

The Meaning People Make of HIV Posters: a Case Study on Health Improvement at Jirapa District in the Upper West Region of Ghana

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Abstract

Posters are visual communication methods used to convey messages to the public as one of health promotion strategies to communicate to the general public on health-related issues on the awareness especially of HIV/AIDS. However, the extent to which the intended communication gets to the community on is unknown. The question is what impact does HIV posters have on the people? Are posters communicating to the people as intended? The objective of this study therefore is to assess the meaning people make on HIV posters in the Jirapa district of the Upper West region of Ghana. A cross-sectional survey using questionnaires and interviews was adopted and a mixed method [qualitative and quantitative] was used. The SPSS [version 16] programme was used to generate results which were presented in pie-charts, bar-charts, frequency, tables and graphs and were discussed. It came to light that more females responded to the questionnaire. It was clear that there was the need to choose an appropriate poster depending on the situation to advertise. Furthermore, posters should be *posted* at vantage points; they should be culturally acceptable and in the local dialect.

Keywords: HIV Posters, Jirapa, meaning, , communication

1. Introduction

HIV posters have been used widely by governments and non-governmental organizations worldwide in their quest to promote healthy living and prevent HIV transmission. Although its origins lie in the commercial advertising, poster were used throughout the twentieth century as a medium for the dissemination of public health messages (Crowley 1998) and as a medium of knowledge transfer by a wide range of health professional groups. They provide a means of publication for academic and professional contributors. They are designed to give visual representation of an issue that attracts attention, and then convey an intended message and shape public opinion on specific subjects.

The main objective of posters, as with other communications media is to influence attitudes, to sell a product or service or to change behaviour patterns. Public health posters are clearly in the third category. The purpose is to alter the perception of the public to bring about an improvement in health practices. The use of posters for public advertisement is therefore crucial for community education in HIV/AIDS control programme especially in Africa.

HIV/AIDS is noted to be one of the most pandemic diseases in the world including Ghana. It is known that sub-Saharan Africa is the region worst affected by the disease, accounting for about two-thirds of the estimated 33.2 million people living with HIV/AIDS worldwide (UNAIDS, 2007). Ghana's prevalence rate is one of the lowest in the region, with 1.9% being recorded in 2007 (Ghana Health Service, 2008). However, according to National AIDS/STI Control Programme (2001a), the importance of addressing HIV/AIDS among young people has been recognized as a reduction in HIV incidence among the youth would not only avoid much suffering but would also be a critical step in controlling the spread of the virus. This could be achieved through educational programme such as posters. Posters are widely used as a medium for health promotion because they are an inexpensive way of reaching a large section of the population.

Attention has also been paid to poster presentation as an effective method for disseminating health information (Goodhand, et al 2011) and the use of posters to manage hypertension (Tobari, et. al 2011) and its impact in academic knowledge transfer (Rowe and Ilic 2009). However, less attention has been given to the effect and meaning people make on HIV posters being used during HIV campaigns and awareness creation. This research therefore targets the latter aspect, providing a study on the meaning people make on HIV posters in the Jirapa district in Upper West of Ghana.

1.1 Problem Statement

Several posters have been used for HIV/AIDS campaigns in the Jirapa district. Despite this, the district has a consistent increase in its HIV prevalence until 2010 where it decreased from 4.5% in 2011 to 1.4% in 2012.

(GHS Sentinel Survey, 2012).

The different meanings attributed to HIV posters in recent times have become a concern to most stakeholders in HIV prevention and control. Although HIV posters are usually used to communicate its messages, there appears to be no effective evaluation format to ascertain whether the meanings of such messages are understood as intended.

As a form of *communication* posters are used to inform and educate people but it is important to get the right information that it intends to convey. There is therefore the need to embark on this study to determine their level of understanding and perception of some of these posters.

1.2 Significance of the Study

This study has evaluated the understanding or meaning people attach to HIV posters used during campaigns. The Ministry of Health, Ghana Health Service and all other stakeholders in HIV/AIDS can also use the findings and recommendations to formulate policy on culturally acceptable posters in health promotion and education.

1.3 Objectives of the study

1.3.1 General objectives

The general objective of this study was to access the meaning people make on HIV posters in the Jirapa district of the upper west region of Ghana.

1.1.2 Specific Objectives

The specific objectives of the study were to:

- Determine the knowledge and perception of the youth on HIV posters.
- Determine the demographic characteristics of the community.
- Determine factors that influence the understanding of posters.
- Assess some posters used in health campaign.

2. Literature Review

Introduction

The concise Oxford dictionary definition of poster is “a large print or notice used for decoration or advertisement”. They are the best and easiest way to communicate message to a large mass audience with their right placement. That is why it is always important to recognize and avoid mistakes in poster printing before the mistake gets exposed a hundred fold (Lynne Saarte 2009). It has been a powerful force in shaping public opinion because propagandists have long known that visual impressions are extremely strong. The main objective of posters, as with other communications media is to influence attitudes, sell a product or service or change behaviour patterns. Public health posters are clearly in the third category, their purpose being to alter the consciousness of the public to bring about an improvement in health practices (Helfand, 2003).

Traditionally, posters aim at presenting information in a succinct manner. In an effort to deliver a depth of information that supports their work, the final result is often a congested poster in which the key messages are either difficult to find or lost. Some posters may have tremendous visual appeal, but lack content. This has therefore led to a perception that the posters are not interactive as it passive and lacks in-depth information and as such not given the necessary attention it deserved. According to Rowe and Ilic (2009), posters, if accompanied by a short presentation, can help with *aural and verbal learning exchanges*, then a large proportion of its intended audience get to understand the message as intended (Rowe and Ilic 2009).

