



ADDIS ABABA UNIVERSITY

SCHOOL OF GRADUATE STUDIES

FACULTY OF JOURNALISM AND

COMMUNICATION

Assessing TV live talk show : EBC “Tenawo Bebetwo” in focus.

A Thesis Submitted to Addis Ababa University in partial fulfillment of the requirements for the award of Master of Art Degree in Journalism and Communication

By

Abayneh W/Yohannes

October 2020

Addis Ababa, Ethiopia

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DECLARATION

I, the undersigned, declare that this thesis is my original work and has not been submitted for an award of any degree in any other university. I have carried it out independently and all the sources of the materials used for the study were acknowledged.

Abayneh W/Yohannes

(The Researcher)

Signature

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List of Acronyms

EBC – Ethiopian Broadcasting Corporation

ETV – Ethiopian Television

MOH- Ministry of Health

WHO – World health organization

AAFMHACA – Addis Ababa Food Medicine and health care Administration and Control
Authority

CDC- Center for Disease Control and Communication

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Abstract

This study was aimed at finding out Assessing TV live talk show: EBC “Tenawo Bebetwo” in focus, regarding the perception and attitudes of health professionals at Tikur Anbesa/Black lion, Bethel and Hayat hospitals and the program content. This study was suited within the theoretical framework of media effects, framing theory and agenda setting theory and models of other scholars were considered to analyze the data about facts related to health professional’s perception and the program contents of the television talk show.

The study adopted mixed method, employing both quantitative and qualitative method, specifically survey, in-depth interview and content analysis respectively. For quantitative method, survey was used as a major data gathering tool. The survey questionnaires were administered a total of 124 questionnaires were distributed to health professionals (nurses) selected by using systematic random sampling technique of which 118 (95.2%) questionnaires were properly filled and returned. Interviews were also conducted with twelve medical doctors of the selected hospitals who were selected using purposive sampling technique. Content also analyzed in terms of issues or agenda setting, program format especially in addressing public health issues, opening phone in discussion to the public for entertaining various opinions, ideas, and views have been discussed and analyzed. Data analysis was made using descriptive statistics, frequency and percentages. SPSS version 24 was used to process the primary data which was collected through the questionnaire. The major findings of the study were showed that Tenawo Bebetiwo Program was very important program that inform and teaches the target audience. And health professionals perceived the program as vital and useful for the society. The topics selected and discussed on the talk show found relevant to the health professionals as well as the public. In the study the talk show program was found out to be worthy and significant in creating awareness on disease prevention, symptoms and follow up treatments.

Participants and the content analysis of the study suggested areas to be improved on the talk show on presentation style, quality of production and attractive standardized studio setting, as the problems of the program. Along with the problem in getting the new technology and having sponsorship were also the need for improving telephone communication system and Jargons language used in promoting the program.

Chapter one

Introduction

This chapter introduces the nature of the proposed research and the overall planned approach to deal with the stated research problem. It consists of the background of the study, statement of the problem, objective of the study, significance of the study, scope of the study, limitations of the study and thesis organization.

1.1 Background of the Study

Television is a compact structure that creates an intimate medium, because it brings the world into our homes and brings its audience into direct relationship with particular values and attitudes (Chinemere, 2014). According to Rodman (2006) suggests that television remains the most time consuming activity, yet the main source of news and information. In addition, television also brings great change to the development of a nation and is still the most credible source of news and enlightenment in most parts of Africa (Okigbo, 1990). This made television as one of the most appropriate means of communication in any society, (Moemeka, 1981).

As a remarkable and effective medium, the television has become a ubiquitous medium. Moreover, the television is not a visionless medium compared to the radio. As an audio-visual medium, audiences are able to undergo a simulated experience (Sendjaja, 2003).

Today, the media industry is in its booming stage in the world; these media are incorporating different issues and broadcast in their own ways. In the case of Ethiopia various radio and television station has been established. According to the information found at EBC the Ethiopian Television is one of the oldest and government owned television stations; it was first introduced in 1963 GC for the sake of transmitting the first organization of African Union meeting. Now EBC entertained different issues in its entire programs, among these health related issues are the one which have been given attention.

“Tenawo Bebetiwo” live talk show has been transmitted in EBC since July 2001 EC and as informed from the current EBC producer of Tenawo Bebetiwo program, the idea came from the current producer and developed by others EBC programs producers. As he said there was a program called “Tenachin” in 2002 EC which was aired in Ethiopia radio on Friday morning for twenty minutes starting from 7:00 AM and the two programs were merged and the radio program was canceled with unknown reason while the television program continued to date. Tenawo Bebatwo is Amharic word meaning “your health by your home”. The program promotes and discusses health and related issues and the presentation format look like the producers invite health professionals and public health experts as guests.

According to Tenawo Bebetiwo program manual 2001 EC the objectives are: to create awareness, Show healthy life styles to audience by teaching about nutrition, physical exercise and personal hygiene and Show the way for the patients how to take care of them from aggravating factors of diseases.

The talk show was intended to enable the public to have a healthy life style and educate the society about the symptoms, causes, effects, and control and prevention methods of different kinds of diseases. Hence, for the purpose of this study, “Tenawo Bebetiwo” health talk show has been selected to be assessed on how the talk show is perceived by the health professionals of the selected three hospitals in Addis Ababa and the selected program contents of the talk show.

Tenawo Bebetiwo program is aired through EBC every Saturday for one hour duration from 3:00 PM to 4:00 PM and repeated on Thursday morning at 9:05. Audiences are allowed to call and ask the guest any questions related to the disease or health issue under discussion on the live talk show. The program includes text information under the screen bar and supported by the relevant video. Therefore, this study were conducted entitled as Assessing live TV talk show: EBC “Tenawo Bebetwo” in focus.in the perception of health professionals and also examine the contents of the program within the selected videos time frame.

1.2 Statement of the Problem

Ethiopian Demographic and Health Survey 2016 report revealed that Ethiopia is a poor country with weak health care systems and infrastructures. Reproductive health, like most aspects of health in Ethiopia were generally poor, with significance regional difference in access to services and in health outcomes. As it was stated full vaccination coverage was the highest in Addis Ababa (89 percent) and the lowest in Afar (15 percent).

Almost 80 percent of morbidity in Ethiopia is due to preventable communicable and nutritional diseases, both associated with low socio-economic development. Improving the general physical infrastructure and strengthening health systems a key to improving health and require major investments and much time (Chaya, 2007).

One of the tools to eliminate such problems, health communication was very crucial. The key objectives of health communication was to influence individuals and communities to change risky health behaviors and adopt good ones by creating a receptive and favorable environment in which information can be shared, understood, absorbed and discussed by the program's intended audiences.

The Centers for Disease Control and Prevention (CDC) define health Communication as the study and use of communication strategies to inform and, influence individual and community decisions that enhance health, (U.S. Department of Health and Human Services, 2005). Towards this, media was used as the means in which these plans can be reached to the public. At the same time, media was a place where the public express their concerns and demands as it was among the functions of the media.

The rationale for conducting this study focused on Tenawo Bebetiwo talk show was its essentiality to the community by discussing different health issues and creating awareness among the society. According to the information found in EBC the show had the intention of enabling the public to have a healthy life style and educating the Society about the symptoms,

causes, effects, control, and prevention methods of different kind of disease and to exemplifies the role of media in building healthy society for one nation.

In Ethiopian Broadcasting Corporation various studies have been conducted but in relation to talk show programs there are limited studies. Kalkidan, (2017) made a study on audience Reception of “Tenawo Bebetwo” Television Program: In the perspective of Kombolcha town community. The first talk show program in Ethiopian television was believed to be ‘The Alebe Show’ which was on air since aired in 1999. This talk show program was interrupted with the death of the producer. There were also talk show programs in Ethiopian television such as ‘Hamsa Lomi’ ‘Shai Buna’ ‘Fegegta’ and ‘Debo’ the programs were dealing social, political and economic issues .All of them were not produced by ETV producers . The talk shows programs were out sourced programs. The study concluded such participatory program is vital so as to give health information in the public day to day lives. As well as the topics presented in the program are relevant.

Other than health talk show audience reception, Abel (2005) also conducted research on Audience Satisfaction of Television Evening Amharic Programs in which the study showed the level of satisfaction with ETV’s evening Amharic programs. Currently, participatory television program approach has recently been increasing and is very essential to meet the needs of the public on one hand, and would enable the journalists to work in a highly demanding area that requires journalist’s better creativity and knowledge while handling diverse audience with a wide range of issues on the other. And it opens the door for debate and to the winning idea for the public as a whole. In Ethiopian television news channel, there are different formats of talk show programs, that is, one to one, one to few, one to many and phone in talk show programs, which presents in live and in recorded forms. In Ethiopian Television the news and program channel presently among the twenty television programs ten of them are talk show programs.

Therefore, considering the above ideas, and also the health talk show program was believed to be essential to the community, the present study takes advantage of studying on assessing TV live talk show: EBC “Tenawo Bebetwo” in focus from the view point of health communication and education as it mainly and prominently deals about health and health related issues and building healthy individual and society at large. This was because without building healthy society, it is not possible to foster the national growth of the country in every

sector. Having this knowledge the researcher motivated to know how health professionals of Tenawo Bebetwo talk show program who are working in three selected hospitals in Addis Ababa and also the program contents were conduct in the study. Regarding to health professionals how they perceives the transmitted message and how much the information they gain from the talk show was crucial for their day to day life and also on what ways the program would apply and be more effective than the previous one makes this research to be conducted.

1.3 Objectives of the study

1.3.1. General Objective

The general objective of the study was to assess TV live talk show: EBC “Tenawo Bebetwo” in focus.

1.3.2. Specific Objectives

Within the above general objective, the study incorporates the following specific objectives:

- ✓ To assess in what ways Tenawo Bebetwo talk show address the health issue of the public.
- ✓ To explore how health professional used the information discussed on the program regarding to their day to day life.
- ✓ To examine the health professional perception towards “Tenawo Bebetwo” live TV program have relevance to the population.
- ✓ To pinpoint problems of the language used in the program during discussion period.
- ✓ To suggest for possible recommendations for the subsequent improvements.

1.4. Research Questions

1. Does Tenawo Bebetwo talk show address the health issue of the public?
2. Have health professional applied the health information acquired from the program in their day to day life?
3. Is “Tenawo Bebetwo” live TV program have a relevance to the population?
4. To what extent the language used in the program discussion made a Problem?

1.5. Significance of the study

The study identified in what ways Tenawo Bebetiwo health program addresses the health issues to the public and in addition to that to bring a significant quality change to the talk show, it was important to get a professional critic using these health professionals. It also provides valuable information to the producers of Tenawo Bebetiwo program to fill their gaps.

Besides, for other health programs, this study will help to assess the interest of public to produce helpful programs and also serve as a resource for researchers who are interested in conducting health issue research on health programs and also beneficial for strategy and policy makers, by collecting the health issues which is dominantly discussed and had impact on the society that venerable them and also helpful to the academic community as a reference material.

1.6. Scope of the Study

The study focused only on the selected three major public and private hospitals in Addis Ababa Ethiopia, studying about the perception of health professionals and also the contents of the program from the selected video production, towards “Tenawo Bebetwo” live TV talk show. It’s felt that the study was worth doing to assess TV live talk show: EBC “Tenawo Bebetwo” in focus critically examine the content of the program and perception of health professionals’ over Tenawo Bebetiwo health talk show.

1.7. Limitations of the Study

Despite the fact that the researcher tried to maximize the fruitfulness of this study, the study cannot be free from limitations. For the reason that, even though there were different hospitals in the country the study focuses to examine on the selected three hospitals health professionals in Addis Ababa and the content of the program transmitted in the selected time frame. Therefore, it was not be generalized to all health professionals.

The other thing, the major challenge was the current situation in relation to corona pandemic in the country was a direct impact on the overall research study.

1.8. Thesis Organization

This research is organized into five chapters. The first chapter deals with the background of the study with the statement of the problem, general and specific objectives of the study, research questions, significance of the study, scope and limitations and thesis organization. The second chapter reviews the literature related to the study. The third chapter was where the methodology of the study is discussed in detail. Then, chapter four focuses on the analyses and interpretation of the findings and discussions obtained from questioners, in-depth interviews of individual interviews and as well as, data from the contents. And finally, fifth chapter concluded the thesis and suggested recommendations.

CHAPTER TWO

Review of Related Literature

Television as a mass media was one of the most important sources of health information. However, concerns have been raised about the quality, completeness and accuracy of medical information covered in the media (BMJ: 2014). Therefore, this chapter reviews on a various concepts and ideas in relation to the assessment of live talk show focusing on EBC “Tenawo Bebatwo” health program. It provides a background for the following chapters and reviews the range of core theoretical foundations, concepts, approaches and theoretical frameworks to understand and evaluate the health professional’s perception of the talk show as well as the content of the program.

2.1. Television talk show

Talk show refers to a talk program. The common pattern was the talk between a host and one or more guests. As a face-to-face discourse type, talk show was a relatively recent and insufficiently explored area, although conversation analysis and discourse analysis have been applied to the examination of question-answer adjacency pairs in several face-to-face discourse types, such as casual conversation, courtroom interaction, classroom interaction, doctor-patient dialogue and news interviews.

Gill (2007:157) categorized the broad talk show genre into three:

.... I am going to present a three way classification of talk shows that differentiate between the audience discussion programmed, usually organized around debates about public and political issues: issue oriented show or the therapeutic genre which focuses on personal problems and dilemmas; and confrontational talk show often dismissed as trash TV, where the emphasis is less up on problem solving than on the spectacle of emotional conflict.

Ilie (1999) Talk show originates from England in 18 Century, people used to talk about entertainment politics in the coffee shop, where the early talk show was born. Because of the

production of radio and television technology, the real talk show developed in the United States.

On the other hand, scholars Saied that, the origin of talk shows was tracked down by Munson as early as the 1930s when interactive talk radio started to emerge in the United States and listeners were invited to phone in. (Phil Donahue, 1967) was the first to adapt the audience participation talk show (also termed audience discussion program and studio debate program) from radio to television. His show initiated what was known today as day time talk show or tabloid talk show. As a result of an increasing decentralization of the media, a transition from debate programs to talk shows occurred in Europe in the 1980s (Ilie, 2006:489). Even though talk shows date half a century in other western countries, it was a very recent component and new type of genre in Ethiopia media.

The very notion of talk show raises issues concerning the boundaries between talk (prototypically dialogical) and show (prototypically monological), between public and private, between collective and personal experience, between expertise and experience between and mass communication, between information and entertainment, between discrete overlapping identities ('me', 'you', 'us', 'them'). (Ilie, 2006)

Ilie (2001:218) defines it as the semi-institutional discourse and as “a socio-cultural practice marked by a particular participant configuration and well-established conventions, as well as by spontaneous interventions and unpredictable outcomes”.

The introduction of a medical television shows was in 1951: City Hospital Lee TK, Taylor LD (2014:29). Since then, medical shows range in content from drama and reality to comedy. Joseph Turow (1996:347). described how medical TV shows affect people's perception of their physician in real life He reflected on how physicians' characters in these shows changed across time where it started to focus on the physicians' personal life and relationship with staff vs. patients' life as it used to be since City Hospital was aired. Therefore, this can cause a negative perception to the audience when they visit their physicians.

According to Nielsen's (2012) report, American citizens spend an average of over five hours a day watching television. Statistic Brain (2012) International health information programs, such as The Dr. Oz Show and The Doctors have become a regular part of television broadcasting. In the 2012-13 seasons, The Dr. Oz Show was consistently ranked in the top five talk shows in America with an average of 2.9 million viewers per day, while The Doctors had a high of 2.3 million viewers. The Hollywood Reporter (2011-12) in the 2012 greatest report, Dr. Mehmet Oz and Dr. Travis Stork (one of the hosts of The Doctors) were both included in the top 100 health and fitness influencers. 12 Popular television talk shows such as The Dr. Oz Show often engender skepticism and criticism from medical professionals. 13-15 However, no research has systematically examined the content of the medical information provided on these talk shows.

