

## **BREAST CANCER MEDIA CAMPAIGNS AMONG WOMEN: AN EXPLICATORY REVIEW**

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**ABSTRACT:** *This piece looks at various conceptual and empirical reviews done within the last two decades on breast cancer and media campaigns. A thorough review of the materials generated for the study showed that there are many empirical studies on breast cancer and communication interventions/campaigns aimed at raising the awareness and knowledge levels of women on breast cancer prevention and early treatment. However, the reviews showed that most media campaigns on breast cancer do not accommodate the men folk in the entire process. This is against prevalent advice that men should be encouraged during communication interventions to remind their wives, sister, mothers and female colleagues to engage in breast self examination and early treatment. It is recommended that the men folk should be considered in planning the campaigns since they could also suffer from breast cancer.*

**KEYWORD:** breast cancer, media campaigns, explicatory review, women

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### **INTRODUCTION**

Human race is at the brink of total destruction because of increasing susceptibility to various kinds of cancer. Statistics emanating from different health organisations and agencies around the world revealed that there are over 23 million new cases of cancer globally (The Cancer Statistics Worldwide 2012). Of these estimated cases, there are 14.1 million new cases of cancer worldwide, 6.7 million of these in women. This number is expected to increase to 40 million by 2045. According to World Health Organization (2008), cancer accounts for 13% of all deaths registered globally and 70% of that figure occurs in middle and low income countries of which Nigeria is among. The International Agency for Research on Cancer (IARC), stresses that there will be 21 million new cases of cancer every year and 13 million cancer deaths by the year 2030 (IARC Report, 2013).

The Medical Director, Optimal Cancer Care Foundation, Dr Femi Olaleye, during breast cancer awareness month, said that breast cancer killed one in every 25 Nigerian women. The World Health Organization (WHO, 2008) has declared breast cancer as the number one cancer scourge afflicting human beings. It is estimated that in every 100,000 Nigeria women, 116 of them have breast cancer (Akpoy, Akhator & Akpo, 2010). According to the former Health Minister of Nigeria, Professor Onyebuchi Chukwu, the data collected from 11 Federal Tertiary Hospitals by the National System of Cancer Registries showed 7,000

new documented cases of cancer which also correspond to the estimated average of 100,000 new cases of cancer reported in Nigeria annually. From the data, 60% of cancers occur in women and 39.8% in men. Breast cancer accounts for 40% of women cancers (National System of Cancer Registries, 2014).

### **Overview of Media Campaigns**

According to the following organizations, Joanneum, Nielsen, University of Sheffield, Hs – Art, University of Twente, Softcopies Mat and TNO, (2006), a media campaign can be defined as a series of measures taken to affect attitudes and opinions. According to them, the scope of a media campaign should comprise discovering, interrelating and navigating different media campaign knowledge, widely automating the detection and tracking of various media campaigns in the press, television and internet. Media campaigns are widely used to expose high proportions of large population to messages through routine use of existing media such as television, radio and newspapers (Wakefield, Loken and Hornik, 2010). According to them, campaigns have been employed, over past decades, to affect different health behaviours in large populations.

Nevertheless, the great promise of these media campaigns anchors on their competence to carry well defined behaviorally focused messages to target audience repeatedly over time (Wakefield, Loken and Hornik, 2010). Obviously, they can be of short period of time or of long duration. In the same vein, they might stand alone or be combined with other organized programmes like clinical/health or institutional outreach or may complement policy change. Hence, multi ways of disseminating campaign messages are employed, if health campaigns are part of broader social marketing programmes (Wakefield, Loken and Hornik, 2010).

### **The Media and Knowledge of Breast Cancer**

The mass media, which have the ability to penetrate every segment of the society, transmit ideas and new information that would help educate, entertain, create awareness and knowledge about health issues, like breast cancer. Television creates knowledge of breast cancer by scrolling messages on prime time news and programmes. The radio can also introduce musical commercials about breast cancer during peak periods.

More, the television can be used to give knowledge about breast cancer by showing documentaries that based on the nature, causes and consequences of breast cancer. In addition, a programme could feature a breast cancer patient, which could help educate and create knowledge of the nature, causes and importance of early detection of cancer, as well as seeking medical attention as soon as a tumor is noticed (Okorie, 2013, p. 7).

