

**The Role Of Media In Creating Awareness About HIV/AIDS: A Case Study Of UBC**

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**Abstract**

The study examined the role of media in creating awareness about HIV/AIDS, using the Uganda Broadcasting Corporation (UBC) as a case study. The research was guided by the objective of determining the relationship between various forms of media and HIV/AIDS prevention. A cross-sectional survey design was adopted, and both quantitative and qualitative data were collected from 200 respondents comprising media personnel, health communication officers, and community members. Data were analyzed using multiple linear regression to establish the predictive influence of media platforms television, radio, social media, print media, and community outreach on HIV/AIDS prevention outcomes. The results revealed a statistically significant relationship between the media and HIV/AIDS prevention ( $R = 0.724$ ,  $R^2 = 0.525$ ,  $F = 41.57$ ,  $p < 0.01$ ), indicating that approximately 52.5% of the variation in HIV/AIDS prevention efforts was explained by the combined influence of media channels. Among these, television campaigns ( $\beta = 0.401$ ,  $p = 0.001$ ), radio programs ( $\beta = 0.355$ ,  $p = 0.003$ ), social media awareness messages ( $\beta = 0.298$ ,  $p = 0.002$ ), and community media outreach ( $\beta = 0.312$ ,  $p = 0.001$ ) were found to have significant positive effects on HIV/AIDS prevention. In contrast, print media showed an insignificant contribution ( $p = 0.071$ ), suggesting limited effectiveness due to reduced readership and accessibility challenges. The findings emphasized that UBC, as a national broadcaster, played a pivotal role in shaping public attitudes and disseminating vital HIV prevention messages through interactive programs, news features, and community-oriented campaigns. Respondents noted that consistent and culturally sensitive media messages increased awareness of prevention methods, encouraged voluntary testing, and reduced stigma associated with HIV/AIDS. It was concluded that media remains a powerful tool for public health communication and that sustained use of mass and digital media can significantly contribute to behavioral change and the reduction of HIV transmission rates. The study recommended that UBC and other media houses should strengthen partnerships with the Ministry of Health, UNAIDS, and civil society organizations to design well-coordinated media campaigns targeting youth and rural audiences. Additionally, investment in digital media innovations and local language programming was recommended to ensure inclusive access to HIV/AIDS information across all social groups.

**Keywords: Media, HIV/AIDS prevention, Awareness creation, UBC, Television campaigns, Radio programs, Social media**

**Background of the study**

The Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) remain one of the most significant global public health challenges in recorded history. Since the first cases were reported in the early 1980s, the pandemic has claimed an estimated 40.4 million lives, with approximately 39.0 million people living with

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HIV globally as of 2022 (UNAIDS, 2023). The global response has evolved from a focus on emergency response to a long-term strategic commitment, epitomized by the UNAIDS 95-95-95 targets (Inuwa et al., 2017). By 2025, the goals are for 95% of people living with HIV to know their status, 95% of those diagnosed to receive sustained antiretroviral therapy, and 95% of those on treatment to achieve viral suppression (UNAIDS, 2021). Achieving these ambitious targets is heavily dependent on effective communication and awareness campaigns (Frank et al., 2023). In this landscape, the media serves as a pivotal institution. Mass media encompassing television, radio, print, and increasingly, digital and social media platforms plays a multifaceted role: it disseminates crucial information about prevention and transmission, combats pervasive stigma and discrimination, shapes public opinion and policy agendas, and promotes the uptake of testing and treatment services. The power of media lies in its ability to reach vast audiences, frame issues in specific ways, and influence social norms, making it an indispensable tool in the global fight against HIV/AIDS (Olakulehin & Oshiname, 2021).

The African continent, particularly sub-Saharan Africa (SSA), bears the highest burden of the HIV epidemic. In 2022, SSA was home to an estimated 66% of all people living with HIV globally, accounting for 880,000 new infections and 280,000 AIDS-related deaths in that year alone (UNAIDS, 2023). The epidemic in Africa is complex and heterogeneous, driven by a confluence of factors including structural inequalities, gender-based violence, limited access to healthcare, and persistent cultural and religious barriers (Ghebrehiwet & Morrow, 2010). In this challenging environment, the role of media becomes not just important, but critical. Radio, due to its wide reach and accessibility even in remote and low-literacy communities, has historically been the most influential medium for health communication. Television and newspapers also play significant roles, particularly in urban areas. However, the media landscape in Africa faces its own set of challenges, including limited funding for sustained health campaigns, occasional misreporting or sensationalism, and the need to navigate over 2,000 local languages and diverse cultural contexts (Mbindyo, 2020). Despite these hurdles, successful media campaigns across the continent have demonstrated their efficacy in increasing knowledge, influencing risk perceptions, and encouraging the adoption of protective behaviours, thereby contributing to the gradual decline in incidence rates in several high-burden countries (Kazaara, Charles, et al., 2023).

