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Indigenous language radio as a tool for improving functional and interactive health literacy at the community level

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Introduction: In South Africa, differences in education and the languages spoken constrain the improvement and promotion of health literacy. Therefore, health literacy initiatives face the arduous challenge of bridging the educational and language divide and providing equitable access to health information simultaneously. This article explored how indigenous language radio programming, such as Umhlobo Wenene's (UWFM's) *Khanyisa Kukhanye Mhlobo* show, could be leveraged to promote and improve functional and interactive among rural communities.

Method: A qualitative methodology, grounded in the theory of self-efficacy was employed, and data were collected through a combination of in-depth interviews and audio content analysis.

Results: The results suggest that *Khanyisa Kukhanye Mhlobo* can serve as a valuable media outlet for disseminating accurate and reliable health-related information to the public, particularly to marginalized communities. Using the first language or mother tongue and combining socially relevant health messages and stories that resonate with the listeners' way of life and experiences makes the Show relatable and inspires trust, making the information more effective and actionable.

Discussion: Consistent with previous findings, the study suggests that when health literacy is offered in a participatory manner and language spoken by the audience, it can increase the uptake of health information, modify behavior and empower individuals to participate actively in community health initiatives. The findings underscore the importance of public health agencies and NGOs utilizing indigenous language media platforms to deliver health literacy interventions. The results of this study provide insight into health literacy and behavior change among a specific African population and indigenous language radio, a medium rarely explored in mainstream academic endeavours.

KEYWORDS

community participation, functional, health literacy promotion, indigenous language, interactive, radio programming, South Africa

1 Introduction

Despite its critical importance in achieving better health outcomes, health literacy remains a challenge faced by countries worldwide, including those in the highly industrialized global North (United Health Group, 2020; World Health Organization, 2024a). Health literacy refers to the ability of individuals "to access, understand, and use information in ways that promote

and maintain good health for themselves, their families, and their communities” (RyDSTRöm et al., 2022, p.145).

Poor health literacy can be detrimental to the wellbeing of society. Evidence indicates that limited health literacy can lead to higher morbidity and mortality rates, especially among older people, increased hospitalizations and emergency care use, as well as limited capacity to take medication appropriately and to interpret labels and health messages (World Health Organization, 2024a). This makes health literacy critical in the health ecosystem of every country, especially in sub-Saharan Africa, including South Africa, where epidemics and chronic diseases and infectious diseases are prevalent. These multifaceted health challenges result in a massive loss of lives and further challenge the already weakened and poorly resourced public health systems (Olaoye and Onyenankeya, 2023a; Onyenankeya, 2022a).

In South Africa, health literacy is inadequate. Health literacy improvement initiatives contend with a plethora of impediments, including differences in education, languages spoken, “a racially defined political and socioeconomic structure” (Onyenankeya and Salawu, 2019, p.33), and a binary health system that often confines disadvantaged individuals and communities to ineffectual public health facilities. These structural, socioeconomic and cultural factors result in a significant variation in health literacy among the populace, where only a few privileged individuals can access, understand, and use information and services, leaving the majority to struggle with health illiteracy.

Inadequate health literacy is particularly problematic in rural communities, where residents often face greater difficulty accessing health information. The difficulties in accessing health information hinder the capacity of these marginalized communities to make informed health-related decisions and take appropriate actions (Obaremi and Olatokun, 2022; Ouchene et al., 2024; Wallace et al., 2021). Therefore, health literacy initiatives face the arduous challenge of bridging the educational and language divide and providing equitable access to health information simultaneously.

Investing in health literacy improvements can yield better outcomes, such as improved healthcare affordability. United Health Group (2020) reports that improving health literacy could prevent hospital visits and save billions annually in Medicare programs. World Health Organization (2024b) acknowledges that enhanced health literacy can help capacitate individuals and communities to drive their own health improvement, fostering a resilient community of individuals actively engaged in community health initiatives and advocacy for health equity, empowering the population with information to prevent, protect and manage health problems whenever they arise.

Making health messages available in ways that people who need the information can easily decode can improve health literacy. The media, especially indigenous language radio, can help bridge the health access gap and provide education and information that capacitate individuals and groups with the necessary skills to improve health literacy (Saei et al., 2021). Empirical evidence suggests that radio remains an effective tool in promoting and improving public health outcomes, including health literacy (Amos and Zakiyyah, 2024; Sanusi and Oyegoke, 2024; Sanusi et al., 2021), self-empowerment and resistance during a pandemic (Belik, 2021). This suggests that radio, especially indigenous language radio, can be a powerful tool to provide communities on the margins with functional and interactive

health literacy. Given the popularity of indigenous language radio, especially amongst the rural population, research is needed into the experiences and perceptions regarding its health programming effectiveness in promoting and improving health literacy.

