

Herbal Medicine Broadcast Media Advertisement, Audience Perception and Purchase Decision

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Abstract

The trend of wholesale commercialization of media outfits has given rise to programming of events that do not necessarily hold much value for the viewing public. Herbal medical practitioners in Nigeria appear to be keying into this development in the way they utilize the media to advertise and promote the efficacy of their drugs as an alternative to synthetic western drugs. The overall purpose of this study was to establish whether there is a relationship between perception of herbal medicine advertisement and purchase of such medicines among the populace in Southeastern Nigeria. The study was designed as a survey. Data were collected from 400 residents drawn from the capital cities of the five Southeastern states in Nigeria. Our findings suggest a high level of exposure to media herbal advertisements and this had a positive impact on the perception of herbal medicine among the residents. They also suggest passive influence on their purchase decision. This led to the conclusion that purchase decision for herbal medicine was dependent on cultural background, community and societal standards that affect people's perception of need. Interpersonal communication and efficacy of herbal medicines rather than ubiquitous herbal media advertisements exerted more influence on the respondents' purchase decision.

Keywords: Herbal medicine, Media advertisement, Audience perception, Purchase decision, Efficacy, Synthetic western drugs

Introduction

The sense of orthodoxy appears to suggest that medication drug users are predisposed to western pharmaceuticals than traditional herbal therapies. However, the enormity of certain ailments could give rise to the possibility of drug users considering herbal medication over established western medication. This study explored the possibility of advertisement, which portrays herbals as potent, inducing drug users' purchase decisions.

Herbal medicine, according to National Herbalists Association of Australia, is the oldest and still the most widely used system of medicine in the world today. It is the use of plants (herbs) to treat disease and enhance wellbeing. Herbal medicine can be modified based on culture, tribe, social and religious values to meet the health need of people

Historically, the use of plants as medicines dates as far back as the origin of humankind. Right from the onset, people had utilised plants, primarily, for nourishment. By trial and error people discovered that some plants are good for food, while some are poisonous, and that some produce bodily changes such as increased perspiration, bowel movement, urination, relief of pain, hallucination, and healing.

Over the past few decades, the development and mass production of chemically synthesized drugs have revolutionized health care in most parts of the world. Notwithstanding, large portions of the population in developing countries still rely on traditional practitioners and

herbal medicines for their primary healthcare. In Africa up to 90% and in India 70% of the population depend on traditional medicine to help meet their health care needs. In China, traditional medicine accounts for around 40% of all health care delivered and more than 90% of general hospitals in China have units for traditional medicine.[1]

The use of traditional medicine is not limited to developing countries, and during the past two decades public interest in natural therapies has increased greatly in industrialized countries, with expanding use of ethno botanicals. In the United States, in 2007, about 38% of adults and 12% of children were using some form of traditional medicine. Herbal medicines are also very common in Europe, with Germany and France leading in over-the-counter sales among European countries, and in most developed countries, one can find essential oils, herbal extracts, or herbal teas being sold in pharmacies with conventional drugs.[2][3]

Although, various reasons why people prefer herbal therapy to western established drugs may vary from country to country, the most common reasons for using traditional medicine across the world are that; it is more affordable, more closely corresponds to the patient's ideology, allays concerns about the adverse effects of chemical (synthetic) medicines, satisfies a desire for more personalized health care, and allows greater public access to health information.[4] The major use of herbal medicines is for health promotion and therapy for chronic, as opposed to life-threatening, conditions. However, usage of traditional remedies increases when conventional medicine is ineffective in the treatment of disease, such as in advanced cancer and in the face of new infectious diseases.[5]

Safety of some herbal ingredients have been recently called into question, in part because of the identification of adverse events associated with their use and, increasingly, because of the demonstration of clinically relevant interactions between herbs and prescription drugs. Furthermore, traditional medicines are widely perceived as natural and safe, that is, not toxic. This is not necessarily true, especially when the in-take of herbs with prescription drugs, over-the-counter medications, or other herbs, is very common. [6][7]

Advertising has a general role to play in modern healthcare. Consumer-directed advertising has one principal purpose: "to alert consumers to the availability of products for conditions suitable for self-medication". To accomplish this, advertising must attract attention, stimulate interest and provide information to mass audiences of consumers about what a particular product might do. It creates awareness of nonprescription medicines, helps consumers in the search for products they need, and directs consumers to information for safe and appropriate product use. Nonprescription drugs such as herbal medicines (over-the-counter, OTC) are medicines which are approved as safe and effective for use without a doctor's prescription. These and other self-care products are available without medical supervision and can be purchased by patients and consumers through pharmacies and, in many countries, from supermarkets or other retail outlets. As no healthcare professional is necessarily involved in their use, advertising directly to the public of the availability of nonprescription medicines is essential and makes an important contribution to public health (World Self-Medication Industry).[8]

In our contemporary society, advertisement of herbal medicine takes several dimensions. Some traditional practitioners mount public address systems in the marketplaces to announce the efficacy of their products, others employ buses and vehicles to announce and distribute their all-powerful drugs to the teeming public. It is very common to encounter advertisers of traditional herbal therapies in public vehicles moving from one major town to another in Nigeria. The most popular is the utilization of the radio and television for wider coverage. To that effect, it has been observed that media organizations in Nigeria are in dire need of revenue

often generated through advertisement and most herbal practitioners are aware of this and are exploiting it.

There is extreme need to ensure that these products are not exposed without regulation and adherence to certain codes of ethics which NAFDAC (National Agency for Food, Drug Administration and Control) should dictate and enforce guidelines which media houses must follow before accepting any advertisements on herbal products. As documented in the Traditional Medicine Policy and Regulatory Framework (2006), there are currently 107 registered herbal medicines in Nigeria, but none is listed on the essential drugs list. However, there seems to be aggressive promotion and advertisement of herbal medicines. The alternative medical therapists now pay for extensive air time on government radio and television to announce their herbal drugs which they say could cure any disease ever known to mankind.