The print media, which refers to newspapers and magazines, in this context, can educate, inform and mobilize people to a topical issue of national interest. The print media has the advantage of permanence and storage and retrieval of information for further use. Other types of print media include brochures, books, pamphlets, billboards and posters.

Print media have their limitation. The user must be literate in order to comprehend the messages from it. Those in the rural areas and the less educated may not benefit well from the print media as most of the publications are presented in English language. Sometimes newspapers and magazines may be clumsy and blurred due to low quality of printing materials used, due to decline in economy of the country. Nonetheless, the use of print media for disseminations of information like health issues, political and other topical issues is very important.

The internet, with its multimedia abilities has affected the traditional methods, individuals access the mass media. With the advent of internet as new media, the means of expressing one's self has become easier. The principal functions of the internet are communication, information gathering, electronic marketing, banking and education among others. Individuals can have access to their television and radio programmes with the use of the multimedia devices. Coming of multimedia devices such as ipads, smart phones, blackberry and others have modernized the ways in which individuals access and disseminate information, people can also get news reports, sports and fashion updates through the internet (Adaja, 2005, pp. 33-48).

The mass media can create knowledge of the duties of Oncologists, the medical professionals that specialize in the treatment of cancer (Mandal, 2012, p.35; Fishbein and Azjen, 2010, p. 6). The women, through the media, need to know the different types of Oncologists and their functions, in order to take a good decision on the treatment of breast cancer.

Swain, (2010, pp 8-17) said that clinical Oncology is divided into three parts, namely; Medical Oncology, Surgical Oncology and Radiation Oncology. Medical Oncology deals with treating cancer with Chemotherapy, that is the use of drugs in killing cancer cells. Surgical Oncology handles the surgical aspect of cancer, which included biopsy. Biopsy means removal of small quantity of tissue for examination and surgical removal of cancer, the surrounding tissue and sometimes, nearby lymph nodes. The lymph nodes, are tiny bean shaped organs that help fight disease. Also radiation Oncology deals with the treatment of cancer with radiation therapy; which means the use of high energy X-rays to destroy cancer cells (Sheng Yang, P., Chen, C., Mei Ching, L., Min Jian, J., Fang Hong, C., Juin, L.M., Long, Yaun, L. M. 2010, pp.516-522; Hennesy, B. T., Gonzalez-Angulo, A. M., Hortobagyl, G. N. 2005, pp. 598- 599).

The American Society of Clinical Oncology (ASCO) disclosed other types of Oncology; namely; Gynecologic Oncology; that treats women with gynecologic cancers, such as uterine cancer and cervical cancer. Pediatric Oncology, deals with treatment of children with cancer, like brain tumour, leukemia, osteosarcoma and Ewing's sarcoma. Tice, (2012, p.80) explained that a cancer patient often times, is treated by a team of Oncologists. The approach is used because cancer treatment in most cases, involves a combination of surgery, chemotherapy and radiation. He said that women need to have knowledge of the

treatments and side effects, such as constipation, nausea, vomiting and fatigue, through the media. The Oncologists need to explain the cancer diagnosis and the extent of the cancer, as well as discuss all of the treatment options and recommend the best type of treatment to the patients. (Fishman, 2011, pp. 15-16).

### **The Mass Media and Knowledge of Breast Cancer among Women**

Generally, the media play big roles in the public understanding of many health issues. The information relayed to the public through the media clearly increases knowledge and influences the behavior of the masses. In Malaysia, Al-Naggar and Al-Jashamy (2011, pp. 3397-3401) were able to show that *Star Newspapers* articles of 2007 contained more information (97 articles) on the knowledge of breast cancer than those of the 1997, which contained (18 articles). They concluded that these differences seemed to reflect on the social, political and scientific occurrences in Malaysia over the years. There is scarcity of research investigations on the influence of information sources used in media knowledge campaigns on breast cancer among women in Nigeria. However, Okorie, Oyesomi, Olusola, Williams and Soola (2014, P. 1) investigated the influence of mass media campaigns on the knowledge of breast cancer care among women in South-West Nigeria. Their findings showed that the majority of the respondents (98.8 percent) were aware of breast cancer, but many of these respondents were not sufficiently knowledgeable of the disease.

