

Research Paper



Assessment of communication strategies used in rural health care delivery by select international NGO's in north central nigeria

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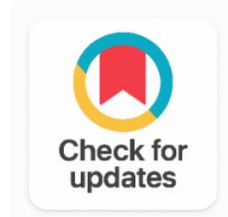
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ABSTRACT

This study to find out, if any, the various communication strategies used in rural health care delivery by international NGOs, the most effective strategy or strategies, and their effectiveness. The study adopted a qualitative approach with in-depth interviews conducted with key informants who are members of various communities and staff of select INGOs in North Central Nigeria. The study identified interpersonal, group and media as communication strategies adopted by INGOs in rural healthcare delivery programmes in North Central Nigeria. Findings from the research revealed that integrated or combined communication strategies are more effective in rural healthcare delivery by INGOs in the region. The study also found that communication performs varied tasks ranging from information provision to mobilisation for programmes. The study concluded that dialogue and lateral communication strategies deployed with the use of multiple channels are effective in rural health care delivery, as evident in the case of North Central Nigeria, just as challenges faced range from funding, and insecurity to language barriers among many others. Among others, the study recommended the use of technology to improve rural healthcare-delivery-related communication, and that there is a need to make efforts to get the cooperation of the affected community to enable them own programmes in order to ensure full participation.

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1. INTRODUCTION

Non-Governmental Organisations' (NGOs') global operations continue to be a part of what might be considered international efforts to guarantee that the world improves. In order to improve the quality of life for everyone, NGOs and those with a global scope (also known as INGOs, or International Non-Governmental Organisations) are acknowledged take on a number of efforts ranging from climate/environment to humanitarian interventions during disasters and advocacy for the world's poorest people. Characterised as international players with a worldwide reach [1], it is well-recognised that INGOs operate on a national level and offer assistance to people worldwide in a variety of fields, including advocacy, healthcare, and humanitarian work.

INGOs are renowned for having forged enduring relationships with people in the Global South, offering everything from basic amenities to high-quality healthcare. These organisations perform complementary, consultative, and advocacy roles in a variety of sectors, with health being one among them [2], [3], [4], [5], [6]. INGOs have a reputation for constantly helping communities with limited resources by offering answers to health problems, particularly where health services are not available [7]. They are viewed as partners in development because they fill the void frequently left by government's incapacity to satisfy the people's needs and ambitions.

Distinct aims of INGOs may require unique communication techniques. Their ability to leverage communication methods to effectively convey important information to the intended audience is an important role in society [8]. Similar to other parts of the world, it is known that INGOs operate in Nigeria and frequently organise events aimed at providing free medical care for the general public. While executing such events, well-planned and implemented health communication becomes necessary to provide high-quality health services. As a result, communication is crucial for healthcare delivery in a way [9], [10], [11], [12] and much more to INGOs on a number of levels. It allows them to express their goals, provide them the justification to stay relevant, keep in touch with funders, assess their progress, and generate income [13].

Health services are offered by INGOs that operate in Nigeria, and in different countries in the African continent. In Nigeria, a number of national and international organisations are recognised for having had an impact on the delivery of healthcare services. The AIDS Prevention Initiative in Nigeria, the Health Strategy and Delivery Foundation, the TY Danjuma Foundation, and the Mentally Aware Nigeria Initiative are a few national organisations that offer healthcare services. There are other foreign organisations that are present and active in the nation as well. MSI Nigeria Reproductive Choices (MSIN) (formerly Marie Stopes International Organisation Nigeria), Management Sciences for Health, and Family Health International are among the INGOs in this category. They have a reputation for using communication tactics to connect with their target groups. These organisations offer healthcare delivery services throughout Nigeria.

INGOs are present throughout Nigeria, but have a prominent presence in rural communities in different parts including the North Central region. The region is a focus due to its strategic location and unique conditions, which have made it difficult for residents to get health care (particularly in the area of communal conflicts and instability). According to [14], communal conflicts in Nigeria usually lead to displacements, which culminate in overcrowded internally displaced persons' (IDPs) camps, and this is often a serious health concern. INGOs continue to struggle with finding the best message distribution channels. Therefore, the goal of the study is to evaluate the communication strategies used by select INGOs to provide rural healthcare in Nigeria's Central Region. It primarily sought to identify the types, effectiveness and challenges of the strategies.

This field of study has a wealth of literature and investigations that have produced a large body of pertinent and related literature for examination. There have been studies conducted on the approaches used by INGOs to provide healthcare, particularly in sub-Saharan Africa. Those studies, in one way or another, built upon earlier studies on this topic, or a subfield within it. A personal approach, a group approach, and a mass approach are the communication tactics utilised in health communication, according to research by [15] on family planning campaign communication strategies. These tactics, if appropriately implemented in comparable programmes, might also be helpful in North Central Nigeria.