2.1 Health Posters

Communication in health promotion and education includes different modes such as lectures, group or panel discussions, symposia, posters or exhibit presentation. Every individual mode of health education has its own merits, drawbacks as well as their own sphere of effectiveness. In addition it has to overcome the barriers of communication (e.g. physiological, psychological, environmental and cultural).

Public health professionals have discovered that posters on preventive health care, nutrition and other issues provide an effective method of relating health information to the public. A poster campaign gives professionals who work in the public health field the opportunity to impart important information to the public about their health and well-being.

According to Bankole *et. al*: (2005) displaying photo-posters in the workplace did little to change peoples' perceptions of some health problems, rather the posters had more influence when they are used in an instructional, interactive atmosphere. They therefore recommended the use of photo-posters in health education for culturally entrenched health issues as crucial. But the routine production of communication materials without paying attention to utilization, field test, and impact analysis is ineffective. The concept of information, education, and communication (IEC) should encompass voluntary activity of health education. Therefore, the HIV-AIDS crisis underlines the urgency with which communication has to respond to health challenges (Chatterjee A.1995).

AIDS posters can be treated as material objects whose production, distribution and consumption varied across

time and place (Cooter and Stein 2010). AIDS media are known to be very important and could change and improve lives once distributed through urban space: billboards fade, posters go missing, and bumper stickers travel to other cities. The types of posters are presented as follows:

2.2 Types of Poster

Many posters, particularly early posters, were used for advertising products. Posters continue to be used for this purpose, for advertising films, music (concerts and recorded albums), comic books, and travel destinations. There are many types of posters being printed today; however it is important to know the type of poster required for a particular purpose.

2.2.1 Advertising posters

Full color advertising posters are the most common type of posters. They basically advertise a product, service or event. This usually involves a full color image of product or service being advertised and a few relevant words and sentences that promote how good they are. There is intense competition in the design and layout of such posters are based on the fact that the best and most eye-catching posters can attract more customers. These color posters are usually placed in high traffic areas such as train stations, airports, bus stops and other strategic locations to attract people. HIV/AIDS posters sometimes attempts to sell a healthy behaviour or commodity to the population (consumers).

2.2.2 Propaganda Posters

For special issues and elections the political or propaganda poster is used. Though there is a slight negative connotation to the word "propaganda", these kinds of posters offer an important contribution in spreading policies and information that adhere to a certain political ideal or campaign issue. The most common organization that uses these kinds of poster is the government. However, it can also be used by administrative, or corporate environments to portray a company's corporate philosophy. These kinds of posters can also be termed as "*corporate communications posters*." It portrays the government or company's good deeds.

2.2.3 Informative Posters

These posters are used to spread awareness and information. They are used for awareness *drives* for certain kinds of issues. Most commonly, these posters are made for environmental protection campaigns and social awareness drives. It might tell you about sexually transmitted diseases such as HIV/ AIDS and other important information about a particular subject.

Informative posters are a little bit more text heavy unlike other posters. Usually there is only one main image to catch the eye and then the rest are the more valuable text that tells the reader about the subject of the poster. This kind of poster can be displayed absolutely anywhere, though it is better to place them in location where the most awareness is required. For HIV and AIDS for example, you may want to place them in areas where a lot of youth gather.

2.2.4 Subject Posters

These posters usually have a certain specific subject as the centerpiece of its design. It can be a "*band poster*" displaying a certain musical ensemble, or it can also be an "artist poster" showing off a great artist. Basically these kinds of posters are printed and sold for fans. They have great designs and are of higher quality than most posters. Usually subject posters are displayed in a personal room or office.

2.2.5. Affirmation Posters

These posters convey a motivational or inspirational message. They encourage people to adhere to a certain kind of ideal or they support people in times of emotional need. Usually these posters are displayed in personal rooms or offices.

2.2.6. Educational posters

Posters are used in academia to promote and explain research work. They are typically shown during conferences, either as a complement to a talk or scientific paper, or as a publication. They are of lesser importance than actual articles, but they can be a good introduction to a new piece of research before the paper is published.

2.3 Designing Effective Poster

Many ineffective posters suffer from easy-to-fix problems, including objective(s) and main point(s) hard to find, text too small, poor graphics and poor organization.

In designing a poster, your aim should be to provide the best to your target audience. This will include the type of image and the theme you will need visuals that will both attract their attention and deliver the message. Bright colour and large letters are appropriate to attract them even at far distance (Janice Jerkins 2010). An effective poster focused on a single message, make Graphs and images tell the story; uses text sparingly and keeps the sequence well ordered and clear.

Posters are useful in health education campaigns for announcing events, reinforcing messages communicated through other media, and provides a starting point for discussion. They should therefore be clear enough to be understood on their own, sufficiently striking to attract attention, and displayed in places where they could be

seen by the target population. These posters should be changed regularly or people will stop noticing them. All posters should be carefully planned and pretested with the intended target group. Use of colour can help ensure that figures and symbols stand out from the background and lower case letters are easier to read than all capital letters. Finally, the lettering should be neat and even.

3. Methodology

Introduction

This research has been organized into the following sections: (a) study site, (b) study design, (c) target population, (d) sampling size and procedure, (e) data collection tool and procedure, (f) analysis of data, (g) ethical consideration and some limitation.