They also revealed that information sources like mass media and interpersonal channels were crucial health communication carriers for breast cancer knowledge. Their suggestion was therefore, that mass media messages should be included as major machineries in media knowledge campaigns for improving breast cancer care among women. The reason, they concluded, was that mass media messages rightly produced positive changes, or prevented negative changes in health-related behaviours of women in South-West Nigeria. Leask, Hooker and King (2010, pp. 2-7) admitted that mass media have the power to set agenda and frame issues that may affect people. These workers argued that media outlets have substantial influence on the populace to identify and report societal health issues that affect socio-cultural and economic development of the nation. Lee and Gelmon, (2011, pp.1650-1659), did a study on effect of news media coverage of cancer risk on Clinical Oncology practice in Colombia. The study found out that during the time of media coverage, there was increase in the number of breast cancer patients that visited Oncologists, with questions about their medical care. The study also showed that the media coverage of the benefits and risks of medication was not sufficient as the media campaign lasted for only seven days. It also showed that the media coverage on Oncology practice motivated the women to take a giant stride in seeking medical help and undergoing medical examination.

Kathy, (2010, pp.613-620), in a study on promoting better quality media coverage of breast cancer in Canada, found out that media coverage of breast cancer can convey important messages that cancer was not a death sentence, as early diagnosis can save lives. The study also showed that quality coverage of breast cancer can raise awareness about ways of bridging gaps in knowledge of breast cancer. Russel, (2012, pp. 167-170), studied media

coverage of cancer in the United States, in eight large United States newspapers and five national magazines, between the year 2010 and 2011. The study showed that 35 percent of cancer related issues focused on breast cancer. Also, alternatives to aggressive treatments, like natural cure, such as dieting were rarely discussed, compared with the use of aggressive treatments, which were discussed in 57.1 percent of the published articles. The study also found out that 32.1 percent of the articles examined, discussed one or more people that survived cancer, while 7.6 percent of the article studied, talked about a person dying from or having died of cancer. Arnold and Eckstein, (2010, pp. 961- 971), studied media creating knowledge on breast density, a risk to breast cancer, in California. The study showed that the media disseminated the information that women with densest breast tissue have about one- and a – half times the risk of developing cancer in the same breast. It also showed that women with dense breast tissue have the risk of developing invasive cancer in either breast, than women with the least dense breast tissue. The study also found out that women who have dense breast tissue have the highest risk of facing a recurrence of cancer.

### **Use of Mass Media Campaigns to Affect Health Behaviours**

United States of America has successfully used mass media campaigns to affect positive change in health behaviours. Such campaigns have been directed to breast cancer awareness, cancer screening and prevention. Other health related issues that the mass media have successfully carried campaigns upon are illicit drug use, sex- related behaviours, child survival and many others Wakefield, Terry, Elrath and Emery (2006, pp.2154-2160), studied the use of mass media campaign to change health behavior and they found that there were reductions in the number of adults engaged in smoking, following the increase in the mass media campaign, on the health hazards associated with smoking.

Health campaign planners placed the health behaviour messages in television, radio, magazines, newspapers, outdoor bill boards and posters, and new media like internet and mobile phones. Mass media health campaigns disseminate health behavioural change messages to heterogeneous audiences repeatedly in order to have desired effects. The health media campaign may be for a short or long duration, depending on the effect the planners want to achieve and the target audiences. The campaign may be made to stand alone or linked with other existing campaigns, Kotler and Lee, 2008, pp. 25-45; Homick and Yanovitzky, 2011, pp.204-224 studied on mass media campaign on creating breast cancer awareness, they found that after viewing televised breast cancer campaigns, several women formed a support group to help them understand the procedure of early detection of breast cancer, and many women even those that did not view the campaign joined the group in order to change their health behavior positively.

