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Assessing the Effectiveness of Electronic Media in Disseminating Malaria Prevention Information in Lusaka District: A Case of Diamond TV

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Abstract

Malaria remains a major public health challenge in Zambia, contributing to high levels of morbidity and mortality, particularly among children and pregnant women. While national public health campaigns are critical, it is equally important to assess how media platforms shape awareness, perceptions, and preventive behaviours. Diamond TV, as one of the leading broadcasters in Lusaka, plays a potentially significant role in malaria awareness; however, its effectiveness has not been adequately examined.

This study aimed to evaluate the extent to which malaria-related messages on Diamond TV influence audience knowledge, visibility, clarity, frequency, and cultural appropriateness, as well as their effectiveness in motivating preventive action.

A descriptive research design was adopted, employing both quantitative and qualitative methods. Data were collected from 50 respondents representing diverse households in Lusaka through structured questionnaires. Quantitative data were analysed using descriptive statistics to identify trends and patterns, while qualitative responses were subjected to thematic analysis to generate deeper insights.

The findings revealed that malaria messages on Diamond TV significantly contributed to raising awareness, improving knowledge, and promoting preventive actions such as mosquito net usage, water drainage, and early treatment. The study provides valuable implications for media practitioners, public health advocates, and policymakers by highlighting effective communication strategies. Ultimately, it underscores the critical role of media in advancing malaria prevention and strengthening public health outcomes in Zambia.

Keywords: Malaria Prevention, Media Communication, Diamond TV, Public Health, Zambia

1. Introduction

1.1 Background

Malaria remains a critical public health concern in Zambia and continues to be one of the leading causes of illness and death, particularly among children under five and pregnant women (WHO, 2023). Lusaka District, despite its urban status, still experiences recurring outbreaks of malaria, attributed to factors such as climate variability, population density, and migration from endemic rural areas (Ministry of Health, 2022). These trends underscore the urgent need for robust and consistent health communication strategies to sensitize the public on malaria prevention measures.

As part of Zambia's National Malaria Elimination Strategy, effective public health messaging has been prioritized. Traditional methods such as community health talks and posters have been complemented by electronic media, including radio, television, and digital platforms, to increase outreach (NMEC, 2021). Among these, television has demonstrated significant potential in reaching wider and more diverse urban audiences on time.

Electronic media, especially television, have proven to be an effective medium in influencing health behaviors due to their visual and auditory appeal. Unlike print or face-to-face communication, television combines motion, sound, and imagery to create compelling narratives that can engage audiences more deeply (Mboera *et al*., 2018). In the Zambian context, Diamond TV has emerged as a major player in health communication, often partnering with institutions such as the Ministry of Health, the National Malaria Elimination Centre (NMEC), and international organizations like UNICEF and WHO to air public health programmes.

Diamond TV's strategic role in health communication makes it a suitable focus for this study. The broadcaster is known for its

blend of news, educational content, and entertainment, which are frequently used to embed public health messages. However, existing literature reveals gaps in empirical assessment, particularly concerning malaria prevention messaging. Despite Diamond TV's frequent collaborations with public health institutions to air public service announcements and educational segments, little is known about the frequency, reach, and clarity of these messages. Previous studies have shown that media campaigns can significantly influence knowledge and practices related to malaria prevention (Mboera *et al*., 2018; Mwangala *et al*., 2021), but few have analyzed the effectiveness of television content in the Zambian context, especially within urban districts like Lusaka.

This study is situated within the broader effort to strengthen Zambia's malaria communication framework. By examining Diamond TV's malaria-related content and assessing audience reception, the research provides valuable insights into how electronic media can be more effectively leveraged to promote health in Lusaka District and beyond.

1.2 Statement of the Problem

Despite significant efforts by the Zambian government and its international partners, malaria continues to pose a serious public health challenge in the country, especially in urban and peri-urban areas like Lusaka District. Interventions such as insecticide-treated nets (ITNs), indoor residual spraying (IRS), and rapid diagnostic testing have contributed to some progress in controlling the disease (WHO, 2023). However, the continued prevalence of malaria indicates that prevention strategies must be reinforced with effective communication and behavioral change campaigns (Chanda *et al*., 2019) [5].