2.2. Nature of talk show

A talk show or chat show is a television programming or radio programming genre in which one person (or group of people) discusses various topics put forth by a talk show host. "Talk Show" is basically the word of American & Australian English. In British English it is known by "Chat Show".

According Haarman (2001) as mentioned a talk show that focus for talk may be simply chat (agreeable talk apparently for its own sake) typical of the evening celebrity talk show, or an issue or theme ranging from political and social matters and current events to topics relating more strictly to the private domain, like jealousy or infidelity.

Talk shows have examined from a variety of perspectives, including cross-disciplinary and cross cultural approaches. They have recently become the focus of attention in media and cultural studies, as well as feminist studies. A growing number of discourse and conversation analysts are using social interactional perspectives in their studies of talk show interaction. (Mininni and Annese, 1999)

Scholars like Clayman and Heritage discussed and point out about the news interview and ordinary conversation that, in conversation topics can emerge freely; the participants are free to make diverse contributions to the subject at hand. They continue that in the news interview,

by contrast, the participants are fundamentally constrained. Furthermore, in news interviews it is the interviewer who decides when to start or end the conversation; in ordinary conversation either party can take this decision (Clayman and Heritage 2002).

These implications clearly indicate the differences between talk in news interviews and ordinary conversation. The turn-taking system of ordinary conversation is not pre allocated; participants of ordinary conversation are not restricted to giving answers or asking questions. Hence this is like a talk show an audience asking questions through phone in which I study.

According to Ilie (2001) the hybrid nature of the talk show can profitably be examined by adopting a comparative perspective since they exhibit both conversational features (belonging to non-institutional discourse, such as regular conversation) and institutional features (belonging to institutional discourse, such as news interviews and public debates). Characteristically, talk shows bring together, through the mediation of a host, a guest panel (experts and lay participants), a studio audience and occasionally an audience of callers.

2.3. Talk Show program in Ethiopia

The origin of the talk show is back to 1930 in radio talk show through phone-in program in the United States (Ilie 2006). He added through time in 1960 two types of formats developed. These are all talk and all-news radio programs. Later on, such programs began to develop controversial and sensationalized talks. Along with the emergence of many television channels throughout the world as a whole and in Ethiopia in particular talk show program formats, interviews and debates are continued to dominate in the media presentation style, EBC Gap Analysis and new formats document (2017).

The talk show guest may have one or more, in which he or they express and discuss their views or ideas or researches on the given issue with host and the audience at the place of the discussion or with the larger audience at their homes in live or in recording format.

Recently, talk show programs becoming a new genre to discuss ideas and opinions. The audience can relate with the host and the people who participate in the Shows are another

reason for the expansion of talk show. The global broadcast media arena is giving much attention for such program which enforced the Ethiopian broadcast media to focus talk show program genre in their formats and presentation style. When we see the global media approach with regard to talk show program it back to five decades but the trend in Ethiopia is only around two decades. The Ethiopian television which was the only station in the country for a long period of time there was a small number of talk show program for more than ten years. During that time the station were not even produce talk show program in house rather those small number of talk shows were produced by outsiders or out sourced, which means they were outsourced and given air time to the producers with sharing of cost and benefit from the commercial and promotion of the different organization while the program is broadcasting. According to the information that the researcher got from commissioning department of the station the share value of the cost is 60-40 which means 60% is given to the station and the rest 40% given for the outsider producer, as EBC outsource programs document manual(2015).

2.4. Talk Show program in Ethiopian Television

In Ethiopian Television talk show programs were designed since April 2018 in which the station launched a new content and format reform. Hence now in Ethiopian television, there are different talk show program formats, which have its own objective, way of presentation and style and target audience.

The talks show programs have four major features one to one show, one two few people, one to many people and phone In. The shows are namely ,B'irtu w'eg,(Hard Talk) yegna geday (Our topic/ Concern) Derib Jegena,(Dual Hero) Negen zare,(the future today) Yelbona wiker (the inner voice) Tenawo bebetowo, (your health at your home) Etv Mederek,(Etv platform/the stage) kasema (The pillar), Min yeteyek,(Your questions) and Enderase (the parliament). These talk show programs are mainly started to be on air at different times. For instance one of the earliest talk Show programs in ETV was “Tenawo Bebetwo” (your health at your home), which was one of the first in house produced phone-in talk show program which was beginning to air in 2010, which is a researcher is going to be studied. Other

programs began to air regularly since 2017 (EBC Gap Analysis and new formats document, 2018).

2.5. Role of Television Producer

The producer is central to every aspect of a project from the wisp of an idea to a tangible piece of work. His/her activity is expected to do base on certain standard and the agenda of the public that is serving the public rather than reflecting his/her interest. The producer must act as a neutral professional in providing information, education and entertainment role rather than reflecting a one-sided and biased point of view (Hallin and Mancini, 2004).

Journalistic professionalism is likely to be low when the media house has strong ties with a political organization. That means there will be lack of autonomy due to the affiliation of the media institution to party politics. Here when journalistic culture and professionalism decline, social responsibility and social purpose of the media house will be in danger (ibid). Besides that regular activities of journalist have both professional and ethical aspect.

A producer's talents cover a broad spectrum from creative to technological, from the first hint of an idea to its final broadcast. In talk show program generating discussion of ideas, making research and preparation on the selected issues, preparing running order or making the skeleton of the show, which needs the comment from the producer and the editor later is the main role of the producer and the editor. After collecting all the necessary data and facts giving direction and showing the next steps and activities to the journalist are expected from the producer. In addition to that the journalist engaged in the show editing process along with the professional video editors and expected to make ready all the necessary materials such as sound effect, other pictures from archives and other roles are expected from the journalist. In talk show program also the journalist is highly characterized by high professionalization (Hallin and Mancini, 2004).

From the above point of discussion we can understand that, the producer propels the project from an unformed idea to final broadcast or download. He can nurture the project from conception to distribution.

2.6. Target Audiences

The word audience has long been familiar as the collective term for the receivers in the simple sequential model of the mass communication process (source, channel, message, receiver, effect) that was deployed by pioneers in the field of media research' and claims that most audiences of the mass media are not observable. Hence, audiences are both a product of social context and a response to a particular media provision (McQuail 1997) as stated.

Shaun Moores asserts that the audience was not a homogeneous group that is easily identifiable for observation and analysis. Rather, Moores proposes a plurality of audiences – consisting of disparate groups categorized according to their reception of various media and/or by their social and cultural positioning (Moores, 1993).

Selective audience explains that the audience are selective on media exposure, interpretation of media content (based on pictures-in-our-head, recurrent context). Selective audience was in accordance to Blumler and Katz's Uses and Gratification Theory (1974). The audiences used the media depending on how they want it. Katz raises questions on not what the media can do but what the people do with the media.

McQuail (1997) directly puts the foregoing factors as factors reshaping nature of the audience. from the tradition linear model (one-way) by Harold Lasswell, that is sender-message-receiver have given way to not only turning table (changing role of sender to receiver and receiver to sender) but also to the phase of audience being active user of what message was being communicated, how such message was deciphered, in what context, to what effect which in turn determines what and how the audience will encode as feedback.

As A Guide to Adapting, Developing and Producing Effective Radio Spots (2009) reports, Health communication strategies must be geared towards a clearly defined target audience in order to achieve optimal effect. So, there were two kinds of target audiences, namely the primary target whose behavior was to be influenced directly, and the secondary target who can influence the primary target such as a family member who makes decisions about the household or health worker with whom the primary audience comes into contact. As much as

possible information should be collected about the target audiences, especially with regards to their views and understanding of disease.

2.7. Phone In

In the western country experience shows that a health talk show mostly done in the studio directly face - to - face communication, that means physically present the audience and make dialogue to the host.

In Ethiopia such kinds of format was not adaptable, instead now a health talk show was even though takes place in the studio the audience make c1ontact to the host or professionals through a telephone call, that was phone in.

1Starkey (2004) said that, Phone-ins are likely to require more personnel than a single producer-presenter, especially if the callers are to be screened before they are put to air, it means, every caller who is allowed to speak in the program will have been spoken to beforehand, either by the producer or by a researchers who should attempt to identify those who sound more interesting.

As McLeish (2001) contend that through public participation, the aim of a phone-in is to allow a democratic expression of view and to create the possibility of community action. An important question, therefore, is to what extent such a program excludes those listeners who are without a telephone.

Phones are now becoming sophisticated and are also emerging at an alarming rate. People greatly utilize this type of communication so as to send a request and get an appropriate response for things they desire to know.

Turkle (2012) People's everyday ways of interacting and communicating have been radically transformed through new forms of communication media and technologies, such as SNS and Smart phones. People are spending more time communicating through these means without face-to-face interaction.

Today tell phone is a faster, more enhanced and more convenient distribution of information and its ability to convey messages instantly make cell phone is a power full medium.

Arthur (2009: 9) the new media communication technologies might bring new communication opportunities to bridge the communication gap between hearing impaired and hearing groups. Perhaps the new forms of media and the advent of mobile technologies have changed to allow new possibilities for richer communication experiences between Deaf/Hard of Hearing and hearing people.

In comparison to face to face communication, phone communication usually occurs in an explicit manner because the physical and cultural barriers in this type of communication are more or less better resolved and the confidentiality of the requester can also be well documented. Thus, without any doubt, phone communication always outweighs face to face communication in many aspects. Actually, it is also due to this fact that phones are currently becoming the mainstay of communication devices.

2.8. Health and media

The media are the primary or sole means for achieving health promotion goals. It also, the media can be effective in changing health attitudes, especially when supplemented by face-to-face instruction (Maccoby, N. 1977). That is why it has the ability to generate awareness among large numbers of people is considered one of the strengths of mass media (McKinlay, 1981).

Noar, (2006) added that Mass media campaigns have long been a tool for promoting public health being widely used to expose high proportions of large populations to messages through routine uses of existing media, such as television, radio, and newspapers. When media are used to promote existing programs, they can familiarize audience members with health behavior change products and services, and encourage the audience to call, write, or participate in programs. This is perhaps the most common role for the mass media in health promotion and probably the best known by the public. (King and colleagues, 1987)

Warner, K. E, (1987) argue that public health professionals have begun to explore the purposive use of television and other forms of mass media as a means for shaping health attitudes and behaviors.

In addition to this scholar have Saied how health and media are interrelated to promote the issues and address to the intended society. In that regard, Gupta & Sharma (2015) suggest that mass media impart necessary health information in our daily life enabling common people to take appropriate decision about their different aspects of their lives especially about health.

Evidences suggest that mass media play a central role in informing & education people about important events / changes happening around the world. Especially because media connect the audience to the world beyond their immediate reach. In other words, media bring the world closer to the audience and increase their reach and access. Mass media is one such institution which has the ability and potential to influence every an individual's life in a big way. We see that media has ability to influence, our behavior, our culture and even it can affect our thinking and attitudes towards different issues in our daily life (Gupta, 2006).

Media have wide reach and access to influence millions of audiences, geographically scattered over thousands of kilometer in different territories, across the geopolitical boundaries. With these qualities media are intensively employed in health education programs (Altschull, 1995).

Collins (2003) also suggest that media plays the role of change agent. It can influence the behavior of people for the sake of better health by adapting to preventive measure which stops the spread of disease i.e. use of condom to stop HIV/ AIDS. By informing & educating about different health issues, media help promote healthy lifestyle and positive behavior changes among the common public. Mass media is instrumental in affecting knowledge and attitudes of people for adopting / maintaining healthy lifestyle. It was a well-known fact that Media influences our behavior toward health belief by informing and educating people. Mass media interventions have great impact on common people's knowledge, attitudes and behavior towards health and healthy lifestyle.

In short one can say that media was instrumental in bringing behavioral change about knowledge, and attitudes about health and healthy behaviors.

2.9. Health Education

According to Meseret & Yihnew (2004) the history of health education as an emerging profession was only a little over one hundred years old, the concept of educating about health has been around since the dawn of humans. It does not stretch the imagination too far to begin to see how health education first took place during pre-historic era. Someone may have eaten a particular plant or herb and become ill. That person would then warn (educate) others against eating the same substance. Conversely, someone may have ingested a plant or herb that produced a desired effect. That person would then encourage (educate) others to use this substance.

At the time of Alma Ata declaration of Primary Health Care in 1978, health education was put as one of the components of PHC and it was recognized as a fundamental tool to the attainment of health for all. Adopting this declaration, Ethiopia utilizes health education as a primary means of prevention of diseases and promotion of health. In view of this, the national health policy and Health Sector Development Program of Ethiopia had identified health education as a major component of program services.

According to World Health Organization (1948) health is defined as a state of complete physical, mental and social well-being. Health was not just the absence of disease or infirmity. This definition of health speaks about the absence of disease or infirmity. While health is not just the absence of illness or infirmity In fact, defining health isn't an easy task. Health is a combination of many facets of one's personality.

WHO (1986) on the Ottawa Charter stressed that education, food, shelter, income, peace, a stable ecosystem; sustainable resources, equity, and social justice are necessary inputs for health.

Sharma & Gupta (2016) mention health is much more than the biomedical health. Health includes physical health, mental health, spiritual health, family health, social health & well-

being etc. Health is a multidimensional concept; Health is not just physical state of health as it includes mental, physical, social, psychological, and economic health.

Health education is an interdisciplinary social science that draws from many disciplines i.e. medical sciences, psychology, education, environment, biology, and other disciplines, with an objective of providing information and instructing individuals, groups, and communities to achieve & maintain better health (Sharma, & Gupta, (2017).

Health education as applied to health and disease issues is defined as "A process with intellectual, psychological, and social dimensions relating to activities which increase the abilities of people to make informed decisions affecting their personal, family, and community wellbeing. This process, based on scientific principles facilitates learning and behavioral change in both health personnel and consumers, including children and youth, (Joint Committee, 1973).

The WHO (1998) on his document describes health education as not limited to the dissemination of health-related information but also “fostering the motivation, skills and confidence (self-efficacy) necessary to take action to improve health” as well as “the communication of information concerning the underlying social, economic and environmental conditions impacting on health, as well as individual risk factors and risk behaviors, and use of the health care system.” A broad purpose of health education therefore was not only to increase knowledge about personal health behavior but also to develop skills that “demonstrate the political feasibility and organizational possibilities of various forms of action to address social, economic and environmental determinants of health”.

According to Green and Kreuter (1991) the defining characteristic of health education is the voluntary participation of learners in determining their own health practices. The authors argue that, “cognitive and behavioral changes depend on the degree of active rather than passive participation of the learner”, and that by emphasizing the voluntary nature of health education, “it helps to avoid public reaction to programs that might be perceived as

propagandist, manipulative, coercive, politically or commercially directed, paternalistic, or threatening”.

As Meseret & Yihnew (2004) stated that in health education, we had to be concerned about how people actually feel, not how we think they should feel. We are interested in how people look at their own problems, not only in the problems we see ourselves. We want people to develop the confidence and skills to help themselves.

Allegrante (1986) has expressed the goal of health education is to promote, maintain, and improve individual and community health through the educational process. The conceptual hallmarks and social agenda that differentiate the practice of health education from that of other helping professions in achieving this goal include: (1) using consensus to identify health needs and problems; (2) voluntariness of participation as an ethical requirement; and (3) a focus on stimulating social and organizational behavior change in defined populations.