The renewal of interest on herbal medicine by residents of urban communities in Nigeria has been attributed to the pronouncements on radio and TV by AM-Therapist who claim that their 'wares' can cure all diseases ever known to mankind. It is now common to see many urban dwellers trooping into stadia and trade fair centres of our state capitals to visit alternative medical therapists' stands to consult and buy these herbal medicines. Herbal medicines are still commonly sold by practitioners and their agents virtually without adequate restriction and regulation. In fact, a great deal of informality still exists. In other words, the traditional herbal medical practitioners follow very informal and highly varied protocols in advertising and distributing their products. These poses a grave danger to the health of members of the public.[9]

Statement of the Research Problem

Consumers react in various ways in their purchase decision making process. This is termed consumer behaviour. Consumer behaviour essentially refers to how and why people make the purchase decisions they do. Producers need to advertise their products and services in order to be able to reach out to both existing and potential customers.

Research has shown that purchase decision depends on so many factors such as, personal emotions, preference, perception, social situations, goals, values etc.; consumers vary in the way they determine which need to satisfy when purchasing a product and service. This goes a long way to ascertain whether they will make a purchase just because it is the newest, most popular item available or that it is actually what they need and want.

Notably, nonprescription medicines like herbal therapies are not impulse purchase items as the need for a medicine is identified always by the pre-existence of a health concern.

Consequently, advertisers may have the tendency of misleading consumers, considering the level of competition that exists among herbal producers around the world.

Against this backdrop, the question is: do media herbal advertisements in any way induce medication drug users' purchase decisions in regard to herbal medicine?

In line with the research problem, our study sought answers to the following research questions:

1. How exposed are medication drug users in southeast Nigeria to herbal medicine broadcast media advertisements?
2. How do these medication drug users perceive these advertisements?
3. Do these advertisements in any way induce the purchase decisions of these drug consumers?
4. What other factors influence these consumers' purchase decisions, apart from broadcast media herbal advertisements alone?

Herbal Medicines in Nigeria: An Overview

Herbal medicine is the use of plants (herbs) to treat disease and enhance wellbeing. Herbal healing is a system of medical treatment in which various parts – leaves, barks, roots, seeds, fruit, latex and resin – of different plants are used in order to treat symptoms and promote good health. In the same vein, National Herbalists Association of Australia holds that herbal medicine is the oldest and still the most widely used system of medicine in the world today.[10]

The origin of Herbal medicine could be traced to ancient cultures including those of the Egyptians, American Indians, Indians and the Chinese. In recent years, interest in herbal medicine has increased globally, leading to a greater scientific interest in the medicinal use of plants. Many international studies have shown that using plants as medicine provides significant advantage for treating many conditions and improving health, due to its complex chemical nature with different parts of the plant providing certain therapeutic effects.

To this effect, the World Health Organisation (WHO) reports that herbal medicines are the first line of treatment for 60% of children with high fever due to malaria in Nigeria, Ghana, Mali and Zambia. Cough and abdominal pains are other symptoms of children that are frequently treated with herbal medicine in Nigeria. [11]

Media Audience Exposure to Herbal Medicine Advertisement

The rate at which traditional herbal medicine practitioners foot the advertising bills of many television/radio stations especially in Nigeria, informed a study of this nature. In our contemporary society, it is not uncommon to hear/see advertisement of various categories of herbal medicine on our local channels of mass communication especially during network news that one may wonder whether it has become part of the news. Such broadcast stations include, Minaj Broadcast International (MBI) Oboji, Anambra State; Purity FM Mgbakwu; Anambra Broadcasting Service Awka; NTA-Awka; Silverbird Television Awka; Broadcasting Corporation of Abia (BCA) Umuahia; Enugu State Broadcasting Service (ESBS) channel 50 Enugu; Imo State Broadcasting Service(IBC) Owerri; NTA-Owerri Imo state Nigeria; Orient TV- Owerri, among others. Among the multitude of herbal medicines in circulation in Nigeria, only about twenty have been registered by the National Agency for Food, Drug Administration and Control (NAFDAC), and most of those are imported. Only advertisements with NAFDAC endorsement are allowed in print and electronic media, yet aggressive strategies such as radio, television and motorcade announcements have been adopted by many unregistered herbal medicine practitioners to market their Products, which are freely available for purchase in the open market. [12]

In a survey and observation study of efficacy of herbal remedies used by herbalists in Oye State, about 85% of Nigerians were found to use and consult traditional medicine for healthcare, social and psychological benefits because of poverty and disillusionment with conventional medical care. [13]

The governing council of the National Agency for Food, Drug Administration and Control prescribes that “advertisement in Nigeria of any herbal medicine or related product shall be accurate, complete, clear and designed to promote credibility and trust by the general Public and health care practitioners and statements illustrated shall not be misleading directly or by implication

The implementation of this has far-reaching consequences for supporting the appropriate use of herbal products by consumers. Informing individuals about ‘responsible’ self-medication is appropriate and led credence to consumer advertising.

Against this backdrop, the WHO’s Regulatory Assessment of Medicinal Product for use in Self-medication (2000) advocates as ethical criteria that “ while advertisements to the general

public should take account of people's legitimate desire for information regarding their health, they should not take undue advantage of people's concern for their health".