Mass media, particularly television, have been identified as a vital tool for communicating public health messages due to their broad reach, multisensory appeal, and capacity to influence social norms (Tufte, 2017). In Zambia, Diamond TV has emerged as a leading broadcaster with a growing urban audience and has often partnered with public health institutions to deliver health education content. However, despite this potential, little research has examined its effectiveness in communicating malaria prevention messages to the intended audience. Current literature offers general insights into the role of media in malaria prevention, but little is known about the specific contributions of Diamond TV, particularly in the context of Lusaka. There is no existing empirical assessment of the frequency with which Diamond TV airs malaria-related programming, the degree to which viewers are exposed to such broadcasts, or whether the messages are perceived as clear, trustworthy, and actionable. Without this information, public health communication strategies may continue to rely on assumptions, potentially reducing the impact of media campaigns (Mboera *et al*., 2018; Mutale *et al*., 2020).

This study, therefore, seeks to fill this gap by systematically evaluating the effectiveness of Diamond TV in disseminating malaria prevention information. It focuses on three key dimensions: The frequency of malaria-related broadcasts, the extent of audience exposure, and the clarity of the information presented. The study generates empirical data that could assist media houses, health professionals, and policymakers in refining and strengthening their communication approaches.

Ultimately, the findings of this research are contribute toward the development of evidence-based media strategies that enhance public understanding of malaria prevention and encourage positive health behaviors in Lusaka District.

1.3 Objectives

1.3.1 General Objectives

To assess the effectiveness of Diamond TV in disseminating malaria prevention information to audiences in Lusaka District.

1.3.2 Specific Objectives

1. To determine the frequency of Diamond TV broadcasts on malaria prevention information in Lusaka District.
2. To assess the extent of audience exposure to malaria prevention content aired on Diamond TV.
3. To evaluate the clarity of malaria prevention messages aired on Diamond TV.

1.4 Research Questions

1. How frequently does Diamond TV broadcast malaria prevention messages?
2. To what extent are audiences in Lusaka District exposed to Diamond TV's malaria prevention messages?
3. How do audiences perceive the clarity of malaria prevention messages broadcast on Diamond TV?

1.5 Theoretical Framework

This study is guided by the Health Belief Model (HBM), a widely recognized psychological model that explains and predicts health-related behaviors by focusing on the attitudes and beliefs of individuals (Rosenstock, 1974). The HBM suggests that individuals are more likely to engage in preventive health actions if they perceive themselves to be at risk of a health problem (perceived susceptibility), believe the health problem has serious consequences (perceived severity), believe that taking a specific action would reduce their susceptibility or severity (perceived benefits), and recognize few barriers to taking that action (perceived barriers) (Glanz, Rimer & Viswanath, 2015) [8].

In the context of this study, the HBM is utilized to assess how malaria prevention messages disseminated via Diamond TV influence viewers' perceptions and ultimately their intentions to adopt malaria preventive behaviours. For example, the frequency and clarity of messages on Diamond TV may affect the audience's perceived susceptibility to malaria, heightening awareness of the risk in Lusaka District (Janz & Becker, 1984) [11]. Similarly, the model allows for an exploration of how viewers evaluate the severity of malaria and the benefits of preventive actions, such as the use of insecticide-treated nets or environmental management (Champion & Skinner, 2008) [4].

Moreover, perceived barriers, such as the accessibility of preventive tools or trust in the media source, are considered in understanding how effectively Diamond TV communicates malaria prevention. This theoretical approach supports the evaluation of how health messages are not just broadcast but are received and acted upon by the target audience (Becker, 1974) [2]. The HBM's focus on individual cognition aligns with the study's aim to investigate audience exposure and clarity of malaria prevention information, thereby providing a robust framework for interpreting the effectiveness of electronic media campaigns in health promotion (Carpenter, 2010) [3].

In addition to individual perceptions, the model is

instrumental in designing survey instruments and interview questions to gauge viewers' beliefs and attitudes following exposure to Diamond TV's content. This provide insight into potential gaps in messaging and identifies areas where the communication strategy could be enhanced to increase preventive behaviors (Strecher & Rosenstock, 1997).

2. Literature Review

This chapter reviews existing literature on media and malaria prevention, structured around thematic areas that correspond with the study objectives. The general objective of this study is to assess the effectiveness of Diamond TV in disseminating malaria prevention information to audiences in Lusaka District. The specific objectives include examining the frequency of broadcasts, audience exposure, and clarity of malaria prevention messages aired on Diamond TV.