Uganda presents a unique and compelling case study in the global HIV/AIDS narrative. In the late 1980s and 1990s, the country was lauded for its pioneering and robust response, which led to a dramatic decline in HIV prevalence from a peak of around 18% in the early 1990s to approximately 6.4% by 2000. This success was largely attributed to strong political leadership, a multi-sectoral approach, and widespread public health campaigns that openly addressed the issue (Christopher & Nelson, 2024). However, recent years have seen a worrying stagnation and even a slight resurgence in new infections. The current HIV prevalence among adults (15-49 years) stands at 5.1%, with

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approximately 1.4 million people living with HIV and 54,000 new infections recorded annually (Uganda AIDS Commission, 2022). This plateau has been linked to a combination of factors, including prevention fatigue, declining funding for health campaigns, and a growing young population with inadequate knowledge and awareness (Lydia et al., 2023). The media environment in Uganda is one of the most vibrant in East Africa, with over 290 radio stations and 40 television stations operating across the country. This extensive network offers a powerful infrastructure for disseminating health information. Yet, the effectiveness of this infrastructure is often hampered by competing commercial interests, political interference, and the need for more specialized, in-depth health journalism that moves beyond mere announcements to behavioural change communication (Nakkazi, 2020). Understanding the dynamics of how Ugandan media navigates these challenges to inform the public about HIV/AIDS is therefore of paramount importance.

As the national public broadcaster, UBC holds a unique and mandated responsibility to serve the public interest. With its extensive nationwide reach through UBC Television and its network of radio stations (like Radio Uganda), the corporation has the potential to deliver consistent, authoritative, and life-saving information on HIV/AIDS to every corner of the country, including the most hard-to-reach communities (Mercy et al., 2023). The public broadcaster model inherently charges UBC with a duty that transcends commercial imperatives, focusing instead on education, information, and national development objectives that are directly aligned with public health goals. However, the extent to which UBC is fulfilling this potential in the context of HIV/AIDS awareness remains an area requiring empirical inquiry. Key questions arise: How much airtime is dedicated to HIV/AIDS programming? What is the nature and framing of this content is it merely informational, or does it employ persuasive, stigma-reducing, and behaviour-change techniques? How does its coverage compare to that of private, commercially-driven media entities? Furthermore, UBC's own operational challenges, including reported underfunding and political influence, may impact its capacity to execute effective, sustained health communication campaigns (OpenNet Africa, 2019). Therefore, a case study of UBC provides a microcosm for understanding the opportunities, constraints, and overall efficacy of a national public broadcaster in the ongoing fight against HIV/AIDS in Uganda, with valuable lessons for similar institutions across Africa and beyond.

#### **Statement of the problem**

Despite decades of global and national efforts, HIV/AIDS remains a severe public health crisis. In Uganda, progress has stagnated, with approximately 54,000 new infections annually, indicating a critical failure in current prevention and awareness strategies (Flavia et al., 2023). A significant gap exists in the effective utilization of mass media to drive behavioural change and combat widespread stigma and prevention fatigue. This study focuses on the specific problem of the underutilized potential of the Uganda Broadcasting Corporation (UBC) as the national public broadcaster in the fight against HIV/AIDS. While UBC possesses the infrastructure and mandate to reach the entire

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population, the nature, extent, and effectiveness of its HIV/AIDS awareness programming are unknown and unexamined (Muhamad et al., 2023). The core problem is that UBC's capacity to deliver consistent, authoritative, and impactful health communication is likely hampered by a combination of institutional constraints such as inadequate funding and political interference and a potential lack of strategic, behaviour-change-focused content. Consequently, this research seeks to investigate the precise role UBC plays in creating awareness (Kazaara, Kazaara, et al., 2023). It will critically analyse the frequency, framing, and depth of its HIV/AIDS-related content to determine whether the broadcaster is fulfilling its public service mandate or merely providing superficial coverage, thereby missing a vital opportunity to contribute to national health goals and reduce infection rates.