Examples of Media Herbal Medicine Advertisements in Southeast Nigeria

The producer of popular herbal medicine known as *Oosa herbal International Limited* receives aggressive promotion through the various media at Enugu Dream FM 92.5, NTA Channel 05 Enugu, NTA Awka, Purity FM 102.5 Mgbakwu, ABS Radio station, Awka, and lots of other media outfits mobilizing the general public to come and get the service of expert from their International partners for the bacterial infections that have defiled all conventional medical solutions at reduced prices. This particular advertiser claims to have herbal medicine that cures hormonal imbalance, kidney infections, dysfunctional reproductive system, etc without side effects. These stations were monitored for three days such as Saturday, Monday and Tuesday and we discovered that the advertiser spent not less than thirty minutes at various prime periods of each day such as around 7:00pm, 8:00pm, and 9:30pm. They even run the advertisement in between network news. Their first weapon of conviction is the NAFDAC registration number.

Also, "Mama Chukwuebuka" and "Papa Chukwuebuka" is another herbal medicine practitioner that consistently foots the bills of radio jingles in radio stations in Awka and its environs.

Similarly, "Eziokwu bu Ndu" is one of its kind that advertises their herbal medicine through local media channels assuring the public of the efficiency and potency of their herbal therapeutic drug using NAFDAC registration number as quality assurance.

The Nigerian Perspective on Herbal Medicine Media Advertisement

Research interest in public perception of herbal medicine is essential. The importance of it is to know the public level of knowledge on the safety of herbal therapeutic remedies, as many users of herbal medicine hardly disclose the matter to their primary health practitioners. Also the findings of such research may help doctors and pharmacists in counseling patients that take herbal medicines.

However, in 2008, Medicines and Healthcare Products Regulatory Agency (MHRA) commissioned (IPOS MORI) a research team to study the public's perception of herbal medicines. The results of the research indicate that 36 percent of adults questioned on the potential risks or problems associated with in-take of herbal medicine were unaware of any possible risks or problems to look out for. The risk most commonly identified unprompted was that some herbal medicines have side effects (12%); the risk of interactions with conventional medication was identified by 6%; no other single risk was identified by more than 6 percent. [14]

The MHRA report also shows that users of herbal therapies are more likely (76%) than any other group of users or non-users to believe that, *natural*, means safe. They are also more likely (44%) than other groups of users to believe that such products were regulated.

Some other stakeholders in the health sector have insistently argued that traditional medicine is unscientific, abstruse in terms of diagnosis, procedure and drug administration. [15]

Advocates of western, conventional medicine argue that traditional medicine is fraught with problems of imprecise dosage, poor diagnosis, charlatanism, exaggerated claims of abilities, and inadequate knowledge of anatomy, hygiene, and disease transmission, all of which put their patients' health and lives at risk. [16]

Public Health Benefits of Herbal Medicine Advertising

Advertising is well-suited and efficient in raising awareness on health matters; research carried out on the effects of direct-to-consumer advertising of prescription drugs suggest that health advertisements motivate people to seek more information about either a drug or their own condition.

Advertising of herbal medicines can play a similar role in public awareness. By addressing the public's instinct for taking care of themselves, herbal medicine advertisements can in some circumstances reinforce a public health awareness, prevention or self-care program.

According to World Self Medication Industry, consumer-directed nonprescription medicine advertising can achieve a number of purposes. They include:

- ❖ Awareness among consumers about their condition and about the availability of suitable medicines for self-treatment;
- ❖ Alert consumers to new products and new indications and reinforce other forms of communication about a product and brand;
- ❖ Develop brand recognition to provide the consumer with confidence in the brand and the company;
- ❖ Facilitate product search and helps consumer make informed selections
- ❖ Advertising of nonprescription medicines to the public stimulate competition in the areas of product quality, product improvement and product development;
- ❖ Help bring market forces into play, creating competitive product prices;
- ❖ Reinforce good medicines use (“always read the label;” “if symptoms Persist, consult a healthcare professional”).

Without advertising, consumers could be at a disadvantage. They would have less information on which to base their search for and selection of self-care health products.

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Research Methodology

The survey research method was adopted for this study. Data collected from the target audience of Herbal medicine in Southeastern Nigeria, were in regard to their dependency on the media for knowledge and awareness of herbal medicine; exposure to media herbal medicine advertising messages; believability of herbal medicine media advertisement; perception of herbal medicine media advertisement; broadcast media herbal medicine advertisement as an influence on residents’ purchase decision. Among the multiple channels employed in advertising herbal medicine, television and radio formed the basis of this study because of their popularity.

The population of this study comprises all residents in the capital cities of the five states in southeast Nigeria, who view or listen to herbal medicine media advertisements. These capital cities, which are urban areas, were purposively selected because their residents are the targets of the advertising onslaught by Alternative Medicine Practitioners. The South-East has an estimated population of 16, 381,729 according to the Nigerian 2006 census figure. A sample size of 400 was drawn from this population using Taro Yamane’s formula for determining sample size: $n = N / (1 + N [e]^2)$

Multi -stage sampling procedure was employed in this study. The first stage involved selection of towns from the five states of the Southeast. Purposively, each of the capital cities was selected because they are urban areas and have the capacity of accommodating different classes of people. They include: Umuahia, Owerri, Awka, Enugu, and Abakiliki. The central areas of these capital cities were selected by purposive sampling procedure.

The second stage involved selecting the strategic places where the respondents could be seen and have the questionnaire filled. Salons, market places, shopping malls, church premises, and schools were considered appropriate in each of these capital cities. Volunteers, who were met at these various places, had the questionnaire administered to them. This procedure is known as the street intercept method. In all, eighty (80) respondents per state were selected.