One of the approaches to communication strategies is dialogue [16]. As explained in the authors, dialogue as an approach to communication is "a continuum of participation that includes the provision of information, consultation (seeking public feedback), involvement (the participation of the public in defining an appropriate solution), and finally empowerment is considered more appropriate" (p. 2). The conceptualisation of dialogue these scholars differs from [15] in some ways. On the other hand, it may be compared to the individual strategy that depends on interpersonal communication. Such a strategy that requires face-to-face communication (if implemented in a well-planned way) could be successful in North Central Nigeria, where there are a lot of rural.

In a study earlier conducted by [17], findings demonstrated that INGOs that operate in the hinterlands of Nigeria were actively involved in healthcare delivery services and relied on various communication techniques and approaches to mobilise participation. Accordingly, the researchers revealed that some of the most prominent approaches adopted by the INGOs in North Central rural healthcare interventions include interpersonal communication, group communication, mass media approach with the communication flow pattern being top-down, dialogue and lateral. The insights from the study showed that strategic communication efforts were adopted by various INGOs operating in the area.

Earlier studies also demonstrated the governmental and non-governmental organisations in Nigeria with focus on health care delivery [18], [19], [20], [21], [22], [23], [24]. However, there is methodological and population gaps of previous studies on the use of communication strategies for healthcare delivery programmes in parts of Nigeria. Most of the studies did not consider in-depth interview to obtain opinions of subjects. Therefore, this study was conducted to bridge the gaps. Accordingly, the research objectives of this current study include finding out the communication strategies adopted by select INGOs in rural health care delivery in select communities in the region, and also determine the effectiveness of the strategies and identify challenges faced by the INGOs in the use of the communication strategies adopted for their campaign.

2. RELATED WORK

Studies have been conducted health care delivery in rural Nigeria. A study by [25] was on the use of dialogue in family physician involved and the researcher showed that help-seeking behaviours can be enhanced in members of rural communities through health dialogue. Furthermore, the researchers revealed that once trust is established rural populations can be motivated to seek medical care. A related conducted by [26] on the interpersonal communication and its effectiveness in the context of awareness creation in the COVID-19 era demonstrated that in Eastern Nigeria, interpersonal communication was an effective channel for awareness creation during the period under review. The researchers established that findings were based on the source and so provide some form of validation for the source credibility theory.

Communication strategies explored for childhood vaccination in rural setting as the focus of another study conducted by [27] and findings showed that three channels were explored and these include health facilities, media outlets and announcements in strategies places such as community squares, religious and worship centres, and market places. [28] Also conducted a similar study where the researcher identified "ethnic media" as the most effective channel of communication in relations to community healthcare delivery particularly in rural areas. The researcher also identified traditional mediums of radio and television as useful platforms for rural health information-dissemination.

The study conducted by [29] was primarily about the use of media to communicate health risks in South Eastern Nigeria particularly in the case of viral hepatitis. The researchers demonstrated that mass media remain useful in awareness creation around the virus because majority of the people consume media products that emanate from Internet news, cable networks, television and radio. Nevertheless, the study showed that the population under study despite their exposure to these mediums and contents that emanate therefrom were not aware of the virus. This raises the question of how strategic media programmes and information could be in respect of the necessity of health communication.

In a study conducted by [30], the focus was on the communication strategies adopted by NGOs championing reproductive health advocacy. The researchers revealed that though accurate information-sharing, there was a challenge that relates to failure to consult community members before programmes and projects are launched inhibiting their success in most cases. [31] Assessed the various health communication strategies adopted for healthcare delivery in different parts of Africa. The researcher demonstrated were that each country adopted and applied its unique strategy but that they were truncated, misapplied or even unclear in some instances and factors responsible for these include bureaucratic red tapes and implementation challenges. The gaps from the study is that population, therefore, this study was conducted to bridge the gap by focusing on North Central region of Nigeria.



