

COMPLIANCE WITH A RADIO ANTI-STIGMA CAMPAIGN ON HIV/AIDS IN NIGERIA

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Abstract

HIV-related stigma remains a major barrier to the social inclusion and well-being of Persons Living with HIV and AIDS (PLWHA). This study investigated the awareness, compliance, and attitudinal influence of Choice 97.1 FM Nnewi's radio campaign against the stigmatization of PLWHA among selected residents of Awka South, Nigeria. The study adopted a descriptive survey design, with data collected from 383 respondents using a purposive sampling technique. Findings revealed that all respondents were aware of the campaign, with 25% reporting very high awareness and 75% reporting high awareness. Despite this, only 4% complied with the campaign messages, and 96% indicated no change in their attitudes toward PLWHA. The findings were analyzed within the framework of Agenda-Setting Theory, which explains the campaign's effectiveness in creating awareness but its limitations in influencing compliance and attitude. Based on the results, the study recommends that the radio campaign be supplemented with behavioral change strategies, community-based interventions, and supportive policies to enhance compliance and positively shape attitudes toward PLWHA.

Keywords: HIV stigma, radio campaign, awareness, compliance, attitudes

Introduction

Globally, about 40 million people were estimated to be living with Human Immunodeficiency Virus (HIV) in 2021. Since the beginning of the epidemic, more than 84.2 million people have been infected, and approximately 40.1 million have died of HIV-related causes (UNAIDS, 2020). Nigeria ranks third among countries with the highest HIV infections and records about 45,000 AIDS-related deaths annually (UNAIDS, 2020). Despite significant advancements that have made HIV a manageable health condition, individuals living with HIV continue to experience stigmatization and discrimination from families, communities, and even health care providers (Sahoo, Khanna, Verma, Verma, Mahapatra, Parija & Panda, 2020).

Goffman defined stigma as "the phenomenon whereby an individual with an attribute is subjected to rejection as a result of that attribute" (Arrey, Bilsen, Lacor & Deschepper, 2017; Goffman, 1963). HIV-related stigma devalues people who live with or are associated with the disease (Aggleton, Wood, Malcolm & Parker, 2005). According to these scholars, the consequences of stigma include prejudice, shame, isolation, rejection, and discrimination directed at people perceived to have the illness. Research has shown that stigmatization stems largely from ignorance and misinformation about HIV, as well as from negative attitudes and entrenched societal beliefs about the disease (Oke, Akinboro, Olanrewaju, Oke & Omololu,

2019). Discrimination serves as a visible manifestation of stigma and includes behaviours enacted by HIV-negative individuals toward those who are HIV-positive (Earnshaw, Smith, Chaudoir, Amico & Copenhaver, 2013; Dako-Gyeke & Asampong, 2015). Given that HIV is transmitted predominantly through sexual intercourse, many societies, including Nigeria, continue to associate the infection with immoral sexual behaviour (Diress, Ahmed & Linger, 2020).

Stangl, Earnshaw, Logie, van Brakel, Simbayi, Barre and Dovidio (2019) developed a comprehensive theoretical framework aimed at interrupting or reducing the negative effects of health-related stigma. Their framework breaks down the stigmatization process into three major domains: drivers and facilitators, stigma markings, and stigma manifestations. These dynamics extend beyond the affected individuals and influence organizations, institutions, and the broader society. The first domain captures the factors that drive or facilitate stigma, including fear of infection from casual contact and social judgment or blame (Stangl et al., 2019; Hargreaves, Stangl, Bond, Hoddinott, Krishnaratne, Mathema & Moyo, 2015). Stigma markings arise when certain individuals or groups are labelled or judged based on their health condition or perceived differences, including demographic or socioeconomic characteristics (Hargreaves et al., 2015). Once these markings occur, they lead to stigma manifestations such as discrimination in housing, forced eviction after disclosure of health status, verbal harassment, and gossip.