A pre-coded 23-items questionnaire was used as the data collection instrument. These items addressed the variables directly related to the research questions and hypotheses developed for this study. The instrument has six sections. The first section sought the respondents’ demographic data such as gender, age, educational qualification, occupation, place of residence (1-5). The second section consisted of four question-items (6-9) seeking to establish the respondents’ awareness of herbal medicine through media accessibility and utility. The third segment contained four question-items (10-13) which sought to ascertain the respondents’ perception of herbal medicine. The fourth section consisted of just four question-items (14-17) seeking to establish the respondents’ perception of herbal medicine media advertisement. The fifth segment contained four question-items (18-21). These items sought to determine the influence of herbal medicine media advertisements on the purchase decision of the respondents. The sixth section consisted of just two question-items (22-23) seeking to establish other variables or sources of information that could affect purchase decision and perception.

Results

A total of 400 copies of the questionnaire were distributed – 80 copies, respectively, to the five capital cities in Southeastern Nigeria. Out of 80 copies of the questionnaire distributed to

residents at Awka in Anambra State all were returned. At GRA, Enugu; all the 80 copies distributed, were returned. Out of 80 copies of the questionnaire distributed at Abakiliki town, 79 were returned and one lost; At Owerri, 80 copies were distributed and all were returned; At Umuahia., 80 copies were distributed, 78 returned and two lost. The total copies of the questionnaire returned were (N = 397); representing 99 percent return rate.

The respondents' demographic variables were measured using question items 1-5 in the questionnaire. Data generated from their responses revealed that 56 percent of the respondents are female and 44 percent are male. Also, the respondents cut across diverse age range; more of the respondents 130 (33%) were in the age range of 30-35. Those within 24-29 years constitutes about 111 (28%). This was followed by 18-23 years which represents 78 (20%) of the sample. Respondents within 41 and above years of age represent 66 (17%), while 11 respondents representing (3%) were under 36-40 years and were the least. Majority of respondents had first degree 102 (26%), followed by respondents who acquired HND 101 (26%) as their highest level of education. Seventy-four (19%) of the respondents have obtained Master's degree and above, those with OND/DIPLOMA/NCE accounted for 46 (12%). The least were those with FSLC and below 32(8%). Respondents who are trading/self-employed constituted the highest number of the respondents with 121 (31%), followed by students which represented 98 (25%) of the respondents. Military personnel accounted for (56 or 14%) of the respondents. Fifty (13%) of the respondents are civil servants, followed by respondents who engaged in professional occupation 22 or 6 percent. While only 9 (2%) of them belong to the clergy. A greater number of respondents, 318 or (82%), live in urban areas, while 56 (14%) are rural dwellers; with only 15 (4%) in semi-urban areas.

Table 1: Respondents' frequency of exposure to TV/Radio herbal medicine advertisements

S/N	VARIABLES	FREQUENCY	PERCENT
1	Occasionally	231	64
2	Regularly	119	33
3	Don't know	10	3
	Total	360	100

Among the respondents who were exposed to Television/Radio herbal medicine advertisement, 231 (64%) said they were occasionally exposed; 119(33%) said they were regularly exposed, while only 10 (3%) returned a 'don't know' response.

Table 2: Believability of herbal medicine as cure for all ailments

S/N	VARIABLES	FREQUENCY	PERCENT
1	Believe	158	40
2	Don't believe	200	51
3	Undecided	36	9
	Total	394	100

From Table 2, about 200 (51%) of the respondents believe that herbal medicine can cure all forms of ailments; 158 (40%) did not believe, while 36(9%) of the respondents were undecided over the issue.

Table 3: Respondents’ perception of Radio/TV herbal medicine advertisements

S/N	Variables	Frequency	Percent
1	Credible/Influential	169	44
2	Informing/educating	142	37
3	Misleading/disturbing	36	9
4	Deceptive/propagandistic	38	10
	Total	385	100

The analysis in Table 3 shows that most of the respondents had favourable perception of Radio/Television herbal medicine advertisements. Accordingly, 169 (44%) of them considered the advertising messages from these broadcast media as credible and influential; 142 respondents representing (37%) perceived the messages as informational and educating; 36 (9%) and 38 representing (10%) among them held contrary opinion. They perceived herbal medicine media advertisements as misleading, disturbing, deceptive and mere propaganda.

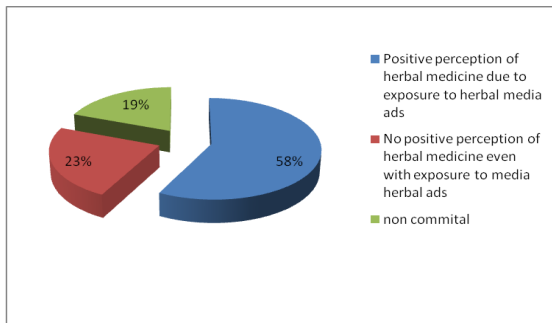


Fig 1: Respondents’ attribution of positive perception of herbal medicine to media herbal ads

Data in figure 1 indicate that majority (58%) of the respondents studied, had positive perception of herbal medicine as a result of their exposure to media ads; 92 (23%) among them disagreed, while 76 (19%) were non committal.

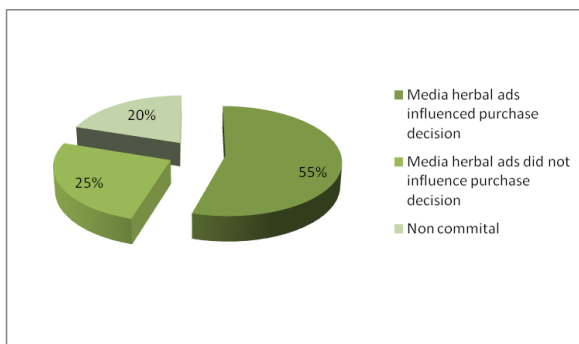


Fig 2: Respondents’ whose herbal medicine purchase was as a result of exposure to media herbal ads

Figure 2 shows that half of the sampled respondents (55%) thought that the media advertisements had some influence on their purchase of herbal medicine; 100 (25%) among them did not think in this direction, and about 78(20%) among them were non-committal.