Health education is eminently interested in giving people the empowered role of defining their problems, setting the priorities, and creating the practical solutions by which they achieve a sense of interest in, commitment to, and ownership over the efforts used to address health issues.

Basically health education helped people to make wise choices about their health and the quality of life of their community.

2.10. Behavior Change Communication

Effective communication is vital for an orchestrated response to a public health crisis (Haiders 2015). WHO report (2009) on “Why health communication is important in public health” insists that many of the threats to global public health (through diseases and environmental calamities) are rooted in human behavior. WHO (2009) added that in adopting the transmission view of communication, it is reasonable to think carefully about the channels through which intervention messages are disseminated, to whom the message is attributed, how audience members respond and the features of messages that have the greatest impact. The intervention message once is disseminated, it is received and processed through

individual and social prisms that not only determine what people encounter but also the meaning that they derive from the communication depending upon factors at both the individual and the macro-social level.

For the smooth communication it is well known that human behavior is very important. For that Bandura, A. (1977) stated that Behavior change was generally thought to be both the outcome of ultimate interest at the individual level and the result of a long series of antecedent changes. Social learning theory advocates the use of modeling, skills training, active involvement, reinforcement and on-going feedback to create lasting behavior change.

Behavior change becomes more likely as interventions foster the antecedents to behavior, such as goal setting, proximal goals, and self-efficacy (Bandura, A. 1985). As currently employed, the mass media alone may be limited in the degree to which they meaningfully facilitate some of the antecedents of behavior, for example, feedback and active involvement in the learning process. However, creative uses of the mass media have been successfully devised to influence other behavioral antecedents

Regarding to communication to bring behavior change, it was often a goal for staff working directly with constituents, organizations, governments, or communities. Individuals charged with this task can be thought of as “interventionists” whose goal it was to design and implement programs or interventions that produce the desired behavioral changes¹ (Glanz, Lewis, & Rimers, 1990).

According to Canavati (2016) Behavior change communication (BCC) is widely recognized as one of the main health promotion strategies. It is an interactive process of working with individuals and communities to develop communication strategies to promote positive behaviors, as well as create a supportive environment to enable them to adopt and sustain positive behaviors.

The most commonly accepted method of BCC in health settings was interpersonal communication (IPC) through: face-to-face education - either in individual (e.g. one-to-one counselling in the home) or small group sessions, group teaching, and other techniques designed to influence the behavior of participants (USAID, 2014; Hornik , 2015: Canavati , 2016).

Behavior Change Communication (BCC) was an interactive process aimed at changing individual and social behavior, using targeted, specific messages and different communication approaches, which are linked to services for effective outcomes. The study elaborates Human behavior; it was among the major determinants of the health of individuals, families or communities. Healthy behaviors contribute to the overall health of individuals and communities and unhealthy behaviors adversely affect the quality of life people at different levels. Most health issues cannot be dealt with by treatment alone. The promotion of health and prevention of diseases will usually involve some changes in life styles or human behavior (Meseret & Yihenew 2004).

To sum up in a related idea, Wakefield et al., (2010) expresses Mass media campaigns can play an important role in achieving population-wide health behavior change. However, they are best supported with other strategies e.g. policies, services and products.

2.11. Health Communication

According to Maibach and Holtgrave (1995) stated health communication as the use of communication techniques and technologies to positively influence individuals, populations, and organizations for the purpose of promoting conditions conducive to human and environmental health.

As Bernhardt (2004) stated Health communication was the scientific development, strategic dissemination, and critical evaluation of relevant, accurate, accessible, and understandable health information communicated to and from intended audiences to advance the health of the public.

The scope of health communication includes disease prevention, health promotion, health care policy, and business, as well as enhancement of the quality of life and health of individuals within the community Ratzan et al, (1994).

According to Robinson et al, (1998) Consumer demand for health information and the availability of new media technologies have spurred substantial interest in interactive health

communication (IHC), the interaction of an individual consumer, patient, caregiver, or professional with or through an electronic device or communication technology to access or transmit health information or receive guidance and support on a health-related issue. Hence, with access to IHC applications, consumers gain greater control of influences over their health, and health professionals may become more effective and efficient providers of care, health information, and support.

One of the most important ways of addressing health related issues for the general public was health communication.

As the National Cancer Institute (2001: 3) suggested, health communication can increase the intended audience's knowledge and awareness of a health issue, problem, or solution; influence perceptions, beliefs, and attitudes that may change social norms; prompt action; demonstrate or illustrate healthy skills; reinforce knowledge, attitudes, or behavior; show the benefit of behavior change; advocate a position on a health issue or policy; increase demand or support for health services; refute myths and misconceptions; and strengthen organizational relationships (National Cancer Institute, 2001: 3).

Health communication is one of the best ways to address health related issues for the general public. It is clear that majority of the population sought after health related information so as to escalate their medical knowledge thereby improving quality of life. Hence, health communication can serve as a cornerstone in such circumstances.

One of the objectives of health communication was to increase knowledge, awareness and understanding of health issues. However, the background of health communication was not only confined to health advancement and hesitant of bad prediction of a disease. It also extends to various social, political and economic issues.

In order to avoid health disparities, it was crucial to use a full range of health communication strategies including entertainment-education, media advocacy, interactive health communication and interpersonal communication, as the health disparities had a potential to extend in to social, economic and political discrepancies.

Most importantly health communication can increase appropriate demand for and use of health services. The emergence of tailored health communication was part of a growing marketing approach to customize health information (Rogers, 2003). Tailoring could enhance motivation to process health information in at least four ways: (a) match content to an individual's information needs and interests, (b) frame health information in a context that is meaningful to the person, (c) use design and production elements to capture the individual's attention, and (d) provide information in the amount, type, and through channels of delivery preferred by the individual (Rimer and Kreuter, 2006: 187-188).

Overall Health communication is useful in helping individuals to find support from other people in similar situations and also encourages social norms that benefit health and improve quality of life.

2.12. Theoretical Framework

In the examination of assessing TV live talk show: EBC "Tenawo Bebetwo" in focus, in the perspective of health professionals of three selected hospitals and the content in the program; this study utilizes framing theory, media effects and agenda setting. The study had discussed in detail in the following sections.

2.12.1. Media Effects

The aim to view the media in different perspectives is important in today's world as it was playing a significant role not only in everyone's life but also in the formation of the key social foundations (Lawrence & DeFleur, 1995).

It was now that how media have a great roll in the society that was why Bruni and Stance (2008) support the idea and defines television as an important agent of socialization, which defines the society and determines its goals. Moreover, Shrum (2005) reported that regular awareness of TV use and its content build perceptions of societal realities. This includes the occurring of material comfort that could mislead and might influence the means that spectators reflect upon themselves and the society. Due to such an influential role, it can be

inferred that television produces powerful effects on health, interpersonal relationships, social religious and cultural beliefs as well as the values of the society including individual behaviors.

Media programming was actually spent in the ease time available to the individuals. An idol person automatically has an innate indication of relaxation by means of enjoying and appreciating the television programs (Hills & Michael, 1997). For that matter media has an impact in different ways according to audience level of knowledge.

Here as, Zillman & Peter, (2000) agree that media programs possess the ability to affect the nation's ethical and economic principles by taking the advantage of its suggestible viewers. When experienced in a balanced dose, the media programs promote positive attributes, societal goodness and idealism. The balanced consumption of media programs improves the personal and societal happiness.

The message transmitted through media needs attention that was why As Gerbner (1976) describes media role as responsible for shaping or cultivating viewer's ideologies about societal realities. The constant exposure to media messages over time reforms the basic conceptions of the viewer and ultimately shapes the person's perception as per media content. Other scholars like Bushman and Anderson (2014) as stated the effect of media have continuous exposure to media violence make individuals less sensitive and less helpful to the injuries of others (Physical/Psychological) thus adversely affecting the psychological wellbeing of them by making them immune to the threatening conditions.

Another study reveals that exposure to anxiety and fear through the media inculcates the same emotions in its viewers and thus negatively affect the psychological health of its audience. It further suggests that extensive viewing of television violence alters a child's view about acceptability of violence may hinder the development of their moral reasoning (Wilson, 2010). Moreover Singh & Sandhur (2011) reported that television damages social, moral and religious values and negatively sways human behavior.

From the above assumption even though its one side has a negative effect In terms of information flow and as a source of entertainment Media has a positive effect but sensationalizes the news and programs produces detrimental effects at the psychological wellbeing of its audience. The major implication would be to select an objective and less emotional way to elucidate the news and programs.

To generalize in today's world, media has become an integral part of everyone's life and a convenient source of information. It is used as a tool to update, inform and amuse people about a variety of issues occurring around the world.

2.12.2. Framing Theory

The media study is primarily concerned on the information content and flows. The way information transferred to their readers comes through various forms of communication, all of which are framed to meet the goals of the providing sources. The role of framing comes here in. It describes the way media portray the stories, issues, events or how to tell the stories for audiences'/readers' consumption. A number of influential scholars in the evolution of framing theory, including Entman (1993) define the concept; framing, as a process of selecting some aspect of a perceived reality and make them more salient in a communicating text in order to promote a particular problem definition, causal interpretation, and moral evaluation. Robert Entman, one of the founders and father of framing, defined the term as, the process of culling a few elements of perceived reality and assembling a narrative that highlights connections among them to promote a particular interpretation. In his view, framing is a process which implies, first and foremost, selection and salience. The verb 'to frame' is thus defined as: to select some aspects of a perceived reality and make them more salient in a communicative text.

Media framing accordingly points to the way in which issues are selected and accentuated in and by the media. Entman further elaborated the term as: Fully developed frames typically perform four functions: problem definition, causal analysis, moral judgment, and remedy promotion (Entman, 2004). Framing works to shape and alter audience members' interpretations and preferences through priming. That is, frames introduce or raise the salience

or apparent importances of certain ideas, activating schemas that encourage target audiences to think, feel, and decide in a particular way (Entman, 2007). Framing theory aims to identify schemes in which individuals perceive the world.

Frames help us to interpret and reconstruct reality. The experimental work of Kahneman and Tversky (1979, 1984) was the first to demonstrate how different presentations of essentially the same information can have an impact on people's choices. They found that individuals were inclined to take risks when "losses" are highlighted. But when the same information is presented in terms of "gains," individuals shy away from risks. Kahneman (2003) uses the "determinants and consequences" of accessibility to explain prospect theory, framing effects, and heuristic processes. Kahneman's approach to framing has been called the "equivalency" framing effect (Druckman, 2001), in that it examines the influence of different but logically equivalent messages. In this approach, all factual and stylistic elements are comparable so that the pure influence of the frame can be observed. The "equivalency" approach draws extensively on the experiments of risk-gains research (Kahneman & Tversky, 1979).

The "emphasis" (Druckman, 2001) approach to framing effects demonstrates that accentuating certain considerations in a message can influence individuals to focus on those particular considerations. Scholars in this approach maintain that it is not always possible to manipulate a frame without changing some of the facts. It is not always possible to present a situation in different but equivalent ways. Instead, emphasis framing effects refer to situations where, by emphasizing a subset of "potentially relevant considerations," individuals are led to focus on those considerations in the decision making process (Druckman, 2001). Framing effects violate "invariance," the assumption that preferences are not affected by variations in arbitrary aspects of the issue. Examples such as the Asian disease problem suggest that individuals can be affected by variations in irrelevant features of options and that framing effects challenge citizen competency.

To this end, the researcher selected this theory as a useful instrument to analyze the contents of the media and this framing theory is used in assessing TV live talk show of focusing EBC "Tenawo Bebetwo" program. Hence, framing provides a better understanding of how the media influence public opinion through the way they present the programs to their viewers.

2.12.3. Agenda Setting

According to the book Mac Combs and Donald Shaw in (1972) stated Agenda setting was the idea that what the public thinks about was set by the media. It emphasizes the agenda setting theory was first introduced by Dr. Maxwell McCombs and Dr. Donald Shaw in 1972. This theory states that the news plays an integral part in the shaping of political realities. The amount of time spent on an issue and the information relayed in a news story, along with the story's position, determines how much a reader learns and the amount of importance placed on the issue. The agenda setting theory of McCombs and Shaw states that when the media reflect on the views of a candidate during a campaign, they are also shaping and determining the issues of importance. This can ultimately set the agenda for a political campaign.

Dearing & Rogers (1996) on their part describes agenda is a set of issues communicated in a hierarchy of importance at any point in time. Agenda-setting addresses the ongoing competition among issues to gain the attention of media professionals, the public and policy elites.

Relating to media and health issues about agenda setting the scholars Kozel, Kane, Rogers & Hammes (1995) state that Health Promotion Agenda-Setting is a process that focuses on how health promotion and public health policy agendas were set and influenced. That means the health promotion agenda-Setting specifies and prioritizes problems and alternative solutions to set strategic agendas, which may ultimately advance the mission of public health, to protect, promote and preserve the health of the community. (Kozel et al., 2003)

Concerning to Tenawo Bebetwo Health live talk show the agenda setting theory, was just like the theory said on the above, the talk show has a potential to set the agenda to the public. The public can discuss on the issue set by the talk show program and it was expected a response from the audience and made interactive. Therefore to sum up the agenda set by the media can influence the audience life style.

CHAPTER THREE

Research Design and Methodology

The main focus of the study, as well as the major issues of the study, will be addressed through the methods of data gathering, analysis, and discussion. Having this in mind both quantitative and qualitative research methods of survey, interview and content analysis are deployed. Therefore, the research design, population and sampling size, Methods of Data collection, sampling techniques, and methods of data analysis are presented in this chapter.

3.1 Research Design

Research methodology is a blueprint to attain the research objectives and answer research questions adequately. It is a master plan in which the researcher specifies methods and procedures of collecting and analyzing the necessary data including specifying the source of data to be used. In this part, the researcher explained the logic behind the selected methods and techniques to manage the study. In addition, it is a place where the researcher checks the appropriateness of the data to be collected to solve the intended problems. The choice of research design fundamentally depends on the nature of the problem; the knowledge already available about the problem; and the resources available for the study (Kothari, 1985).

To accomplish the main objective of the study a combination of quantitative and qualitative method has been used. This was suitable to the exploratory nature of the study and provided the research questions to explore health professionals' ideas towards "Tenawo bebetwo" of ETV talk show program.

Mixed methods study has been described in a variety of ways which can make it a difficult concept to understand (Niglas, 2009). It has been referenced as "empirical research that involves the collection and analysis of both qualitative and quantitative data" (ibid), whereas Johnson et al. (2007, p. 123) define it as: "... the type of research in which a researcher or team of researchers combine elements of qualitative and quantitative research approaches (e.g., use of qualitative and quantitative viewpoints, data collection, analysis, inference

techniques) for the broad purposes of breadth and depth of understanding and corroboration.” Greene (2007, p. xiii) recognized by Johnson & Onwuegbuzie (2004) believes that this approach provides researchers with opportunities to “... compensate for inherent method weaknesses, on inherent method strengths, and offset inevitable method biases”. Creswell and Plano Clark (2011) comment that this approach enables a greater degree of understanding to be formulated than if a single approach is adapted to specific studies. Furthermore, they also put forward a collection of core characteristics which highlight key elements within mixed methods research. They state that researchers collect and analyze both qualitative and quantitative data in a sequential and/or simultaneous and rigorous manner which integrates the two forms of data.

Therefore, by taking the use of having the three kinds of data collection methods i.e., survey, in-depth interview and content of the program as an advantage, the study applied the mixed methods of research. As the above mentioned scholars clearly stated advantages, the researcher used this method to dig out how health professionals of three selected hospitals perceive “Tenawo Bebetwo” program and the message transmitted in the talk show and how the contents are set agenda towards addressing the issue of phone-in participation in the talk show.