3.1 Study Site

Jirapa District [Figure 1] was created from the former Lawra District Council in 1988. It is a rural district with the majority being subsistence farmers. It is situated in the northwestern part of Ghana located in the Upper West Region with a population of 64,631 and a growth rate of 1.7 in 2010.

It is bounded to South by Nadowli District, to the North by Burkina Faso, to the East by Sissala District and to the west by Lawra District. It covers an area of about 2,125km square. Bongo festival is celebrated yearly among the people of the Jirapa traditional area in the last week of April to up lift a ban on dawadawa and pave way for harvesting it. [Figure 1]

The district is within the Guinea Savanna climatic Zone and experiences one season of rainfall and a long dry spell. The rainy season starts from June to October giving way to the dry season from November to May. The rainfall distribution varies from year to year sometimes with intermittent droughts and floods mostly peaking in September. The occurrence of droughts and floods affect the growth of crops, thus resulting in reduced crop yields every year. Temperature ranges from 18 °C in the wet season to 40 °C in the dry season. During this period of extreme warm weather, deaths caused by outbreak of Cerebro-Spinal meningitis (CSM) and other diseases are likely in the district.

The vegetation of the district is Guinea Savanna woodland with light under growth and scattered trees. The major economic trees are *she nut*, *dawadawa*, and *baobab* species. Human activities such as bush burning, tree felling for fuel, inappropriate agricultural practices, sand and gravel winning contribute immensely to the destruction of the vegetation and consequently to the environment. The major religious practice is Christianity with a few Muslims and traditionalists.

3.2 Human Settlement pattern

It is a dispersed type of population distribution due to land ownership. It has only one town with the rest of the communities being small and dispersed in rural areas with population size ranging between 500 and 1000 people which make the provision of socio-economic infrastructure and service delivery very difficult.

Migration is prevalent in the district especially in the western belt among the youth, mostly men who move to southern Ghana especially during the dry season to look for menial jobs for sustenance. Most of them come back with all sorts of diseases including guinea worm, HIV/AIDS and other diseases that affect productivity.

3.3 Major Economic Activities

Agriculture remains the major economic activity in the district. About 90% of the people are engaged in crops and animal farming. The agricultural practice is subsistence farming with few instances of large-scale farming. Cereals, legumes, tubers and vegetables are the main crops cultivated in the district. Cash crops cultivated are cotton and groundnut. Other trees of economic importance include *sheanut* and *dawadawa*.

3.4 Health Infrastructure

The district has sixteen (16) health facilities, seven (7) health centres, eight (8) CHPS compounds and one district hospital. Out of the sixteen facilities, three health centres and the hospital are mission facilities. It has three health training schools all located in Jirapa.

3.4 Study design

This study is a descriptive cross-sectional study.

3.5 Study Population/Target Population

The study population comprise all youth within the age range 15–45 years in Jirapa township. They were selected from a randomly five (5) section out of seven (7). They were chosen to provide the researcher with the relevant data.

3.6 Sample size determination

The sample size was calculated using a sample size calculator by the national statistical survey. Using a population of 12290, confidence level of 95%, 0.5% proportion and 0.07980 confidence interval, the Sample size is 150.

3.7 Sampling Procedure

The simple random sampling technique was employed in this study to select the respondents. The technique was

used to give every youth the opportunity to be part of the study and to give a true reflection of the entire population. The researchers wrote the names of all the sections on a sheet of paper (sample Frame). Five were selected out of seven and then, thirty (30) youth randomly selected from each section. This was arrived at by writing the words “YES” and “NO” on pieces of papers folded and thoroughly mixed in a bowl and asking any youth, we come across to pick. Those who picked “YES” were interviewed until the 30th respondent was obtained.

Both qualitative and quantitative methods were employed in data collection. A well-structured questionnaire comprising of open and close-ended questions were designed for the study. Questions were set by the researchers based on the objectives of the study and sub grouped into sections. Questions were administered in the English and local language for easy understanding. The research questionnaires were administered to respondents by the help of three students (interviewers). These students were trained to administer the questionnaire to the respondent.

3.8 Data Analysis

The analysis was done using the SPSS, (versions 16) and Microsoft excel. The data were presented in tables, pie and bar charts and discussed.

3.9 Ethical Consideration

The Jirapa District Health Management Team (DHMT) approved of the study as well as the faculty of Public Health in the School of Health Sciences in University of Ghana, Legon. Informed consent was also obtained from all the participants and all procedures followed were in accordance with the ethical standards of the Ghana Ministry of Health.

3.10 Limitation of the study

The major limitation of the study were

1. There were economic constraints which could otherwise have extended the research coverage.
2. It was difficult getting posters for use as samples in the district.
3. People Living With Disabilities, for example the blind were not factored into the study as we could not communicate with them.

However, the limitations of the study did not affect the research findings and interpretation of results.

4. Presentation of Results

Introduction

This research represents the results of the study on background and other characteristics of the respondents. The knowledge, perception and understanding of posters as well as assessment of some common posters of respondents are outlined.

4.1.1 Demographic Data

From the research conducted, 69 % of the respondents were within the ages 21-40 years while 10% were between the ages of 10-20 years, as shown in table 1. The gender categories of respondents indicate 56%, were females while 44% (66) being males. About 5.3% (8) respondents have attained primary school education, 20.7% (31) of the proportion had junior high education, and 17.3% (26) had senior high education. Tertiary education however represents 32.7% (49) and 24% (36) of the respondents being illiterates (had no formal education). For the type of work the respondents were engaged in, 16% (24) were farmers , 26% (39) representing the highest were public servants , 18.7% (28) being students, 5.3% (8) artisans and 2.7% (4) were professional drivers [Table 1]. Overall, about 99% of respondents had knowledge of HIV/AIDs and familiar with posters as a source of Education and Health promotion [Figure 2]. With regard to HIV channels for Health Education and promotion, about 10% of respondents mentioned posters, 41 % mentioned TV and about 61% mentioned Posters, radio and TV combined [Figure 3]. It shows clearly that majority of the respondent 40.7% (61) had their message from all the channels, 27.3% (41) from TV, 16.7% (25) from Radio, 6.0% (9) from only posters and 9.3%(14) from hospital staff.