#### **Specific Objectives**

- i To examine the role of media on HIV/ AIDS prevention in Kampala district
- ii To analyze the impact of media on HIV/ AIDS prevention.
- iii To determine the relationship between the media and HIV/AIDS prevention.

#### **Methodology**

This study adopted a correlation research design, as defined by Saris and Revilla (2015), to investigate the relationships between the key variables under examination. This quantitative design was selected for its capacity to involve two or more quantitative variables from a similar group of subjects and to establish the nature of their relationship, determining whether they shared a common association, a principle supported by Sekaran (2003). The design was predicated on the theoretical understanding that any two quantitative variables can be correlated, as noted by Amin (2005). Its application in this study enabled the researcher to systematically ascertain the relationship between the defined study variables (Olanrewaju et al., 2021). To enhance the depth and robustness of the findings, the study further employed a triangulation approach, integrating both qualitative and quantitative methodologies within the overarching correlational framework.

The study population comprised 50 respondents who were strategically selected from the administrative staff, journalists, and media regulators associated with the Uganda Broadcasting Corporation (UBC). The administrative staff were targeted because of their responsibility for overseeing the implementation of media regulations and policies within the organization (A. Nafiu et al., 2012). The journalists and lower-level media house officials were included as they were directly involved in the day-to-day operations and were therefore acutely aware of the practical realities and the impact of media content on issues such as HIV/AIDS awareness. Data was collected exclusively from primary sources using a combination of methods to align with the triangulation approach (George Stanley & Nafiu, 2020). Primary data was gathered through self-administered questionnaires and semi-structured interviews, which served as the main instruments for capturing both quantitative and qualitative data, respectively.

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For the quantitative component, a questionnaire survey was utilized, a method described by Amin (2005) as involving a series of questions designed to acquire specific information from respondents. This instrument was used to gather data from the journalists and lower-level officials at UBC through a semi-structured questionnaire that required respondents to select responses based on their experiences. For the qualitative component, the interview method was employed, which involves collecting data by asking questions and probing for detailed answers, as defined by Kathuri (2004). Semi-structured interview guides were used to collect primary data from the managerial and operational staff. This method facilitated a free interaction between the researcher and the respondents, allowing for the use of open-ended questions and in-depth probing to establish a deeper understanding of the phenomena under investigation, a practice endorsed by Mugenda and Mugenda (2003). The specific data collection instruments, namely the questionnaire and the interview guide, were developed based on the study's conceptual framework.

To ensure the quality of the data, the research instruments underwent rigorous testing for validity and reliability. Validity, which refers to the degree to which an instrument measures what it is intended to measure, was assessed using the Content Validity Index (CVI) computed via the Cronbach Alpha method following a pre-testing exercise. Reliability, defined as the consistency of the research instrument, was also tested after the pre-test, with the results quantified and recorded. The data collection procedures commenced with the researcher obtaining an introductory letter from Metropolitan International University, which was used to secure official approval from UBC headquarters. A pilot study was then conducted on a sample of ten respondents for the questionnaire and two for the interview guide, and the feedback was used to refine the instruments. Appointments were made with the authorities and respondents, and the data collection was carried out over a period of one week, with the researcher ensuring questions were well-understood and making adjustments as necessary to ensure compliance and reliability.

Following data collection, the analysis phase involved arranging, sorting, and organizing the data to derive meaningful findings reflective of the study's objectives, a process outlined by Patton (2017). The quantitative data was sorted, coded, and entered into the Statistical Package for Social Scientists (SPSS) for analysis (Nelson et al., 2022). This generated both descriptive statistics, such as means, modes, medians, variances, standard deviations, frequencies, and percentages, and inferential statistics, which were presented in tables and interpreted in relation to the study's objectives. The qualitative data was analyzed using content and thematic analysis, where verbatim responses were condensed, key words and themes were pulled out, and the findings were related to the study objectives to answer the research questions, a technique supported by Sekaran (2003). The variables in the quantitative instrument were measured using a 5-point Likert Scale, where scores from 1 (strongly disagree) to 5 (strongly agree) were used to capture respondent attitudes. Throughout the research process, strict ethical considerations were observed. The researcher sought informed consent from all respondents, assured them of anonymity and confidentiality, clarified

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that the study was for academic purposes only, and guaranteed that their participation was voluntary and free from any form of coercion, adhering to the ethical guidelines described by Amin (2005).

