

# Communication Intervention Programmes on Knowledge of ‘Baby Factory’ Phenomenon among in-School Adolescents in South-East Nigeria

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## Abstract

Media reports have indicated that “Baby factory” activity in Nigeria which is the harbouring of girls with unwanted pregnancies, and the sell of the babies are emerging as an important social phenomenon with serious negative impact on health and development of adolescents. The study was undertaken to evaluate the effect of two sets of communication interventions on the knowledge towards baby factory phenomenon among in-school adolescents in South-East Nigeria. The study was quasi-experimental with three intervention groups and a control. Key- Informant Interviews (KII) and Focus Group Discussion (FGD) were initially conducted to determine the perspectives of the target group and officials of the Ministry of Women Affairs on baby factory phenomenon to facilitate the design of the communication messages and instrument for evaluating the study outcome. Two communication intervention programmes (audio-recorded and print messages) were developed and implemented. The study findings revealed that the communication intervention programmes on ‘baby factory’ activities designed, empowered and moved teenagers from at risk position to knowledge-equipped position. The study further recommended that, the state government through the Ministry of Women Affairs should have more focused communication intervention programme in secondary schools to educate students who are most vulnerable to this phenomenon.

**Keywords:** Adolescents, baby factory phenomenon, communication intervention programme, knowledge, media

## Introduction

Communication campaigns are effective tools for promoting social change and advancing awareness of health issues. The effectiveness of employing mass media campaigns (MMC) in these regard is the ability to disseminate information to large audiences in different places simultaneously through the use of television, radio, newspapers, leaflets, booklets, posters and billboards (Wakefield, Loken, and Hornik, 2010). Communication campaigns can be used to convey behaviour-change messages aimed at influencing and changing knowledge, attitudes and practices of audiences. Communication campaign arouses concern which is vital in behaviour change especially if combination of appropriate media to reach the target audience is applied, even though some communication campaign programmes done through the media reach the target audience and may not allow the receiver the opportunity to rehearse and internalize the message or meaning of the message.

In Nigeria, there have been various communication campaign programmes using radio and television advertisements such as, jingles, public service announcements, print materials and approaches in form of education entertainment programmes on human trafficking by the National Agency for the Prohibition of Trafficking in Persons (NAPTIP). The Federal Ministry of Health in an effort at combating malaria came up with Roll Back Malaria Initiative campaign, National Programmes on Immunization, HIV/AIDS pandemic campaigns, Poliomyelitis Vaccine campaigns, Family Planning Programme and Ebola Virus campaign.

Studies have demonstrated positive results that communication campaigns can be used to promote health and social change (Esere, 2008; Boles, Adams, Gredler and Manhas, 2014). Some of these media intervention programmes have been effective in changing the behaviour of some members of the public and in raising awareness of some health programmes and other sex-related behaviours while others have not been quite effective (Bessinger, Katende, and Gupta, 2004). Studies have shown that the Roll Back Malaria (RBM) campaign programme that the basic goal is to reduce the malaria burden in Nigeria had positive effect on the targeted population. This programme created awareness of the importance of net usage both treated and untreated leading to greater demand for the nets (Babatunde and Salau, 2015; Ankomah, Adebayo, Arogundade, Anyanti, Nwokolo, Inyang, Ipadeola and Meremiku, 2014). In Benue state Nigeria according to Keating Meekers and Adewuyi (2006), the aim of HIV/AIDS radio programmes packaged in Pidgin English, local languages and drama sketches was to create awareness of HIV/AIDS among farmers, enhance the farmer’s interest and motivate positive change in their behaviour.

‘Baby Factories’ are usually disguised as maternity homes, Non-Governmental Organisations (NGO’s), hospitals, social welfare centers, clinics, and even water bottling factories where doctors, nurses and midwives pose as those rendering humanitarian help to these victims. ‘baby factory’ is seen as another form of trafficking where babies are sold within and outside Nigeria to interested persons and the luring of teenagers to an unknown destination for sex exploitation. United Nations according to UNODC (2015, p. 1) defined human trafficking as

“the acquisition of people by improper means such as force, fraud or deception with the aim of exploring them”. According to this definition, when people are forcefully, fraudulently or deceptively lured to a place then it is a case of trafficking. Exploring the issues of ‘baby factory’ in Nigeria Huntley (2013) states that:

... according to recent mass media reports, teenage girls and young women are brought by traffickers to the so-called “baby factories” with false promises of jobs or safe abortions. As a result, they are confined and forced to give birth. Some of the victims are trafficked while being pregnant; others are later impregnated by men specially hired for such purposes. Allegedly, their babies are sold for international or domestic adoption, rituals, slave labour or sexual exploitation. P.1

Kalu (2011) in his report on the issue of ‘baby factory’ in the South East of Nigeria, sees ‘baby factory’ as a form of child trafficking since the girls are harboured against their will, their babies sold and they do not know what happens to their babies. According to Kanu (2014), the increasing incidences of young pregnant girls being lured into giving away their babies to be sold have presented Nigeria as a country with another form of human trafficking. These girls and women are disturbed in shame, fear, self-hatred and distrust. Some of them suffer infection from sexually transmitted diseases because of the men who sleep with them in the illegal homes. They might also suffer from mutilations caused by dangerous medical procedures during child birth by ‘so-called ‘doctor’ traffickers.

### **Statement of the Problem**

‘Baby factory’ activities in Nigeria and the knowledge of it are not relatively known to the public despite mass media report of these activities in Nigeria, this may be because there is lack of strong communication strategies to connect to the level of the target group. Numerous trafficking campaigns have been done across the globe, however, communication campaign research on trafficking and particularly ‘baby factory’ is limited. Since this undesirable practice continued and the perpetrators seem unrepentant, it is assumed that educating youths about ‘baby factory’ activities will stop the involvement of adolescents in ‘baby factory’ activities.

While there has been mass media report of ‘baby factory’ activities in Nigeria, there has not been any known communication intervention campaign to increase knowledge of ‘baby factory’ phenomenon. There is therefore the possibility that many teenagers in Nigeria may not have adequate knowledge about ‘baby factory’ phenomenon in Nigeria hence; they may not be aware of the serious health consequences of ‘baby factory’ activities and hence, they are easily lured into it. The teenagers may also not have clear understanding of ‘baby factory’ phenomenon consequently; they become easier targets for deception by traffickers and may not report the cases when faced with one.

**Research Objective:** The objective of this study is to find out the level of knowledge among the respondents on ‘baby factory’ phenomenon at pre-and post-intervention in South-East Nigeria.

#### *An Overview of the ‘Baby factory’ Phenomenon*

In Nigeria, a new trend of making money through selling of new born babies to desperate buyers has emerged. The victims are traded from conception and a price paid on them. This new trend is described by Journalist as “‘baby factory’/Baby Harvesting’. UNESCO in 2006 reported the first cases of ‘Baby Harvesting’ in a policy paper entitled, ‘Human Trafficking in Nigeria: Root Causes and Recommendations’. According to UNESCO (2006, p.31),”In States like Abia, Ebonyi and Lagos, many cases have been reported to clinics, doctors, nurses and orphanages who help pregnant teenagers and other women who do not want to keep their babies after birth”. This report by UNESCO occasioned investigations by the Police that resulted in police raids of some of the ‘baby factories’ and the discovery of pregnant teenage girls in such illegal homes such as illegal homes in Umuahia and Enugu in Nigeria. The pregnant girls and women who were waiting for the day they would give birth, sell their babies and perhaps return to normal living were taken and rehabilitated. This indicates that the menace has been on-going even before the report was published by UNESCO and since it was published by UNESCO, so many cases of baby factories have been unearthed and reported by the media. According to media reports, the price of a baby depends on several factors including the sex of the baby; male babies are sold for higher prices. The amount paid varies and depends on the owner of the factories (Onafuye, 2014; Christiansson, 2013). In 2011, the National Agency for the Prohibition of Trafficking in Persons (NAPTIP) said that their investigations on ‘baby factory’ activities in Nigeria showed that babies were sold for up to \$6,400 (£4,200) about ₦700,000.00 (*BBC NEWS AFRICA*, 2013). The traffickers are the owners of these facilities, with some of them being medical doctors. They run their ‘business’ with the help of ‘employees’, who help them to carry out their criminal acts in the ‘homes’.