### **Carefully Designed Media Campaign, Promotes Health Behaviour**

Carefully designed media health campaign provides potential for maximum effectiveness Homick, Jacobsohn, Orwin, Piesses and Kalton 2008, pp.2229-2236; Bala, Strzeszynski and Cahill 2008, pp.104-120; Jones, 2011, pp.309-325; John, 2010, pp. 505-508, studied

mass media campaign to expose health hazard involved with the smoking in Australia and they came with the result that mass media campaigns were associated with decline in smoking habits among adults and teenagers. Various studies have been done to assess the effects of media campaign on smoking in the United States and the results are successful. Between 1970s and 1990s, the studies were based on field experiments, forming part of research demonstrations projects, while large scale media campaigns were used from the mid 1990s and the results have been very impressive (Jha, Peto, Zatonski, Boreham, Javis and Lopez 2006, pp. 367-370).

Studies have also shown that media campaigns that involve negative emotions, such as sadness, disgust and fear, promote decreased cigarette smoking, example anti tobacco campaigns that use negatively emotive advertising messages, such as associating smoking to serious health damage, like cancer will cause reduction in smoking habits among adults and youths (Bricker, Leroux and Peterson 2003, p. 585-593); Niederdepp, Kuang, Crock and Skelton 2008, pp. 1343-1355). Sometimes media campaign against smoking produced undesired effect. Some studies stated that advertisement messages that said that young people should not smoke, may be giving a subtle message that smoking is an adult activity, may encourage teenagers who want to taste “adult food” (Farrelly, Healton, Davis, Messeri, Hersy and Hariland 2002, pp. 901-907; Wakefield, *et al*, 2006, pp. 2154-2160).

Also another area that media campaigns have been used to affect health related issues is on the uses of illicit drug. Even in United State of America (USA) various studies found positive effects of a campaign that ran from 1987 to 1990 against the use of illicit drugs (Block, Morwitz, Putsis and Sen 2002, pp. 1346-1351; Babor, Caetano and Casserwell 2003, p. 55; Rehm, Mathers, and Popova 2009, pp. 2223-2233). Between 1998 and 2004, the United States spent several millions of dollars on a national anti drug media campaign targeted at young people, their parents and other influential adults. The campaign involved television, radio advertising, as well as other media and community programmes, to provide information, awareness and education, with the aim of preventing initiation of marijuana use and persuading occasional users to stop. Media messages directed at parents, requested them to talk with their children about drug-use and to closely monitor their behaviour. However, the result showed that only young people who required substantial novelty and stimulation, and those who also received school based drug prevention information were affected positively by the media campaign (Palmgreen, Lorch, Stephen, Hoyle and Donohew 2007, pp. 1644-1649; Longshore, Gosh-Dastida and Ellickson 2006, pp. 496-508).

A national assessment indicated that the mass media campaign did not positively effect behavioural attitude towards marijuana use among young people. Indeed some studies suggested that greater exposure apart from media campaign would have made the teenagers to continue taking marijuana since the message (Not from media campaign) was that marijuana use was commonplace and thereby normal. However, the media campaign favourably effect the attitude and behaviour of parents towards talking with their children about drugs (Palmgreen, *et al*.2007, P. 1646; Ereeg – Hum, 2008, p. 258). Also in the area

of cardiovascular disease, mass media campaigns have successfully convinced people to engage in healthy nutrition and physical activities in order to reduce the risk for heart disease (Pomerleau, Lock, Knai and Mckee 2005, pp. 2486-2495; Matson-Koffman, Brownstein, Neiner and Greaney 2005, pp.167-193). Studies have shown that rates of heart disease, stroke, have reduced drastically as a result of carefully large – scale designed media campaigns in the developed countries (Huhman, Potter, Duke, Judkins, Heitzier and Wrong 2004, pp. 38 – 43; Sanigorski, Bell, Kremer, Cuttler and Swinburn 2008, pp. 1060 – 10671. In the 1970s and 1980s, large – scale community – based public communication intervention targeted at preventing cardio vascular disease, including the North Karelia project in Finland, and Stanford Heart Disease prevention programme and the Minnesota Heart Health programme in the United States were among the first to be formally assessed for effectiveness (Shea and Basch, 1990, pp. 279-287).