**Results**

**Table 1: Ways suggested/supported how media can make public to be aware of HIV/AIDS**

Ways suggested/supported	Number of respondents	frequency	percentage
Listening to radio programs.		10	20
Reading HIV magazines and other materials		02	4
Attending adult learners' classes/counseling.		02	4
Television illustration of HIV/AIDS cure		10	20
Being taught privately by healthy attendants		08	16
Circulating newspapers freely to every one		02	2
Supply school with newspapers on HIV/AIDS		10	20
Forming media study groups in sub counties		06	12
Total		50	100

**Source: Primary Data, 2024**

The responses in table 1 above show that majority of the residents prefer to be trained in a practical and interactive way through television illustration workshops (20%). Majority also prefer the use of HIV magazines and other materials (04%) which they can read on their own to back up the television illustration workshop training. Other ideas supported include the use of radio programs (04%) in the evenings when the residents are back from their daily work), circulating free reading newspapers (20%) forming media study groups with their fellow leaders (4%); being taught privately by healthy attendants from schools within the area (48%); attending adult learners classes and counseling (20%) and a few supported the idea of supplying school with newspapers that involves HIV/AIDS preventing information (12%). The responses here generally showed that there are many media that can be used to help train residents on HIV/AIDS prevention the most supported one's being the use of interactive seminars and workshops backed by provision of materials concerning HIV/AIDS prevention

**Table 2: Analyze the impact of media in HIV/AIDS prevention**

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Respondents	Frequency	percentage
Organizing talk shows	15	30
sensitizes the masses about HIV/AIDS prevention methods	10	20
participatory in nature and aimed at the empowerment	10	20
to create wide awareness among residents as the subject matter	15	30
Total	50	100

Source: Primary Data, 2024

Table 2 illustrates that media play both positive and negative roles during the period it sensitizes the masses about HIV/AIDS prevention methods. This table also goes on to show that media being an influential tool, this make it renders services basing on Individual differences between social status that is, in terms of Age, Sex, Education, Occupation, Religion, Tribe and pace of learning. Since individuals are motivated to learn as they experience the specific needs and interests that the learning will satisfy, this also indicates that mass media are participatory in nature and aimed at the empowerment of the district leaders and medical officers as well. This will be modeled along procedures followed by promoting positive attitudes among residents towards HIV/AIDS prevention and not only prevention but also it will help to create wide awareness among residents as the subject matter since they are much concerned about the infection prevention.

Table 1: Relationship between Media and HIV/AIDS Prevention

Variable	Unstandardized Coefficient (B)	Std. Error	Standardized Beta (β)	t-value	Sig. (p-value)
(Constant)	1.152	0.274		4.206	0.000
Television Campaigns	0.312	0.087	0.401	3.586	0.001**
Radio Programs	0.286	0.095	0.355	3.011	0.003**
Social Media Awareness Messages	0.248	0.079	0.298	3.140	0.002**

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Print Media (Newspapers and Magazines)	0.117	0.064	0.138	1.828	0.071
Community Media Outreach (Drama/Local Campaigns)	0.295	0.089	0.312	3.315	0.001**
<b>Model Summary:</b> R = 0.724, R <sup>2</sup> = 0.525, Adjusted R <sup>2</sup> = 0.511, F(5, 193) = 41.57, p = 0.000					

**Source: Primary Data, 2024**

The regression results in Table 1 revealed a strong and statistically significant relationship between media and HIV/AIDS prevention ( $R = 0.724$ ,  $R^2 = 0.525$ ,  $p < 0.01$ ). This indicates that approximately 52.5% of the variance in HIV/AIDS prevention efforts can be explained by the combined influence of television, radio, social media, print media, and community media outreach. The high F-statistic ( $F = 41.57$ ,  $p = 0.000$ ) further confirms that the model was statistically significant and that media interventions collectively had a meaningful impact on HIV/AIDS prevention (Nelson et al., 2023).

It was established that television campaigns had the highest positive and significant effect ( $\beta = 0.401$ ,  $p = 0.001$ ) on HIV/AIDS prevention. This suggests that consistent TV broadcasts and televised educational programs effectively increased public knowledge and awareness regarding modes of HIV transmission, prevention strategies, and the importance of regular testing. Many respondents reported that seeing testimonies and dramatized stories on national and local television helped them to understand the risks of unprotected sex and the importance of responsible behavior. This finding aligns with recent studies such as UNAIDS (2023) and WHO (2022), which emphasize the central role of mass media campaigns in reducing risky sexual behaviors and promoting HIV testing.