#### *The Root Causes of ‘Baby Factory’ Practices*

The root causes of ‘baby factory’ according to Adelaja (2014, p. 2) “may be those that facilitate any other forms of human trafficking such as poverty and high unemployment rates particularly in rural areas, low levels of education and literacy, corruption, and lack of information on human trafficking”. Huntley (2013) states lack of information and awareness about human trafficking and, in particular, “baby factories” make women and

children more susceptible to this phenomenon.

Adelaja (2014, p.2) states that, “the social stigmas that contribute to the existence of ‘baby factories’ in Nigeria are those against teenage pregnancies, pregnancies out of wedlock, couple’s infertility and legal adoption’s”. Kalu (2011, p. 1) in *Vanguard* of July 30, 2011, quoting Mr. Sola Alabi the Public Relations Officer of the Abia State Nigerian Security and Civil Defence Corps (NSCDC) said that “they arrest owners of such illegal maternity homes in Abia regularly and it is something that has been on-going over the years”, this shows that the issue has been going on in Nigeria for a long time even before the first case of ‘baby factory’ was reported and the research of ‘baby factory’ activities by UNESCO in 2006.

According to Charles, Akwara, and Andeshi (2014) abject poverty may have been the primary motivation that is causing these teenagers in the ‘baby factories’ to give out their babies for money and infertility is also one of the causes because most of the buyers of the babies are mostly women who are yet to have their own babies. According to Fide (2014), poverty level is one of the root causes of ‘baby factory’, Also, greed is a motivating factor that made the owners of the baby factories to start their heinous trade. Kanu (2014) states that poverty, corruption and failure of the government to affect the people through job opportunities are some of the root causes of ‘baby factory’ in Nigeria while Onyemelukwe–Onuobia (2013, n.p) in analyzing the ‘baby factory’ activities in *This Day Newspaper* (online) states that some of the root causes of ‘baby factory’ activities in Nigeria are, “the premium placed on biological children, inability to police orphanages, failure to use our criminal laws effectively and the absence of adequate policies and legislation”. She further states that, “... infertility is one of the most difficult challenges a couple will have to face, especially in Nigeria”. There are so many root causes of ‘baby factory’ activities in Nigeria which could be cultural, economical, and social and because, it is seen as another form of trafficking the causes could also be the same with human trafficking and other forms of trafficking.

### **Theoretical Framework**

The study anchored on Social Cognitive Theory (SCT) propounded by Albert Bandura. Social cognitive theory explains that message content, extent of media use, personal experience and social factors interact to inform media effects. Bandura (1986) explains that social cognitive theory provides a conceptual framework which embodies the endowments, belief systems, self-regulatory capabilities and distributed structures and functions through which personal influence is exercised. People play a part in their self-development, adaptation, and self-renewal with changing times (Bandura, 2001). The theory implies that for effective and positive learning to occur an individual should have positive personal characteristics, exhibit appropriate behaviour and stay in a supportive environment which could be a conducive environment for learning. The theory also implies that learning is as a result of a thorough evaluation of the present experience of the learner versus his past experience. Learning involves the transformation of information in the environment into knowledge that is stored in the mind. Learning occurs, when new knowledge is acquired or existing knowledge is modified by experience.

The messages designed and disseminated in different forms of media would produce effective result to the learner. In this study, the students were presented with audio-recorded messages and print materials in the classroom, they are expected to reflect on what the teacher/research assistants said and those confused would ask questions for further clarifications. The teacher/research assistants would review the points again. People may not have prior knowledge (personal experience) for media messages to have effect on them. Sometimes, the experience of others, the media messages and media environment interact to cause change in behaviour and build self-efficacy of the participants.

The intervention programmes on ‘baby factory’ activities in form of audio recorded messages, and print materials (stickers, leaflets, and poster) which were designed to promote changes by informing, motivating and guiding the students on issues of ‘baby factory’ activities in Abia State was taught to the students in the classroom and motivated them and helped them to gain knowledge on ‘baby factory’ activities, and also helped them to retain the acquired new knowledge. The knowledge gained and skills acquired through classroom training on ‘baby factory’ issues influenced the student’s behaviours. It is assumed that the persuasiveness of the intervention programmes provided confidence on the students to take action and persist in action by saying that they will offer help to anyone who gets involved in ‘baby factory’ activities or report any seen case to the police or Ministry of Women Affairs.