To sum up, a combination of quantitative and qualitative research methods which was mixed research method applied to get the health professionals perception of Tenawo Bebetwo live TV talk show. Mostly, qualitative research method was going to be used with semi structured questionnaire composed in this research paper.

3.2. Population, Sampling and Sample size

To select the required sample, the researcher used systematic random sampling technique. This technique was employed because to enable the researcher to select health professionals from the selected Hospitals that is administered under the government and private for this study purpose. According to the information from Ministry of Health (MOH) and Addis Ababa Food Medicine and Health Care Administration and Control Authority (AAFMHACA) there are currently licensed 8 government hospitals administered under federal level and 18 private hospitals in Addis Ababa city under AAFMHACA. Among these three hospitals are

selected according to their service delivery and long work experience for the research purpose that means one hospital selected from the government: Black Lion, it is the largest hospital among the others government owned hospitals that have high number of health professionals and long year service in addition to that its medical school play a great role in the country, the others two selected from private hospitals that was Hayat and Bethel among the other 18 private hospitals using simple random sampling method. After selecting the hospitals in this way, a systematic random sampling technique used to select samples from subjects to be respondents, which means the selection process started by picking some random point in the list and then every nth element is selected until the desired number was secured. These respondents are health professionals who were working in those three hospitals. There for a researcher believed that these health professionals were critical respondents for the intended study. The goal for selecting this sample was to have those individuals which enable the researcher to get relevant and plentiful data regarding to the topic of the study (Yin 2011).

With regard to drawing sample the researcher employed a Systematic random sampling and purposive random sampling technique. Systematic random sampling is the random sampling method that requires selecting samples based on a system of intervals in a numbered population. In such a design the selection process started by picking some random point in the list and then every nth element is selected until the desired number is secured.

The aim of the systematic random sample was to reduce the potential for human bias in the selection of cases to be included in the sample. As a result, the systematic random sample provides the researcher with a sample that is highly representative of the population being studied; assuming that there limited missing data (Kothari, 2004, p.62).

Purposive sampling technique was employed because it hopes to enable the researcher to select the targeted respondents who watch the program. According to Howitt & Cramer (2014:271) the purposive sampling used in drafting specified types of consultants. Frankfort & Nachmias (1996:36) also elaborates this fact as follows. "Researchers select sampling units subjectively in an attempt to obtain a sample that appears to be representative of the population." This type of sampling gave an absolute freedom for the researcher to choose

subjects that are knowledgeable about the research issue. Purposive sampling allows the researcher to get in depth and informative data. Among the purposive sampling techniques, the researcher applied maximum variation or heterogeneous purposive sampling where it used to provide as much insight as possible in to the event or phenomenon under examination. "This sampling method was based on the "law of requisite variety," which says that any research study should represent the variety of characteristics present in the population" (ibid).

The quality of any research is influenced by the relevance of methodology, instrumentation and suitability of the sampling strategy that has been adopted (Manion, 2001). The researcher uses systematic random sampling to select the sample size. On this regard, the respondents are going to be selected from diversified groups, In terms of age, position, years of experience and educational status; in this study a researcher were focus on the selected health professionals that are nurses and doctors and in addition to this the researcher analyzed the program content from the period of January 5/2019 to December 28/ 2019 (twelve months) which is the resent program to the research study. According to Federal Negarit Gazette proclamation No.1112/2019 "Medical professional" means a physician or other health professional who is authorized by the appropriate organ to examine, diagnose human diseases and treat them by drug, surgical operations or other related medical means ; it is known that these people include doctors, nurses, pharmacist, etc. The samples were a total of about 124 nurses who working in these three selected hospitals. That was from Tikure Anbesa 60, from Hayat 26 and from Bethel 38 were taken. The number of sample given to each hospital is according to their population size (selected health professional) available in each hospital.

3.3. Methods of Data collection

There were different methods of data collection that the researcher applied in this research work. From qualitative and quantitative research methods data collections, the study employed those which were conducive to achieve the intended objectives. Among those methods of data collection, interview, Survey and content analysis methods of data collection selected for this research. In the content data on the talk show program meaning and their understanding, the basis in the designing of such program, the values and significance of the

programs were assessed. In the study, the talk show programs participant (health professionals and phone in audience) role, the role of the host during the time of transmission was assessed. They are taken for their advantages for the research. This is discussed here under.

3.3.1. Survey Method

The survey is a flexible research approach used to investigate a wide range of topics where it often employs the questionnaire as a tool for data collection. Survey research is answer questions that have been raised, to solve problems that have been posed or observed, to assess needs and set goals, to determine whether or not specific objectives have been met (Isaac & Michael, 1997).

As indicated in the above survey most of the time used questionnaire as a tool for data collection. Therefore, for the purpose of this research questionnaire distributed to the selected hospitals of health professionals in order to have data with regard to attitudes towards “tenawo bebetwo” of ETV Live talk show. These health’s professionals: nurses that selected for the research purpose, who were working in the government and private hospitals, were selected through systematic random sampling, it means taking every nth of the target population, technique and provided with self-completion questionnaire. Questionnaire was the basic tool for collecting data in survey research. More than 25 questions were constructed of which 8 were close ended and 6 were open ended and the rest were answered using five point Likert’s scale used to allow the individual to express how much they agree or disagree with a particular statement. The researcher tried to construct questions as short, clear and unambiguous as possible.

The questions were presented in four thematic categories. The first category deals with demographic information. The second category of questions deals with to explore how health professionals used the information provided on the program regarding to their day to day life. The third category deals with to examine the health professionals’ perception towards “Tenawo Bebetwo” live TV program. The last category deals with to assess in what ways Tenawo Bebetwo talk show address the health issue of the public. A total of 118 female and

male health professionals that was nurses of the selected hospitals in Addis Ababa completed the questionnaire.

3.3.2. Interview

In order to get the data from primary resource doing interview with respondents was the main technique. There are different kinds of interviewing methods. Among these, the researcher was going to apply an in-depth interview method. Scholars in the field of research such as Johnson (2002:106) stated that in-depth interviewing begins with commonsense perceptions, explanations, and understandings of some lived cultural experience and aim to explore the contextual boundaries of that experience or perception, to uncover what is usually hidden from ordinary view or reflection or to penetrate to more reflective understandings about the nature of that experience". Moreover, Marvasti (2004) also elaborates that in depth interview allowed suppressed feelings through the interview process. Additionally, the scholar argued that this in-depth interviewing technique is useful for the researcher to gain knowledge of his or her own respondents' hidden or conflicting emotions individually. Crabtree and Miller (1999: 18) also stated that individual interviews often provide more depth about a topic. In addition they noted in depth interview was a powerful qualitative research tool when the focus of inquiry is narrow' (1999: 90). The method would help come out with depth of responses that is necessary to gain a detailed understanding of the respondents. In an in-depth interview, there were a conversation between a researcher and a respondent to have detail information about the perception of health professionals towards "tenawo Bebetwo". If the respondent gave unclear answer or not understand the questions the researcher had a chance to ask again. So to understand opinion and attitude of health professional, towards the live talk show of "tenawo bebetwo" health program based on their life experience and perceptions, in this regard two different in-depth interviews were carried out. That is In-depth interview with program producers and the other one with key informants. The interview with the media producers was to identify the intended messages of the television talk show program by applying structured format of in depth interview was appropriate and essential.

3.3.3. Content analysis

Content analysis is a technique used for gathering and analyzing the content of a program. Content, according to Deacon et al, (1999) refers to any message that can be communicated in forms of words, pictures, symbols, ideas, themes or meanings. Whereas Wimmer and Dominick (2011), content analysis has its own significance, which can be divided into different categories, such as describing patterns or trends in media portrayals, testing assumptions about the objective of producers, comparing media content with the real world, to assess the media effect. In the study along with qualitative research techniques, this study used quantitative content analysis to examine the content of Ethiopian television Tenawo Bebetwo live talk show program. This method enables to collect data about the broadcasted talk show programs such as issues, time duration, aims and themes and the frequency of each program in the study period. Smith (2000) indicated that content analysis has a vital role in extracting the necessary information from the desired data which later helps to identify the objective and characteristics to quantify the data. According to Gunter (2000), the aim of content analysis is the truthful representation of a body of messages.

Thus, content analysis is an important method that allows analyzing data and its process, impact, and meanings. Therefore, the analysis of this talk show program of Tenawo Bebetwo issues and interpreting the data of the study was drawn.

3.3.3.1. Period of Content Analysis

EBC Tenawo Bebetwo live talk show is the program which is transmitted in the station live. The content analysis in which the period from January 5/2019 to December 28/ 2019 (twelve months) this period of study was selected because my research were done during this year's therefore the programs transmitted were very recent to assess or evaluate for the study. In the study period that broadcasted live Tenawo Bebetwo talk show programs the content in the study period where it could have become 52 programs from the talk shows included in the study. Since 4(four) programs were missed since they were not found to be broadcasted 52 programs were analyzed. The programs were missed due to different reasons such as the

presence of urgent and current issues unable to transmit the program on time and unexpected live transmissions.

3.3.3.2. Unit of Analysis

The unit of analysis on this study was the selected sample talk show programs that produced and broadcasted in the study period were included. Thus, the unit of analysis of this study is the talk show program content.

Moreover, in terms of the content of the unit of analysis, in this regard, the researcher tried to analyze the content in the following categories. Guest's selection, issue or agenda framing and the role of host in talk show programs, participants (phone-in) of talk Show programs, weakness and strengths of EBC Tenawo Bebetwo talk show program, duration of time, dominant issues in the study period, frequency of the transmitted issues in their weekly schedule, format and characteristics of the talk show. The content analysis was done mainly in two ways. The analysis was done according to the theme of the programs as content categories and also based on the aims of the talk show so as to indicate how the issues are framed. The content of this study is categorized and framed into fourteen themes.

- | | |
|------------------------------|---------------------------|
| 1. Respiratory system | 8. Hygiene and sanitation |
| 2. Internal medicine | 9. Nutrition and Food |
| 3. Maternal and child health | 10. Trauma or Emergency |
| 4. Cancer | 11. Epidemic |
| 5. Addiction | 12. Public health |
| 6. Neurology | 13. Mental health |
| 7. Dermatology | 14. Life style |

The subject categories were meant according to the characteristics and behavior of diseases. The purpose of the coverage is considered through what kinds of agenda framing types the talk show used in covering different issues.

3.4. Sample Size/ Technique

The main function of the sample size/technique was that it allowed the researcher to conduct the study of individuals from the population so that the results of their study used to derive conclusions that apply to the entire population. It is much like a give-and-take process. The population “gave” the sample, and then it “takes” conclusions from the results obtained from the sample. In this study, the researcher used a systematic random sampling technique in the collection of data. This achieved through the use of questionnaires to enable the researcher to better analyze and examine the perception of health professionals on Tenawo Bebetwio television program. Hence in determining the sample size of the given population, the statistical formula were used.

According to Kothari sample method (2004).and its sample Table.

$$n = \frac{z^2 \cdot p \cdot q \cdot N}{e^2 (N-1) + z^2 \cdot p \cdot q}$$

Where, N = (population)

z= 1.96 (desired confidence level is 95% and value obtained from table)

p= 0.5 (sample proportion).

q= 0.5 {(1-0.5) i.e. 1-p}

e = 13% or 0.13 (precision rate or acceptable error)

$$\begin{aligned} n &= \frac{(1.9)^2 \cdot 0.5(1-0.5) \cdot 853}{(0.13)^2 (853-1) + (1.9)^2 \cdot 0.5(1-0.5)} \\ &= 60 \end{aligned}$$

$$\begin{aligned} n &= \frac{(1.9)^2 \cdot 0.5(1-0.5) \cdot 106}{(0.13)^2 (106-1) + (1.9)^2 \cdot 0.5(1-0.5)} \\ &= 38 \end{aligned}$$

$$\begin{aligned} n &= \frac{(1.9)^2 \cdot 0.5(1-0.5) \cdot 45}{(0.13)^2 (45-1) + (1.9)^2 \cdot 0.5(1-0.5)} \\ &= 26 \end{aligned}$$

3.5. Data Analysis Techniques

As discussed earlier, the researcher employed both qualitative and quantitative data gathering techniques. The data were analyzed based on appropriate quantitative and qualitative research methodologies. Quantitative data that were collected by survey method entered into the computer using SPSS 24 software program. Coding and analyzing of these data was using a percentages in this software package. In addition, information through qualitative instrument in-depth-interviews analyzed qualitatively and program content analyzed using both methods . Lastly, the three data sets were triangulated to complement each other.

The Cronbach's alpha coefficient test

The SPSS result showed that the questionnaire's reliability is 0.731 Cronbach's Alpha and hence, reliable.

Table 3.1 – Reliability test table (SPSS result)

| Cronbach's Alpha | No of Items |
|------------------|-------------|
| 0.731 | 24 |

3.6. Ethical Consideration

In doing any research, there is an ethical responsibility to do the work honestly and with integrity. The basic principle of ethical research is to preserve and protect the human dignity and rights of all subjects involved in a research project (Leedy and Ormrod, 2013). In this regard, the researcher assured that the respondents' information are confidential and used only for the study purpose. The researcher also committed to report the research findings in a complete and honest manner, without confusing others about the nature of the results. As a general rule, therefore the study was not raising any ethical anxiety. In the process of conducting this research, the researcher obtained ethical clearance letter from Addis Ababa University, school of journalism and communication.

CHAPTER FOUR

Data Presentation, Analysis, Results and Discussion

Introduction

This chapter presents the research findings, analysis and discussion of the sample. Descriptive statistics are used to describe the data collected in research studies and to accurately characterize the variables within definite sample. This provides information about the overall representativeness of the sample. The description was percentage. The main purpose of this study was to Assess TV live talk show: EBC “Tenawo Bebetwo” in focus, regarding to the perception and attitudes of health professionals at Tikur Anbesa, Hayat and Bethel hospitals, Addis Ababa, Ethiopia and the content on Tenawo Bebetwo health program at EBC. The subject knowledge was captured through questionnaires distributed in the selected three hospitals. On the other hand, information was gathered from Medical Doctors who works on those hospitals and EBC program producer through an in-depth interview, in addition to these the content of the program also analyzed.

The total numbers of the respondents for the distributed questionnaire was 124. Six of the health professionals (nurses) did not return the questionnaire on time. Therefore, respondents of the questionnaire were 118(95.2%) in total. On the other hand, 12 Medical Doctors and a producer of Tenawo Bebetwo program were interviewed and included in this study.

The data from the questionnaires were statistically analyzed. The SPSS software version 24 was used for the quantitative data analysis. The findings are discussed according to the sections of the questionnaire in line with reference to the three section of the questionnaire.

In the triangulation design, the researcher implemented the quantitative and qualitative data analysis side by side. The three data sets were merged by bringing the separate results together in the interpretation to facilitate the analysis.

The results obtained are discussed below.

4.1. Data from the Questionnaire

4.1.1 Background Information of the Respondents

This section dealt with the background information of the respondents. The features discussed included gender, age, and level of education.

4.1.1.1 Gender

Table 4.1 Gender of the respondents

| Variables | | Male | Female | Total |
|-----------|-------------|------|--------|-------|
| Gender | Frequency | 23 | 95 | 118 |
| | Percent (%) | 19.5 | 80.5 | 100 |

The nurses who were selected in systematic random to fill the questionnaire for the study were both females and males. From the findings, majority of the nurses 80.5% were female while 19.5% were male. In general, it emerged that there were more female respondents' than their male counterparts in this study. There is a significant difference between males and females. This complements the assumption that more women nurses are employed in the hospitals. Therefore the analysis indicate that most of health professionals in the field of nurses occupied by the women.

