability of girls to HIV/AIDS (%)

According to the findings of this study, majority of the respondents agreed that many of the programs watched had messages on vulnerability of girls to HIV/AIDS. Up to 81.9% had watched a program with a message on vulnerability of girls to the epidemic and only 18.9% said they didn't see anything on vulnerability of girls to HIV/AIDS in the programs they watched. This means that if they were to change behavior through watching TV messaging, then they would because awareness on HIV/AIDS had been created. However, this was not the case on the ground as girls still engaged in risky behavior and new HIV infections continue to be reported.

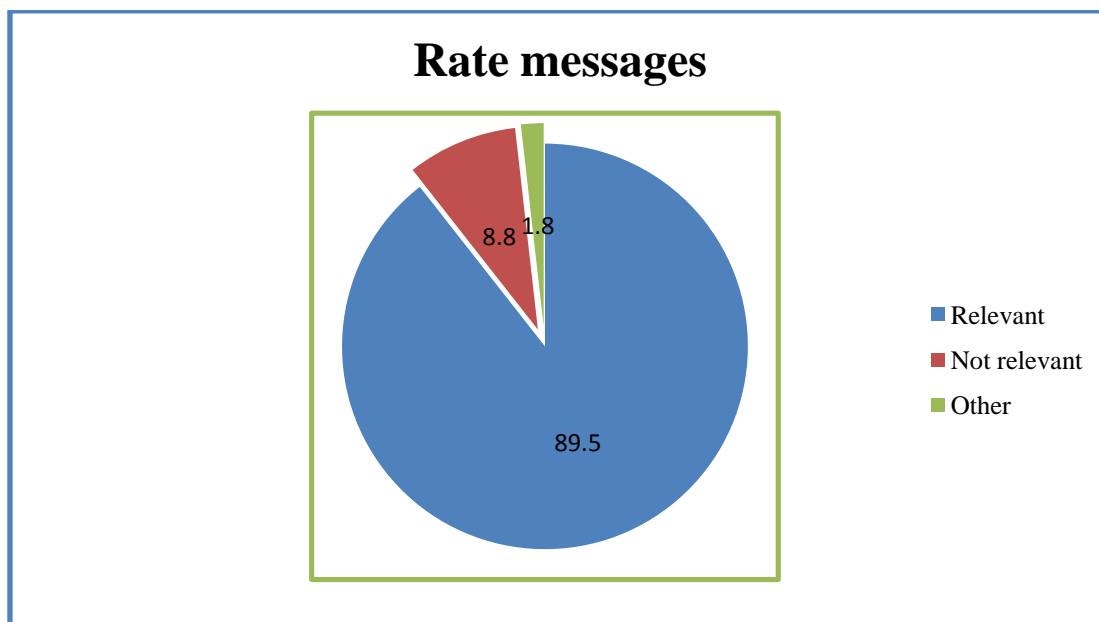


Figure 10: Relevance of messages (%)

Again majority of the respondents agreed that the messages on HIV/AIDS in the programs they watched were relevant at 89.5%. Only 8.8% felt that the messages were not relevant and only 1.8% could not tell whether they were relevant or not. The findings concur with what Hubley (2001) says that education and awareness creation need to go beyond just awareness creation and empower women with skills and confidence to negotiate for safer sex with clients. He further argues that the more successful programs are those that have used participatory approaches including the selection and training of the vulnerable groups which include sex workers. He adds that prevention efforts need to be directed at clients of the vulnerable women like the long distance truck drivers.

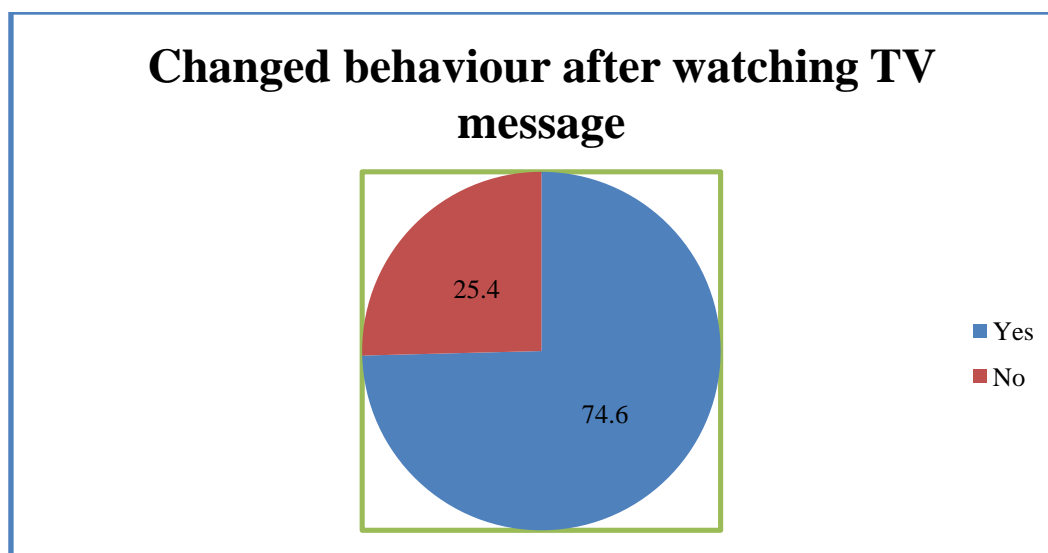


Figure 11: TV viewing and behavior change (%)