However, there are limited health literacy studies from Africa (Amanu et al., 2023). Studies investigating health literacy have tended to focus on European and American societies, rather than other regions. Existing studies on health literacy in South Africa are narrow, concentrating on some aspects of literacy, such as health literacy measures (Marimwe and Dowse, 2019), health literacy interventions (Heine et al., 2021; Meherali et al., 2020), trust and health literacy (Medina-Marino et al., 2020), health literacy in rural and urban populations (Aljassim and Ostini, 2020), health communication strategies (Olaoye and Onyenankeya, 2023a), social media and health promotion (Mwaura et al., 2020) and community radio in health promotion (Olaoye and Onyenankeya, 2023b) revealing significant gaps and leaving many questions unanswered.

Using Umhlobo Wenene (UWFM’s) *Khanyisa Kukhanye Mhlobo* show, formerly *Khanya Gqiyazana*, as a point of departure, the article investigates how indigenous language radio programming could be leveraged to promote and improve functional and interactive literacy among rural communities. It explores how listeners perceive and experience the notion of health literacy when using indigenous language health shows. Additionally, and consistent with Evans’ (2016) immersive, interactive, and para-active engagement model, the paper aimed to investigate the role of the IsiXhosa language in audience reception, participation, and engagement with the programme. The article argues that exposure to radio programming, such as the *Khanyisa Kukhanye Mhlobo*, has the potential to provide listeners with the capacity for functional and interactive health literacy, as articulated by Nutbeam (2008, as cited in Liu et al., 2020).

The overarching research questions were: (1) Does indigenous language radio programming enhance listeners’ self-efficacy necessary to promote personal health literacy? (2) What role does the IsiXhosa language play in audience participation and reception of the *Khanyisa Kukhanye Mhlobo* radio show? (3) How does the audience perceive the effectiveness of *Khanyisa Kukhanye Mhlobo* in improving personal health literacy? (4) What is the structure, format, and audience engagement strategies of *Khanyisa Kukhanye Mhlobo*’s Show?

The article aims to expand knowledge about the role of radio in health education, particularly the intersection of indigenous language health programming and personal health literacy in rural communities. The results of this study provide insight into health literacy and behavior change among a specific African population and indigenous language radio, a medium rarely explored in mainstream academic endeavours. The study’s findings have significant implications for both real-world applications and academic research. It provides insight into indigenous language programming in personal health literacy, particularly in rural areas. Appropriate profiling of listeners is vital to understanding their characteristics and the social dynamics underpinning listening preferences, as well as designing tailored policy and communication strategies to enhance this population group’s functional and interactive health literacy. The remainder of the article is organized as follows. First, we provide a brief overview of the role of the media, particularly radio, in health communication, which informs the materials and methods presented in this paper. After that, the research results and discussion are presented.

2 Literature review

2.1 The dialectics of health literacy

Health literacy can be a convoluted term. Its conceptualization continues to vary across space and time, as well as among different scholars. A systematic review of several empirical studies found that health literacy has been commonly conceptualized from the perspective of knowledge as “a set of knowledge, a set of skills or a hierarchy of functions” (Liu et al., 2020, p.1) that allows individuals to make informed choices and engage in healthy behaviors regarding their health and wellbeing.

RyDSTRöm et al. (2022, p.145) define Health literacy as the ability of individuals “to access, understand, and use information in ways that promote and maintain good health for themselves, their families, and their communities” (p.145). This definition, which aligns with World Health Organization’s (2024b) conceptualization of health literacy, extends beyond the knowledge perspective to acknowledge the multiple levels of social and cognitive skills required to accomplish health literacy.

Nutbeam (2009, as cited in Liu et al., 2020) identifies three-level of health literacy Nutbeam (2009, as cited in Liu et al., 2020): identifies three-level of health literacy: functional literacy, such as the ability to read and understand medication labels; Level II, interactive health literacy, such as performing in a social setting and interacting with community members; and Level III, critical literacy, the ability to objectively analyse and evaluate available facts about specific health issues, including the strengths and weaknesses of and potential advantages and disadvantages of a health issue to form a judgement. This article focuses on functional and interactive health literacy.

Several factors contribute to the level of functional and interactive health literacy among nations. Age, gender disparities, education, languages spoken, health behaviors, and health system features are critical factors impeding health literacy improvement (Obaremi and Olatokun, 2022; World Health Organization, 2024a). Effective communication through accessible media channels, such as radio, can help overcome these barriers.

2.2 Radio and health communication

One way to improve health literacy is through clear communication, where health information, such as words, numbers, images, concepts, or medical terminology, is conveyed in a manner that allows people to understand it easily. The media, especially radio, have been critical in providing people with easy-to-understand information to improve their health (Ouchene et al., 2024). Over the years, radio has played a pivotal role in making health messages accessible to a mass audience, especially during public health crises (Ajilore et al., 2017; Corbu et al., 2021; Kanjilal et al., 2024).