[Table 2] represents the respondents' knowledge of HIV posters. It shows that about 76% (114) have ever seen an HIV poster while 24% (36) said they have never seen it. About 81.3% acknowledged that the posters they saw were not interpreted while 18.7% (28) respondents said they have received interpretations. From the same table, the majority 64 % (96) of respondents saw posters at the health facility, 14% (21) on road, school, health facility and school, class, and church and TV with less than 10 % each. It is revealed also that 34.7% (52) of the respondents said the posters were large enough to be seen at far distant while the remaining majority of 65.3% representing 98 respondents said no to the question [Table 2].

The findings as presented in Table 2 shows that about 34.7% (52) of respondents mentioned that posters were large enough to be seen at far distance and 65.3% said otherwise. As to whether or not they understood HIV posters, about 56% (84) of the respondents understood the meaning of posters and 44% (66) did not understand them [Figure 4].

Table 5 represent the reasons respondents did not understand the posters they saw. Out of the 66 respondents that did not understand, majority of them representing 72.7 % (48) said they were only pictures, 21.1 % (14) said they could not read and the remaining 6.1 % (4) said the writings were small. [Table 3]

From the research conducted, table 6 below indicates the messages respondent had from the posters. 38% (57) of them did not know the message in the poster, 19.3 % (29) gave Stop Aids as their message, 14 % (21) said AIDS is real, 9.3 % (14) said HIV Drugs/ Testing and diagnosis of infant HIV, 6% (9) gave Effect, cause and prevention of Aids, 5.3 % for Stigmatization and Show them love and care and 1.3 % for Don't judge and pregnant women can give HIV to their children as their messages. [Table 4]

The result further shows that 83.3 % (125) did not have any interpretation of the posters while 16.7% (25) had some form of interpretation. [Figure 5]. However, about 47.3 % (71) of the respondents mentioned that the posters were useful and 52.7 % (79) said they were not useful to them. [Figure 6]

From the research conducted, it was realized that about 80 % (120) of the respondent needed more information on the posters they saw, while 20 % (30) respondents did not require further information on the posters [Figure 7]. In the assessment of posters, it was noted that about 72% (108) of respondent showed interest in posters and willing to give attention to if poster were shown to them or *pasted* while 28% (42) would not [Table 5]. Furthermore, about 37.3% (56) respondents understood the subject matter of the poster shown while 62.7 % (94) said it could not understand [Table 5]. On the issue of visual quality, about 44.7 % (67) of respondents were happy with the poster quality and 55.3 % (83) were not [Table 5]. While 58.7 % (88) respondents said the posters shown were attractive and relevant 41.3 % (62) respondents said they were neither relevant nor attractive as shown in the table above. [Table 5]

5. Discussion

Introduction

This research discusses the result of the study on the meaning people make on HIV/AIDS posters in the Jirapa and how they relate to the findings of various studies by other researchers.

The study focuses on 15-45 age group. It presents their views on posters and their usefulness. The study also identified gaps that need to be filled in order to meet the expectation of stakeholders on posters

5.1 Background Information of Respondents

A total of 150 people from 5 communities in the district were interviewed in the study. The age range of the respondents was 15 – 45 years while the medium age is 30. Females interviewed exceeded males possibly because of the fact that women population exceeds men in the country the fact that women tender the house and were available interview. In the study, it was realized that the majority of the respondents 114 (76%) have had some form of education which is as a result of the settlement of the Catholic faith and education in the district. This could have influenced the massive awareness on HIV by respondents. About 48.7% of them were gainfully employed.

5.2 Knowledge on HIV/ AIDS

In line with the finding by Chereshi et al (2010) about 99% of the population mentioned to have heard of HIV through mass media (T V, radio) and posters which This could have been as a result of the high level of education and the numerous health facilities that surround the area. Knowledge comes from information and the source of the information on every subject is very important as it has effect on the one receiving it. Mass media can be said to be the highest source of information in the Jirapa District, though it is evident that more people watch TV than Radio and Posters. It is therefore important to note the role of posters and their contribution in the area of information towards HIV sensitization. Health personnel who are the authorities of health issues in the area contributed only 14 (9.3%) of the source of knowledge to HIV issues.

5.3 Knowledge on HIV/ AIDS Posters.

Although about 76% of respondents see HIV poster regularly only a few of them had some form of interpretation while the rest of them had to interpret it on their own. This is an indication that health workers are not doing much in Health education on HIV posters. It is not surprising that the researchers observed on their visits to Jirapa Hospital and the urban health centre where no trace of HIV/AIDS posters was seen.

On the knowledge on HIV posters by respondents, the fact that 44% attributed illiteracy, illegible writing and unexplained pictures as the reason for not understanding the posters. This was supported by Goodhand et al (2011) who stated that, the visual appeal of posters is increased by the limited use words not is often misinterpreted. In this research, it was noted that about 57 (38%) did not understand the messages on the posters. Mixed messages such as: *five fingers, all our fingers are not the same, pastors can even get or preach about HIV, a friend with HIV can still be a friend and the beautiful girls can transmit the infection* [to mention but a few] were attributed to the posters. This is clearly shown in the study by Goodhand *et al*; (2011) where they confirmed that most people who see posters do not understand them.