4.1.1.2. Age

Table 4.2 Age of the respondents

| Variables | | 21-30 | 31-40 | 41-50 | Above 50 | Total |
|-----------|-------------|-------|-------|-------|----------|-------|
| Age | Frequency | 78 | 27 | 9 | 4 | 118 |
| | Percent (%) | 66.1 | 22.9 | 7.6 | 3.4 | 100 |

Above indicate that, in relation to age of the respondents, 66.1% of the nurses were between 21-30 years of age while 22.9% were among 31-40 years. There were also nurses who cover 7.6% of the respondent's aged 41-50. However, only 3.4% were aged 50 and more years. Here the results revealed that the majority of respondents were young and between 21-30 years of age.

4.1.1.3 Educational Level

The study sought to establish the education level of nurses. Out of the 118 respondents who participated in this study, majority of the respondents 83(70.3%) had Degree and more 24(20.3%) of the nurses were diploma holders.

Table 3 Education level

| Variables | | Diploma | Degree | Master | Any other | Total |
|-----------------|-------------|---------|--------|--------|-----------|-------|
| Education Level | Frequency | 24 | 83 | 11 | - | 118 |
| | Percent (%) | 20.3 | 70.3 | 9.3 | - | 100 |

And the rest 11 (9.3%) were in MA degree holders. It is possible to say that the majority of respondents can clearly understand the health and its program. Therefore, it is also indicated that the respondent group in the study can provide useful and relevant information related to Tenawo Bebetwo health program.

4.1.2 Nature of Viewing

In this section, the purpose of the questions is to know the nature of viewing of the nurses in line with frequency of their watching habit, appropriateness of the use of language and transmission time, and relevance of the concepts presented in the program that helped and if the programs are improved.

The respondents were asked about their viewership condition and 108 of them out of 118 replied that they watch Ethiopian Television or EBC which is 91.5%,

Table 4 Respondent's viewership condition

| Variables | | yes | No | Total |
|------------------------|-------------|------|-----|-------|
| Do you often watch ETV | Frequency | 108 | 10 | 118 |
| | Percent (%) | 91.5 | 8.5 | 100 |

Whereas, 8.5 percent of respondents stated they do not watch the channel. This entails, ETV program's viewership is high and that it is the choice of many health professionals.

From the in depth interview analysis it's observed that twelve doctors who have different field of specialty express their interest of watching ETV since it is the information channel and it is also the main stream channel and that grabbed the attention of many.

To conclude, according to Adams (1998), audiences watch television regardless of its content and message. Therefor Tenawo Bebetwo talk show in EBC had an impact on the society interims of content and message and so as to particularly for health professionals.

Table 5 Viewers preference of watching TV programs

| Variables | | Social | Economic | Political | cultural | Total |
|---|-------------|--------|----------|-----------|----------|-------|
| What kind of television programs do you often watch | Frequency | 75 | 8 | 26 | 9 | 118 |
| | Percent (%) | 63.6 | 6.8 | 22.0 | 7.6 | 100 |

Respondents were also asked what kinds TV programs do they often watch, as table 5 portrays, social program has the first rank 63.6% followed by political 22.0%. The third in the rank is Economic 6.8%. Last they ranked cultural 7.6%.

Therefore, the analysis indicated the majority of nurses watch social program on ETV most of the time. This implies that health issues as social element usually come under social issues to this category, and perhaps, that is the why they were interested in social issues. Besides, from the interview the analysis shows that almost all the doctors watched the social program as well as news.

In general one concludes from the two respondents' point of view that health professionals (Doctors and nurses) were social program were their favorite program to watch on ETV.

Table, 6 Type of social programs respondents often watch

| Variables | | Education | Health | Transportation and communication | Water and sanitation | Electricity | Total |
|------------------------------|-------------|-----------|--------|----------------------------------|----------------------|-------------|-------|
| Which type of social program | Frequency | 26 | 82 | 10 | - | - | 118 |
| | Percent (%) | 22.0 | 69.5 | 8.5 | - | - | 100 |

As was observed in table number five and also as table number six in the above table, the majority of the respondents 82(69.5%) said that they watch health program and 26(22.0%) of these health professionals desire in watching educational program. The rest 10(8.5%) of respondents liked transportation and communication. The findings imply that those nurses inclined to look at health issues type of programs since it grabs their attention.

Table 7. Respondents Experience of watching Tenawo Bebetwo talk show

| Variables | | yes | No | Total |
|------------------------------------|-------------|------|-----|-------|
| Have you ever watch Tenawo Bebetwo | Frequency | 117 | 1 | 118 |
| | Percent (%) | 99.2 | 0.8 | 100 |

Regarding the question in the above table 7 out of the total number of 118 respondents 117(99.2) almost all of them are watch Tenawo Bebetwo talk show program, whereas the rest 1(0.8%) respondents have no interest to watch the program.

Relating to this under the open ended question respondents were asked if they said “yes” what the program tell about, majority of respondents replied that it transmit about the health and related issues and creating awareness to the society.

In relating to the literature as mentioned how talk show have change people mind, Vicki (1996) expressed, watching TV talk show is important to alter our perceptions, our social relationships, and our relationships to the natural world.

In relation the analysis indicated that the health program “Tenawo Bebetwo” preferred most by the respondents, and in turn, this implies that the nurses gave attention to watch the program in line with their profession.

In addition to that in related question to the in-depth-interview the interviewees (Doctors) all argue with nurse’s idea that the health related programs are their favorite since their work is related to health.

In general the analysis indicates that in the perception of both health professionals Tenawo Bebetwo EBC health talk show was an important program to watch when it transmitted.

Table 8. Frequency of watching Tenawo Bebetwo

| Variables | | Usually | Sometimes | Rarely | Total |
|--|-------------|---------|-----------|--------|-------|
| How frequently are you watching Tenawo Bebetwo | Frequency | 13 | 103 | 2 | 118 |
| | Percent (%) | 11.0 | 87.3 | 1.7 | 100 |

Table 8 illustrates that how frequent they are watching Tenawo Bebetwo live health talk show. Among the respondents who answer for this question the majorities 103(87.3%) are do watch sometimes, whereas 13 (11.0%) of the respondents watch usually and the rest 2 (1.7%) rarely.

The data implies that most of the nurses even though they look at the live program their frequency of watching Tenawo Bebetwo were every now and then. To support this idea concerning this issues the same question was raised to the informant interview to twelfth medical doctors, some of them said that they have an interest to watch Tenawo Bebetwo usually, but unfortunately their working condition did not allow them to do that. So that their time of viewing the program became not continues for such reason they forced to watch sometimes. However some of the doctors said that they have a chance to be a gust of the program to discuss on the issues with the audience.

Therefore, to conclude since they are in the same sector Medical doctors and nurses, the frequency of watching the program became sometimes, due to the reason that their working condition is not allowed to watch usually.

Table 9- About convenience of transmission time and date

| Variables | | yes | No | Total |
|---|-------------|------|------|-------|
| Convenience of transmission day and time of the program | Frequency | 74 | 44 | 118 |
| | Percent (%) | 62.5 | 37.5 | 100 |

Table.9. presents about respondents' weather the transmission day and time of the program is convenience to them or not. In this regard 74(62.5%) of the nurses said that they are comfortable to watch, whereas 44 (37.5%) declare no. Here as the data shows that who comfortable with the transmission day and time is greater than by half of the respondents of who said "no". This analysis indicate that more number of nurses were audience of Tenawo Bebatwo health program with no complain of transmission time and date.

According to Tenwo Bebatwo producer in the interview confirmed that audience was complaining the time and the data of transmission previously, but now they are comfortable to watch the program. The literature in the study support the idea that, Fiske (1987) said on his part that audiences are not merely passive watchers of the television screen, but rather are active audiences, engaging with the program in ways the producers never could imagine.

Generally, the findings from the analysis indicate that the current transmission date and time of the program is contented to the nurses to watch Tenawo Bebetwo health talk show.

4.1.3. Program Satisfaction of Respondents

According to table.10 the nurses were asked about the duration of the live talk show to deal with the topic. As it is seen from the table among 118 respondents 69(58.5%) stated that the time to deal with the topic is enough, whereas 36(30.5%) the respondents said it is not enough to dealt with the program and the rest of 13(11.0%) have different reason from the two.

Table.10 duration of program broadcast time

| Variables | | Enough | Not enough | Any other | Total |
|--------------------------------------|-------------|--------|------------|-----------|-------|
| How is the program duration of time? | Frequency | 69 | 36 | 13 | 118 |
| | Percent (%) | 58.5 | 30.5 | 11.0 | 100 |

This demonstrates that the majority of the respondents believed that the time which is given to the program were enough to discuss the issues that rose during the time.

In addition to that the same questions were asked to the informants through interview of all twelve medical doctors who said it's enough to deal with the issues within the given time frame. When they expressed their reason, if the health professional used the given time properly and discuss the issues with the audience, there wouldn't be time to waste and the program became interesting. Otherwise if the time is lengthening the program became boring and not attractive. And they added that in science people mind are not capable to watch a program more than one hour effectively.

They also advised that the respected health professionals have to prepare themselves before they appear on the talk show. To conclude one hour health talk show is enough to the audience who sits and watches such kinds of program with interest and the program became effective.

Here under about the program time allocation to triangulate with content study, the researcher analyze that air time Allocation for talk Show programs, according to Ethiopian television content and format document (2018), the station Amharic talk show program has got priority in its air time allocation in weekly log sheet schedule. The main reason why the station given most prime time for talk show program is they are with low cost and little time spent in production, to bring current issues to broadcast on time within the appropriate time for the audience. So, Tenawo Bebetwo health talk show since it is a live transmission program doesn't take more time for the editing process, unlike other production based television programs. Talk show programs are believed to be one of the television program genres, which is becoming powerful and developed its accessibility and low cost of production. In addition, these talk show programs produced with the participant of different societal groups and various opinions are entertained that makes or attract the attention of the people enforced the station to give prime time schedule for the shows. Above all, the commercial and advertising agencies organization and an individual want such time allocated for talk show programs to promote their commodity or service that follow up some targeted group of the population that is considered as one means for income generation of the station. Even though Tenawo Bebetwo talk show program were not achieved the expected means for income generation of the station. Generally, in Ethiopian television talk show program, Tenawo Bebetwo health talk show program has given 60 minutes air time including the commercial

and advertising time for a week which is set a standard by the Ethiopian Television content and format document (2018), Hence the researcher analyzed the selected videos production and believed that, the time allocation for the program to discuss the health professionals gust with the phone in participants were enough to address the desired information.

Table.11 Understanding of talk show broadcast language

| Variables | | Very high | high | medium | Low | Very low | Total |
|---|-------------|-----------|------|--------|-----|----------|-------|
| How easily do you understand the language in the discussion | Frequency | 6 | 43 | 65 | 4 | - | 118 |
| | Percent (%) | 5.1 | 36.4 | 55.1 | 3.4 | - | 100 |

In this table, 11 concerning the question illustrated in the above, respondents express their level of understanding that the language used by health experts and journalists 65(55.1%) of the nurses ranked at medium level where as 43(36.4%) replied understanding the language at high and few of them 6 (5.1%) gave a rank at very high understanding level and the rest 4(3.4%) said at low.

Totally, the level of understanding the language used by the health experts indicated in the table 65(55.1%) this implicate nurses knowledge of understanding is at good level and the language use is suitable to them.

The finding indicates that the average of the nurses easily understand what the health professionals or health experts and the journalist discussed the health issues with the audience during the program transmission time.

On the other hand in the open ended question to nurses they responded that even though they listened the professional language discussed the issues by health experts on the program, some of the health experts the way they explained the issues were not clear, because it was mixed with local language, so it is not easy to capture the idea they want to transfer to the audience. Therefor the respondents afraid of that people who need this health discussion may not have the full information as they expected. So that, the issue were listened and communicated with audience were made some gaps at the end.

In the literature scholars point out that, the degrees of 'understanding' and 'misunderstanding' in the communicative exchange depend on the degrees of symmetry/asymmetry (relations of equivalence) established between the positions of the "personifications", encoder/producer and decoder/receiver' (Hall, 1980).

To triangulate with the interview that the researcher asked a related question to the medical doctors, the language of health professionals who have different field of specialization replied that they were understand the language used by health professionals and program producer. But, they added that some of the experts used the local language with scientific health language to explain the issues were mad an ambiguity and they believed that it is not easy to understand by the audience.

Regarding to these questions the medical doctors who have different field of specialization elaborate what makes it easy to understand. Among them the interviewees – 1C:

“all health professionals speak the same working language and used similar medical terms when they discussed with the patients, mostly Senior doctors try to explained what it means as much as possible but sometimes junior doctors do not gave attention the words that they used, in that case the language they used made a problem and it became difficult to be understood by the audience therefore it needs further explanation.”

According to the doctors participated in the interview share the same idea and argue on it.

The doctors recommended to health professionals who will have a chance to discuss with audience should minimize English language and medical terms or jargons. Since the program transmission language is in Amharic. Audience might not understand the message that discussed and missed the intended information given to them.

Hence regarding to health professionals language used, most nurses respond on the above was concluded similar with the doctors that they approved.

In general the findings from the analysis indicate that, health professionals, nurses as well as doctors understand the medical terms or jargons used during the discussions with gusts and producer but not the audience.

Respondents were asked about to what level they think the program has helped them about increasing their understanding about the cause, symptoms and treatment of disease or health condition. As it has been indicated in table 12 above 59.3% of the respondents at high degree helped the program to know the cause symptom and treatments, While 32.2% half of the respondents recognized averagely that the program helped to know the cause symptom and treatment, the rest 8.5% the program helped them very much.

Table 12- The Effectiveness of Tenawo Bebatwo program

| Variables | | Very high | high | medium | Low | Very low | Total |
|--|-------------|-----------|------|--------|-----|----------|-------|
| To what degree the program helped to know the cause, symptom & treatment | Frequency | 10 | 70 | 38 | - | - | 118 |
| | Percent (%) | 8.5 | 59.3 | 32.2 | - | - | 100 |

The findings from the analyses proved that the discussion made through this program about the cause, symptoms, and treatment helped the nurses and they got additional knowledge to their profession.

Table 13 Evaluation about the effectiveness of health communication techniques

So as to learn about the effectiveness of the health communication respondents were asked about how they evaluate the question and answer of the telephone communication as health communication tool.

| Variables | | Excellent | Very good | Good | Fair | poor | Total |
|---|-------------|-----------|-----------|------|------|------|-------|
| How do you level the question and answer of the telephone communication | Frequency | | 13 | 44 | - | 61 | 118 |
| | Percent (%) | | 11 | 37.3 | - | 51.7 | 100 |

Regarding to the filings of the nurses towards the telephone communication with respect to the health professionals and the audience, 51.7% of the respondents leveled it as poor

communication takes place where as 33.7% of the respondent's label it was a good way of communication, about 11.0% were measured very good telephone communication through discussion time.

By taking this result in to account the findings indicate that 51.7% of the nurses express their filings that the telephone communication between the health professionals and the audience discussing about the issues that explained by the health professionals and received by the audience were not comfortable to understand each other.

There was an open ended question to express his perception why they said poor. The respondents replied that the telephone line were interrupting during the discussion line, there were an overlapping telephone communication two or three person would be on line at a time. There were miss- understanding between the health professionals and the audience because other television sound were open on the audience side and sometimes the line were not clear disturbing sound would be on air.

The requests were delivering to the interview side (medical doctors) to react what they perceive on the telephone communication during the discussion between the gust and the audience. Most of the respondents conveyed their perception that since the idea was good but because of the poor communication line the discussion would be distorted and made people discomfort to listen the program, inconvenience were made during the jamming of telephone caller.

In the same talk in the producer of the program confirmed the problems that were happened during the discussion, so it is well known that it made inconveniency to the general audience.