According to the findings in this study, 74.6% said that yes it was possible to change behavior as a result of watching programs on TV while 25.4% said it is not possible to change sexual behavior as a result of watching TV. This implies that even though a good percentage indicated that they can change behavior as a result of watching TV programs with messages on HIV/AIDS. However, other underlying issues such as economic dependence make the girls not to change behaviour. This means that HIV/AIDS prevention through messaging on TV is not the most effective way of changing behavior as some of the girls are still vulnerable to HIV/AIDS. Even those who have changed behavior because may not have done so 100%. Meaning that there is still more that needs to be done to achieve desired positive behavior change among young girls in Mlolongo and not merely by watching television Programs that contain messages on HIV/AIDS. There is still more to be done to help girls come out the plorable coditions under which they live, which make them vulnerable to HIV infection especially from the long distant truck drivers who inhabit the highway township because of the weigh bride as they wait for their trucks to be weighed. The following are some of the steps that can be taken to cushion the girls from vulnerability to HIV/AIDS up and above television messaging.

Table 1: Change of strategy

If no what else needed to change	Frequency	Percent
A lot of open forums	1	10
Avoid being idle	1	10
Be very principled	1	10
Families need to talk to children	1	10
More counseling to be empowered to say no to sex	4	40
Not having sex before marriage	1	10
Watch other programs eg soccer so that they use their leisure time wisely	1	10
Total	10	100

From the study findings, a number of those interviewed strongly believed that girls cannot change behavior mainly by watching TV programs. They gave several suggestions on what else should be done to help them change their sexual behavior. Many of the respondents (40%) said that there was need for more counseling to empower the girls to say no to unprotected sex. Others, (10%) said that there should be open forums where girls can speak openly about things that affect them including HIV/AIDS, another 10% said that girls should avoid being idle because that leads them into temptation. Another 10% said that girls should be principled, another 10% said that families or parents should talk to their children on issues of sex; yet another 10% said there should be no sex before marriage and another 10% said that girls should watch other programs like soccer so that they use their time wisely.

Table 2 : More information on television messages

If no what more can be added	Frequency	Valid Percent
Experiences of people who are infected or affected by HIV/AIDS	1	9.1
Guiding and counseling should be done to the youth to encourage them to work and be independent	3	27.3
Have more informative programs on HIV/AIDS	3	27.3
Show pictures of infected people to serve as a lesson	2	18.2
Use more emphatic language	2	18.2
Total	11	100

VII. CONCLUSION

The findings of the study indicated that indeed Mlolongo Township is a high risky place due to the presence of truck drivers and recently sand harvesters. This situation, coupled with poverty levels make the female population in the town very vulnerable to HIV/AIDS.

The town looks relatively calm during the day but ‘wakes up’ night especially after 7 pm. The reason for this state of affairs was that majority of the people are either out doing casual jobs while majority, especially women, were asleep waiting to start ‘work’ at night; i.e. wake up to service the long distant truck drivers who arrive from various destinations on transit but have to stop in the town for their trucks to be weighed in the weighbridge located in the town.

Given that Mlolongo is a high-risk area due to the truck drivers and sand harvesters, there are chances that the girls in the town can be easily compromised into risky sexual behavior in order to earn a living.

Based on the findings of this study the following conclusions are made: From the study findings, awareness of HIV/AIDS has been created at almost 100%. This is because majority of the respondents had watched at least one TV program or another with a message on HIV/AIDS. This means that awareness creation has been achieved. However behavior change has not been achieved.

Therefore, watching TV programs with messages on HIV/AIDS alone may not be adequate enough to change behavior as there are underlying factors like unemployment and poverty that make girls more vulnerable to HIV/AIDS. The prevention strategies therefore should be more inclusive and address the various other issues that affect young women in Mlolongo town vulnerable to HIV/AIDS infection.

There was general agreement among the respondents that whereas the TV messages have served their purpose in creating awareness in the war against HIV/AIDS but they are not adequate in themselves to change behavior. There is more to be added if positive behavior change is to be achieved.

Wilton (1997) says that programs targeting sex workers and other vulnerable groups such as young women should address the economic reasons why women take up sex work. This should also provide support in finding alternative ways of generating income, and not just create awareness on HIV/AIDS. Other targeted programs are also necessary. Intensive programs should also be formulated to reach men who travel way from home, especially truck drivers. In Kenya, a creative mix of educational activities at transport companies and roadside halts, and specialist clinics resulted in a decrease of STDs, HIV/AIDS and a reduction in sexual risk behavior. Such programs should be replicated and sustained over a long period of time to ensure success.

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