2.1 Frequency of Diamond TV Broadcasts on Malaria Prevention Information

The frequency of health-related messages in mass media significantly influences public knowledge, attitudes, and behaviors toward disease prevention. Repeated exposure to malaria prevention messages increases the likelihood that audiences will retain information and adopt protective behaviors such as the use of insecticide-treated nets (ITNs), indoor residual spraying (IRS), and environmental management (Noar, 2006; Wakefield, Loken & Hornik, 2010; WHO, 2021). Frequent and strategically scheduled broadcasts, especially during peak viewing times, are more likely to engage larger audiences and reinforce key prevention behaviors (Schiavo, 2013; Snyder, 2007).

The Health Belief Model (HBM) emphasizes that repeated messaging strengthens perceptions of susceptibility and severity, motivating health behavior change (Rosenstock, 1974; Carpenter, 2010 [3]). Regular broadcasts also help address social and cultural barriers, such as myths or fatalistic attitudes, and can enhance message uptake. Moreover, monitoring broadcast frequency enables alignment with malaria transmission seasons, ensuring that messaging is most impactful during critical periods (Ministry of Health, 2022). Overall, understanding the frequency of Diamond TV broadcasts provides insight into the extent to which media interventions can effectively engage the Lusaka audience and sustain malaria prevention behaviors.

2.2 Audience Exposure to Malaria Prevention Content

Audience exposure is a key determinant of the effectiveness of media campaigns. It reflects both the reach and engagement of viewers with malaria prevention messages, including how often and how deeply they interact with the content (Neuman, 2011; Atkin & Rice, 2013 [1]). High exposure is necessary for information to influence knowledge, attitudes, and behaviors. Measurement of exposure includes both quantitative metrics (e.g., viewership ratings, frequency) and qualitative aspects (e.g., attention, comprehension) (Snyder, 2007).

Factors such as viewer habits, socio-economic status, access to television, competing media, and cultural relevance affect exposure levels (Glenton *et al*., 2013 [9]; Munyongwe *et al*., 2021). The HBM supports the idea that adequate exposure is required to activate perceptions of malaria risk and benefits of preventive actions (Rosenstock, 1974). Disparities in exposure across demographic groups, including age, gender, education, and urban-rural residency, highlight the need for targeted communication strategies to ensure equitable access to malaria prevention information (CSO, 2020). Evaluating audience exposure thus provides essential evidence for optimizing message reach and effectiveness in Lusaka District.

2.3 Clarity of Malaria Prevention Messages

Clarity in health communication refers to how easily the intended audience can understand and act upon the information presented. Clear messaging is essential for improving comprehension, building trust, and promoting behavioral outcomes (Schiavo, 2013; Atkin & Rice, 2013 [1]). Ambiguous or overly technical messages often fail to change behavior, especially in multilingual and diverse literacy contexts such as Zambia (Glanz, Rimer & Viswanath, 2015; Chanda *et al*., 2019) [8, 5].

The HBM emphasizes that individuals are more likely to adopt preventive behaviors when risks and recommended actions are clearly communicated (Rosenstock, 1974; Carpenter, 2010 [3]). Evidence from Zambia and other African countries shows that messages using local languages, relatable examples, visual demonstrations, and actionable instructions improve adoption of preventive behaviors like ITN use and larval control (Kalungwana *et al*., 2020; Chikaphupha *et al*., 2016; Ochieng *et al*., 2018).

Non-verbal elements such as visuals, subtitles, tone, and pacing also affect clarity, particularly among viewers with limited formal education or media literacy (Glanz, Rimer & Viswanath, 2015) [8]. Diamond TV, with its growing audience and health partnerships, has the potential to deliver effective malaria prevention messages if clarity is prioritized. Ensuring that messages are understandable, culturally relevant, and actionable is crucial for fostering meaningful behavior change in Lusaka District (Hornik, 2002 [10]; Agyemang *et al*., 2022).

3. Research Methodology

This chapter presents the methodological approach adopted to achieve the study objectives, providing a detailed account of the research design, population, sampling strategies, data collection methods, data analysis, and triangulation. The methodology is structured to comprehensively assess the effectiveness of Diamond TV in disseminating malaria prevention information to audiences in Lusaka District.

3.1 Research Design

The study employs a mixed-methods research design, combining quantitative and qualitative approaches to capture both measurable trends and deeper insights into malaria communication. The quantitative component involves structured questionnaires administered to residents of Lusaka District. These questionnaires are designed to quantify key variables, such as the frequency of television viewership, perceived clarity of malaria prevention messages, and reported behavioral responses. By focusing on numeric patterns and standardized responses, the quantitative data allow for the identification of trends across a wide audience sample.