With its broad reach, accessibility and conversational characteristics, radio can be a potent tool for implementing clear communication to promote and improve health literacy. This is because it allows content to be produced in plain and unambiguous language and can provide health information in the language of those it serves. As evidenced by the literature, people exposed to health messages on the radio are more likely to modify their health perceptions and behavior than those not exposed (Green et al., 2021; Majamanda, 2022).

This is particularly true in South Africa, where radio has become a popular medium for information and entertainment, especially among rural populations (Onyenankeya and Salawu, 2023), with an exponential growth in listenership over the last decade. Approximately 80% of South Africans listen to the radio every week (Bosch, 2022). Regional indigenous language radio franchises, in particular, continue to experience a significant increase in listenership, surpassing that of well-established commercial radio stations, according to Broadcast Research Council of South Africa (2023).

Scholars attribute indigenous language radio’s rising traction with the audience to easy access (Megwa, 2007; Li et al., 2012), its participatory and culturally nuanced content (Gondwe and Aday, 2021; Onyenankeya, 2023), especially the liberal use and valorization of the target audience’s cultural heritage and language (Mhlambi, 2019; Onyenankeya, 2022b). Using the mother tongue in its broadcast enables the audience, especially communities on the margins, to access health information in the language and symbols they are accustomed to, which is crucial in improving health literacy. These attributes make radio, especially indigenous language radio, a crucial platform for promoting health awareness and enhancing self-efficacy, as emphasized by Bandura (1997).

Studies show that providing health-related information in the languages spoken by the population served can improve health literacy (Fang et al., 2020; Brach, 2024), as it offers vicarious experiences that help build self-efficacy (Bandura, 1997).

2.3 Situating Bandura’s self-efficacy theory

As a theoretical lens, Bandura’s (1997) self-efficacy theory helps explain psychological and behavioral tendencies in mediated communication. Self-efficacy refers to the belief that one can effectively organise and implement actions to manage future situations (Bandura, 1997). A sense of self-efficacy is a crucial pillar of motivation, success, and wellbeing. Self-efficacy has been linked to intentions to engage in health-related behaviors, such as adopting healthy lifestyle habits and quitting smoking (Elshatarat et al., 2016). Recent evidence shows that individuals with high levels of self-efficacy were less likely to exhibit COVID-19 vaccine hesitancy (Guidry et al., 2021; Kim et al., 2022).

The self-efficacy theory is based on two constructs: self-reflection and motivation, as well as a belief that one can accomplish goals. The theory acknowledges that a person’s ability to develop self-efficacy depends not only on their motivation and confidence in their ability but also on existing systems available to them in the environment in which they live. Bandura identifies four primary sources through which individuals can develop their efficacy: mastery experiences, vicarious experiences, social persuasion and emotional states (Bandura, 1997), which radio, especially indigenous language radio, can provide through its culture-centric programming.

Culture, language, trust, context, and the environment in which the information is communicated all play a role in one’s ability to manage one’s health (Nielsen-Bohlman et al., 2004; Smith et al., 2007). As a social platform, radio, especially regional or community radio, evokes an imagined distant community where the audience reconnects and experiences a mediated co-presence. Here, radio provides listeners with an outlet, a cultural and linguistic environment that fosters participatory dialogue and feedback, which can in turn promote a high level of self-efficacy.

Radio programs like *Khanyisa Kukhanye Mhlobo* can enhance personal agency by influencing thoughts, health-related decisions, and behavior, providing easy-to-understand health information in the listener's mother tongue. The health narratives, enriched by lived experiences, provide vicarious experiences and social feedback, highlighting both the positive and negative consequences of engaging in certain health behaviors.

According to Bandura (2008), performing a task successfully strengthens an individual's self-efficacy. This is consistent with studies that have found that listening to health messages on the radio can modify perceptions and behaviors regarding health (Green et al., 2021; Majamanda, 2022), thus making radio, such as Umhlobo Wenene FM, an essential platform for health awareness creation.

2.4 Umhlobo Wenene FM

The station was chosen because of its popularity and audience size. As of 2023, it was the second-largest public service radio station in South Africa, with over 4.1 million listeners, trailing Ukhozi FM, which had 7.6 million listeners according to the radio audience measurement for September 2023 (Broadcast Research Council of South Africa, 2023). The station's broadcast reaches listeners in all nine provinces and can be streamed live on their digital devices via its website. UWFM's primary goal is to empower, inspire, and provide "informative, entertaining and music content" to the Xhosa-speaking community in South Africa in this language (Umhlobo Wenene FM, 2024).