In response to persistent HIV-related stigma, Choice 97.1 FM Nnewi launched a radio campaign aimed at sensitizing residents of Anambra State on what constitutes stigma and why it must be rejected. Owoyemi and Akinmoluwa (2023) note that mass media campaigns can influence health consciousness and behaviour both directly and indirectly, depending on the nature of the campaign and how its messages are framed and delivered. Guided by this

understanding, the present study investigated the awareness of and compliance with Choice 97.1 FM Nnewi's anti-stigma campaign among selected residents of Awka South.

The studies reviewed earlier focused on experiences of stigma, discrimination, and barriers to health services among persons living with HIV (PLHIV). They also examined the relationship between comprehensive knowledge of HIV and stigmatizing attitudes, as well as community perceptions surrounding HIV disclosure. Although these studies uniformly opposed stigmatization and advocated for stronger policies and sensitization often emphasizing the role of religious leaders, none examined the role of media campaigns in combating HIV-related stigma. This gap created a clear justification for the present study.

To fulfil the general aim of investigating exposure to and compliance with Choice 97.1 FM Nnewi's anti-stigmatization campaign among residents of Awka South, the study sought to:

1. Determine the level of awareness of the campaign among selected residents of Awka South.
2. Ascertain their level of compliance with the campaign.
3. Examine the extent to which the campaign influences their attitudes towards Persons Living with HIV and AIDS (PLWHA).

Empirical Review

In their examination of stigma, discrimination, and access to health care services among Persons Living with HIV (PLHIV) in Akwa Ibom State, Nigeria, Adekoya, Oluwaseyi, Kumolu, Ejeh, Olutola, and Magaji (2024) adopted a cross-sectional survey design and administered structured questionnaires to 385 respondents across 12 Local Government Areas. Using a multi-stage sampling procedure and univariate and bivariate analyses, the study found that 215 (50.4%) PLHIV had been denied health services, including dental care, because of their HIV status. The authors recommended policy enforcement to combat HIV-related

stigmatization in Akwa Ibom State. This differs from the current study, which adopted a purposive sampling technique.

In another study, Nzelu, Nzelu, Ugwunze, and Azodoh (2024) explored the association between reproductive-age women's comprehensive knowledge of HIV transmission and their stigmatizing and discriminatory attitudes. Using the 2018 Nigerian Demographic and Health Survey and a two-stage stratified cluster design, the researchers analyzed data with SPSS version 28. Results showed that 22,821 (77.0%) women exhibited stigmatizing or discriminatory attitudes toward PLHIV. The authors recommended that Christian faith leaders play a more active role in sensitizing communities against HIV stigma. While this study focused exclusively on women, the current study examines both men and women.

Similarly, Mokgatle and Madiba (2023) investigated community perceptions of stigma and discriminatory attitudes toward HIV disclosure in two South African provinces. Conducting a cross-sectional survey of 670 adult clinic clients sampled using Cochran's formula, the researchers used translated questionnaires and analyzed data using STATA version 17. Findings revealed that stigma toward PLHIV remains widespread across communities. The authors recommended intensified stigma-reduction efforts to meet South Africa's "ending AIDS" targets. This study was carried out in South Africa, whereas the present study is situated in Nigeria.

Further, in a mixed-method study conducted in Ethiopia, Diress, Ahmed, and Linger (2020) examined HIV-related stigma among adults attending antiretroviral therapy (ART) clinics. Using a systematic random sampling technique among 422 respondents, they identified significant levels of enacted stigma (such as avoidance and verbal insults) and internalized stigma (including self-blame and shame). The authors concluded that stigma negatively affects treatment adherence and disclosure, recommending broader community sensitization. This aligns with the current study's focus on the role of communication interventions.

In Ghana, Dako-Gyeke and Asampong (2015) conducted qualitative research involving in-depth interviews with PLHIV to understand community responses to HIV disclosure. Their findings revealed persistent discriminatory attitudes-including social distancing and exclusion-often stemming from misconceptions about HIV transmission. The study recommended strengthening public education mechanisms to correct misinformation. Unlike the current study, it used qualitative inquiry rather than a quantitative survey.