The qualitative component involves semi-structured interviews with key stakeholders, including Diamond TV staff involved in content development and Ministry of Health officials responsible for health communication and

malaria control. These interviews explore the motivations behind messaging strategies, challenges in conveying malaria information effectively, and perceptions of audience engagement. This qualitative approach captures nuances that cannot be easily measured through survey instruments alone.

Complementing these two approaches, a systematic content analysis of Diamond TV programming aired between 2023 and 2025 is conducted. This analysis examines the frequency, timing, clarity, and stylistic features of malaria prevention messages, allowing for an independent assessment of the actual content delivered to viewers. By integrating these three methods, the study ensures that data from different sources inform and validate one another, providing a comprehensive understanding of how televised messages influence malaria prevention awareness and behavior.

3.2 Target Population

The study focuses on three groups that are central to malaria communication in Lusaka District. The primary population comprises adult residents, aged eighteen years and above, who are the intended audience for malaria prevention campaigns on Diamond TV. These individuals are essential in evaluating the reach, comprehension, and influence of the messages on household health behaviors. Efforts are made to include a diverse range of participants, reflecting differences in gender, educational attainment, and media access to capture the socio-economic and cultural heterogeneity of Lusaka.

The second group includes media professionals from Diamond TV, particularly those involved in content production, programming, and health communication. These participants provide insight into editorial decisions, message framing, and the operational challenges associated with broadcasting malaria prevention information. Finally, Ministry of Health officials, especially those engaged in malaria control and health promotion, are included to understand how public health priorities are translated into communication strategies and how collaboration with media outlets enhances message dissemination. By engaging both message creators and consumers, the study captures a holistic view of malaria communication dynamics.

3.3 Sampling Design

To ensure representativeness and depth, the study employs two complementary sampling strategies. A stratified random sampling technique is used to select residents of Lusaka District. The population is divided into subgroups based on demographic characteristics such as age, gender, education, and socioeconomic status, and participants are randomly selected within each subgroup. This method minimizes bias and captures a diverse cross-section of the urban population, reflecting variations in media access and health knowledge.

For the qualitative component, purposive sampling is employed to select key informants from Diamond TV and the Ministry of Health. Participants are chosen based on their expertise, roles, and direct involvement in malaria communication or media production. This deliberate selection ensures the collection of in-depth insights from individuals with specialized knowledge, providing rich contextual understanding that complements the quantitative data.

3.4 Sample Size Determination

The quantitative sample size was determined to ensure reliability while remaining feasible. Estimates of Lusaka's television-viewing population indicate approximately 900,000 potential viewers of Diamond TV. Using a margin of error of 8.2% suitable for exploratory research, the calculated sample size is 150 respondents. This number allows meaningful analysis of audience exposure, comprehension, and behavioral responses. The qualitative component, comprising semi-structured interviews, will involve approximately fifteen key informants, and the study is further enriched by a content analysis of selected broadcast segments. This methodological triangulation provides depth, context, and validation for the findings.

3.5 Data Collection Methods

Data collection combines questionnaires, interviews, and content analysis to capture both quantitative and qualitative dimensions. Structured questionnaires are administered in person to gather data on participants' exposure to malaria prevention content, comprehension, and behavioral responses. The use of trained research assistants ensures high response rates and clarity in understanding the questions.

Semi-structured interviews with key informants offer flexibility to explore unanticipated themes while maintaining focus on message creation, dissemination challenges, and audience engagement. These discussions provide insights that contextualize survey results and shed light on the intentions and constraints behind message production.

Content analysis of selected Diamond TV programs evaluates the actual broadcast content, examining frequency, timing, clarity, language simplicity, visual aids, and alignment with public health standards. This method offers an objective perspective on the effectiveness of the televised messages, enabling cross-validation with audience perceptions and stakeholder insights.

3.6 Data Analysis

Quantitative data from questionnaires will be analyzed using SPSS software. Descriptive statistics, including frequencies, percentages, means, and standard deviations, will summarize respondent characteristics and key variables. Cross-tabulations will explore relationships between demographics and exposure or comprehension, while inferential tests such as chi-square or t-tests will assess the significance of observed patterns.

Qualitative data from interviews and content analysis will be subjected to thematic analysis. Recorded interviews will be transcribed, and both interviews and broadcast content will be coded to identify recurring patterns, concepts, and categories. These codes will then be grouped into overarching themes reflecting perceptions, message characteristics, and challenges in malaria communication. Triangulation, peer review, and audit trails will enhance the credibility and trustworthiness of qualitative findings.