Khanyisa Kukhanye Mhlobo is a talk show that broadcasts from 9 a.m. to noon four days a week. The show is an audience-participatory show that follows a magazine-style format. The regular host is Nokubonga Blaq Maci (Maci, 2025). The Show features a diverse range of guests, including medical professionals who provide expert advice on health issues, as well as inspirational figures of both genders. Although the Show prioritizes women, it targets the entire family. Listenership spans a broad spectrum of audiences, primarily women of all social classes. *Khanyisa Kukhanye Mhlobo* addresses various issues, including health, relationships, fashion, and entertainment in isiXhosa. The chosen topics on health discussed in the program hold significant public interest, leading to a lively and interactive discourse. The program is produced and broadcast exclusively in an indigenous language, isiXhosa. The incorporation of sociocultural dynamics into the content, delivering content in the native language, and the inclusion of health professionals who provide epidemiological evidence help influence the message's acceptance by the listeners. The degree to which an audience perceives an information source as credible influences message acceptance (Hocevar et al., 2017; Slater and Rouner, 2017). Therefore, *Khanyisa Kukhanye Mhlobo* constitutes an interesting domain for exploring the potential impact of indigenous language radio on health literacy improvement as it educates and empowers its target audiences, especially on health issues.

3 Methods

We applied the qualitative method within the theoretical framework of self-efficacy theory to explore listeners' experiences and perceptions, particularly their perceptions of *Khanyisa Kukhanye*

Mhlobo's effectiveness in enhancing personal health literacy. Data was collected using a combination of in-depth interviews and audio content analysis.

3.1 Interview procedure

A total of 24 self-reported adult listeners, comprising males and females aged 18 years and above, cutting across diverse educational and socioeconomic classes were interviewed in four locations to explore participants' perspectives on *Khanyisa Kukhanye Mhlobo's* effectiveness in developing self-efficacy, improving their health literacy, and the significance and dynamics of the language use in selected audio texts (see Table 1). The interviews were conducted in isiXhosa and English.

3.2 Sampling

The participants were purposively selected from East London, Amalinda, Alice, Bhongweni and Phumlani, all in the Eastern Cape Province of South Africa. The method was based on the participants' accessibility, considering the communities' work and religious and cultural dynamics. Participants were recruited through a combination of personal networks, including friends, students, and colleagues, which is why multiple locations were used. Data from different locations enhanced the data triangulation. Saturation was reached when the interviews yielded no new patterns or perspectives. The participants had to be UWFM listeners, Xhosa speaking. Participants were chosen on the premise that they could make health decisions and access the preferred channels for health information.

TABLE 1 Participants' demographics.

Demographics	Number (n = 24)	Percentage (%)
Age		
20–29	4	15%
30–39	7	31%
40 and above	13	54%
Gender		
Male	16	65%
Female	8	35%
Highest level of education		
Tertiary education	9	37%
Secondary education	12	50%
Primary education	3	13%
Occupation		
Public servant	4	17%
professional	6	23%
Other/unemployed	14	60%

3.3 Data analysis

The interviews were analyzed using thematic analysis. First, the interviews were transcribed. Second, we identified the codes, extracted, organized, and analyzed the data into smaller, more digestible pieces that can be used as building blocks for themes and research questions. [Clarke and Braun \(2017\)](#) describe codes as the smallest units of analysis that capture interesting data features (potentially) relevant to the research questions and are used as the building blocks for themes. In all, 24 in-depth face-to-face and virtual interviews were analyzed.

3.4 Content analysis approach

Following [Wang and Ji's \(2015\)](#) study, the audio content analysis was used to examine the structure and format of *Khanyisa Kukhanye Mhlobo* to understand the language's significance in the delivery and reception of the texts. [Kotsakis et al. \(2012\)](#) state that systematic audio recordings or data analysis can yield significant information and patterns regarding a phenomenon. Consistent with [Wang and Ji \(2015\)](#), the audio content analysis focuses on establishing the structure and format of the discourse to understand the significance and dynamics of language use within the texts.

First, we analyzed selected episodes of *Khanyisa Kukhanye Mhlobo*, which are available on the UWFM website from January 2021 until July 2024. Only episodes focused on health topics were sampled to ensure a more nuanced and focused analysis. This approach enabled the identification of key themes or topics discussed and the elements of language and cultural and discursive dimensions of the program that contribute to personal health literacy improvement. In total, 30 episodes were content analyzed.

3.4.1 Coding process

The audio content analysis followed the steps outlined by [Zhang and Wildemuth \(2009\)](#). First, the audio data was prepared and transformed into written text. Based on the research questions, only a summary of the verbalizations was transcribed. While a complete transcript of the sampled episodes could be helpful, the additional value it provides may not justify the additional time required to create it. Second, we defined the units of analysis. Individual themes served as the unit for analysis. A code was assigned to a text chunk of any size that represents a single theme or issue relevant to the research questions. The codes were used to identify key themes and pinpoint participants' perspectives on the significance of language in participating in the program, as well as how the program contributes to creating awareness and education on health issues.