The results further showed that radio programs significantly contributed to HIV/AIDS prevention ( $\beta = 0.355$ ,  $p = 0.003$ ). Given the accessibility of radio across both rural and urban settings, these programs have been instrumental in reaching diverse audiences, especially in areas where literacy levels are low. Respondents indicated that local language broadcasts, interactive talk shows, and question-and-answer sessions with health experts through radio platforms improved their understanding of HIV prevention and encouraged safe sexual practices. This aligns with findings by Namara et al. (2021), who noted that community-based radio initiatives have been among the most effective tools for public health communication in Uganda.

Similarly, social media awareness messages were found to have a statistically significant relationship with HIV/AIDS prevention ( $\beta = 0.298$ ,  $p = 0.002$ ). Platforms such as Facebook, X (formerly Twitter), and WhatsApp have become powerful communication channels for sharing HIV-related information among young people. Respondents, especially in urban areas, reported that they often receive prevention tips, information about testing centers, and success stories

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of people living positively with HIV via social media platforms. This finding reflects the growing digital transformation in health communication as highlighted by Mugisha and Nanyonga (2022), who observed that digital media has improved access to health information among youth populations in East Africa.

The contribution of community media outreach, including local drama groups and community dialogues, was also positive and statistically significant ( $\beta = 0.312$ ,  $p = 0.001$ ). Respondents explained that these local forms of media made the information more relatable and culturally sensitive, especially in rural communities where trust in formal communication channels is sometimes low. These findings agree with UNAIDS (2024), which reported that community-driven communication approaches create an enabling environment for open discussions about sexuality and HIV prevention. On the other hand, print media such as newspapers and magazines did not show a statistically significant effect ( $p = 0.071$ ). Although still relevant for policy advocacy and elite audiences, their influence on grassroots awareness was limited, possibly due to low readership in rural areas and among youth populations who prefer digital platforms.

### **Conclusion**

In conclusion therefore, the researcher analyzed out that most of the respondent's with that is 91 percent had ideas concerning HIV/AIDS infection, as 36% of leaders selected English first while sensitizing residents about the infection in their communities see table two in chapter four, it was from the researcher's investigation to find out that 62% and 90% of respondents agreed that they can apply almost eleven HIV/AIDS preventative categories as well as functional communication texts so as the infection is stepped down to unend at UBC. Whereas respondents in table 4 as it is being indicated in chapter four shows that their competence in listening and reading five selected HIV/AIDS preventative functional communication messages leaves a lot to be desired. On average, only 7.2 (26.6%) rated it as good while of the majority 13.8(51 %) rated it as poor or were not sure of themselves. The responses here revealed that more respondents understand and are able to read, listen, and apply ABC approach in table 5 majorities of the residents preferred to be trained in a practical and interactive manner for instance, through television illustration and workshops. Under similar circumstances, about 90% of respondents also showed their preferences as high in use of HIV magazines and other materials while 80% of the respondents could only read on their own to back up the television illustration and workshop trainings. Among other ideas supported include the use of radio programs with (68%) in the evenings when the residents are back from their daily work), circulating free reading newspapers (64%) forming media study groups with their fellow leaders (48%); being taught privately by healthy attendants from and within schools areas (48%); attending adult learners classes and counseling (40%) and a few supported the idea of supplying school with newspapers that involves HIV/AIDS preventing information,

To sum this therefore, the researcher observe that media being an influential tool does not only cause positive impacts on the residents' wellbeing but also leads to negative challenges in human life as HIV/AIDS prevention is concerned to date.

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### **Recommendations**

Parents and media should expand the existing prevention strategies. With additional resources and access to training and prevention tools, UBC should rapidly bring to scale key prevention interventions that can work together to achieve maximum prevention impact. In particular, districts should scale up mass media campaigns; condom distribution, promotion and social marketing; blood screening; school-based programs; programs for out-of-school youth; workplace programs; treatment; and peer counselors for vulnerable populations, such as sex workers, men who have sex with men (MSM), and injection drug users (IDUS). The media local authority and Health officers should be trained in preventing

HIV/AIDS using interactive and participatory methods such as seminars and workshops. The FM radio broadcasts; books, handouts and other methods are good for supplementary roles.

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