Concerning the usefulness of the posters, (52%) respondents said the posters were not useful and would have

liked more or detailed information added which could be in the form of leaflets or fliers and interpretation by health personnel. Ward and Hawthorne (1994) mentioned similar finding in their research.

5.4 Assessing HIV/AIDS Posters

Most of the posters conveyed information ‘*telling*’ rather than ‘*selling*’ ideas and some of these were confusing. They were not also designed to motivate, and some conveyed mixed messages and none used fear appeal. In the study, it was observed that about (72 %) of respondents would stop to look at displaced posters if only they are attractive. They confirmed they were not easily understandable because there were no inscriptions to explain the meaning. Inscription on posters like: “*who are you to judge*” created a lot of confusion and mixed messages as most respondents did not attribute it to HIV/AIDS.

This study shows that, the posters were relevant and attractive though many respondents misinterpreted the message. This could mean that they only looked at the pictures and guessed the meanings which in most cases were wrong. It was not surprising when 46 (30.1%) could not comment on the posters and had no idea on the posters.

5.5 Conclusion

The findings of this study indicate that we must choose appropriate media depending upon the situation of the population, so that more people can actually view and read the materials and should be made simple.

The use of posters as a channel of health education and promotion in general practice is justified as it has shown in the study that about 99% of respondents know of HIV posters and HIV/AIDS respectively. There is a culturally acceptable need for posters in the local dialects for clarity. More research are required to inform policy on using Posters for health promotion and education to improve the quality of health.

5.6 Recommendation

The following are important consideration that would help improve individual understanding of posters.

To the health facilities

1. There is the need to embark on intensive health education on the various posters around the facility.
2. HIV/AIDS posters should be made available to all units of the facility and should be pasted and not filed in cupboards.

To the DHMT

1. DHMT should make available to all facilities HIV/AIDS posters
2. They should assist facilities and individuals to conduct research on the evaluation of the posters given
3. During monitoring and supervision, they should look out for adequate and proper posting of posters in the facility.

To the Ministry, NACP and National Health Promotion Unit.

1. They should make culturally acceptable poster to each community but not general ones.
2. They can use local dialect to express the messages in the posters.

References

- Anonymous, (1998). Attracting attention. Posters. (1998) AIDS Action (40); 8 Retrieved 9/14/2011 from pubmed NCBI [No authors listed]
- Banda, F. Oketch O, (2011) Localising HIV/AIDS discourse in rural Kenyan community Journal of Asian and African Studies 46 (1); 19 – 36.
- Chattarjee, A. (1995). Communicating Health. *Health for Millions* 21 (4); 24, 11
- Chireshe, R.; Rutondoki, E N. &, Ojwang, P. (2010). Perception of the availability and effectiveness of HIV/AIDS awareness and intervention programme by PWDs in Uganda. *Journal of Social Aspect of HIV/AIDS* Volume 7 Retrieved 7/19/2011.
- Coote, R. SDtein, C. (2010). Positioning the image of AIDS ; Endeavour 34(1):12-5. Retrieved 8/2/2011 from U S National Library of Medicine, National Institute of Health. (pubmed)
- Cooter R, Stein C (2007) Coming into focus ; Poster power and visual culture in the history of medicine ; *Medizinhistorische Journal* 42(2):180-209
- Douglas Bintzler, eHow Contributor updated March 18, 2011)
- Effective Poster Design, By teaching support services University of Guelph Retrieved 9/12/2011 from <http://www.tss.uoguelph.ca/index.cfm>.
- George, H; Kathryn, T. & Leon, L. Creating effective poster presentations; An effective poster. Retrieved 7/18/2011 from <http://www.ncsu.edu/project/posters> .
- Goodhand Jr, Gile, S C., et al (2011) Poster presentation at medical conferences; an effective way of disseminating research. 11 (2); 138 – 41
- Gosky M; Kresztof, K; Wojciech, D. & Berndge, V. (2010). Anti – alcohol posters in poland 1945 -1989, Diverse meaning, uncertain effects *American Journal of Public Health* Vol 100, No. 11. AJP 2059 – 2069.
- Hermans, H. J; Merjman, F.J. & Klazinga, N. S. (2006). Historical Health posters as expressions of public health