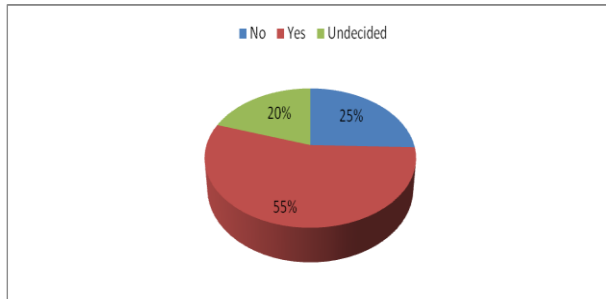


Fig 3: Respondents’ search for herbal medicine as a result of TV/Radio herbal advert message

Figure 3 shows that half of the sampled respondents thought that the media herbal advertisements had some effect on their decision to purchase herbal medicine. Two hundred and fourteen (55%) held such view; while 100 (25%) among them were not affirmative; and 78(20%) among them were undecided.

Table 5: Respondents’ motivation for deciding upon herbal medicine

S/N	VARIABLES	FREQUENCY	PERCENT
1	Efficacy of herbal medicine	140	40
2	Influence of media advert	46	13
3	Credibility	35	10
4	Testimonies from users	112	32
5	Truthfulness of herbal medicine practitioners	15	4
	Total	348	100

Data in Table 5 indicate that 140 (40%) of the respondents decided upon herbal medicine as a result of the drug’s efficacy; 112(32%) among them sought these drugs because of testimonies from other users. About 46 or (13%) among them owed their reason to the influence of media herbal advertisement, while 35 representing (10%) sought these drugs because of the media’s credibility. Only 15(4%) of them were motivated to decide upon herbal medicine as a result of the truthfulness of herbal medicine practitioners.

Table 6: Respondents’ purchase of herbal medicine after exposure to TV/Radio herbal advertisements

S/N	VARIABLES	FREQUENCY	PERCENT
1	No	58	15
2	Yes	282	72
3	Undecided	49	13
	Total	390	100

Table 6 shows that a greater number of the respondents, 282 (72%) agreed that they had bought herbal medicine after listening to radio or viewing the advertisements on television, while 58(15%) of them said “No”; and 49 (13%) were undecided.

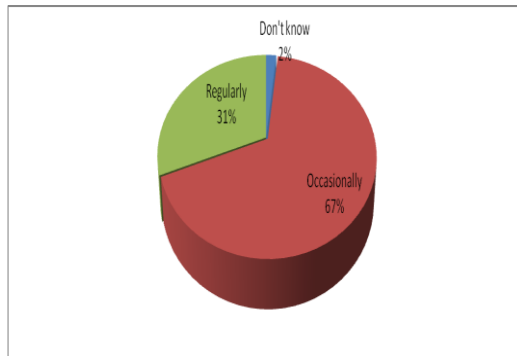


Figure 4: Respondents' Frequency of Purchase of Herbal Medicine

The analysis in Figure 4 shows that 222(67%) of the respondents purchased herbal medicine occasionally while (31%) did so regularly. Only 6 (2%) among them returned the 'don't-know' response.

Other Variables and Sources of Information that Influence Respondents' Purchase Decision

We looked at other variables, apart from TV/Radio advertisement, that exerted some influence on the respondents' purchase decision. The primary goal was to determine the convincing factors in terms of herbal medicine perception and purchase decision among these respondents. Thus, research question 4 was answered using question items 22-23 in the questionnaire. The data generated from the variables are as presented below in Tables 12 & 13.

Table 7: Respondents' other motivating factors for the purchase of herbal medicine

S/N	VARIABLE	FREQUENCY	PERCENT
1	It is cheap	45	12
2	It is accessible	32	9
3	It is acceptable	78	21
4	It is natural	50	14
5	It is safe	10	3
6	it is effective	38	10
7	All of the above	118	32
	Total	371	100

Table 7 reveals that 32% of the sampled population purchased herbal medicine not just because of media advertisement but for the following; its cheapness, accessibility, acceptability, nature, safety and effectiveness. Twenty-one percent of them chose acceptability as other factor for their purchase of the medicine. Respondents who purchase herbal medicine because it is natural were 50(14%), followed by 12% among them who purchased them because they are cheap. Those whose other motivating factor was effectiveness accounted for 38(10%). Thirty-two (9%) said they purchased them because they were accessible. Only 3 percent purchased them because they considered them safe.

Discussion of Findings

The key finding of this study was that the urbanite, middle aged, working class, literate residents of Southeastern Nigeria sampled in this study, are highly aware of herbal medicine as an alternative means of treating various ailments and majority (67%) of them got this knowledge through their exposure to Television or Radio herbal advertising message. This stance corresponds with a study in 2009 that suggested that the renewal of interest on herbal medicine by the residents of urban communities in Nigeria has been attributed to the unrestricted pronouncements on radio and TV by AM-Therapist which claim that their 'wares' can cure all diseases ever known to mankind.[9]

This study found that the respondents' had positive perception of herbal medicine media advertisement because the media message upholds their socio-cultural health belief. The study also established that the respondent's exposure to herbal medicine media advertisement had a passive influence on their purchase decision. The respondents would rather consider the testimonies of drug users, advice from family members and information from the internet before deciding upon herbal medicine purchase. This would suggest that the respondents were not directly influenced by media herbal advertisement to decide upon herbal medicines but had other reasons like credibility of practitioners, efficacy of herbal medicines and need as determinants.

Conclusion

Inferentially, the major findings of the study suggest that the respondents were highly exposed to herbal medicine advertisement via Television/Radio but the advertising messages through these media had passive impact on these respondents' decision to purchase herbal medicine; they were rather mostly influenced by interpersonal discussions with friends, family members and associates and testimonies from drug users when it comes to purchase decision for herbal medicine.