All these taking into consideration the finding of the analysis shows that phone - in telephone communication were distracting to the audience and the message were not properly transferred to the intended target audience during those days.

Concerning the evaluation of the program asking the nurses to put their value of judgment how do they generally rated the talk show, 44(37.3%) of the respondents evaluated at a very good position, while 39(33.1%) said the program is in good condition and about 35(29.7%) of the respondents rated the program was excellent.

Table. 14. The effectiveness of Tenawo Bebatwo program

| Variables | | Excellent | Very good | Good | fair | poor | Total |
|---|-------------|-----------|-----------|------|------|------|-------|
| How do you generally rate Tenawo Bebatwo program? | Frequency | 35 | 44 | 39 | - | - | 118 |
| | Percent (%) | 29.7 | 37.3 | 33.1 | - | - | 100 |

As the data result shown in the table the results rated to the program is nearly the same. Therefore from the analyses made above I can conclude that Tenawo Bebetwo health program is a useful program for the general audience as well as the society.

In an open ended question respondents were asked to say something about things that need to be improved by expressing their reason, in relation to Tenawo Bebetwo talk show program.

In the perception of the nurses Tenawo Bebetwo talk show has to be encouraged and continued without interruption since it is well educative and informative to the society, but on the other hand, it needs some improvements. The respondents suggested that making the program attractive and artistic is very essential to stay attentive the audience.

Regarding to the smooth telephone communication during the phone in time, there were a problem of an overlapping, distractive and interrupted sounds during the discussion which mad discomfort to listen. So, it should be alleviated and replaced by modern technology and must create a face to face mechanism to communicate. In addition to that some of the respondents need to increase the current air time, others said that since the program started until now we don't see any significance improvement it is at stagnant stage. Therefore the quality of production should change.

On the other hand, the same question was asked to the interview respondents, to triangulate these the doctors realize that there is some problems in the program and gave a suggestion that should alleviated; producers of the program should also work together alien with the health professionals to get credible information before they appearing on the air. And also the information to the guest (Doctors) must gave ahead to prepare well on the issues. Regarding to the selection of issues and its production the respondents comments; if the program supported by video and a picture related to the issues to in hence the quality and also even some entertaining video related to health issues has to be included to relax the audience, its presentation style is old fashioned so it should be changed together with setting of the studio to be attractive and pleasant. Over all they suggested that the program need to have its own brand.

Table 15 Satisfaction level of respondent’s about Tenaw Bebetwo program

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|---|-------------|-------|----------------|----------|-------------------|---------|-------|
| It gives me satisfaction with the information | Frequency | 73 | 26 | 9 | - | 10 | 118 |
| | Percent (%) | 61.9 | 22.0 | 7.6 | - | 8.5 | 100 |

Table 15 concerning with the satisfaction of information from Tenawo Bebetwo health talk show the respected nurses were requested to forward their perception. In this case the respondents responded 73(61.9%) clearly underline that Tenawo Bebetwo program gave satisfaction to them, 26(22.0%) of the nurses also agreed indicating that they had a similar feeling as the previous ones. While 9(7.6%) responded they disagree with the statement indicating that they did not accept the program is satisfying. 10(8.5%) of the respondents stating neutral.

In general, the analysis indicated that there were 83.9% (in total) nurses satisfied with the health program that disseminating the health information to the society as well as to the health professionals. While a number of respondents 7.6% were not satisfied but the majority of the

nurses were expressed their satisfaction with the services they got from the program. Taking in to account the literature,

Livingstone (1998) describes reception, the satisfaction research that upholds the idea that audiences make choices in their media consumption activity in ways that allow them to satisfy specific needs.

4.1.4. Health professionals’ perception and attitude about the role of the program

In this section, the purpose of the question is to identify the nurses perception and attitude when they watching Tenawo Bebetwo health program regarding to the relevance and use of the program.

Table 16 presents data on whether Tenawo Bebetwo programe supports the respondent and add value for their profession most nurses 74(62.7%) agreed stated that the program supports and add value to their profession 36(30.5%) of the nurses also strongly agreed indicating that they had a similar support as the previous ones 8(6.8%) of the nurses were neutral. The majority of them support that idea that it supports them and adds value for their profession.

Table. 16. The role of the program in capacity building of the professionals

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|---|-------------|-------|----------------|----------|-------------------|---------|-------|
| Supports me & add value for my profession | Frequency | 74 | 36 | - | - | 8 | 118 |
| | Percent (%) | 62.7 | 30.5 | | | 6.8 | 100 |

In general, the analysis indicated that there were 93.2% (in total) nurses were this health program gave supports and it is worth important for their profession.

Table 17 The credibility of health information

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|---|-------------|-------|----------------|----------|-------------------|---------|-------|
| It provide me credible health information | Frequency | 70 | 15 | 13 | - | 20 | 118 |
| | Percent (%) | 59.3 | 12.7 | 11 | - | 16.9 | 100 |

Table 17 depicts perception of the nurses whether the program provide credible health information. Majority 59.3% stated that they agreed with the statement. Another 12.7% of nurses also strongly agrees with the statement indicating that the program provide them a credible health information. Here is 11% stated on disagreement of the statement. That means almost all 100% in total nurses declare that they believed that the program and the health professionals who invited on the talk show were delivering a brief analysis to the audience made it trustworthy. It is known that credibility is very important things for any media especially when it is governmental.

Therefore the analysis indicated that the media and the content of the program that transmitted to the audience were ethically in good condition. Furthermore the findings showed that Tenawo Bebetwo health talk show trusted by the health professionals as well as the audiences. Standing from this analysis concluded that EBC invited the selected high quality and experienced health professionals from different field of specialty.

Table 18 The educational role of the talk show about health and related issues

One of the functions of media is agenda setting role and from this perspective the talk show seemed to have agenda setting role for the professionals as they tend to follow the program for getting knowledge about the various health issues entertained.

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| It helps me to learn about health & related issues | Frequency | 60 | 53 | - | - | 5 | 118 |
| | Percent (%) | 50.8 | 44.9 | - | - | 4.2 | 100 |

In table 18 the respondents answered for the question they were also asked about their level of agreement whether the program helps them to get more knowledge. As it indicated from the table above, most of the respondents, 60(50.8%) of them expressed that the program helps them to learn about health and related issues. 53(44.9%) of them also indicated that the programs helped to get more knowledge during the discussion. The remaining 5(4. 2%) of confirmed that they do not have any ideas whether the health program helps me to get knowledge or not. This implies that the majority of the respondents agreed the health talk show helped them to get the relevant knowledge.

Table.19. About the role of the program in the society

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| It helps me to know about my role in the society | Frequency | 45 | 48 | 4 | - | 21 | 118 |
| | Percent (%) | 38.1 | 40.7 | 3.4 | - | 17.8 | 100 |

According to table 19 the health professionals expressed regarding the role the program play in the society. 48(40.7%) of the respondents stated that Tenawo Bebetwo program stimulate them very highly as a health professionals and also 45(38.1%) of the respondent show their agreement that the program initiate them to play important role in the society. Whereas 4(3.4%) of the respondents opposed the given statement.

From the above data one can conclude that the perception of the nurses regarding to Tenawo Bebetwo the information they got change their mind to use their profession to support and aware the society.

Table 20 It creates better awareness about health issues how to protect oneself from disease

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| It creates better awareness about health issue | Frequency | 73 | 33 | 8 | - | 4 | 118 |
| | Percent (%) | 61.9 | 28.0 | 6.8 | - | 3.4 | 100 |

Table 20 on this section considers the perceptions of respondents about the awareness creation of health issues of Tenawo Bebetwo health program. One could see on the table 20 the respondent replied that 61.9% of the nurses agreed and believed that the program creates a better awareness to the health professionals (nurses) and also 28.0% of the nurses show their supports of agreement very much. On the hand, 6.8% of the nurses opposed that the program were not create a better awareness to the nurses. The rest 3.4% of the respondents stay neutral. It is known that one of the elements of media is awareness creation to the audience and made them to be attentive and alert.

Therefore, according to the perception of the nurses the analysis indicates that majority of those respondents perceived as the program is relevant and useful regarding to awareness.

Table 21 It teaches me about things I don't learn in school

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| It teaches me about things I don't learn in school | Frequency | 65 | 13 | 28 | - | 12 | 118 |
| | Percent (%) | 55.1 | 11 | 23.7 | - | 10.2 | 100 |

As it is stated in table 21 above the perception and interest of audience about media explained briefly, in related to this issue the literature indicated the scholar Shrum (2005) as reported that regular awareness of TV use and its content build perceptions of societal realities. Therefore by considering that statement I need to discuss in table 21, the respondents were asked about the health talk show program what they learn that they don't get from the school. The respondents replied that 55.1% of the nurses reacted that they confirm they benefited from the program by stating their agreement, and also 11.0% of the respondents were also expressed their support of agreements, while 23.7% of the total nurses reflect their disagreements and finally 10.2% remain undecided.

The findings from the analysis data revealed about what the nurses received from the health program as that gave an additional input to their profession and enable them to take a lesson to update their professional knowledge and skill.

Table 22 I acquired lesson on the disease or health problem discussed on the talk show

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| I acquired lesson on the disease or health problem | Frequency | 86 | 19 | 8 | - | 5 | 118 |
| | Percent (%) | 72.9 | 16.1 | 6.8 | - | 4.2 | 100 |

As demonstrated in table 22 the audiences are eager to know about relevant events and condition in immediate surroundings, society. They also need to acquire important information, therefore, significantly the contribution of media in educating and molding the generation in developing countries to improve health of the society. The main objective of EBC Tenawo Bebetwo health program is also to perform this important task. With reference to I acquired lesson on the disease or health problem health professionals (nurses) obtained from the program as shown in the table above, 72.9% of respondents indicate their agreement that they acquire important message from the health program and also 16.1% of the nurses show their agreement with high level. While 6.8% of the respondents expressed their filing that they were not acquired a lesson from the program. Only 4.2 % were remaining underside. As we have seen from the data the gap between from those who agreed and disagreed significantly big.

Media professional McQuail (1987) believe that audiences switch their television on in order to integrate and interact via television programs and seek information.

The findings from the analysis demonstrated that the nurses perceived this health talk show Tenawo Bebetwo as relevant to their profession and as well as they found a lesson.

4.1.4 Health professional’s perception about program agenda

In this objective, the study examined on which agenda more coverage was given when they watched Tenawo Bebetwo program. At this point, about communicable disease, non-communicable disease stigma and discrimination, how people get infected and prevention.

To deal with this issue it is better to refer the literature in the study,

In setting strategic agendas, which may ultimately advance the mission of public health, to protect, promote and preserve the health of the community (Kozel et al., 2003).

Table 23 in my perception more coverage is given to communicable disease

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|---|-------------|-------|----------------|----------|-------------------|---------|-------|
| In my perception more coverage is given to communicable disease | Frequency | 56 | 37 | 17 | 4 | 4 | 118 |
| | Percent (%) | 47.5 | 31.4 | 14.4 | 3.4 | 3.4 | 100 |

Table 23 regarding to the agenda setting and the issue presenting on the program, this section were asked to the health professionals (nurses) to re-act their own perception whether communicable disease is took more coverage during the broadcasting of the program. Here as the table displayed out of 118 respondents 47.5% of the nurses believed that the issues of communicable disease were on air and the health professionals were discussed with audience most of the time. Others 31.4% of the respondents gave their strong agreements towards the issues of communicable disease, while 14.4% of the nurses show their disagreement that the communicable disease were not took more coverage on air, similarly 3.4% of the respondents shows the same disagreement regarding the issues, the rest 3.4% stay Undecided.

This indicates that the findings and results lead to the analysis of the perception of the nurses 78.9% who react on the given question towards the coverage of issues or agenda set on the program. Therefore in general to conclude the program producer gave more air time to discuss the health professionals with the audience on the issues of communicable disease.

Table, 24 I think for the issues of non-communicable diseases given more coverage

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| I think for the issue of non – communicable diseases given more coverage | Frequency | 60 | 36 | 9 | - | 13 | 118 |
| | Percent (%) | 50.8 | 30.5 | 7.6 | - | 11.0 | 100 |

Table 24 However, considering the issues of the non-communicable disease that given more air time coverage on the program, the nurses were also asked to express their perception. According to the data show on table 50% of the respondents gave their agreement in favor of the non-communicable disease and in addition 30.5% also support the idea of the previous agreement. In total sum 91.3% of nurses who believed to be more air time were given to non-communicable disease, while 7.6% of the respondents on the contrary were not believed that non-communicable disease took more coverage. And the rest of the respondents 11.0% show their neutrality.

From these responses we can conclude that Tenawo Bebetwo health program clearly shown that the health professionals who invited on that program discussed agenda of a non-communicable disease with the audience.

Table 25 Opinion of the issues of stigma and discrimination

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| In my opinion the issues of stigma and discrimination take more coverage | Frequency | 44 | 24 | 15 | 8 | 27 | 118 |
| | Percent (%) | 37.3 | 20.3 | 12.7 | 6.8 | 22.9 | 100 |

Table 25 shows opinion of the nurses whether stigma and discrimination discussed on the program rather than that mentioned issues in the previous tables. Thus the data show as 37.3% of the respondents claimed that in their opinion issue of stigma and discrimination were discussed repeatedly on the program, more over 20.3% of the nurses argue and show their

agreement strongly on the other hand 12.7% of them opposed that these issues were not covered by taking more time, in the same talk in 6.8% of the respondents confirm their disagreement, overall 22.9% stay underside.

In general the analysis indicates that for the coverage of stigma and discrimination during the transmissions period got apriority to be an agenda of the discussion time.

Table 26 Issues related to how people get infected by disease and prevention method

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|---|-------------|-------|----------------|----------|-------------------|---------|-------|
| I believe issues related to how people get infected by disease & prevention | Frequency | 61 | 26 | 16 | 4 | 11 | 118 |
| | Percent (%) | 51.7 | 22.0 | 13.6 | 3.4 | 9.3 | 100 |

Table 26 depicts about perception of the health professionals (nurses) and 61(51.7%) of the nurses proved their agreement to the stated issues and also 26(22.0%) of respondents again confirmed their strong agreements, whereas 16(13.6%) of them not supported the issue as that took more coverage on the program. Still, 4(3.4%) of respondents also strongly disagree on the stated issues, on the other hand 11(9.3%) of the respondents stay neutral.

To sum up the analysis the findings indicate that 73.7% (in total) confirms here in the table Tenawo Bebetwo program regularly broadcast how people get infected by disease and its prevention mechanism were the agenda of the program.

As in table 27, concerning of the issues on communicable and non-communicable disease the perception, the nurses were requested, so, that 49.2% of the respondents shows their agreements that equal coverage given to both communicable and non-communicable disease and with respect to this the same answer were registered by giving 26.3% of the respondents, while 11.0% were disagree on the issues stated on the above statement, in the same converse 3.4% of the respondents strongly disagree with the idea. 10.2% conveyed neutral.

Table 27 Perception about equal coverage health problems

| Variables | | Agree | Strongly agree | disagree | Strongly disagree | Neutral | Total |
|--|-------------|-------|----------------|----------|-------------------|---------|-------|
| In my perception equal coverage is given to both | Frequency | 58 | 31 | 13 | 4 | 12 | 118 |
| | Percent (%) | 49.2 | 26.3 | 11.0 | 3.4 | 10.2 | 100 |

The result shows that the majority of the respondents 75.5% revealed that Tenawo Bebetwo television program gave equal chance to discuss by professionals with the audience.