A study by Sahoo et al. (2020) in India assessed stigma and discrimination among HIV-infected adults attending tertiary hospitals. Using structured questionnaires and a descriptive cross-sectional design, the study found high levels of HIV-related stigma from family members, employers, and healthcare providers. The authors recommended targeted health communication campaigns to reduce stigma. This supports the focus of the present study, which examines a radio campaign aimed at addressing similar issues.

In a national-level investigation, Mahajan, Sayles, Patel, and Remien (2021) assessed HIV stigma and its determinants across four regions in the United States. Using a sample of over 2,000 participants through random-digit dialing, the study found that perceived stigma significantly predicted individuals' willingness to seek testing and treatment services. It recommended mass media interventions and community-based sensitization as central strategies for stigma reduction. The present study aligns with this recommendation by assessing media-based intervention effectiveness.

Another relevant study by Hargreaves, Stangl, Bond, Hoddinott, Krishnaratne, and colleagues (2015) evaluated the drivers and manifestations of HIV stigma across five sub-Saharan African countries. Drawing on multilevel data from household surveys and health facility assessments, the researchers found that stigma is strongly associated with fear of infection, moral judgment, and gender norms. They emphasized the need for context-specific

interventions, including mass communication programs-similar to the Choice 97.1 FM campaign examined in the current study.

Finally, in Nigeria, Okorie and Abiodun (2022) examined the impact of radio campaigns on HIV/AIDS awareness in Lagos State using a survey of 412 respondents selected through stratified sampling. Their results revealed that radio remains one of the most effective platforms for disseminating HIV-related health messages due to its wide reach and accessibility. Respondents exposed to specific anti-stigma messages demonstrated significantly lower discriminatory attitudes. This study provides a direct empirical basis for the present research, which also focuses on radio campaigns as tools for reducing stigmatization.

Theoretical Framework

Agenda-Setting Theory

This theory was formulated by McCombs and Shaw (1972). The basic assumption of agenda-setting theory is that the mass media may not be particularly successful in telling their audience what to think, but have stunning success in telling them what to think about (Scammell, 2015). Indisputably, a macro and direct consequence of the gate-keeping function of the media is the agenda-setting function of the media (Omotayo & Abidemi, 2023). The agenda-setting hypothesis is an indispensable component of media functional studies, which explains how the media, through their contents, determine issues that attract public attention and the importance attached to such issues by the public (Scammell, 2018). The theory suggests that the media play a crucial role in shaping public conversation by emphasizing specific topics, which in turn affects what issues the public considers important (Fadeji, Aluko & Hamzat, 2025).

Rogers and Dearing (1988) identify three types of agenda setting to include as follows: public agenda setting, in which the public's agenda is the dependent variable (the traditional

hypothesis); media agenda setting, in which the media's agenda is treated as the dependent variable (“agenda building”); and policy agenda setting, in which elite policy makers' agenda are treated as the dependent variable (“political agenda setting”).

Since the agenda-setting theory states that the media may not be particularly successful in telling their audience what to think, but has stunning success in telling them what to think about, it means that the Choice 97.1 FM Nnewi may not be successful in telling select Awka South residents what to think of the stigmatization of Persons Living with HIV and AIDS (PLWHA) but was successful in telling them what to think about it as indicated in the findings of this study. However, their awareness of what the radio station told them about what to think about the stigmatization of Persons Living with HIV and AIDS (PLWHA) did not result in full compliance with what the radio station told them.

This gap highlights the limitations of agenda-setting theory, between awareness and compliance. It is noted that Agenda setting explains issues of HIV Stigma in Awka South, but fails to explain why the listener's behavior refuses to change. It is clear that awareness was there, but the compliance was missing. In conclusion, agenda-setting theory is suitable for explaining the level of awareness that is examined, but it is not responsible for the action of the listener and nor is it able to enforce behavioral change. Therefore, Agenda-setting theory is only suitable for creating awareness but fails to enforce behavioral change. Note, it requires the support of behavioral models to explain attitudes, social pressure, and perceived control.