Figure 1. Primary Health Centre Somewhere in Nigeria

Source: LinkedIn

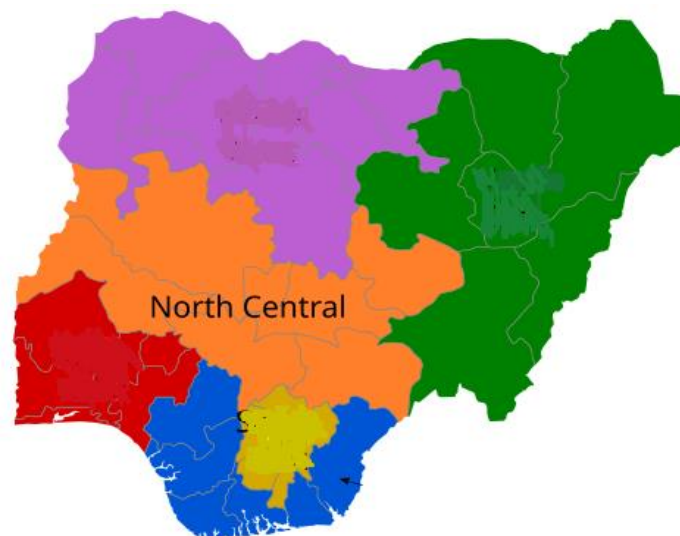


Figure 2. Shows the North Central Region of Nigeria

Source: Nigerian Archives

3. METHODOLOGY

Qualitative research methods which include the in-depth interview and focus group discussion (FGD) were utilised in the study. In-depth interview is to acquire comprehensive data that goes beyond a cursory response [32]. FGD, on the other hand, provided a similar thrust into details about a matter of enquiry. The study area is known as the North Central of Nigeria and communities in the zone such as Aidogodo (Benue), Luvu-Madaki (Nasarawa), and Foron (Plateau) emerged from the stratification sampling technique adopted to select sample for the study. The personnel of the INGOs under investigation make up the study's population. Two persons each from Family Health International (FHI-360), MSI Nigeria Reproductive Choices, and Management Sciences for Health (MSH) were purposively selected based on their years of experience for this study. The semi-structured interview schedule guide was relied upon the data collection of this study. This was done in line with the position of [33] that interview schedule serves as a tool for acquiring research data, with questions prepared and organised to help investigators, interviewers, and researchers gather data. Prior to the interview sessions, and in line with research ethics, participants were assured of their anonymity and ethical statement read to them. Contained in the statement is note on their voluntary participation in the study and that they have freedom/rights to withdraw at any point in the process if uncomfortable with the data being sought. Post-interview sessions, researcher matched data from the sessions with the research objectives from whence themes emerged upon which this discussion takes base.

Table 1. Demographic Information of Informants

Code	Gender	Age	Position	Cadre
R01-INGO	Male	35	SBCCO	Senior
R02-INGO	Female	32	CMO	"
R03-INGO	Female	36	CMO	"
R04-INGO	Male	44	SIO	"
R05-INGO	Male	40	RCMA	"
R06-INGO	Female	49	DoC	"

Source: Author's Elaboration, 2021

Table 1 shows the demographic data of key informants who happened to be stakeholders in the rural health care delivery programmes and projects in the different states located in North Central region of Nigeria.

Table 2. Background Information of Informants

Code	Years of Stay in INGO	Role in the Unit
R01-INGO	8	Social And Behaviour Change Commu-Cation Officer Assist In Behaviour Change Programmes Campaign Drafting And Implementation At MSI Choices Nigeria
R02-INGO	6	Community Mobilisation For Programme From The Conceptualisation To Implementation Phases At MSI Choices Nigeria
R03-INGO	5	Community Mobilisation Efforts At MSH
R04-INGO	14	Strategic Information Officers Provides With Necessary Strategy Ideas And Decision In MSH
R05-INGO	15	Serves As Regional Community Mobilisation Advisor To FHI
R06-INGO	16	Heads The Communication Unit Or Department Of FHI-360

Source: Author's Elaboration, 2021

Table 2 above contains data that show background information of the informants that participated in the in-depth sessions. Data obtained from the sessions with the key informants is presented and discussed below.



Figure 3. Health Awareness Campaigns in North Central

Source: Nick-Tansi Saint Udeh

4. RESULTS AND DISCUSSION

The rationale for this study was to assess communication strategies used by INGOs in rural health care delivery. Figure 1 depicts the deplorable conditions of PHCs in Nigeria and the need for intervention from stakeholders other than the government. Based on the qualitative data from the interview sessions, the study's results provided information about the intervention and use of communication tactics for providing healthcare in rural areas of North Central Nigeria. In the states of Benue, Nasarawa, and Plateau in North Central Nigeria, communication tactics are used for programmes aimed at providing healthcare to rural populations. As shown in Figure 2, these states are in the central part of Nigeria. In the areas under study, INGOs that are selective or concerned tend to develop and deploy various forms of communication tactics, including interpersonal, group, and mass media communication as tools adopted for deployment of the strategies. However, advocacy, public relations and social marketing are some of the adopted health communication strategies. Whereas one of the INGOs utilised social marketing only as its communication strategy, others have a combination of strategies like advocacy, public relations and social marketing.