- dilemmas. *Netherlands Tijdschr Geneeskde* 150(1):39-53 (pubmed)
- Jerking, J. (2008). Things to know about your target audience. Internet and businesses online community Retrieved 9/12/2011
- Jirapa District Profile (2011). MOH Annual report
- Kelsh M P, Werrenmeyer A (2011) Poster project to emphasize public health in the pharmacy curriculum. *American Journal of Pharmaceutical Education* Vol 75 (1) 2 Retrieved 8/2/2011.
- McDonnel, T. E (2010). Cultural objects as objects; Materiality, urban space and the interpretation of AIDS campaign in Accra, Ghana. *American Journal of Sociology* 115 (6);1800 – 52 Retrieved 7/22/2011.
- Miller, M; Supranowicz, P; Targowski, M. & Piechowiak-Modrzejewska, E. (2004) *Evaluation of quality and accessibility of health education materials. I. The opinion of health personnel.* *Roczniki Panstwowego Zakladu Higieny* ;55(2); 115-23
- Montazari, A.. Sajadian A (2004) Do women read poster displays on breast cancer in waiting room. *Journal of Public Health* 26 (4) 355-8
- Pelletier, D. (1993). The focused use of posters for graduate education in the complex technological nursing environment. *Nurse Education Today* 13(5); 382-8
- Poster (8/2/2011, 1; 35 am) Wikipedia <http://www.wikipedia.org>
- Rowe N and Illic D (2009) what impact do posters have on academic knowledge transfer? A pilot survey on author attitude and experienced (Dec 8) DOI – 10.1186/1472-920-9-71 Retrieved 8/2/2011, from <http://creativecommons.org/licenses/by/2.0>.
- Saarte L (2009) Recognizing and avoiding mistakes in posters. Jun 12, internet and businesses online community Retrieved 8/2/2011
- Saarte, L. (2009) Common Types of Posters today. Internet and business online community Retrieved 8/30/2011 from <http://www.articlebase.com/rss/author/24698>.
- Saha, Poddar, and Mankad (2005) *Effectiveness of different methods of health education: A comparative assessment in a scientific conference* DOI :10.1186/1471-2458-5-88
- Sentinel survey (2010) Ghana Health Service.
- Tembo, K.C. (1995) Grass-root health education strategies in Malawi. *Journal of the Royal Society of Health* 115 (5); 318-9
- Use of posters in health communication. (8/27/2011, 3;43 PM) <http://www.ehow.com/communication/poster-board.html>
- Ward, K. & Hawthorne, K. (1994). Do patients read health promotion posters in the waiting room? A Study in one general practice 44,583 – 583
- Yoshita, K. et al (2004) The Evaluation of Materials to Provide Health-Related Information as a Population Strategy in the Worksite: The High-Risk and Population Strategy for Occupational Health Promotion (HIPOP-OHP) Study. *Environmental Health and Preventive Medicine* 9, 144–151.
- Bankole, Aderinokun and Denloye (2005) Evaluation of a photo-poster on nurses' perceptions of teething problems in south-west Nigeria. 2005 Apr; 119(4):276-82.
- Rowi N and Ilic D (2011) Poster Presentation-a visual medium for academic and scientific meetings. *pediatric respiratory reviews* <http://www.sciencedirect.com/science/journal/15260542/12/3>
- Jenner, Jones, Fletcher, Miller and Scot (2005) Hand hygiene posters: motivators or mixed messages. *Journal of hospital infection* volume 60 issues 3 pages 218-225.
- Tobari. Yamagishe and Iso (2011) An occupational physician-pharmacist cooperation management for hypertension by the use of educational letters and posters. *Japanese journal of hygiene* 66(3):608-5
- APPENDIX 1: Questionnaire on the meaning people make of HIV Posters: a case study at Jirapa District in the Upper West Region of Ghana
- The researchers are from the University of Ghana, School of Public Health. The study is on the meaning people make on HIV/AIDS posters in Jirapa District of Ghana.. The respondents are assured that this study is purely for academic purposes and would be treated as confidential as possible.
- Please tick against the question where appropriate and the necessary answers where they are required.

SECTION A

BACKGROUND INFORMATION

1. Age (years)
 - a. 10-20 []
 - b. 21-30 []
 - c. 31-40 []
 - d. 41-50 []
2. Sex
 - a. Male [] b. Female []
3. Educational Background
 - a. Primary education []
 - b. Junior Secondary education []
 - c. Senior Secondary education []
 - d. Tertiary education []
 - e. No Formal education []
4. Occupation
 - a. Trader []
 - b. Housewife []
 - c. Farmer []
 - d. Civil/public servant []
 - e. Others (specify).....

SECTION B

KNOWLEDGE ON HIV/AIDS POSTERS

5. Have you ever heard of HIV/AIDS? a. Yes [] b. No []
6. What was the channel of the message?
 - a. TV []
 - b. Radio []
 - c. Posters []
 - d. All above []
 - e. Others (Specify).....
7. Have you ever seen an HIV/AIDS poster? a. Yes [] b. No []
8. Where did you see it
 - a. On road []
 - b. Health facility []
 - c. School []
 - d. Church []
 - e. Others (specify).....
9. Did you understand it? a. Yes [] b. No []
10. If No to no Q11, why is it so?
11. Has anybody ever interpreted any poster to you? a. Yes [] b. No []
12. Was it large enough to be seen at far distant? a. Yes [] b. No []
13. What was the message in it?
14. Did someone interpret it for you? a. Yes [] b. No []
15. Was the poster useful? a. Yes [] b. No []
16. Would you have like more information added to it? a. Yes [] b. No []

SECTION C

ASSESSING HIV/AIDS POSTERS

17. If you see this poster, would you stop to look at it? a. Yes [] b. No []
18. Is the subject matter quickly understood? a. Yes [] b. No []
19. Is the layout visually pleasing? a. Yes [] b. No []
20. Is it attractive and relevant? a. Yes [] b. No []
21. Can you tell me what this means? (show sample poster to them)