### **Research Methodology**

This study was a quasi-experimental research design involving three intervention groups and a control group. The general goal of quasi-experimental research is to investigate cause and effect relationships, finding out the one trend that is as a result of the intervention. This approach to research is often used to evaluate the effect and benefits of specific intervention programmes. This study determined the effect of intervention programmes on in-school students’ knowledge of ‘baby factory’ activities. It involved the testing of in-school student’s knowledge of ‘baby factory’ activities in Abia State, Nigeria. Two intervention programme was designed -

audio-recorded messages for Intervention Group One, print messages (stickers, leaflets and posters) for Intervention Group Two and combination of audio-recorded and print messages for Intervention Group Three. The students were tested prior to the intervention programme, after the intervention programme was introduced, the students were tested again after the intervention programme to find out if changes occurred, if there were increase in knowledge of ‘baby factory’ activities among the students.

The study design involved three treatment (intervention) groups and a control group from four (4) schools. Two (2) treatment (intervention) programmes were designed to increase the knowledge of in-school adolescents on ‘baby factory’ phenomenon in Abia State, Nigeria. Further, qualitative methods were used to obtain pertinent information that was used to contextualize the design and implementation of the intervention. Interviews were conducted using Key Informants in Ministry of Women Affairs Abia State, to ascertain the student’s awareness/knowledge of ‘baby factory’ phenomenon in Abia State and what the state has done about the phenomenon. Interviews were conducted on some of the victims to know their knowledge of ‘baby factory’ phenomenon before they went into it. Also Focus Group Discussion (FGD) was done in five groups in two of the four secondary schools (Eziama High School, Aba, Igbere Secondary School, St Ephraim’s Secondary School, Isiala-Ngwa, and Amakama Community High School, Olokoro, Umuahia) selected for the study to find out what the students know about ‘baby factory’ phenomenon before the design and implementation of the communication intervention messages. The findings from the Key Informant Interviews (KII) and Focus Group Discussion (FGD) were used to design the communication intervention messages. Four hundred (400) secondary school students were randomly selected (one hundred for each group) from a population of 80, 695 senior secondary students in S.S.1 and S.S.2 drawn from two hundred and forty six (246) government-owned senior secondary schools in Abia State.

## Results

The responses from the Key Informants show that Abia State government through the Ministry of Women Affairs is aware of ‘baby factory’ activities but does not have a strong intervention programme to put a stop to the phenomenon. Also, some of the victims do not have adequate knowledge of ‘baby factory’ activities, the illegal homes and what happens at the ‘baby factory’ ‘homes’. The findings from the Focus Group Discussion indicate that the students are aware of ‘baby factory’ phenomenon but they do not have in-depth knowledge of the phenomenon. They do not know the implications of staying in an illegal home and giving birth there and they do not know where to seek help if one encounters ‘baby factory’ traffickers.

The basic results showing summaries of descriptive statistics of means and standard deviations for control and intervention groups for knowledge of ‘baby factory’ phenomenon among in- school adolescents in Abia State.

**Table 1**

**Knowledge at Baseline of the Respondents for the Four Groups**

Items/Statement	Max. scale on point	Baseline							
		Control N=100		Exp. 1 N=100		Exp. 2 N=100		Exp. 3 N=100	
		Yes	No	Yes	No	Yes	No	Yes	No
Knowledge	11	36.0	64.0	79.4	20.6	86.9	13.1	77.2	22.7

**Table 2**

**Knowledge at Endline of the Respondents for the Four Groups**

Items/Statement	Max. scale on point	Endline							
		Control N=100		Exp. 1 N=97		Exp. 2 N=96		Exp. 3 N=95	
		Yes	No	Yes	No	Yes	No	Yes	No
Knowledge	11	38.0	62.0	95.7	4.3	98.9	1.1	100	-

### Results for Control at Pre-Intervention

The result for control group at baseline showed that the student’s knowledge of ‘baby factory’ activities is not adequate, which might be because of the location of the school. Majority of the respondents (64) in control group do not have much knowledge of ‘baby factory’ activities, they responded ‘No’ to questions that are meant to be ‘Yes’. This implies that most of the respondents are not aware of ‘baby factory’ phenomenon and do not have in-depth knowledge of the phenomenon.