To summarize the issues that discussed under the point 4.2.4 where health professionals perception on which agenda/issues were more coverage is given on Tenawo Bebetiwo program. To decide on these there were five points which was raised to answer by the nurses under, the table 23, 24, 25, 26 and 27. Therefore I used comparison method to come up with the general conclusion. For these purpose it is employed cumulative results of each table that the findings proved the majority percentage. In these regard according to the findings of each table result as shown, on the perception of nurses more coverage were given to the issues of non-communicable disease 91.3% out of 118 respondents.

To generalize the findings from these analyses the agenda set on Tenawo Bebetwo by the producers were focused on the non-communicable disease.

According to Katz and his colleagues media have many goals .They inform or educate, identify characters of the situation in the media environment, entertain, and enhance social interaction and help audiences escape from the stresses of daily life (1974). This is shown in EBC Tenawo Bebetwo program.

In an open ended question about strength and weakness of the program were asked. But the weakness of Tenawo Bebetwo EBC program already have been discussed under point 2.4.10 table 15, under the topic “how to improve the program” but in addition to that in the interview some of the comments were clearly shows the weaknesses of the program for that case I put it below. The twelve doctors argue on their comments and suggested that this health talk show

need an advisory team to protect from unnecessary selection of health professionals to be ethical, and they conveyed the health expert or professionals must focused on his discussion rather than promoting himself, and they added its lack of horizontal relationship with other association. With the same talk in the researcher realize the problems that already commented and suggested by the doctors when analyzing the content. In terms of professional health guest selection a researcher study in a content analysis from the selected videos production realized that more men health professionals invited guests than women guests, there for the analysis concluded that there were imbalances of gender in Tenawo Bebetwo talk show health professionals. Other weakness regarding to technic was in relation to directing and shooting of camera. The director's ability to select a good background, support the program with a good graphics and making the setting based on the program standard to make attractive production was not well done.

But in the case of strength of the program, most of the respondent's thankful for the EBC since the beginner of health program which is very helpful and important to the society. And in addition to that the model and bench mark of the other broadcast media encourage to open their own health program in different language.

From the point of view of the interviewees the same question were asked to express their perception on the strength of the program, therefore almost all of the doctors gave a credit to EBC since a pioneer of the health talk show and brought a new approach of health talk show presentation in the Ethiopia media. They argue that it is the major strength. The interviewees appreciate the program producer to keep the program to sustain for a long period of time and some of them admire him because he is a back bone of the program. Secondly the show fills the gap between the health professionals and the society to communicate and exchange their filing or ideas, and also the program gave an opportunity to the health professionals who serve in multidisciplinary to proof their knowledge on media. Moreover it address all the society that is very supportive and set up a two-way communication system, the program is discussing current issue and aware the society in addition to that it is an indicator of the government to assess how the society vulnerable to the pandemic. In relating to satisfaction

on the program some of the interviewees said that the content that discussed on the program is satisfied them. And others said encouraging.

To triangulating with the content analysis perceived by the researcher regarding to strength were the television station commitment to give much air time for health talk show program was very significant and enables to participate in various health professionals', society groups. These show programs also create a favorable environment to entertain various health issues, opinions and opened the door for discussion in different issues by health experts and societies, which was not designed in this type before.

Respondents have given possible recommendations to the program in order to improve quality of production. So, the respondents and interviewees recommended the following points. The Producer should improve his knowledge and skill through any means of education mechanism. To achieve its goal and sustainable program, the producer should set long term plan. The interviewees suggested that the program that already transmitted should be collected and has to change in the form of book because it is very important for feature reference. In addition to that to strengthen the program there should be a horizontal relationship towards health association.

Under this agenda topics the researcher were analyzed the content regarding to the issues or agenda framing or selection based on the video footages that transmitted within the given frame time. It is known that Ethiopian television like other governmental organization, every activity is guided by planning, which is segmented in different time intervals such as one year, six months, three months, one month and a weekly plan. Therefor Tenawo Bebetwo talk show is one of the program that pass through this plan since the station are guided by such planning approaches (Editorial policy of EBC, 2006 EC). These plans are discussed and debated in different levels of editorial conferences. The talk show program issues selection is passed through such procedures. In addition to these the producers uses three selection of issues or agenda concerning the weekly program these are: using annual health calendar, seasonal issues and Event days. and also on the other hand, criteria to select a discussion program is drafted from different perspective such as from the current situation of the country, from the interest of the public and from the ideas of the reporter, host and the editor with regards to the talk shows program is dependent (interview of producer). Therefor a researcher study through these videos the issues which is discussed by health professionals and the phone in

participants in each week was in line to the plan transferring the message and aware of the society to protect their life. As the researcher viewed most of the participants (audience) reflects their views regarding to health issues. For that matter as it showed in the production framing of the issues become vital in addressing the real and immediate concern of the society.

4.1.5. Data from the Interview

The researcher used a semi-structured type predetermine questions were prepared and conducted with interviewees the data were collected from twelve medical Doctors who have different field of specialty and works at the selected three hospitals, regarding of gender they were heterogynous, four women and eight men in different age level were selected, on the other hand a producer of Tenawo Bebetwo health talk show at EBC were one of the person who conducted interview with the researcher.

As I have already been mentioned before all the in-depth interviews with medical doctors were discussed under each table to support the idea of each relevant question. Thus I proceed to discusses only the producer response as follows:

4.1.5.1. Producer interview and results

Ethiopia broadcasting corporation is one of the oldest TV station broadcasting different programs with different language. Among those Tenawo Bebetwo healths talk show program broadcasting in Amharic and one of the pioneer programs that connect society to health professionals as a bridge.

The producer - 35, Masters in health since, he is the originator and producer of the program. As he mentioned he serve for the last eleven years as a producer of “Tenawo Bebetwo” health talk show program at EBC. He believes that the program achieved its objectives, He continued and remembers that how they developed the idea of Tenawo Bebetwo program and stated,

“In the department there were a plan to start health program that would include the society, at the time the idea was came from different perspective including the

responsible body, then we collected the idea and discussed together and finally decided to be “Tenawo Bebetwo” that was how it began”.

It is believed to be that media is the powerful tool to convey and address the intended information to the target audience, especially when it is health related issues. According to wondewosen, then after their were also different idea sours that came to department: the health association is one of the reliable source and the other one is journalists that share their experience, society also the undeniable sours of input, the rest from books and searching different related sours from internet.

Regarding to the topics of the show producer explained how they evaluate the relevance of the topics to audiences, he do believe that, the program is very much relevant to audiences since they could see the influence it makes to the society from time to time audiences tell us that they got tangible knowledge from the program and practicing it in their day today lives. and through a telephone and also using our website they share their filings about Tenawo Bebetiwo’s a massive contribution for the people. He added that, he tries to be neutral from biasness to give information to the public. Producer must act as a neutral professional in providing information, education and entertainment role rather than reflecting a one-sided and biased point of view (Hallin and Mancini, 2004).

One of the questions was forwarded to the producer, how he selects the issues to the program, when he elaborates;

“one of the selection method that we employed were country current issue, for instance now a day’s Corona various or Covid 19 is one of the pandemic that put impact to the society, and the second one is periodic colander and seasons, as you know Ethiopia is a country with a population having diversified culture, different geographical and environmental risk factors, lifestyle and diversified health, economic and social conditions and the disease burden and enabling factors for disease transmission varies from place to place within the country. So during the rainy and dry season the pandemic change its behavior and break out in that case people have to aware of the disease. So environmental factor is also the issue”, and off course we look for editorial police of the station as well.

The other thing that audience complaining of changing time or extending of broadcasting how is the producer deal with these, he believes that all the complaints have been taken as a feedback and some can be considered to answer.

But now a day we don't have a plan to change our schedule because we have enough time to convey our message to the audience.

One of the measurement tools to evaluate the program is audience satisfaction; the question raised to a producer was at what extent audience expresses their satisfaction. As he replied that;

“One of the check in mechanisms which I used to know was a research paper, there are some papers which was written based on the program, thus considering the study I understand that audience of the program are shown their satisfaction. And the other mechanism was the society, they express their satisfaction in different ways. So, referring that I can conclude that audience of Tenwo Bebetwo are satisfied by the program.”

Media producer will not free from facing challenge how Tenawo Bebetwo producer tackle the challenge that he face during presenting program. The first challenge from the producers was lack of training on health and related programs. The other challenges were difficulties in getting the appropriate guest, problem of translating scientific health terminologies in to Amharic and getting a new technology to improve the video production with quality work so, we are not equipped well to produce lack of sponsor. A producer clarified the challenges faced in, Difficulty in getting the right health expert for the program and the topic chosen for discussion in the talk show. We, Producers contact health experts through their organizations formally. Therefor bringing guest to the program requires patience and a lot of effort to convince them that was time taking in most of the cases;

Getting the exact Amharic translation for health terminologies was a challenge. Producers translate these words ahead of the program and during the talk show following the guest speech we try to explain the words and terminologies in Amharic.

Triangulating with the content analysis that the researcher analyzed about the role of the talk show program host from the selected videos, as the history of talk show programs indicated that most of the time shows are identified with the name of the host, title, which shows the significance of the host in television talk show program history. Steve Allen, who was the first host of the talk show program the Tonight show that was aired on NBC in 1954, it was one of the most exemplary talk show. This talk show program maintained its own unique format, feature, and style of presentation throughout the time in which it was on air for the first four decades of its age of transmission, Bill (2009). In Ethiopian television or EBC Amharic talk show programs also the host or the presenter is everything, which means as indicted and seen in long-serving international media the host or the presenter is a key for talk show program. The host has to develop the skill of host, style and well prepared from making well preparation on the issue until developing questions and other technical preparation. Regarding to these a researcher analyze from the selected videos, hosts expect to show his /her ability and skill to attract and to make the show interesting since the host is everything for that particular talk show. The host has also a responsibility to frame the discussion and to deliver the message of the show in appropriate time and clear understandable language. The show has to be guided by the plan, objective and the preparation based on the frame and crafted messages. The host is expected to approach the guest and the phone in participant as a family to ease, to attract and to invite the participant to express their ideas or feeling freely. The host has double responsibility not only in considering the audience at live transmission recording place and time but also meditate all the time the audience, who are watching the show in their home. Talk show program host needs to have depth knowledge, has to prepare videos and picture to simplify and easily understand the issues. Hence, the host has to develop simple and easy approaches by alienating personal interest from the crafted message of the talk show. Generally, it is believed to be that most talk show program has the nature having the present situation and right here; right now characteristics. In these regard on Tenawo Bebetwo talk show program the host should show more effort to get the point.

4.1.6. Treatments of Content Elements

The program broadcasted from January 5, 2019 to December 28, 2019 (twelfth weeks) categories were made according to the characteristics and behavior of disease, classification of disease and related health problems WHO (1992). These categories were grouped from the transmissions of monthly program of 12 months' to evaluate and make easy for the analysis of the research study.

Table 28 Categories of the selected issues weekly frequency transmitted of each issues

| No | Categories of the selected issues | Frequency of transmitting (in week) | In percent (%) |
|----|-----------------------------------|-------------------------------------|----------------|
| 1 | Maternal and child health | 10 weeks | 20.83 |
| 2 | Nutrition and food | 5 weeks | 10.41 |
| 3 | Epidemic | 5 weeks | 10.41 |
| 4 | Respiratory system | 4 weeks | 8.33 |
| 5 | Internal medicine | 4 weeks | 8.33 |
| 6 | Trauma /emergency | 4 weeks | 8.33 |
| 7 | Public health | 4 weeks | 8.33 |
| 8 | Mental health | 3weeks | 6.25 |
| 9 | Life style | 3weeks | 6.25 |
| 10 | Dermatology | 2 weeks | 4.1 |
| 11 | Addiction | 1 week | 2.1 |
| 12 | Neurology | 1 week | 2.1 |
| 13 | Hygiene and sanitation | 1 week | 2.1 |
| 14 | Cancer | 1 week | 2.1 |

Source: transmitted videos program (January 2019 to December 2019)

Each issue of Tenawo Bebetwo talk show program has their own duration of time and weekly schedule that broadcasting on weekly bases. Therefore, in the study period the talk show

program expected to broadcast 52 programs in twelfth months. Having this into consideration 52 talk show programs were expected to be on air in the study period. But in the study period of twelfth months, the total broadcasted program was 48 (92.3 %) of the programs were broadcasted based on their weekly schedule. The remain 4 talk show programs which means 7.7 % of the programs were not aired in their allocated weekly scheduled air time. From the qualitative method of in-depth interview weekly scheduled programs sometimes omitted and are not aired based on their weekly schedule due to different reasons such as the presence of current affairs and urgent issues, which can be expressed in the form of press release by the government officials and presence of unexpected live transmissions. From the above data, it is possible to infer that the talk show programs were broadcasted based on issues that is the agenda selected for each week were regarding to the three factors such as: annual health calendar, seasonal issues (that is a triggering factors for diseases) and event days. There for having this information maternal and child health issues were transmitted most from the others issues that is 10 weeks (20.83%) of the total transmissions. Thus it shows that the child and maternal case was very important issues for the public to inform and participate through a phone in discussion with health professionals on live talk show Tenawo Bebetwo program. Secondly Nutrition and Food and Epidemic diseases were transmitted less by half important issues to discussed, that means 5 weeks (10.41%) of the transmission period. These means, that the public were discussed on that issues through phone in with the health professionals gusts and have information and aware of the diseases. And the other issues like respiratory system, internal medicine, trauma, and public health issues were treated equal weeks to discuss 4weeks (8.33%) for each case.

The others issues which were showed in the table were not balanced like the discussion weeks comparing to maternal and child issues. As the researcher examined that the agenda to select for each weeks program were as he mentioned before based on the three factors (annual health calendar, seasonal issues and event days) and also including the editorial policy (interview of producer) in these case the issues were not equally transmitted.

From the content analysis of the program a researcher analyzed regarding to the characteristics of the talk show of Tenawo Bebetwo program evaluating the selected videos. Therefor to look in to the characteristics of Tenawo Bebetwo talk show program it is better to

know about what is a talk show in Ethiopian television. According to interview data and Content and Format document (2018) Ethiopian television news channel talk show program are designed to make the public to actively participate in the programs, entertain various opinions, attitudes and promote diversification and sharing of ideas and experiences. These weekly scheduled talk show programs have their own brand name, objectives, content and scope, production mechanisms, presentation style, and defined formats. Each talk show programs has its own presenter or host, director and technique crew members. The talk show program production needs to consider not only the guest and the participants but also the audience in terms of language usage, simple presentation, ethical and professional attention. The topic of each talk show program has to be selected thoroughly to make the issue an agenda by making depth research and investigation. In one talk show program, only one main topic is advised to entertain, which needs analysis, debate, and discussion. To make a simple way of communication with the audience; it should be convincing and need to grasp the attention for the issue to meet the objective of the talk show. As to the analysis of the study, the Ethiopian television talk show programs have the characteristics of question and answer, explanation, debate, and discussion to show the reality, to clear and expose to new things and ideas to the audience.

Another characteristic the study analyzed that Ethiopian television talk show program has to realize depth research and investigation, good preparation for recording and has to be simple approaches, postproduction activities to minimize the cost time and effort to finalize the show's production in a short period of time.

At present, Ethiopian television talk show program has two forms of content and presentation style, which is defined in live transmission and in recorded formats of approaches. The talk show programs have their own institutional structure in which the setting, wearing style audience participant selection criteria and background of the shows. Each of the talk show programs has their own identity, background, content scope, setting and design and program intro (EBC Content and Format Document, 2018).

Hence in Ethiopian television, there are different types of discussion, interview and debate type of talk show programs, which have its own feature of approaches. As indicated in the content and format document of the station. Ethiopian television Amharic talk show program

can be categorized into four types of talk show such as: one to one talk show, one to few talk shows, one to many talk show, and phone in talk show programs.