3.7 Triangulation

Triangulation is employed to strengthen the validity, reliability, and overall credibility of the study. By integrating findings from questionnaires, interviews, and content analysis, the research captures the phenomenon of

malaria message dissemination from multiple perspectives. Convergence of findings across these methods increases confidence in conclusions, while discrepancies highlight areas such as gaps in message clarity or audience engagement. Triangulation also facilitates the detection of hidden patterns and contradictions, offering a more nuanced and holistic understanding of how Diamond TV communicates malaria prevention information to the Lusaka audience. This multi-method approach ensures that the study produces actionable insights for improving public health communication strategies through electronic media in Zambia.

4. Results/Findings

4.1 Presentation of Research Findings

4.1.1 Age Group of Respondents (n = 50)

Age Group	Frequency	Percentage (%)
18 – 24	45	30
25 – 34	54	36
35 – 44	30	20
45 and above	21	14
Total	150	100

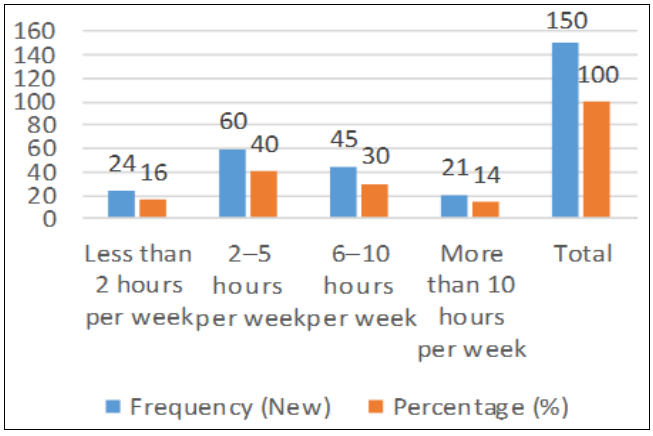
The findings show that the majority of respondents (36%) were aged between 25–34 years, followed by 18–24 years (30%). Those aged 35–44 years accounted for 20%, while only 14% were 45 years and above. This suggests that the study sample was largely composed of young to middle-aged adults, which is expected since these groups are among the most active television viewers in Lusaka and are critical in household decision-making about health matters such as malaria prevention.

4.1.2 Gender of Respondents (n = 50)

Gender	Frequency	Percentage (%)
Male	81	54
Female	69	46
Total	150	100

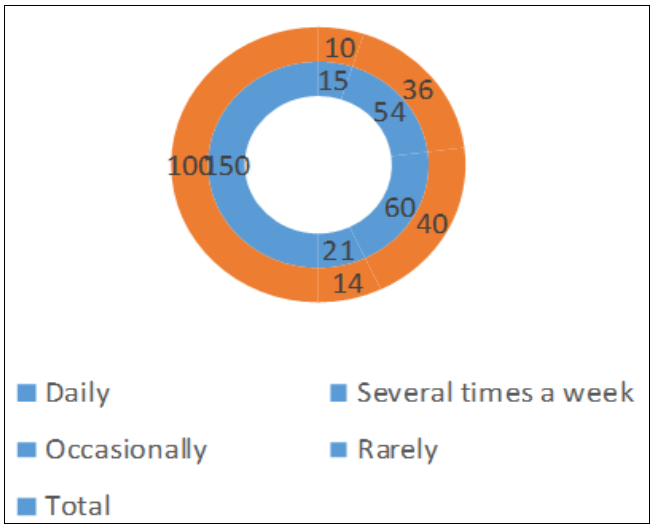
The results indicate that 54% of respondents were male, while 46% were female. This shows a fairly balanced gender distribution, with males slightly outnumbering females. Such representation is important because both genders play a role in malaria prevention practices, and the findings reflect perspectives from both sides of the population in Lusaka District.