This approach enabled an in-depth analysis of the program's specific characteristics and unique features, extracting meaningful insights, patterns, and information that emerged from health dialogues. Third, we developed content categories and a coding scheme. Finally, the entire datasets were then coded systematically. Coding categories were derived inductively from the data. The following categories were used in coding the content: programme format, audience engagement, motivation for tuning in, program effectiveness in communicating health message, and audience Call-ins. Two coders assisted in coding the content. The coders, all graduate students, were trained on the coding scheme and content categories based on the audio transcripts. To ensure coding consistency, a coding

scheme was developed that specified category names, rules for assigning codes, and provided examples of codes.

Thereafter, we organized all the themes and sub-themes that emerged from them to facilitate a rigorous analysis and interpretation of the patterns.

3.5 Trustworthiness

Multiple sources were used to ensure the validity and reliability of the study. Pilot testing of the interview questions was conducted with 10% of the interviewees, followed by peer review and feedback to improve validity and reliability. The reliability of the findings in this research was further established through the transparent coding process and inter-coder verification. Data were collected and analyzed using only interview questions validated during the pilot study.

4 Results

This study aimed to determine the perceived effectiveness of an indigenous language radio program, UWFM's *Khanyisa Kukhanye Mhlobo*, in promoting health literacy by examining its structure, format, and audience engagement strategies. Additionally, it sought to determine whether the audience participated and engaged in the program and the role of the IsiXhosa language in audience engagement and participation in the program. A content analysis was conducted to determine and analyse the *Khanyisa Kukhanye Mhlobo* content, structure and format of the discourse (see [Table 1](#)).

The results are presented under the following themes: presentation format, motivation for tuning in, audience engagement strategies, the perceived role of IsiXhosa language in audience participation and reception of the *Khanyisa Kukhanye Mhlobo*, perceived effectiveness of *Khanyisa Kukhanye Mhlobo* in enhancing self-efficacy ([Table 2](#)).

4.1 Content analysis of the *Khanyisa Kukhanye Mhlobo* show

4.1.1 Show's format

The *Khanyisa Kukhanye Mhlobo* is a magazine-style, audience-participatory show that airs Monday to Thursday on UWFM and features health, relationships, fashion, and entertainment segments. The health segment features health experts and professionals covering topics ranging from hygiene before and after sex, common eye problems, dental care, marital rape, and sex education to tuberculosis, common cancers in men and kidney-related diseases. Some experts, like Dr. Tebelele, regularly appear in studio discussions, while other experts join via telephone from different locations nationwide.

The anchor's thought-provoking questions on the day's topic of discussion enable a lively discourse, allowing the experts to unpack the topic more deeply and for the audience to engage by calling in to ask questions and seeking further clarifications. The interactive set-up provides listeners with comprehensive and insightful information they can use to promote and maintain good health for themselves, their families, and their communities, which is one of the primary goals of health literacy. Overall, the *Khanyisa Kukhanye Mhlobo* Program was found to be engaging by participants. Those who agree with this

TABLE 2 Content analysis of *Khanyisa Kukhanye Mhlobo*.

Programme format	<ul style="list-style-type: none"> • Magazine style • Audience-participatory • Live Broadcast • A sole anchor person
Target audience	<ul style="list-style-type: none"> • Targets the entire family • Prioritises women
Duration	<ul style="list-style-type: none"> • 9 a.m.-noon
Programme Language	<ul style="list-style-type: none"> • IsiXhosa
Topics	<ul style="list-style-type: none"> • General hygiene • COVID-19 • Common eye problems • STIs and prevention • Dental care • Marital rape • Sex education • Tuberculosis • Treatment methods • Common cancers in men • Kidney-related diseases • Diabetes management, etc.
Resource Persons	<ul style="list-style-type: none"> • Doctors of various specializations. • Local health department officials • Advocacy Groups & NGO Representatives
Audience participation/Engagement	<ul style="list-style-type: none"> • Call-ins • SMS • Voice notes on the station's WhatsApp platform

viewpoint say the anchor is friendly and knowledgeable and engages with the audience politely and professionally.

What I like about Nokubonga is her disposition to the listeners. She is patient with the listeners, even when some callers struggle to express themselves; she does not cut the call (P1, Alice).

Some callers may be unable to make their points clearly, but she allows them to finish their thoughts (P3, East London).

The *Khanyisa Kukhanye Mhlobo* format is conversational and enables the presenter to address each audience member in a relatively private and courteous manner, almost as if the speaker were in a studio setting. The presenter's ability to relate and reenact personal experiences engenders and reinforces a parasocial relationship with the listeners. The hosts' friendly and accommodating disposition, along with the conversational nature of the Show, is important in creating the right atmosphere to engage the audience and increase participation.