We, therefore, concluded that purchase decision for herbal medicine was dependent on cultural background, community and society's standard that affected peoples' perception of need. Interpersonal communication and the efficacy of herbal medicines rather than ubiquitous media herbal advertisement exerted more influence on these respondents' purchase decision.

Recommendations

Based on the results of this study the following recommendations were made:

- Herbal medicine Television and Radio advertisements should be channeled towards creating awareness and helping audience members in search of safe and appropriate herbal medicine for better healthcare rather than being used to win brand loyalty.
- Health regulators such as NAFDAC and herbal medicine practitioners should work together to ensure that consumers have the information they need about the benefits and the risks of the herbal medicines that are advertised.
- Traditional Medicine Practitioners (TMPs) that have real knowledge of ethno-medicine should be encouraged by the government and other stakeholders, including broadcast media outfits to come out and share their expertise for the common good.
- The broadcast media professionals in Nigeria should create special forums where TMPs could productively rub minds with western, orthodox medicine practitioners.
- National Broadcasting Commission (NBC), APCON and other relevant regulatory agencies should work hand in hand to verify the claims of TMPs before they are placed on the broadcast media in Nigeria. In this connection, agencies such as NAFDAC, Consumer Protection Agency (CPA), and Standard Organization of Nigeria (SON) should be further strengthened to check any unwholesome practice among the ranks of

TMPs in Nigeria.

Work Sited

- [1] World Health Organization, "National Policy on Traditional Medicine and Regulation of Herbal Medicines." Geneva: Report of WHO global survey, 2005.
- [2] E. Ernst, K. Schmidt, and B. Wider, "CAM research in Britain: The last 10 years," *Complement Ther Clin Pract*, 11:17–20, 2005.
- [3] P.M. Barnes, B. Bloom, and R. Nahin, "Complementary and alternative medicine use among adults and children: United States, 2007", *CDC National Health Statistics Report # 12*. 2008.
- [4] P. H. Canter and E. Ernst, "Herbal supplement use by persons aged over 50 years in Britain: Frequently used herbs, concomitant use of herbs, nutritional supplements and prescription drugs, rate of informing doctors and potential for negative interactions," *Drugs Aging*, 21:597–605, 2004.
- [5] D.M. Qato, G.C. Alexander, R.M. Conti, M. Johnson, P. Schumm, and S.T. Lindau, "Use of prescription and over-the-counter medications and dietary supplements among older adults in the United States," *JAMA*, 300:2867–78, 2008.
- [6] A. M. Loya, A. Gonzalez-Stuart, and J.O. Rivera, "Prevalence of polypharmacy, polyherbacy, nutritional supplement use and potential product interactions among older adults living on the United States-Mexico border: A descriptive, questionnaire-based study," *Drugs Aging*, 26:423–36, 2009.
- [7] P.A. Cohen, and E. Ernst, "Safety of herbal supplements A guide for cardiologists," *Cardiovascular Ther*, 28:246–53, 2010.
- [8] World Self Medication Industry and Association of the European Self Medication Industry, "Working together for self-care," *The World Vision Confluence Report*, Geneva, Switzerland, 1- 3, 2005.
- [9] J. O. Bamidele, W. O. Adebimpe, and E.A. Oladele, "Knowledge, attitude and use of alternative medical therapy amongst urban residents of Osun State, Southwestern Nigeria" *African Journal of Traditional, Complementary and Alternative Medicine*, 6(3): 281–288, 2009.
- [10] A. Adeyemi, "A rhetorical analysis of the discourse of advertising herbal medicine in Southwestern Nigeria," *Linguistic online*, 33, (1), 2008.
- [11] K.A. Oshikoya, O.F. Njokanma, J.A. Bello, and E.O. Ayorinde, "The use of prescribed and non-prescribed drugs in infants in Lagos, Nigeria," *J Med Sci*, 8:111-117, 2008.
- [12] E. Obi, P.U. Agbasi, N.A. Ezejiolor, C. Maduagwuna, and O.E. Orisakwe, "Safety warnings and first aid instructions on Nigerian traditional herbal remedies: are they adequate," *World J Med Sci*, 1:108-111, 2006.
- [13] E.O. Ajaiyeoba, C.O. Falade, O.I. Fawole, D.O. Akinboye, and G.O. Gbotosho, "Efficacy of herbal remedies used by herbalists in Oyo State Nigeria for treatment of plasmodium falciparum infections – a survey and an observation," *Afr J Med Sci*, 33:115-119, 2004.
- [14] MHRA policy division, "Public health risk with herbal medicines: An overview of medicines and healthcare products regulatory agency," London, 2008.
- [15] K.R. Awosola, E. Eregare, O.S. Omoera and M.A. Okhakhus, "Seeking solutions: Radio/Television advertisement and patients/non-patients, perception of traditional medicine," *International Journal of Research and Review*, Volume 6(1) 48-6, 2011.

- [16] E. Hillenbrand, E., "Improving traditional-conventional medicine collaboration: Perspectives from Cameroonian traditional practitioners," *Nordic Journal of African Studies*, 15(1), 1–15, 2006.
- [17] H. M. Wendy, "Consumer Behavior-strategy, levels, examples, types, company, hierarchy," *business.htm*, Retrieved from <http://www.referenceforbusiness.com> on 16th July, 2016
- [18] P. Kotler, and G. Armstrong, *Principles of Marketing*, 12th ed., New Jersey: Prentice Hall, 2008.