4.1.3 Average hours



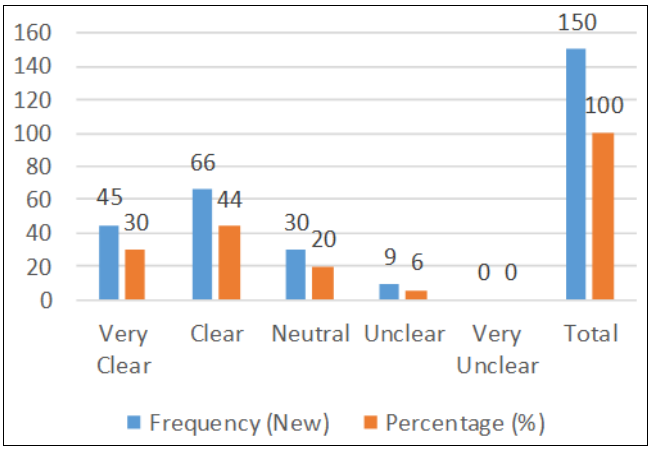
The majority of respondents (40% or 60 respondents) indicated they see malaria-related messages occasionally, while 36% (54 respondents) encounter them several times a week, showing moderate coverage of malaria awareness. Only 10% (15 respondents) reported seeing such messages daily, suggesting limited consistent messaging. A smaller group (14% or 21 respondents) rarely sees malaria-related content, pointing to gaps in continuous health communication.

4.1.4 Frequency of malaria-related messages on Diamond TV



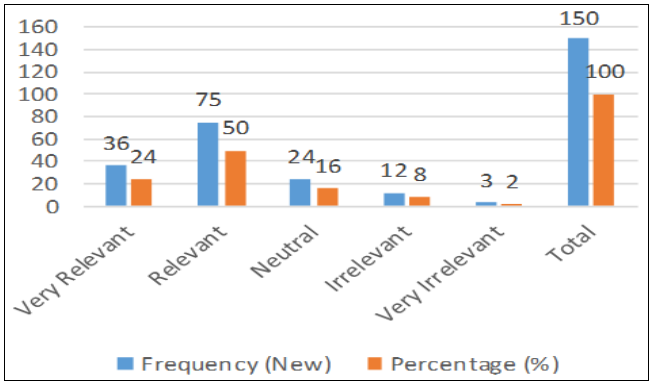
The majority of 60 respondents (40%) indicated they see malaria-related messages occasionally, while 36% encounter them several times a week, showing moderate coverage of malaria awareness. Only 10% reported seeing such messages daily, suggesting limited consistent messaging. A smaller group (14%) rarely sees malaria-related content, pointing to gaps in continuous health communication.

4.1.5 Clarity of malaria messages language



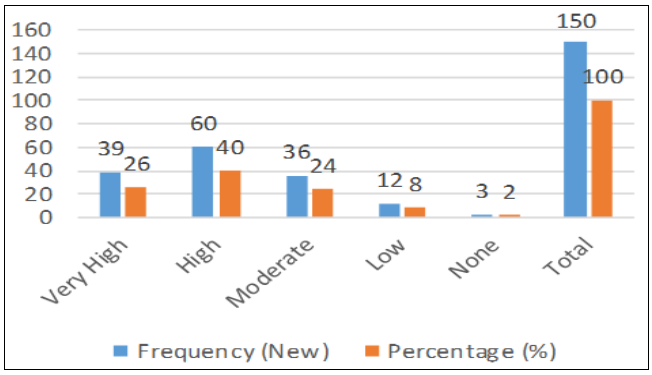
Most respondents (44% or 66 respondents) rated the language of Diamond TV's malaria messages as clear, while 30% (45 respondents) considered it very clear. Neutral responses accounted for 20% (30 respondents), and only a few (6% or 9 respondents) found the messages unclear, with none rating them as very unclear. This suggests that the language used is generally understandable and accessible to the audience.

4.1.6 Malaria messages relevance



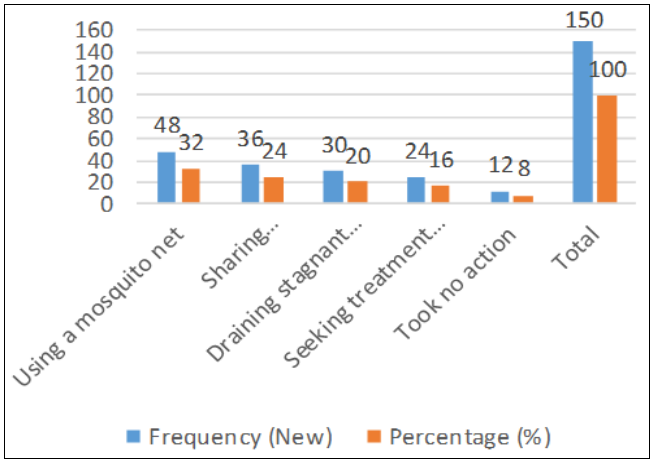
Half of the respondents (50% or 75 respondents) found the malaria content on Diamond TV relevant to their community, while 24% (36 respondents) considered it very relevant. Neutral responses made up 16% (24 respondents), and smaller proportions found it irrelevant (8% or 12 respondents) or very irrelevant (2% or 3 respondents). This indicates that the malaria messages largely resonate with viewers' local experiences and needs.