4.1.2 Perceived motivation for tuning in

4.1.2.1 Affordance of credible and reliable health information

Most participants cited the affordance of credible and reliable health information as a significant reason for tuning in to *Khanyisa Kukhanye Mhlobo*. In all the 30 episodes analysed, guests and discussants are medical practitioners or possess expert knowledge of

the subjects discussed. Participants felt the program's consistent inclusion of reputable medical practitioners and experts contributes to the audience's trust in the accuracy of information presented in the *Khanyisa Kukhanye Mhlobo* show and enhances public health literacy. Those who hold this view stated that the program provided accurate information on the correct use of masks and social distancing to prevent the spread of the COVID-19 virus. This sharply contrasts with inaccurate and untrustworthy information disseminated through other health information sources, such as social media posts by people with little or no expert knowledge.

According to one of the interviewees, a significant attraction for tuning in to *Khanyisa Kukhanye Mhlobo* is "the opportunity to receive a free and reliable information. It is more like free consultation" (P8, Amalinda). Other interviewees agreed:

You know you would pay heavily if you were to consult the experts on some of these medical conditions. Yet they are kind enough to explain these health issues so that we can understand them and take action, and that's why I keep tuning in (P5, Amalinda)

I like the program because it invites people who are practising what they preach and can explain the subjects in a way that listeners can understand, especially those conditions about which we have erroneous beliefs (P4, Alice).

The statements above indicate that participants view the *Khanyisa Kukhanye Mhlobo* Show as a means to access free and authentic health information. Participants need this expert advice to make informed decisions about their health. By providing authentic health information, the Show has the potential to educate and empower viewers, ultimately leading to improved health outcomes and informed, knowledge-based decision-making.

4.1.2.2 Topic relevance

The results show that the topics' significance is a strong motivator for listenership, as they resonate differently with the audience. *Khanyisa Kukhanye Mhlobo* covers various health topics that are significant in health and are of social relevance. The results suggest that listeners assign different values to health topics, which, in turn, influence their interest and engagement with specific health topics. As demonstrated in the quotes below, the values the audience assigned to the topic are underpinned by age, educational level, personal experience, cultural background, and socioeconomic status.

As a young girl, I naturally tend to pay attention to issues of sexually transmitted diseases and pregnancy prevention. I love to hear the experiences of others and the opinions of the experts on these issues. I listen to other health talks, but I skip some topics that do not speak directly to my immediate needs (P4, East London).

I tune in to Khanyisa Kukhanye Mhlobo regularly because the information I get from the program has helped me to take preventive steps. If I did not have such information, I would have ended up spending money on treatment or hospital visits, which would have been difficult given my economic status (P9, Amalinda)

I enjoy all the topics. I do not have to have a health problem to listen to the program. For older citizens like us, information on any health issue is important (P15, East London).

It is evident from the statement above that listeners' values significantly influence the listenership pattern of *Khanyisa Kukhanye Mhlobo*. Participants view the Show as a go-to source for rich information on diverse health topics that resonate with their values. Accessing a variety of health information from the program is not only convenient but also at no cost to the audience. The program presenters' ability to deliver health information excellently in a way that resonates with the diverse audience is what endears it to a seemingly loyal audience.

4.1.2.3 Participatory dialogue affordance

The findings indicate that *Khanyisa Kukhanye Mhlobo* facilitates participatory dialogue on personal and public health issues. Audience members stated that they participate actively in the program through call-ins, SMS, and voice notes on the station's WhatsApp platform, consistent with Evans's (2016) concept of immersive and interactive engagement. Audience members who cannot call in participate vicariously by listening to the interaction and the experiences shared by the expert and audience speakers.

I am yet to be successful in getting across to the station during the live broadcast. However, I am a regular listener of the program. I like the way the presenter and the experts, especially Dr Tebele, discuss their topics. I can also relate to the experiences shared by those who managed to phone in. So, yes, the information from the program is beneficial (P13, Alice).

It is not always easy to get through because many people are calling in at the same time, but I have participated on two occasions by asking questions during a live broadcast. It was exciting, especially since I was going through a health challenge and needed a second opinion (P11, Bhongweni).

I sent a voice note once, which was played during the program, and I was excited to hear my voice over the radio. At other times, I listen and take notes when they discuss topics that concern me. (P3, East London)

The statements above indicate audience members' desire to participate in the Show to share their experiences or ask questions regarding the topic being discussed. For some, hearing their voices over the radio performs a status-conferring function. This might explain the persistence in making the call-ins despite the challenge in getting through to the station. The findings show that audience participation in *Khanyisa Kukhanye Mhlobo* is prevalent at the listening stage, with minimal audience input during the production stage. Unlike community radio, where the community exerts some level of control over programming and operational issues, Umhlobo Wenene FM's production is determined by management, who reports to the Board.