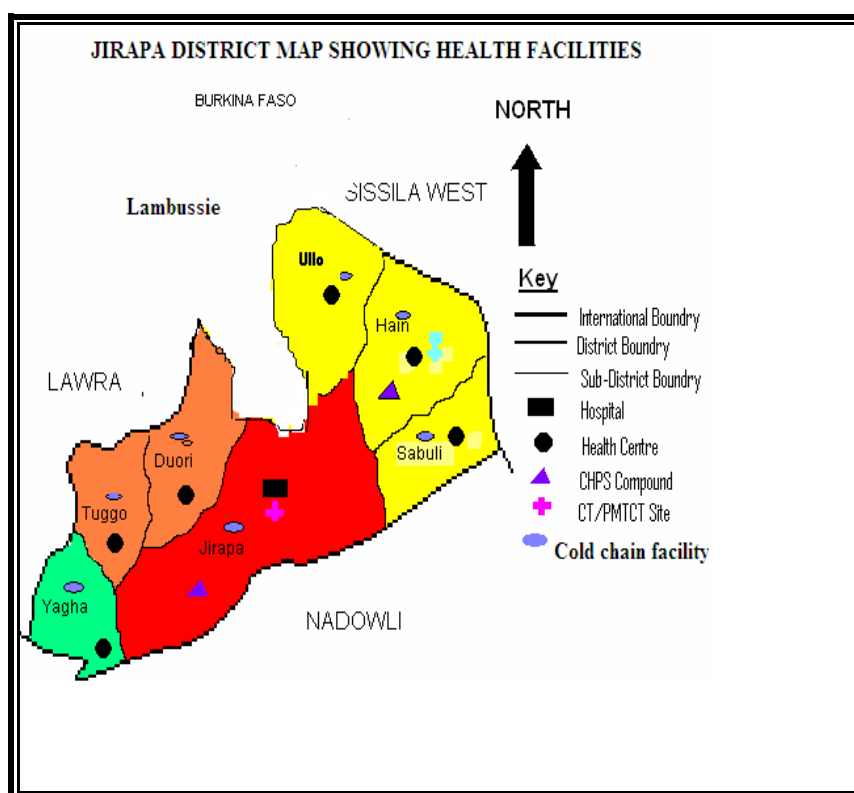


Figure 1: Map of Jirapa District

Table 1: Demographic characteristics of respondents

CHARACTERISTICS	FREQUENCY	PERCENTAGE %
Age Group		
10-20	15	10.0
21-30	51	34.0
31-40	53	35.3
41-50	31	20.7
Total	150	100
Sex [Gender]		
Male	66	44
Female	84	56
Total	150	100
Educational level		
Primary	8	4.7
Junior Secondary	31	20.7
Senior secondary	26	17.3
Tertiary	49	32.7
No Formal Education	37	24.6
Total	150	100
Occupation		
Trader	22	14.7
Housewife	25	16.7
Farmer	24	16.0
Civil/Public Servant	39	26.0
Student	28	18.7
Artisan	8	5.3
Driver	4	2.7
Total	150	100

Figure 3 represent the respondents knowledge on HIV/AIDS. 98.7% (148) of them have heard about the disease while only 1.3% (2) have not heard of it.

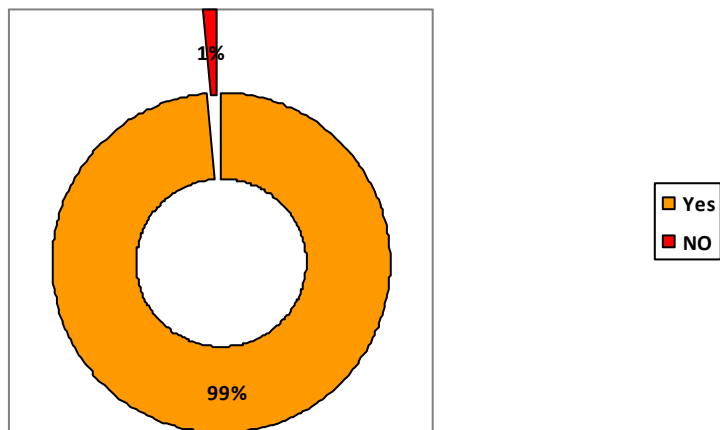


Figure 2; Respondents' knowledge on HIV/AIDS.

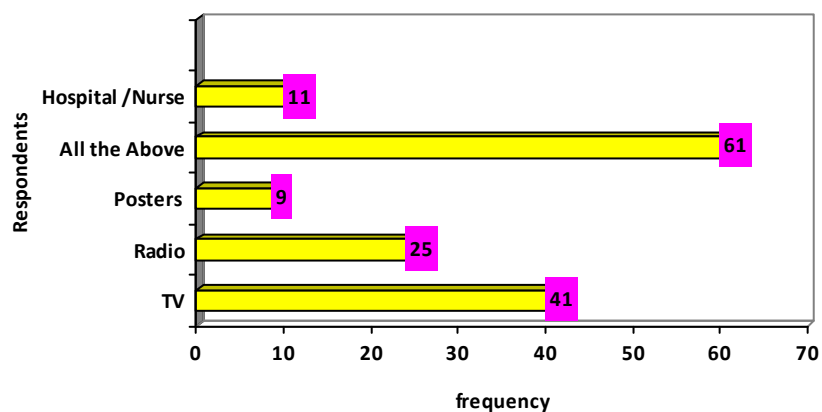


Figure 3: Channels of HIV message

Table 2; Knowledge on HIV/AIDS Posters

Respondents	Frequency	Percent%	Cumulative percent%
Ever seen poster			
Yes	114	76	76
No	36	24	100
Total	150	100	
Interpretation of posters			
Yes	28	18.7	18.7
No	122	81.3	100
Total	150	100	
Source of posters			
On road	21	14.0	17.8
Health Facility	96	64	80.5
School	11	7.3	89.8
Church	2	1.3	91.5
Health facility and School	4	2.7	94.9
Class	4	2.7	98.3
T.V.	2	1.3	100.0
Total	150	100.0	100
Illegibility of posters			
Yes	53	34.7	
No	98	65.3	
Total	150	100	