Materials and Methods

The research design that will be adopted for the conduct of this study is a descriptive survey design. This is in consideration of the fact that it can help the researchers elicit the opinions of select Awka South residents regarding their exposure and compliance with the campaign that will be studied. The residents' 2025 projected population (304, 964) was

calculated using Thomas R. Malthus's (1798) geometric method of population projection formula: $P_p = P_1 (1 + r)^n$ (where P_p = Projected population; P_1 = Given population [as at the time of the last census]; r = Annual rate of increase of population (3.2% [0.032]); n = Period between the given population and the year of study (2025 – 2006 = 19) while the number of residents (samples) that were studied (383) was determined using Meyer (1973) sample size determination formula. The purposive sampling technique was employed to select the samples for study. Only those who listened to Choice 97.1 FM Nnewi were specifically selected for the study. A valid and reliable closed-ended questionnaire was used to collect the residents' responses. In line with ethical requirements, the consent of the residents who participated in the study was sought in writing, while their anonymity was ensured. Thereafter, their responses were analyzed using descriptive statistics, including frequency tables and simple percentages.

Analysis

Objective 1: Awareness of Choice 97.1 FM Nnewi's Radio Campaign

Table 1: Awareness and Level of Awareness of the Campaign Among Respondents

Items	Frequency	Percentage (%)
Awareness of the Campaign		
Yes	383	100
No	0	0
Level of Awareness		
Very High	94	25
High	289	75
Low	0	0
Very Low	0	0
Total	383	100

Source: Data Analysis Results, 2025

The results show that 100% of the respondents are aware of Choice 97.1 FM Nnewi's radio campaign against stigmatization of PLWHA. Furthermore, 25% reported a very high level of awareness, while 75% indicated a high level of awareness. This demonstrates that awareness of the campaign among residents of Awka South is universally high.

Objective 2: Compliance with Choice 97.1 FM Nnewi's Radio Campaign

Table 2: Compliance and Level of Compliance with the Campaign

Items	Frequency	Percentage (%)
Compliance with the Campaign		
Yes	15	4
No	368	96
Level of Compliance		
Large Extent	3	1
Moderate Extent	12	3
Low Extent	0	0
I Do Not Comply	368	96
Total	383	100

Source: Data Analysis Results, 2025

Although awareness was high, only 4% of respondents reported complying with the campaign. Further analysis shows that just 1% comply to a large extent and 3% to a moderate extent, while 96% do not comply at all. This indicates a major gap between awareness and behavioural compliance.

Objective 3: Influence of the Campaign on Respondents' Attitude Toward PLWHA

Table 3: Influence of the Campaign and Extent of Attitude Change

Items	Frequency	Percentage (%)
Does the Campaign Shape Attitude?		
Yes	15	4
No	368	96
Extent to Which the Campaign Shapes Attitude		
Large Extent	4	1
Moderate Extent	11	3
Low Extent	0	0
Does Not Shape My Attitude	368	96
Total	383	100

Source: Data Analysis Results, 2025

Only 4% of the respondents stated that the campaign influences their attitude toward PLWHA. Among these, 1% reported a large extent of influence and 3% a moderate extent. A significant 96% reported no attitudinal influence at all. This indicates that although the campaign is widely known, it has minimal impact on changing attitudes.

Discussion of Findings

Objective 1: Awareness of Choice 97.1 FM Nnewi's Radio Campaign

The findings revealed that all respondents (100%) were aware of Choice 97.1 FM Nnewi's radio campaign against the stigmatization of Persons Living with HIV and AIDS (PLWHA). Additionally, 25% of respondents reported very high awareness, while 75% reported high awareness. This suggests that the campaign successfully reached its target audience, creating widespread awareness about HIV-related stigma in Awka South.

From a theoretical standpoint, these findings align closely with Agenda-Setting Theory. According to McCombs and Shaw (1972), the mass media are highly effective in telling audiences what to think about, even if they cannot directly dictate what people think. The success of Choice 97.1 FM in generating high levels of awareness demonstrates the agenda-setting function: the radio campaign effectively placed the issue of HIV stigma on the public's mental agenda. As Fadeji, Aluko, and Hamzat (2025) argue, by emphasizing specific social issues, media influence the salience of these topics in public discourse. Similarly, the empirical studies reviewed support the effectiveness of media interventions in raising awareness. For example, Okorie and Abiodun (2022) found that radio campaigns in Nigeria significantly increased awareness about HIV/AIDS among local populations, consistent with the findings of the current study.