Among these four talk show programs EBC Tenawo Bebetwo program was categorized in the phone in talk show type. This health talk show invite health professional gusts in the studio and there are phone in participants who call a telephone to discuss with health professionals about their cases from the society. This talk show program has an experience of more than 10 years. Such programs are encouraged because every audience who wants to participate and ask the guest or health professionals directly, enables the requester to hide his name and can ask any question freely and also has the chance to interact with the guest and would have health advice. This creates an opportunity to entertain individual health cases and take as a lesson for others also. The issue in such programs is selected mainly from the society cases, country current situation, and periodic calendar, seasons, environmental factor and also emanated from the editors, society, and producer or from the editorial direction of the station. As the analysis of the study shows the talk show has its own weekly schedule of transmission and a fixed duration of time its own background, setting, intro, and identification.

CHAPTER FIVE

Summary, Conclusion and Recommendations

This chapter deals with a brief summary of the works, conclusions of findings and some recommendations. The first part is about summary and second part is conclusions of the research while the third part is concerned with some possible recommendations that, the researcher believes, may minimize some of the problems and help to maintain the intended quality and attractiveness of the program.

5.1 Summary

Throughout this research, attempt has been made Assessing TV live talk show: EBC “Tenawo Bebetwo” in focus: In the perception and attitudes of health professionals and content analysis. The initial point was to investigate the perception of health professionals (Medical doctors and nurses) how they perceive the program and to reflect their opinion and attitude since it is relevant to their profession. To support the research with previous works related literature on the issue has been discussed. The review mainly revolved around “how these health professionals perceive the talk show when they watch EBC Tenawo Bebetwo.” and the agenda settings, relevancy, media effect and framing theory paradigm.

The research was held basically using quantitative and qualitative research method. Questionnaires were distributed to health professionals (nurses) to the intended study. And the in-depth interview was also conducted with medical doctors who gave valuable result to the program. The analysis was done based on different factors that are related with health professional’s perception and also the content analysis based on the selected videos.

The quantitative data was analyzed using SPSS version 24. On the other hand, the techniques used for analyzing qualitative data in this study were coding technique, classifying technique, categorizing, and relationships.

Regarding the findings, although the current situations in relation to corona epidemic in the country will have a direct impact on the overall research study, based on the findings obtained from the research, the following conclusions are drawn.

The questionnaire, in-depth interview respondents and a content analysis witnessed that the usefulness of Tenawo Bebetiwo and awareness created on disease prevention, symptoms of diseases and follow up treatments addressing these health issues to the public as discussed by professional health experts and above all to obtain a healthy life style.

The lessons conveyed on the program were accepted by nurses and they agree with the scientific explanation given by the guests who are professionals, lectures in universities and have long years of providing treatment for patients in different places.

According to the analysis indicated that in the perception of health professionals and analysis of a content confirmed “Tenawo Bebetwo” EBC health talk show was an important program to watch.

As the producer mentioned current initiatives and thoughts to be under taken for the program and they revealed their challenges which were mentioned by health professionals as weakness including problems of translating technical and English words to Amharic, and problems in advocating the program which was due to lack of sponsor.

Since it was the first health program Presented in Ameharic language Tenawo Bebetiwo talk show in EBC was appreciated by the respondents of the research. However the use of English words and scientific terminologies was one of the communication limitations of the program and medical doctors and nurses mentioned the problem will be bigger especially on the audience.

The other challenges were difficulties in getting the appropriate guest, problem of translating scientific health terminologies in to Amharic lack of sponsor and getting a new technology to improve the video production with quality work because not equipped well to produce. Program producer mentioned that sources of the program were: health association one of the reliable source and the other one is journalists that share their experience, society also the undeniable source of input, the rest from books and searching different related sours of internet.

The One indicated on the analysis was to improve Presentation style, attractive studio setting and good production, unless the audience attracted by the program they will not stay long.

Scholars believed that, since audiences have their eyes on the screen when they find the programs attractive and interesting (McQueen, 1998).

Producers believed that the program objectives were achieved based on the feedback they got from health experts and audiences. The respondents from in-depth interview and questioner asserted that awareness had been created on symptoms, treatments and prevention of diseases and they have got lesson a lot from home.

In addition to that they stressed that benefited much from the advice of highly experiences health experts and guests of the program. This shows that the nurses understand the message as the health experts intended to convey the message, even though they are in the same professions.

The findings from the analysis data revealed that what the nurses received from the health program gave an additional input to their profession and took a lesson to update their skill.

The analysis indicated that majority of health professionals satisfied with Tenawo Bebtwo program.

The major findings of the study were revealed that Tenawo Bebetiwo Program was very important program that inform and teaches the target audience. The findings also indicate that this health talk show is very important, therefore the relevance of content presented in the program is not that much argumentative to play vital role to the health professionals as well as the society.

The major findings of the study were revealed that Tenawo Bebetiwo Program was very important and relevant program to the public that inform and teaches the target society.

5.2 Conclusion

The data were gathered using qualitative and quantitative method of techniques (questionnaires, in-depth interview and content analysis) was employed to undertake the study. Using systematic random sampling and purposive sampling technique, a total of 130 study subjects were selected for questionnaires and in-depth interview and 12 months talk show programs for content analysis. The research triangulated the perception of the three different groups of the participants: health professionals such as medical doctors, nurses and also producers of the program and the content analysis on the program were reviewed and

discussed. The finding revealed that almost all respondents were purposely tuned to the program in order to get health information and since the effect of this, participants desires were became fulfilled.

Thus, the collected data from both the questionnaires, in-depth interview and content analysis showed that the health information on “Tenawo Bebetiwo ” program were vital so as they practiced it in their day today lives and benefited from it and the content analysis also proved it how it is important.

As the findings from the study indicated that Argument were found from the data collected and most of the respondents stated that the issue presented on “Tenawo Bebetiwo” program were relevant to the targeted society as well as to the health professionals.

And in addition to that, the findings also indicated, the health program “Tenawo Bebetwo” talk show addresses the health problem of the society, regarding to awareness created on disease prevention, symptoms of diseases and follow up treatments, healthy life style and they have learnt a lot from the program.

Regarding to language used the finding indicated that health professionals to explain the issue were mad an ambiguity and believed that it is not easy to understand by the audience.

And from the Producer point of view, the study reviled that, the program objectives were achieved based on the feedback they got from audiences.

More over from the questions respondents and in-depth interviewees asserted that non-communicable diseases were the main issues or agenda during the discussion between highly experiences health experts and respondents on Tenawo Bebetwo health program.

The finding from the analysis of the content during a year transmission period showed that the child and maternal case was very important issues for the public to inform and participate the public through a phone in discussion with health professionals on live talk show Tenawo Bebetwo program. And the other things that were found was the imbalance of entertaining issues during a year bases.

Consequently, the prevalence data from the analysis stated that, the problem that was faced during the transmission a poor telephone communication (phone-in) that distracts the

audiences. And also in the same token, use of English words and scientific terminologies produced problem on communication.

5.3 Recommendations

The result of this research indicated that health professionals mostly and attentively watch “Tenwo Bebetwo” program transmitted on EBC. It is known that the usefulness of the program was remarkable as confirmed by the respondents and also a content analysis proved that how it is important. Based on the findings and conclusion, the researcher suggests the following points as the key recommendations:

- Credibility is the backbone for media services. In order to develop plausibility with its viewers, health issue program should be tangible and presented ethically with credible sources.
- Program producer of EBC Tenawo Bebetwo should need an advisory team to protect from unnecessary selection of health professionals to be ethical.
- The Producer should improve his knowledge and skill through any means of education mechanism.
- Gust of the program (health expert or professionals) should focused on his discussion rather than promoting himself.
- Health professionals who invited to the program to discuss with audience should minimize English language and medical terms or jargons. Since the program transmission language is in Ameharic
- Some entertaining video related to health should be included in the program to relax the audience,
- Video production of the program that already transmitted should be collected and has to be changed in the form of book for the reason that it is very important for feature reference.
- Government should give attention to the program to track out the health of the society how vulnerable to the pandemic

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Addis Ababa University

School of Journalism and Communication

Questionnaires to be filled by health professionals in the Black Lion, Hayat and Bethel hospital; Addis Ababa Ethiopia

Dear Respondents,

This questionnaire is part of an MA Thesis conducted as a requirement for the fulfillment of MA in Journalism and Communication in Addis Ababa University. The aim of the study is to Assess TV live talk show: EBC “Tenawo Bebetwo” in focus. Regarding to health professionals in the selected three hospitals in Addis Ababa Ethiopia. As the findings of the study depend on your responses, you are kindly requested to provide your genuine and accurate answers to the following questions. At this point, I would like to assure you that the information is used only for research purpose and will be kept confidential.

Thanks!

Questionnaire

Appendix

Part I:

Demographic Information

1. Name/Code _____

2. Age _____

3. Gender Male Female

4. Level of education Diploma Degree M.D Master Doctorate
 Other

Part II: Questions for Nurses

1. Do you often watch Ethiopian television?

Yes No

2. What kind of television programs do you often watch?
 - Social economic political cultural
3. Which type of social programs do you often watch from the following
 - Education Health Transportation and communication water and sanitation
 - Electricity
4. Have you ever watched Tenawo Bebetiwo Television talk show?
 - Yes No
 - If yes, what is the program about? _____
 - If for Q 1, your answer is No. Why?

5. How frequent are you watching Tenawo Bebetiwo?
 - Always usually Sometimes rarely Never at all
6. Is the transmission day and time of the program comfortable for you to watch?
 - Yes No
7. For Q No.6 your answer is No, Do you have another preferred day? When?

 - If No, do you have another preferred time? At what time? _____
8. How is the duration of the talk show to deal with the topic?
 - Enough Not Enough Any other
9. What do the programs lack/miss to meet your demands? Explain? _____

10. How easily/clearly do you understand the language/words used by the journalists and the health expert? as an audience as well as a health professional.
 - Very high High Medium Low Very low
11. To what degree do you think has the program helped you know the causes, symptoms and treatment of disease or health condition discussed?
 - Very high High Medium Low Very low
12. How do you label the question and answer telephone communication between the guest, (health's Professional) and audiences?
 - Excellent Very good Good Fair Poor

➤ . If your answer for Q 11 is Poor, why? _____

13. . How do you generally rate Tenawo Bebetwo program?

Excellent Very good Good Fair Poor

14. Write something you would like to say in relation to Tenawo Bebetiwo talk show program and things that need to be improved? _____

Part Three: Questions on health professional’s perception and attitude

This part is designed to identify health professional’s perception and attitude regarding to **relevance** and **use** of the information watching the Program. You are kindly requested to provide your answer honestly so, please show your level of Agreement or dis Agreement by putting (√) on the right side of the questions.

| No | Health professional’s perception when watching Tenawo Bebetwo TV program regarding to Relevance and use of the information | Agree | Strongly agree | Disagree | Strongly disagree | Neutral |
|----|--|-------|----------------|----------|-------------------|---------|
| 1 | It supports me and add value for my Profession | | | | | |
| 2 | It provides me credible health information | | | | | |
| 3 | it helps me to learn(educate) about health & related issues | | | | | |
| 4 | it helps me to know about my role in the society | | | | | |
| 5 | it creates better awareness about health issues how to protect oneself from disease | | | | | |
| 6 | It teaches me about things I don't learn in school | | | | | |
| 7 | I acquired lesson on the disease or health problem discussed on the talk show | | | | | |
| 8 | It gives me satisfaction with the information I get from ‘Tenwo Bebetwo Program | | | | | |

Audience perception on witch **agenda/issues** are more coverage is given on Tenawo Bebetiwo program.

| No | Health professional's perception on witch agenda/issues more coverage is given on Tenawo Bebetiwo program. | Agree | Strongly agree | Disagree | Strongly disagree | Neutral |
|----|--|-------|----------------|----------|-------------------|---------|
| 1 | In my perception more coverage is given to communicable disease | | | | | |
| 2 | I think for the issues of non-communicable diseases is given more coverage | | | | | |
| 3 | In my opinion the issues of stigma and discrimination n take more coverage | | | | | |
| 4 | I believe, issues related to how people get infected by disease and prevention method take more coverage | | | | | |
| 5 | In my perception equal coverage is given to both communicable and non-communicable disease | | | | | |

1. What do you think the main weaknesses of the EBC Tenawo Bebetwo TV talk show program?

2. What do you think the main strengths of the EBC Tenawo Bebetwo TV talk show program?

3. What should EBC Tenawo Bebetwo TV talk show program do to sustain and maximize its viewers' gratifications?

Appendix - 2

Guide for individual in-depth interview of Medical Doctors of the selected three hospitals: Black lion and Hayat and Bethel. Addis Ababa, Ethiopia

Part 1: Biographical Information

1. Name/Code _____
2. Age _____
3. Gender _____
4. Level of education _____

Part 2: Interview questions

1. Do you often watch Ethiopian Television?
2. What kind of television program(s) do you often watch?
3. Have you ever watched Tenawo Bebetiwo TV talk show?
4. Who do you think “Tenawo Bebetwo TV health program aimed to transmit?
5. How do you see the program content and presentation as a health professional?
6. Do you think that issues raised in the program are appropriate or relevant to the audience?
7. Do you think that the language of health professionals used on the program understandable to audiences? If not, what do you suggest?
8. Do you think that the time allocated for Tenawo Bebetiwo TV talk show is enough?
9. Do the programs gratify your needs?
10. What are the things should be included or improved in the program?
11. How do you see the question and answer telephone communication between the guest, (health’s Professional) and audiences?
12. What are the major weaknesses and strengths of the program?

Appendix - 3

Guide for individual in-depth interview with the producers of the Tenawo Bebetiwo television talk show

Personal Details

1. Name _____
2. Position _____
3. Responsibility in the production of the Tenawo Bebetiwo television talk show _____

4. Educational background _____
5. How long have you been involved in the production of Tenawo Bebetiwo program in the EBC?
6. Have you ever received media related trainings? And in particular health communication?

Interview Questions

1. How long have you worked as a producer of EBC Tenawo Bebetwo Talk show program?
2. How do you get program ideas?
3. How do select the issues?
4. Are the issues relevant to the audiences? Why do you think so?
5. How do you select the gusts (health professionals)? Is there any criteria?
6. What are the sources of the information/facts... on which you base your program?
7. To what extent do audience express their gratification?
8. Have you ever thought of changing the time or day or frequency of broadcasting? If yes' Why?
9. How does feedback on your programs come to you?
10. What do the comments generally indicate?
11. Do you think that the program achieved its objectives? How?
12. What are your main challenges you faced in presenting the program?

Participants of the in-depth interview profile

| S.No. | Name | Gender | Age | Edu. status |
|--------------|-------------------------|---------------|------------|--------------------------------------|
| A | Abate Bane | M | 56 | Professor |
| B | Yewondewosen Taddese | M | 50 | Medical Doctor |
| C | Desalew Mekonen | M | 38 | Medical Doctor |
| D | Anteneh Kasahun | M | 34 | Medical Doctor |
| E | Yidnekachew fikadu | M | 34 | Medical Doctor (medical director) |
| F | Genet Teklehaimanot | F | 36 | Medical Doctor |
| G | Seble fikremariam | F | 55 | Medical Doctor |
| H | Kibrewesen Kiflu | M | 32 | Medical Doctor |
| I | Dersisa legesse | M | 51 | Medical Doctor |
| J | Asnaku Tarekegn | F | 49 | Medical Doctor |
| K | Hawi Bira | F | 28 | Medical Doctor |
| L | Eyosias Aklilu | M | 29 | Medical Doctor |

| S.No. | Name | Gender | Age | ED. status |
|--------------|-------------------|---------------|------------|-------------------|
| A | Wondwosen Tilahun | M | 35 | MA |