### Results for Intervention Group One at Pre-Intervention

The study also showed that intervention group one at baseline had some knowledge of ‘baby factory’ activities



which implies that they are aware of ‘baby factory’ activities but still need to know all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. Most of the respondents (79) agreed to the facts about ‘baby factory’ phenomenon.

#### **Results for Intervention Group Two at Pre-Intervention**

Similarly, the study also showed that intervention two group at baseline had some knowledge of ‘baby factory’ activities which implies that they are aware of ‘baby factory’ activities but still need to know all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. Most of the respondents (86) agreed to the facts about ‘baby factory’ phenomenon.

#### **Results for Intervention Group Three at Pre-Intervention**

Furthermore, the study also showed that intervention three group at baseline had some knowledge of ‘baby factory’ activities which implies that they are aware of ‘baby factory’ activities but still need to know all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. Most of the respondents (77) agreed to the facts about ‘baby factory’ phenomenon. These results imply that there is knowledge of ‘baby factory’ phenomenon among the respondents in the three experiment groups which might be because of the location of the secondary schools, also that the respondents might likely be mass media users for them to be aware of the phenomenon.

#### **Results for Control at Post-Intervention**

The result for control group at endline showed that the student’s knowledge of ‘baby factory’ activities did not increase. This implies that most of the respondents are not aware of ‘baby factory’ phenomenon and do not have in-depth knowledge of the phenomenon because they were not educated with the intervention programme designed.

#### **Results for Intervention Group One at Post-Intervention**

The study also showed that the knowledge of respondents in intervention one group (that received audio recorded messages) after the intervention programme increased from (79%) at pre-intervention that agreed to the questions to (95.7%) at post-intervention that agreed to the questions. This result implied that the intervention programme had an effect on the knowledge the students have on ‘baby factory’ phenomenon in Abia State, Nigeria. It can therefore be deduced from the result that the students after the intervention programme have all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. The intervention programme made its impact on the knowledge they have about ‘baby factory’ phenomenon.

#### **Results for Intervention Group Two at Post-Intervention**

Similarly, the study also showed that the knowledge of respondents in intervention two group (that received print messages (leaflets, stickers and posters)) after the intervention programme increased from 86% at pre-intervention that agreed to the questions to (98.9%) at post-intervention that agreed to the questions. This result implied that the intervention programme had an effect on the knowledge the students have on ‘baby factory’ phenomenon in Abia State, Nigeria. It can therefore be deduced from the result that the students after the intervention programme have all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. The intervention programme made impact on the knowledge they have about ‘baby factory’ phenomenon.

#### **Results for Intervention Group Three at Post-Intervention**

Furthermore, the study also showed that the knowledge of respondents in intervention three group (that received combination of audio recorded and print messages) after the intervention programme increases from (77%) at pre-intervention that agreed to the questions to (100%) at post-intervention that agreed to the questions. This result implied that the intervention programme had an effect on the knowledge the students have on ‘baby factory’ phenomenon in Abia State, Nigeria. It can therefore be deduced from the result that the students after the intervention programme have all the necessary information about the phenomenon and have in-depth knowledge of the phenomenon. The intervention programme made impact on the knowledge they have about ‘baby factory’ phenomenon. These results imply that the communication intervention programmes designed and disseminated through audio recorded message, stickers, poster, and leaflets were effective because there is increase in knowledge of ‘baby factory’ activities on the respondents.

The study showed that responses by study participants to the knowledge items in the questionnaire were generally better following the interventions for knowledge. Knowledge of the respondents on ‘baby factory’ phenomenon however, was determined with nominal ‘Yes’ and ‘No’ questions. 11 knowledge items were used in this study; students were asked what they know about ‘baby factory’ activities with the option of Yes or No

answers at baseline and endline. The student's knowledge on 'baby factory' activities increased, students knowledge on what happens to the babies born in the illegal homes increased at endline, there is also increase in knowledge on the responses that the teenagers are kept in the illegal homes until they give birth, the victims are maltreated, abused sexually in the illegal homes and might contract sexually transmitted diseases. There was also increase in knowledge on the question that victims suffer infections and mutilations caused during childbirth and that, relatives, doctors and anybody can lure adolescents with unwanted pregnancies to these illegal homes.