4.1.3 Perceived role of IsiXhosa language in audience participation and reception of the *Khanyisa Kukhanye Mhlobo* show

4.1.3.1 Xhosa language provides linguistic agency and access

One of the objectives of this paper was to determine if broadcasting *Khanyisa Kukhanye Mhlobo* in IsiXhosa influenced participants' involvement with the program. There was a consensus among participants that IsiXhosa's usage significantly drew them to

the show. "For me, the language is a major attraction," Participant 17 from Alice stated. Those sharing this sentiment agreed that their mother tongue's use facilitated their active participation in *Khanyisa Kukhanye Mhlobo*.

The program is popular, and the conversations are lively. I think the fact that the program is on IsiXhosa makes it easy for the audience to engage. So, yes, people naturally feel more comfortable and confident expressing their thoughts and opinions in IsiXhosa (P16, Phumlani).

It is obvious that the Xhosa language is a major attraction for many of us. It is always easier when one converses in one's mother tongue. I might be wrong, but I think the people who call in daily to the program to ask questions or share their experiences do so because they can express themselves more easily in IsiXhosa (P18, Alice).

Yes, the use of Xhosa makes it easy for me to understand the doctors' explanations. You know, some of those medical terms or conditions can be difficult for ordinary people to understand in English. So, the presenters and the experts were able to describe these conditions using expressions and codes that we could easily understand. (P23, Amalinda).

A consistent pattern emerging from the comments above is the criticality and constitutive power of the Xhosa language in negotiating the text, as well as in fostering interactive and participatory engagement. Participants view *Khanyisa Kukhanye Mhlobo* as effective in communicating health content, especially complex medical topics, because of the clarity and efficiency it affords.

4.1.4 Perceived effectiveness of *Khanyisa Kukhanye Mhlobo* in enhancing self-efficacy

4.1.4.1 Accessing digestible health information

Respondents were asked if they found *Khanyisa Kukhanye Mhlobo* to be an effective tool for accessing understandable health information that could be used to help promote and maintain good health. The results showed that most respondents found *Khanyisa Kukhanye Mhlobo* a useful channel for accessing health information, which enabled them to take action or modify their health perceptions and behaviors.

Since listening to Khanyisa Kukhanye Mhlobo, I have developed a better understanding of some common diseases in our society and how to prevent them or avoid infections. I am confident of obtaining advice or information on health and medical topics through the program (P2, East London).

The information I received from the program has helped me to take preventative measures to protect me and my family from common diseases. It has also helped me to understand the negative consequences of not taking the necessary healthcare measures (P21, Alice)

The statements above suggest that *Khanyisa Kukhanye Mhlobo* influenced participants' capacity to act, effectively boosting the listeners' confidence in executing the desirable actions regarding their health. The feeling of self-efficacy is strengthened when an individual

successfully completes a task, as noted by Bandura (2008). The finding is consistent with previous studies that show listeners exposed to health messages on the radio are more likely to modify their perceptions and behaviors concerning their health (Green et al., 2021; Majamanda, 2022).

4.1.4.2 Awareness creation and education

Participants unanimously agreed that the program had helped raise awareness of some common diseases and what they can do to prevent contracting diseases like tuberculosis, STDs, HIV and AIDS in the future. Participants noted that when the COVID-19 pandemic hit, the program proved to be very useful. “We were informed about the Covid-19 vaccine and why it is essential to get vaccinated,” Participant 19 at Phumlani. In addition to creating awareness of the disease, the show also provided information about how it spreads. They acknowledged that the doctors and other health experts featured in the program provided information on seeking help if symptoms occur.

Furthermore, they reported being more likely to make healthier choices after listening to the Show. Those who hold this view insist that the program has provided them with important information, allowing them to make informed health-related decisions about themselves and their loved ones.

Before, it takes a lot of effort to get the health or medical information you need. I believe the program has generated a lot of awareness about family health issues. Listening to Khanyisa Kukhanye Mhlobo has improved my knowledge about conception significantly (P20, Amalinda).

In the program, I have been exposed to a lot of health issues that I previously took for granted. For instance, I have never gone for an eye test. However, in response to an episode of Khanyisa Kukhanye Mhlobo on eye health, I recently underwent for an eye test to ensure my eyes were in good condition. (P5, Bhongweni).

The statements above suggest that there is a healthcare gap that Khanyisa Kukhanye Mhlobo helps to fill. As evidenced by the statements above, participants tune in to the Show regularly because they can access information that was previously difficult to obtain. The Show not only educates them about public health issues but also serves as a virtual hospital, providing medical advice on personal health issues, especially for marginalised communities.

5 Discussion

This paper investigated how indigenous language radio programming, such as Umhlobo Wenene’s (UWFM’s) *Khanyisa Kukhanye Mhlobo* show, could be leveraged to promote and improve functional, interactive and critical health literacy among rural communities.