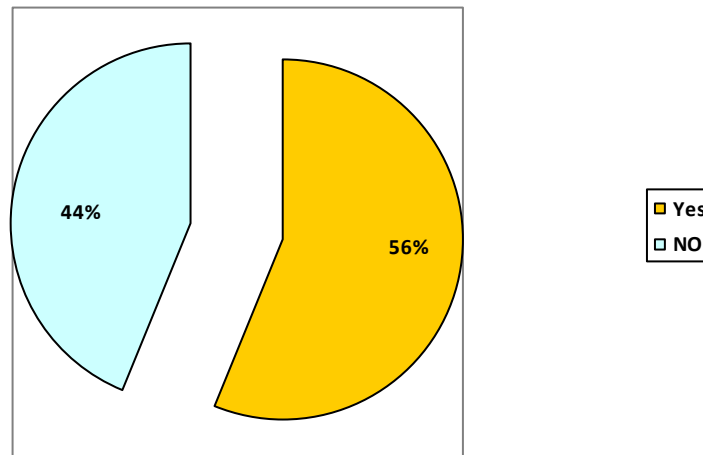


Figure 4; Understanding of HIV posters seen.

Table 3; Reasons for not understanding posters seen

Respondents	Frequency	Percent %
Cannot read/no formal Education	14	21.2
Small inscriptions/writings	4	6.1
Only picture	48	72.7
Total	66	100

Table 4; Messages from HIV Poster seen.

Respondents	Frequency	Percent %
Don't know	57	38
Stop Aids/ ADIS can Kill	29	19.3
AIDS is real, it has no cure	21	14
HIV Drugs/Testing HIV/Diagnose infant HIV	14	9.3
Effect & Causes of Aids/Prevention /Education	9	6.0
Stigmatization	8	5.3
Show them love and care	8	5.3
We should not judge them	2	1.3
Pregnant woman can give to their child	2	1.3
Total	150	100.0

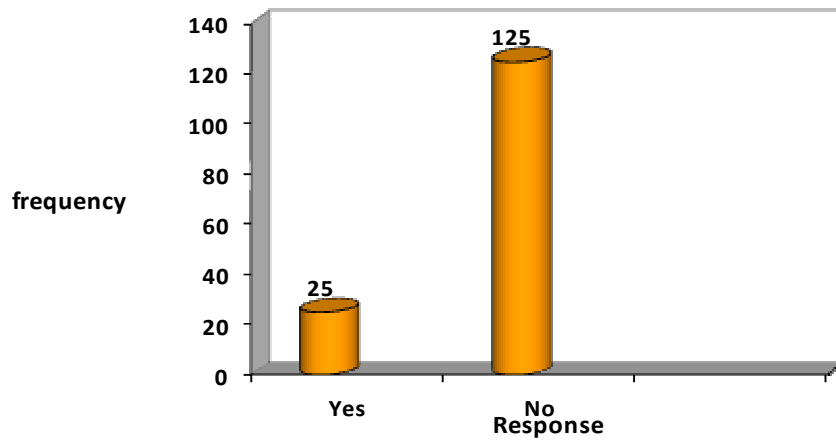


Figure 5: Level of poster interpretation to respondent

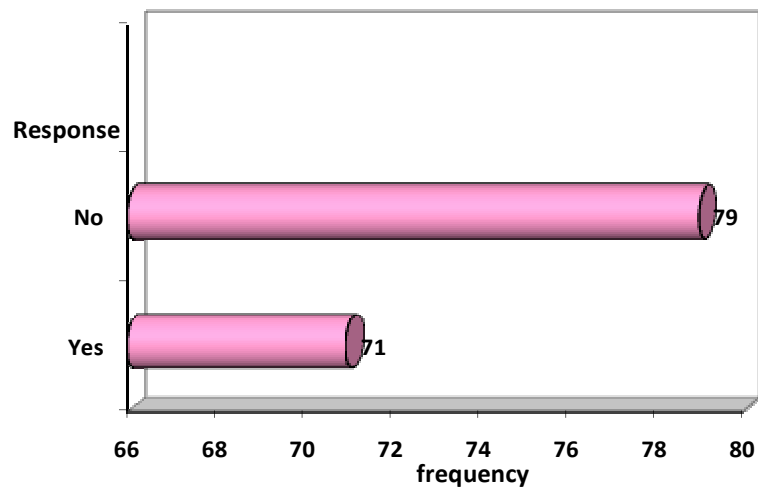


Figure 6: Usefulness of Posters.

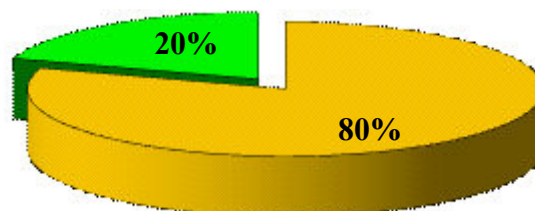


Figure 7: Respondents who would like more information added to posters

Table 5 Assessment of posters

Respondents	Frequency	Percent %	Cumulative Percent %
Attention to posters			
Yes	108	72	72
No	42	28	100
Total	150	100	
Understanding of poster			
Yes	56	37.3	37.3
No	94	62.7	100.0
Total	150	100.0	
Visual Quality of posters			
Yes	67	44.7	44.7
No	83	55.3	100.0
Total	150	100	
Relevance of posters			
Yes	88	58.7	58.7
No	62	41.3	100
Total	150	100	

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