In the mid 1980s and 1990s, smaller – scale cardiovascular disease prevention programme started. The media campaign yielded great awareness and improvements in heart disease, stroke risk – reducing behaviour, such as changes to diet and increases in physical activities (Rocella, 2009, pp.73-83; Atienza and King, 2010, pp.72-74). Media campaigns directed at increasing low fat milk consumption have also motivated governmental policy changes (Reger, Wootan and Booth-Butter 2009, pp. 271 – 275). Media campaigns have recorded success in convincing people to consume healthy food (Snyder, Hamilton, Mitchell, Kiwanuka-Tondo, Fleming-Milici and Proctor 2004, pp. 71-96; Brownson, 2006, pp. 771–790). Mass media campaign directed at encouraging physical activities yielded positive result in physical activity, mainly in highly motivated individuals (Cavil and Bauman 2004, pp.771–790; Kahn, Ramsey, and Brownson 2002, pp. 73-107).

Mass media campaigns have done a lot job in creating awareness about HIV/AIDS and reductions in birth–rate. Studies have shown that there are urgent need for awareness in the prevention of HIV/AIDS and reductions in birth rate particularly in the developing countries, also mass media campaigns had aimed at encouraging family planning programme in the low income countries, whereas those aimed at preventing HIV/AIDS have been targeted at low income and high – income countries (Bertrand, O’ Reilly, Desison, Anhang and Sweat 2006, pp. 567 – 597; Piotrow, Kincaid, Rimom and Rinehart 2009, P.45).

It has been seen that the dissemination of information about family planning through mass media campaigns was associated with acceptance of contraception (Homik and McAnany, 2011, pp. 208-239; Cleland, Bernstein, Ezech, Faundes, Glasir and Innis 2006, pp. 1810-1827). Mass media campaign design, included the embedding of pro-family – Planning messages in entertainment programmes, especially in a soap opera, at social interaction with expanded distribution of family planning devices. It was reported that those exposed to campaign messages, adopted and accepted family – planning programme as a way of controlling birth – rate (Cleland, *et al.* 2006, p. 1815).

There have been a clear increase in the use of condoms for protection against pregnancy among women across Africa, which was attributed to HIV-related condom media campaigns. Mass media campaigns for prevention and awareness of HIV/HIDS have received sufficient funding world wide, and health behavioural change targets, included lowering the number of sex partners, use of condom and HIV testing (Bertrand, *et al.* 2006, pp. 567-597). Studies showed that casual sexual partners who used condom increased in countries with serious media campaigns but there was no effect on countries with less media campaigns, which showed that mass media campaign programmes can effect and change health behaviour for good (Wellings, 2002, pp. 131-146; Noar, Palmgreen, Chabor, Dobransky and Zimmerman 2009, PP. 15 -42; Mayhre and Flora 2000, pp. 29-45).

Another area that mass media campaigns have helped to make behavioural change was in the area of organ donation and transplantation. Mass media campaign surrounding the world transplant games federation international events was associated with increased organ donations in the cities where campaign held but the progress stop when the media campaign exposure dropped (Slopak, 2004, pp. 46-50; Morgan, 2009, pp. 29-48). Studies also indicated that there was increase in blood donors due to increase with mass media campaigns educating people on the importance to donate blood willingly in order to save lives. For instance during china's national campaign to promote blood donation, which engaged celebrities to support the programme, the number of voluntary blood donors rose from 55 to 96320 in one city between 1993 and 2001. Also in Ghana, a massive low cost radio campaign that promoted and supported voluntary blood donation from 2003 to 2006, indicated an associated increase in response from young male donors coming out repeatedly to donate blood, more than they did before the media campaign. In addition, because of media campaign, Nigeria has witnessed an increase in people voluntarily donating blood to save lives (Allain, Sarkodie, Boateng, Asenso, Kyeremteng and Owusu-Ofori 2008, pp. 735-741; Adams, Erwin and Le 2009, pp. 410-418).

Also in changing health behavoiur, mass media campaigns have aimed at the reducing child – mortality. It is a known fact that in developing countries, there has been premature mortality, due to inadequate treatment of dehydration, resulting from diarrhea, non vaccination for preventable diseases and failure to breast feed exclusively. Mass media extensively carried campaigns to reduce child mortality in Africa through vaccination programmes (Hormik, McDivitt, and Zimicki 2002, pp. 219-250; Jones, 2011, pp. 65-71; Black, Morris and Bryce 2003, pp. 2226-2234; Zimicki, Hormik and Verzosa 2012 , pp. 409-422).