References

- Adelaja, A. (2006) **Nigeria boosts research into traditional medicine**. *Science and Development Network: news, views and information about science and technology and the development world* 2006. [<http://www.scidev.net/en/news/Nigeria-boosts-research-into-traditional-medicine.html>] (Accessed on August 26, 2014)
- Adesina, S.K, (2004) **Traditional medical care in Nigeria**. <http://www.onlinenigeria.com/links/LinksReadPrint.asp?blurb=574> Accessed on August 16, 2014)
- Adeyemi, A, (2008). *A Rhetorical Analysis of the Discourse of Advertising Herbal Medicine in Southwestern Nigeria*. *Linguistic online* 33, (1) (Accessed on August 26, 2014)
- Adum, A. N ,(2010). *HIV & AIDS controversies as a probable influence on believability OF HIV & AIDS communication in Southern eastern Nigeria*. (Ph.D thesis 2010). Awka, New Anambra State: Nnamdi Azikiwe University, Department of Mass Communication.
- Agbedo, O, (July 14, 2015). "Only foreign Agencies with selfish Agenda Oppose APCON'S Ad sector" *The Guardian Newspaper* on-line.
- Ajaiyeoba, E.O, Falade, C.O, Fawole, O.I, Akinboye, D.O, & Gbotosho, G.O, *et al.* (2004). **Efficacy of herbal remedies used by herbalists in Oyo State Nigeria for treatment of Plasmodium falciparum infections – a survey and an observation**. *Afr J Med MedSci* 33:115-119
- Awosola, K.R, Eregare, E. Omoera. O. S. & Okhakhus, M.A (2011). Seeking Solutions: of Radio/Television Advertisement and Patients/Non-Patients, perception of Traditional Medicine. *International Journal of Research and Review*. Volume 6(1) 48-6
- Ayimey.E.K, Awunyo-Vitor.D, & Gadawusu, J. K, (2013). Does Radio Advertisement Influence Sale of Herbal Products in Ghana? Evidence from Ho Municipality, Kumasi, Ghana. *Modern Economy*, 2013, 4, 652-658 <http://dx.doi.org/10.4236/me.2013.410070> Accessed from <http://www.scirp.org/journal/me> on 20th August, 2014)
- Bamidele J. O. Adebimpe, W.O. & Oladele, E.A (2009). Knowledge, Attitude and Use of Alternative Medical Therapy amongst Urban Residents of Osun State, Southwestern Nigeria *African Journal of Traditional, Complementary and Alternative Medicine*. 6(3): 281–288.
- Barnes P. M, Bloom B, & Nahin R, (2007). Complementary and alternative medicine use among Adults and children: United States, 2007. *CDC National Health Statistics Report # 12*. 2008. (Accessed date: 5 August, 2014). [PubMed]
- Callen-Marchione, K. S & Ownbey, S. F. (2008). "Association of Unethical Consumer Behavior and Social Attitudes," *Journal of Fashion Marketing and Management*, Vol. 12, No. 3, pp. 365-383. (Retrieved from <http://dx.doi.org/10.1108/13612020810889317> on 9th Sept. 2014)
- Canter, P. H, & Ernst, E. (2004). Herbal supplement use by persons aged over 50 years in Britain: Frequently used herbs, concomitant use of herbs, nutritional supplements and

- Prescription drugs, rate of informing doctors and potential for negative interactions. *Drugs Aging*.21:597–605. [PubMed]
- Chan M. F. E, Mok Y. S, Wong S.T. F, Tong F.M. C, Day C.C. K, Tang K, & Wong D. H. H, (2003). Attitudes of Hong Kong Chinese to traditional Chinese medicine and Western medicine: Survey and cluster analysis. *Complement Ther Med*. 11(2):103–9. [PubMed]
- Cohen, P.A, & Ernst, E, (2010).Safety of herbal supplements A guide for cardiologists. *Cardiovascular Ther*. 28:246–53. [PubMed]
- Dieringer, N.J, Kukkamma L, Grant W. S, & Ronald I. S, (2011). “Self-responsiveness to direct to consumer drug advertising and medication use” result of national survey. *BMC Health service research*.
- Donohue, J. M, & Berndt, E.R; (2004) “effects of direct-to-consumer advertising on medication choice: the case of antipressant” *Journal of public policy and marketing*, vol 23, 115-127.
- Ernst, E, Schmidt K, & Wider B. (2005). CAM research in Britain: The last 10 years. *Complement Ther Clin Pract*.11:17–20. [PubMed]
- Ernst, E. (2007) Herbal medicines: balancing benefits and risks. *Novartis Found Symp*; 282:154-67; discussion 167-72, 212 (www.ncbi.nlm.nih.gov.) (Retrieved on 5th August, 2014)
- Food and Drug Administration (2002) *Good Manufacturing Practices (GMP)/Quality System (QS)Regulation*
Accessed from[<http://www.fda.gov/cdrh/dsma/cgmphome.html>]
- Harms.J. & Kellner. D-Toward A Critical Theory of Advertising.
(Accessed from <http://www.illumination:kellner-Towards A Critical Advertising.htm> 28 August, 2014)
- Harrison, R. A, Holt, D, Pattison, D. J,& Elton P. J, (2004). Who and how many people are taking herbal supplements? A survey of 21,923 adults. *Int J VitamNutr Res*. 74:183–6.
- Health Canada Online (2002b) Advisory: Health Canada is advising consumers not to use any products containing kava. Jan. 16, 2002. Retrieved from\
[http://www.hc.sc.gc.ca/english/protection/warnings/2002/2002_ø2e.htm]
- Hechtman.L.National Herbalist Association of Australia NHAA: An overview of Herbal Medicine. Retrieved from www.nhaa.org.au/publicinfomation-resources on June 6th, 2014
- HerbaMedicine-Better Health Channel (2011).
Retrieved from <http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/page> on 6th June, 2014
- Hillenbrand, E. (2006). Improving traditional-conventional medicine collaboration: Perspectives from Cameroonian traditional practitioners. *Nordic Journal of African Studies*, 15(1), 1–15.
- Ilondu, M., & Okoegwale, E.E. (2002). Some medicinal plants used in the management of dermatophytic diseases in Nigeria. *African Journal of Environmental Studies*, 3(1&2), 140-141.
- Jon.C, & Ted .J, (2008).Herbal Medicine Research and Global Health-an analysis. *World Health Organization Bulletin (WHO REPORT, 2008)* Accessed from www.who.int/bulletin/volumes/86/8/07-042820/en/Wikipedia.org.on 16th August, 2014
- Kotler. V, Armstrong, .G, Saunders J. & Wong, V, (1999). “Principles of Marketing,”
- Kur, J.T, (2004). The Perceptual Impact of Online Advertising on Internet Users in Nssuka, Town. *Biannual Journal of Department of Mass Communication, UNN*. Vol. 1(1): 34