Findings of this study showed that INGOs that provide rural healthcare can also use integrated or combined communication tactics. This is strongly tied to the idea that interpersonal, group, mass media, and community communication tactics are all important components of health campaigns. An integrated communication strategy is one that makes use of both new and interpersonal media types and classic or mainstream media. Based on the results of the interviews, it is clear that the INGOs under investigation preferred combined or integrated methods, which employ a variety of approaches for health communication in rural North Central Nigeria. As shown in Figure 3, for instance, the result is an indication of group communication efforts championed by one of the INGOs in rural community in Nigeria.

INGOs that create and implement communication strategies are successful because they close the information gap among the members of the communities that are directly impacted. Additionally, they assist in providing community members with the health information they need on matters like reproductive health, which may help lower the rate of mother and infant mortality in the impacted population. Most crucially, this study demonstrated that tactics, when implemented in accordance with early warning systems by INGOs, also aid in the prevention of epidemics and even pandemics. This study's key finding, which is in line with another study by [34], is the one mentioned above. Consistent with the findings of a study by [35], this study also established that communication strategy bridges communication gaps between patients and health personnel. The result implies that the INGOs applied

strategic communication as they adopted the best message and channels, targeting the right people with timely information and also leaving the feedback loop open which, in fact, the hallmark of information considered as strategic.

According to the study, communication techniques are useful and can increase population awareness and knowledge, which will increase involvement. This is also in line with findings of a previous study conducted by [36]. According to the study, women's reproductive health was improved based on the information they were exposed to in a few communities in North Central Nigeria, which is likely achievable when the appropriate communication strategy is used for rural health campaigns or communication. These findings are consistent with earlier studies such as the ones conducted by [37], [38], [39]. Reiterating, caregivers develop trust with community members and are able to self-disclose without hiding any personal information. This is part of the findings in respect of the effectiveness of communication in rural healthcare delivery in North-Central Nigeria – and it aligns with the postulations of social penetration theory.

INGOs encountered difficulties while implementing communication tactics within their intended audience. The study's conclusions demonstrate the difficulties experienced by INGOs working in North Central Nigeria, including low community opinion of the organisations' work, linguistic obstacles, insecurity, financial constraints, and low levels of education. One important finding from this study is that long-held or established perceptions might have a negative impact on health interventions and, consequently, health communication. This study also showed that hiring security, providing incentives to community members to participate in programmes, and using interpreters are the ways in which non-governmental organisations can address the issues that have been highlighted. Additionally, in keeping with the principles of communication for persuasion, focused health communications aimed at changing behaviour can be packaged using the appropriate frames.

5. CONCLUSION

The researchers come to the conclusion that communication is necessary since a health campaign cannot be carried out properly without it. This is due to the fact that effective communication is necessary to deliver the correct information and win public support for a programme. Based on the results, this study draws the conclusion that, as demonstrated by their application in communities in North Central Nigeria, communication methods are both necessary and beneficial in rural healthcare delivery programmes. The foundation for this is the availability of helpful health information to community members, which can aid in a number of ways, such as the prevention and combat of epidemics and pandemics, sufficient understanding of reproductive health, and more. INGOs mostly use dialogue and lateral methods as communication strategies for their rural healthcare delivery programmes in the North Central Nigerian states of Benue, Nasarawa, and Plateau. The study concludes that MSI Nigeria Reproductive Choices, Management Sciences for Health, and Family Health International employ various strategies, including a combined approach, to deliver healthcare to patients in North Central Nigeria and, consequently, other regions of the nation.

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Authors reported no funding for the specific purpose of conducting this research.

Author Contribution Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Kelvin Inobemhe	✓	✓	✓		✓	✓		✓	✓	✓			✓	
Nick-Tansi Saint Udeh PhD	✓			✓		✓	✓	✓	✓		✓		✓	
Oluwatobi Enitan Modeyin		✓				✓			✓					

Tsegyu Santas PhD				✓		✓		✓		✓	✓	✓	✓	
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C : Conceptualization

M : Methodology

So : Software

Va : Validation

Fo : Formal analysis

I : Investigation

R : Resources

D : Data Curation

O : Writing - Original Draft

E : Writing - Review & Editing

Vi : Visualization

Su : Supervision

P : Project administration

Fu : Funding acquisition

Conflict of Interest Statement

Authors state no conflict of interest.

Informed Consent

We obtained informed consent in writing from individuals that participated in this study.

Ethical Approval

The research related to human use has been complied with all the relevant national regulations and institutional policies in accordance with the tenets of the Helsinki Declaration and has been approved by the authors' institutional review board or equivalent committee. The PG Board of Nasarawa State University approved this during the first presentation made.

Data Availability

The data that support the findings of this study are available on request from the corresponding author, [K. I]. The data, which contain information that could compromise the privacy of research participants, are not publicly available due to certain restrictions.

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