Also, in Bangladesh, reduced in child mortality rate was attributed to the mass media campaigns on the use of immunization against child killer diseases like polio among others. Mass media was a strategy widely used in multi component vaccination campaigns world-wide and substantial improvement in childhood vaccination were successfully recorded (Pegurri, Fox- Rusbby and Damian 2005, pp. 1624-1634; Hutchinson, Lance, Gullkey, Shahjahan and Haque 2006, pp. 91-121).



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**Mass Media Campaigns and Knowledge on Cancer Screening and Prevention**

Mass media campaigns to motivate women to have papanicolaou (PAP) smears and undergo screening mammography have been going on in developed countries a long time ago. Screening of asymptomatic individuals for breast cancer, cervical and colorectal cancers is recommended for early detection. In Australia and the U.S.A., mass media campaigns in addition to reminder letters gave rise to short-term pap-smear uptake, especially when there was efficient screening services (Baron, Rimer and Breslow 2008, pp. 534-555; Marcus and Cran 2010, pp. 13-31; Black, Yamaya and Mann (2011), pp. 386-393). Further studies indicated that short duration screening programmes that offered quick access to screening services, used reminder letters and also campaigns in television and radio to educate people on the need to undertake pap smears. Also in the cases of mammography, mass media campaigns and reminder letters were used in areas where screening was already organized and many people participated in the screening exercises (Mullins, Wakefield and Baron 2008, pp. 477-486; Pasick, Haitt and Paskett 2004, pp.1146-1164; Snyder, *et.al* 2004, pp.71-96).

Mass media campaigns without standard screening services, however produced no increase in the early detection of cancer. Also mass media campaigns have succeeded in creating awareness on the prevention of skin cancer. The media had continued to educate the people that skin cancer is caused mainly by over exposure to ultraviolet radiation in sunlight. Mass media also went further to tell people to reduce sun exposure, especially for fair-skinned persons to avoid high ultraviolet periods to wear protective clothing (Saraiya, Glantz and Briss 2004, pp. 422-466; Elwood, Makin, Sinclair and Burton 2009, pp. 107-132). A study that assessed sun protection behavioural change for 15 years in Australia, due to mass media campaign awareness, had shown that there has been improvements in attitudes and behaviour concerning skin cancer prevention, also, reduction in the incidence of melanoma was observed, especially among young people due to the media campaign (Hills and Marks 2008, pp. 538-540; Dobbins, Wakefield and Jansen 2008, pp. 94-101; Saraiya, *et al.* 2004, pp. 422-466).

**THEORETICAL FRAMEWORK****The Health Belief Model**

The Health Belief Model (HBM) is one of the first theories of health behavior. It is a psychological model that attempts to explain and predict health behaviors. This is done by focusing on the attitudes and beliefs of individuals. The HBM was first developed in the 1950s by social psychologists Godfrey Hochbaum, Irwin Rosenstock and Stephen Kegels working in the U.S. Public Health Services in order to understand the failure of people to adopt disease prevention strategies or screening tests for the early detection of disease (Conner, M. & Norman, P., 1996). The model was developed in response to the failure of a free tuberculosis (TB) health screening program. Since then, the HBM has been adapted to explore a variety of long- and short-term health behaviors, including sexual risk behaviors and the transmission of HIV/AIDS (Rosenstock I., 1974).

The HBM suggests that a person's belief in a personal threat of an illness or disease together with a person's belief in the effectiveness of the recommended health behavior or action will predict the likelihood the person will adopt the behavior.

It derives from psychological and behavioral theory with the foundation that the two components of health-related behavior are:

- 1) the desire to avoid illness, or conversely get well if already ill; and,
- 2) the belief that a specific health action will prevent, or cure, illness.

The relevance of the Health Belief Model to this study lies in the fact that the health of individuals within any given society or community is dependent on their ability to identify the risks for specific health problems. This ability is based to a large extent on the knowledge and right perception of the state of illness and the state of the pathological abnormality in any of the organs of the body system. This knowledge is acquired mostly through either formal or non-formal education and this links up the domains of health education, health promotion and indeed health communication. Health communication through the broadcast media campaigns is imperative for individuals to be sensitized with various health messages for them to become aware and to take positive measures to safeguard their health and contribute meaningfully to the development of the society.