However, while awareness was high, Agenda-Setting Theory does not inherently predict changes in attitudes or behavior. It explains salience but not compliance, a limitation evident in the current study where awareness did not automatically translate to action.

Objective 2: Compliance with Choice 97.1 FM Nnewi's Radio Campaign

Despite the high awareness, compliance with the campaign was notably low. Only 4% of respondents reported adhering to the campaign messages, with 1% complying to a large extent and 3% to a moderate extent, while 96% did not comply at all. This gap highlights a

critical limitation of the campaign: while it successfully raised awareness, it did not effectively motivate behavioral change.

From the theoretical perspective, this aligns with the known limitations of Agenda-Setting Theory. While the theory explains the successful placement of HIV stigma as a topic of public attention, it does not account for the behavioral mechanisms necessary to induce compliance, such as social norms, personal motivation, perceived control, or attitude change. As noted in the theoretical framework, agenda-setting creates awareness but does not enforce action. Empirical studies also support this pattern. For instance, Sahoo et al. (2020) found that despite being informed about HIV and stigma, many participants did not alter their behaviors or reduce discriminatory practices, reflecting the gap between knowledge and action. Similarly, Dako-Gyeke and Asampong (2015) observed that awareness alone did not necessarily reduce discriminatory attitudes among Ghanaian communities.

These findings suggest that while Choice 97.1 FM successfully applied agenda-setting to bring HIV stigma to public attention, additional interventions-possibly drawn from behavioral change models-are necessary to translate awareness into compliance.

Objective 3: Influence of the Campaign on Attitudes Toward PLWHA

The study further revealed that only 4% of respondents reported that the campaign influenced their attitudes toward PLWHA. Of these, 1% indicated a large influence and 3% a moderate influence, while a majority of 96% stated that their attitudes remained unaffected. This indicates that the radio campaign had minimal impact on attitudinal change among the respondents.

Integrating this finding with Agenda-Setting Theory, it becomes evident that the theory is limited in explaining behavioral and attitudinal outcomes. As the framework suggests, media can successfully highlight issues (in this case, the stigma surrounding HIV), but the conversion of awareness into attitudinal or behavioral change often requires additional mechanisms, such

as persuasion, social influence, or reinforcement. Empirical evidence supports this interpretation: Mahajan et al. (2021) and Hargreaves et al. (2015) both highlight that while mass media campaigns can shape perceptions and awareness, structural and psychosocial factors often mediate whether awareness leads to changes in attitudes or behaviours.

This finding underscores the need for complementary interventions, such as community-based sensitization, counseling, or programs grounded in behavioral theories like the Theory of Planned Behavior or Social Cognitive Theory, which can address factors like subjective norms, perceived control, and social pressures.

Conclusion and Recommendations

The study examined the awareness, compliance, and attitudinal influence of Choice 97.1 FM Nnewi's radio campaign against HIV-related stigma among residents of Awka South. Findings revealed high awareness (100% of respondents), but very low compliance (4%) and minimal impact on attitudes (4%). Using Agenda-Setting Theory, the campaign successfully highlighted HIV stigma as an important issue but was largely ineffective in changing behavior or attitudes, consistent with previous studies (Sahoo et al., 2020; Dako-Gyeke & Asampong, 2015). The study recommends that:

1. Awareness: Choice 97.1 FM should continue and expand the campaign to maintain public attention on HIV stigma.
2. Compliance: The campaign should include behavioral change strategies, such as interactive programs, dramatizations, and practical guidance for supporting PLWHA.
3. Attitudinal Change: Integrate psychosocial and community-based interventions, collaborating with local leaders and health educators to address social norms and misconceptions.

4. Policy Support: Government and health authorities should enforce anti-stigma policies to reinforce media campaigns and create an enabling environment for behavioral and attitudinal change.

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