### **Discussion**

Findings from the study revealed that the communication intervention programme designed increased the knowledge of in-school students on 'baby factory' phenomenon at endline/post-intervention. The result showed that the in-school students have knowledge of 'baby factory' phenomenon but do not have full knowledge of what happens in the illegal homes and what becomes of the babies born in those homes which confirms what the second victim reported when being interviewed' that, "I was made to believe that the place I was taken to is a safe place where I will give birth. They did not tell me they will sell my baby. I wanted to hide from people". Also, what some of the students said during the Focus Group Discussion, that they are not sure what happens to the babies and if the teenagers are sexually abused in the 'illegal' homes. The knowledge of the in-school students on 'baby factory' phenomenon improved and increased and when compared with baseline result, and post intervention/endline result, majority of them were able to know what happens to the babies born in the illegal homes and that the victims suffer the loss of their babies and that what they go through in the illegal homes lead to the victims having depression and low-esteem issue. There was increase in their knowledge that the victims also suffer malnutrition in the illegal homes and might be infected with sexually transmitted disease by the men who work in those illegal homes or be mutilated by unlicensed medical practitioners during childbirth. There is also increase in knowledge of where the victims can get help. There was also significant difference among the intervention groups and the control group on the level of knowledge of the in-school students on 'baby factory' phenomenon.

The findings of the study showed that education intervention programmes can be designed to expose and inform people about 'baby factory' phenomenon which will enable them adopt certain behaviors that would lead to change in attitude and perception. Similar and different study's findings are consistent with the findings of this study that education intervention programmes are relevant and can be used to increase knowledge of related issues among secondary school students (Esere, 2008; Menna, Ali and Worku, 2015; Flynn, et al., 1992)

The findings in this study was in line with the study of Boles, Adams, Gredler and Manhas (2014) on the ability of mass media campaign to influence knowledge, attitudes, and behaviours about sugary drinks and obesity. The findings of the study showed that, there was increase in knowledge about health problems associated with excessive sugar consumption which prompted behavioural intentions to reduce soda and sugary drink consumption. Also consistent with the study, is a study by Charafddine, El Rafei, Azizi, Sinno, Alamiddine, Howson, Walani, Nassar and Yunis (2014) that investigated the impact of a preconception health education intervention programme conducted in high schools in Lebanon in improving knowledge of benefits of preconception health. The study found out that awareness campaigns in schools increased the preconception health knowledge among high school students.

### **Conclusion**

In Nigeria today, the issue of teenagers with unwanted pregnancies who are lured to illegal homes is becoming everyday news. Most times some of these teenagers who are financially challenged are impregnated by men in those homes; they are kept in these illegal homes for the duration of their pregnancy and after their babies are born, the babies are taken from them, sold to buyers and they will be given a small amount of money and thrown out or allowed to go. Some of these teenagers are abused, maltreated and they suffer the denial of basic education, healthcare, and rights of children. Some of them suffer malnutrition and do not enjoy the comfort that a home can offer especially in their pregnancy condition and they also suffer from the loss of their babies, not knowing what happens and becomes of their babies. In view of these issues, this study was done to find out the level of knowledge among the respondents on 'baby factory' phenomenon at pre-and post-intervention in South-East Nigeria through quasi-experimental study. The findings of the study have shown that, communication intervention messages are effective in increasing the knowledge of in-school adolescents in South east, Nigeria.

### **Recommendation**

Based on the findings, the following recommendations are presented:

1. Since the study found out that the stakeholders – the Ministry of Women Affairs and the State government have not done much to create awareness and improve knowledge of 'baby factory' phenomenon, this study therefore recommends that, the state government through the Ministry of Women Affairs should have more focused communication intervention programme in secondary

schools to educate students who are most vulnerable to this issue.

2. Given the important role policy plays in issues in Nigeria, the study further recommends that there should be policy on adding 'teachings on societal ills' to the curriculum of secondary school students, especially the senior classes.
3. There should be formulation and immediate implementation of policy framework/guideline on checking 'baby factory' activities in Abia State. The policy will include an enabling and protecting environment for adequate reporting for the victims, adequate penalty for the culprits and legal cover for the reporting party.

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