4.1.7 Knowledge level after viewing



Most respondents reported a high (40%) or very high (26%) level of knowledge about malaria prevention after watching Diamond TV's messages. About a quarter (24%) felt their knowledge was moderate, while only small numbers rated it as low (8%) or none (2%). This shows that the malaria messages are generally effective in enhancing viewers' awareness and understanding of prevention methods.

4.1.8 Preventive actions



The most common preventive action reported was using a mosquito net (32%), followed by sharing information with others (24%). Some respondents also took measures like draining stagnant water (20%) and seeking treatment early (16%). Only 8% indicated that they took no action after watching the malaria messages. This suggests that Diamond TV's messaging prompted positive health behaviors, especially in mosquito net usage and information sharing.

4.2 Discussion

Respondents held varied professional roles ranging from media programming officers to public health communication specialists, giving them diverse but complementary insights. Many had worked in malaria communication for more than five years, which gave them deep familiarity with both the challenges and successes of media-based awareness campaigns. Some institutions had formalized communication strategies, while others worked through collaborations with the Ministry of Health. As one respondent explained, "Our strategy is not always written down, but we align with national campaigns whenever the Ministry of Health initiates them." This showed that malaria messaging often depended on seasonal drives and partnerships rather than continuous independent strategies.

Findings revealed that Diamond TV consistently aired malaria prevention programs, though frequency often increased during malaria-prone seasons. Messages were mostly broadcast in the evenings when families were likely gathered to watch the news, and also during specialized health segments. The youth, women, and families with children were the most frequently targeted audiences. One key informant noted, "We usually slot malaria messages during prime time, especially in the news hour, because that's when most households are tuned in."

However, gaps were also observed in terms of coverage. Some respondents highlighted that older audiences and residents in peri-urban areas did not always benefit equally. As one participant remarked, "Our biggest challenge is reaching people on the outskirts who may not watch TV regularly, yet they are among the most vulnerable." This points to the strength of Diamond TV in reaching urban audiences, but also the need for complementary approaches in underserved areas.

Respondents emphasized that the station worked hard to ensure malaria messages were both clear and accessible. The use of simple language and relatable demonstrations was cited as key. As one health officer explained, "We avoid medical jargon and instead show practical steps like how to properly hang and use a mosquito net because people remember what they see." The frequent use of both English and local languages (notably Nyanja and Bemba) made the messages more inclusive.

Still, some challenges were acknowledged. For example, a media respondent admitted, "Sometimes the campaigns are designed by technical experts, and we find that the language is too heavy for ordinary viewers." This highlighted an ongoing tension between expert-driven content and audience-friendly communication.

Overall, Diamond TV's malaria messages were regarded as impactful in raising knowledge and influencing preventive behavior. Respondents pointed to increased awareness of net usage, early testing, and treatment-seeking behaviors as clear outcomes of sustained messaging. One participant reflected, "We've seen families in our community actually

change their habits, especially using nets more consistently after watching our programs."

Certain communities showed more visible change, particularly those with school-going children. As another informant described, "Children tend to pick up these messages quickly and remind their parents about malaria prevention at home, so they act as bridges for behavior change."

Yet, challenges were noted in rural and peri-urban parts of Lusaka. Television penetration was limited, and socio-economic barriers such as lack of nets or poor housing structures undermined behavior change. As one respondent warned, "Information alone is not enough; without resources like nets, people can't always act on what they've learned." This underscored the idea that while Diamond TV was effective in raising awareness, broader systemic support was needed to translate knowledge into lasting action.

4.3 Conclusion

The findings of the study lead to the conclusion that Diamond TV plays an important and influential role in malaria communication. Its programs have demonstrated the ability to reach diverse audiences and to shape public understanding of malaria prevention practices. The use of prime-time slots for broadcasting, the inclusion of health-focused programs, and the incorporation of visuals and demonstrations were particularly effective in ensuring that messages were both visible and understandable to audiences. Respondents consistently pointed out that they learned about preventive practices such as sleeping under treated mosquito nets, recognizing early symptoms, and seeking treatment promptly from these broadcasts. In this way, Diamond TV has not only raised awareness but also fostered tangible behavioral change in many households.