### **Cognitive Dissonance Theory**

Leon Festinger (1951) synthesized a set of studies to distill a theory about communication's social influences. Cognitive dissonance enjoyed great popularity from the late 1950s through the mid-1970s. Theoretical problems and conflicting findings lead to temporary replacement by similar "self" theories in the early 1980s, but cognitive dissonance regained its place as the umbrella theory for selective exposure to communication by the late 1980s (Festinger, L. 1957).

Cognitive dissonance is a communication theory adopted from social psychology. The title gives the concept: cognitive is thinking or the mind; and dissonance is inconsistency or conflict (Folarin, 2002). Cognitive dissonance is the psychological conflict from holding two or more incompatible beliefs simultaneously. Cognitive dissonance is a relatively straightforward social psychology theory that has enjoyed wide acceptance in a variety of disciplines including communication. The theory replaces previous conditioning or reinforcement theories by viewing individuals as more purposeful decision makers; they strive for balance in their beliefs. If presented with decisions or information that creates dissonance, they use dissonance-reduction strategies to regain equilibrium, especially if the dissonance affects their self-esteem. The theory suggests that

1) dissonance is psychologically uncomfortable enough to motivate people to achieve consonance, and

2) in a state of dissonance, people will avoid information and situations that might increase the dissonance.

How dissonance arises is easy to imagine: It may be unavoidable in an information rich-society. How people deal with it is more difficult.

Cognitive Dissonance Theory, however, cannot predict how people will choose to reduce their psychological discomfort when challenged. Attempts to influence people to a different opinion or behaviour can sometimes backfire by reinforcing an undesirable attitude.

The rewards of convincing people to change their behaviour are often well worth the effort. In a phenomenon known as the “free choice paradigm,” people who choose between two desirable outcomes tend to view the rejected outcome less favourably, and chosen outcome more favourably, than they did before making their decision.

This theory further explains that people tend to seek internal justification for their participation in behaviours that offer them little to permanently adopt said behaviours such as BSC & CBE, for early detection of breast cancer and reducing breast cancer risk factors. Cognitive dissonance explains why people who are persuaded to put more effort toward achieving a goal exaggerate the attractiveness of the goal to justify their effort. Since persuasion is inherent goal of communication, this shows why cognitive dissonance plays such a large role in the field.

Dissonance theory applies to all situations involving attitude formation and change. This theory is able to manipulate people into certain behavior, by doing so these people will alter their attitudes themselves. It is especially relevant to decision-making and problem-solving.

Understanding this theory helps communicators/ the media to succeed in stirring others to action. This theory enables the broadcast media to stir the women towards improving their health behaviour as it regards breast cancer, its risk factors, prevention and screening methods.

Cognitive dissonance theory is relevance to this study because it can be used to promote behaviour such as increased performance of breast self examination for early detection. Other studies suggest that cognitive dissonance can also be used to encourage individuals to engage in pro-social behaviour under various contexts such as campaigning against breast cancer, avoiding the risk factors and compliance with BSE and CBE.

## CONCLUSION

The dominant climate of opinion in all the materials reviewed in this piece showed that breast cancer is the greatest threat to womanhood. Recent statistics showed that this threat is growing and most likely will consume a greater number of women in by 2020. Obviously, the review have shown that the only way to reduce the incidences of breast cancer is to step up media awareness and knowledge. With adequate knowledge, early detection and constant breast examination is the only answer.

## Recommendations

Based on the conceptual and empirical evidences presented in this study, the researchers recommend as follows:

1. The obvious gap noticed in the entire review is that almost all studies conducted on breast cancer and the media in the past eliminated men in the process. The men are usually not taken into account in planning media campaigns on breast cancer. This has to be corrected because to a large extent, the men should be motivated to help their wives, mothers and sisters to adhere to breast self examination.
2. Again, since most of the studies showed that rural women have little knowledge on breast cancer. As a matter of urgency, campaign planners should take the campaigns to rural areas.

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