- 35 Prentice-Halls, Cambridge, pp. 98-102.
- Loya A. M, Gonzalez-Stuart A, & Rivera J. O, (2009). Prevalence of polypharmacy, Polyherbacy, nutritional supplement use and potential product interactions among older Adults living on the United States-Mexico border: A descriptive, questionnaire-based Study. *Drugs Aging*.26:423–36. [PubMed]
- MHRA policy division (2008). Public Health Risk with Herbal Medicines: An Overview Medicines and Healthcare Products Regulatory Agency. London (Retrieved from www.mhra.gov.uk .on 5th August, 2014)
- NAFDAC NIGERIA: **Journey: some administrative guidelines.** (Accessed from <http://www.nafdacnigera.org/journey.html> on 26th August,2014)
- Obi, E, Agbasi, P.U, Ezejiofor, N.A, Maduagwuna, C & Orisakwe, O.E (2006). **Safety warnings and first aid instructions on Nigerian traditional herbal remedies: are they adequate.** *World J Med Sci*, **1**:108-111.
- Okeke, T.A, Okafor, H.U, & Uzochukwu, B.S (2006). **Traditional healers in Nigeria: Perception of cause, treatment and referral practices of severe malaria.** *J BiosocSci*, **38**:491-500
- Okunna.C.S (2002). Teaching Mass Communication: A multi- Dimensional Approach. New Generation Book Enugu, Nigeria.
- Oshikoya K.A, Njokanma O.F, Bello J.A, & Ayorinde E.O (2008). **The use of prescribed and non-prescribed drugs in infants in Lagos, Nigeria.** *J Med Sci*, **8**:111-117.
- Oshikoya K.A, Njokanma O.F, Bello J.A, & Ayorinde, E.O (2007). **Family self-medication for children in an urban area of Nigeria.** *PaediatrPerinat Drug Ther*, **8**:124-130.
- Qato, D. M, Alexander, G. C, Conti, R. M, Johnson, M, Schumm, P, & Lindau, S. T, (2008). Use of prescription and over-the-counter medications and dietary supplements among older adults in the United States. *JAMA*.300:2867–78. [PMC free article]
- Rados C. (2004). “Truth in advertising” RX Drugs Ads come to Age FDA CONSUME **36(4): 20-27** [PubMed]
- Rajagopal, J, (2010). “Role of Radio Advertisements as Behavioral Driver among Urban Consumers,” Graduate School of Administration and Management (EGADE) Monterrey Institute of Technology and Higher Education, ITESM Working Paper.
- Ranjbarian. B, Kazemi. A, & Shokrollahi.S, (2013). Investigating the Impact of Herbal Medicines Marketing Mix and Physicians' Product Involvement on Prescription of these Drugs *International Journal of Academic Research in Business and Social Sciences*. Vol. 3, No. 11 ISSN: 2222-6990 Accessed from www.hrmars.com/journals on 29th August, 2014.
- Richardson, M. (2006) “Commercial Broadcasting and Local Content: Cultural Quotas, Advertising and Public Stations,” *Economic Journal*, Vol. 116, No. 15, pp. 605-625. Retrieved from <http://dx.doi.org/10.1111/j.1468-0297.2006.01094> on 19th Sept, 2014
- Tyler, V.E. (2000) Herbal medicine: From the past to the future. *Public Health Nutr.*,
- Wendy, H.M, (2014). Consumer Behavior-strategy, levels, examples, types, company, hierarchy, business.htm, Retrieved from <http://www.referenceforbusiness.com> on 16th August, 2014
- World Health Organization (2003): **The Africa Malaria Report 2003. WHO/CDS/MAL/2003.1093, World Health Organization/UNICEF.**
- WHO (1993) *Research Guidelines for Evaluating the Safety and Efficacy of Herbal Medicines*, Manila
- WHO (1996) *Annex II. Guidelines for the Assessment of Herbal Medicines* (WHO Technical Report Series No. 863), Geneva
- WHO Essential Medicines and Health Products Information Portal, (2014) (Accessed from

- www. Human Info NGO. On August 20th, 2014).Last updated on June 25 2014.
- World Self-Medication Industry, (2008) Advertising of nonprescription medicines to the public: A Significant contributor to healthcare (WSMI, 2008)
- World Health Organization (WHO, 2005).National Policy on Traditional Medicine and Regulation of Herbal Medicines. Geneva: Report of WHO global survey.
[PubMed]
- World Self-Medication Industry. (1999).Guiding principles in Self-Medication.WSMI: London, UK.
- World Self Medication Industry and Association of the European Self Medication Industry (2005) Working together for self-care-the world vision confluence report, Geneva, Switzerland, 1- 3
- Wosinska, M. (2005). Direct-to-Consumer Advertising and Drug Therapy Compliance, Journal of Marketing Research, 42(3), pp. 323-33