Nonetheless, the study concludes that challenges remain in ensuring equal access and inclusivity. A significant gap was identified between urban and peri-urban audiences. While urban residents were well served by Diamond TV programming, those in peri-urban areas had more limited exposure due to factors such as lower television ownership and inconsistent electricity supply. Furthermore, although messages were generally clear, some content contained technical jargon that alienated viewers with lower levels of education. The emphasis on prevention over other aspects of malaria, such as treatment-seeking behavior and community mobilization, also narrowed the scope of the messaging.

Another conclusion that emerges is that although television can strongly influence knowledge and attitudes, behavioral change is often constrained by broader socio-economic realities. Several respondents emphasized that while families may understand the importance of mosquito nets, they are unable to act on this knowledge when such resources are unavailable or unaffordable. Similarly, while messages encourage early testing and treatment, weak health infrastructure in some communities makes it difficult for individuals to put this advice into practice. This underscores that while media like Diamond TV can raise awareness, the translation of knowledge into action requires systemic support from government and health providers.

Overall, Diamond TV should be recognized as a vital medium in the fight against malaria, but its effectiveness is greatest when it operates in synergy with other health communication platforms and with supportive public health interventions. The study concludes that the station's current efforts have laid a strong foundation for malaria prevention, but additional measures are necessary to strengthen and sustain the impact of these initiatives.

5. Acknowledgments

Based on the findings of the study, a number of recommendations are advanced to enhance the role of Diamond TV and other stakeholders in malaria prevention communication.

One of the main recommendations is that Diamond TV should increase the frequency and consistency of malaria-related broadcasts. Currently, messaging is concentrated around peak malaria seasons, but health communication is most effective when it is sustained over time. Regular programming throughout the year would ensure that malaria awareness remains constant in the public consciousness rather than being perceived as a seasonal concern. By reinforcing messages on a continuous basis, Diamond TV can help normalize preventive behaviours and integrate them into daily routines.

In addition to frequency, there is a need to diversify the formats used in disseminating malaria information. News bulletins and health shows have proven effective, but the findings suggest that audiences are more likely to remember and act on information presented in relatable formats such as dramas, talk shows, or community-based storytelling. By embedding malaria prevention messages within entertainment content, Diamond TV could expand its reach to audiences who may not regularly engage with formal health programming. This approach could also enhance emotional connection and improve recall, thereby increasing the likelihood of behavioral change.

Language use is another critical area requiring improvement. Although Diamond TV employs a mix of English, Nyanja, and Bemba, the findings suggest that more emphasis should be placed on simplifying language and reducing technical terminology. Messages that are too scientific can be difficult for the general audience to grasp, particularly for those with lower levels of education. Expanding the use of local languages and incorporating culturally familiar expressions would not only make the messages clearer but also foster a stronger sense of relevance and ownership among viewers.

The study also recommends that Diamond TV broaden its target audience. While youth and women were identified as the primary focus of malaria campaigns, older adults and residents in peri-urban communities remain highly vulnerable and should not be overlooked. Developing tailored content for these groups, such as programs that address the unique risks faced by older populations or the structural challenges experienced by peri-urban residents, would help ensure that malaria prevention communication reaches those most in need.

At the policy level, the Ministry of Health and its partners should ensure that communication campaigns are linked to the provision of practical resources. Information urging people to use mosquito nets is of limited value if nets are not available in households. Similarly, urging early treatment is less effective when health facilities are understaffed or located far from communities. Therefore, public health campaigns should be integrated with interventions that increase access to preventive tools and medical services.

This would ensure that the knowledge gained from television campaigns can be translated into meaningful action.

Health communication practitioners are also encouraged to continue refining their approaches. Demonstrations of preventive practices should remain central to television programming, as audiences are more likely to act on behaviors they can clearly visualize. Continuous audience research should be undertaken to monitor the clarity, cultural relevance, and effectiveness of malaria messages, allowing for ongoing improvements. Practitioners should also build on the finding that children and youth play a crucial role in influencing family health practices. Campaigns can deliberately position young people as peer educators, empowering them to act as bridges for health knowledge within their households and communities.

Finally, collaboration between media outlets, policymakers, and communities should be strengthened. Television messages can only achieve maximum impact if they are reinforced by community health workers, schools, churches, and other grassroots structures. By linking mass media communication with interpersonal outreach, malaria prevention campaigns can achieve greater penetration and sustainability.

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