5.1 *Khanyisa Kukhanye Mhlobo* format and appeal

The findings suggest that *Khanyisa Kukhanye Mhlobo*’s Show has created an environment that serves as a platform for developing a

sense of community among its audience members, allowing them to engage in personal, parasocial and vicarious interactions. Throughout *Khanyisa Kukhanye Mhlobo*’s Show, there is a degree of audience participation and interactivity that aligns with Evans’s (2016) typology of immersive and interactive engagements. Participants felt encouraged to engage directly with the explanations provided by doctors or experts; the real-time audience feedback and interactive discourse enhanced immersion and fostered a greater audience engagement with the information (4.1).

Nokubonga Blaq Maci, host of *Khanyisa Kukhanye Mhlobo*, describes the Show as a space where people can share their stories, learn, and hopefully become better individuals (Maci, 2025). As attested by participants (4.1), Maci’s individualized responses and engaging interaction with the audience create a co-presence in the studio, fostering a parasocial relationship with the listeners. According to Maci, her approach is inspired by the stories of people, their tenacity, power, and the indomitable human spirit. “It is such a powerful tool for us to connect and build our communities while having fun” (Maci, 2025).

Most participants cited the Affordance of credible and reliable health information as a significant reason for tuning in to the Show. According to Hocevar et al. (2017) and Slater and Rouner (2017), the degree to which an audience perceives an information source as credible influences message acceptance. The Show’s focus on health topics that hold significant social and health relevance emerged as another major attraction for the audience.

5.2 The isiXhosa language role in audience reception of and participation in the *Khanyisa Kukhanye Mhlobo* show

The cultural and linguistic setting of *Khanyisa Kukhanye Mhlobo*, along with trust in its information, helps bolster the audience’s self-efficacy. This is consistent with Bandura’s self-efficacy theory (Bandura, 1997), which states that environmental and sociocultural factors contribute to shaping an individual’s ability to develop self-efficacy. Including the sociocultural dynamics of the listeners in the content and delivering it in their native language, as well as involving health professionals who provide epidemiological evidence, made the message more acceptable and encouraged engagement (4.2.1). As Hocevar et al. (2017) and Slater and Rouner (2017) note, the acceptance of a message is influenced by the degree of credibility perceived by an audience.

The findings show that the use of the isiXhosa language, which most audience members speak, is a significant impetus for audience tuning in, engaging and participating in the program (4.2.1). The finding is consistent with previous studies that providing health-related information in the languages spoken by the population served can improve health literacy (Fang et al., 2020; Brach, 2024; Onyenankeya and Salawu, 2019, 2023; Onyenankeya, 2023).

Cultural resonance is particularly key to continued audience engagement and loyalty to *Khanyisa Kukhanye Mhlobo*. Using isiXhosa helps to bridge the language gap between the program and its audience. It bolsters linguistic agency, creating an inclusive setting where listeners feel heard and understood in their native language, strengthening community bonds. The findings confirm that the embedding of *Khanyisa Kukhanye Mhlobo* texts in the Xhosa language

and cultural context provides listeners with critical literacy to manage their health effectively. Previous studies by [Nielsen-Bohlman et al. \(2004\)](#) and [Smith et al. \(2007\)](#) have made similar findings.

While the program allows audience participation through several strategies, such as call-ins, SMS, and WhatsApp voice notes, the finding shows that audience participation in *Khanyisa Kukhanye Mhlobo* is limited to the listening stage. There is little or no audience involvement in the design, production or financial phases. The lack of audience participation in these crucial stages of the program may result in a lack of diverse perspectives and ideas. This could limit the overall quality and relevance of the content, thereby hampering the program's ability to effectively cater to its audiences' specific needs and interests. Furthermore, limiting audience engagement to mainly the listening stage deprives the programme of valuable collaboration and co-creation prospects with its audience, which could imperil its continuity and future growth.

However, allowing audience members to participate in the Show's design and production can be beneficial. For one, it can ensure that the Show's format and content closely align with the audience's beliefs, interests and predilections, leading to a more appealing hands-on experience. Additionally, audience participation in these stages can foster a sense of ownership and loyalty, as they feel like active contributors rather than passive consumers of the program. It is evident that the use of the IsiXhosa language is pivotal in audience participation and reception of the *Khanyisa Kukhanye Mhlobo* radio Show.

5.3 Audience perceived effectiveness of *Khanyisa Kukhanye Mhlobo* in improving personal health literacy

As the findings indicated, participants leveraged the program to access vital health information and share their experiences regarding the discussed health topic (4.3.1.). Most of those interviewed believe the program is an authentic source of health information and was a critical component of the COVID-19 outbreak in educating and sensitising communities on preventing contracting or spreading the virus (4.3.2).

Most participants agreed that the Show has created awareness of some common diseases, providing them with preventive and therapeutic information to make informed health-related decisions about themselves and their loved ones. This is consistent with [Nutbeam's \(2008\)](#) concept of interactive health literacy, which empowers individuals to perform in a social setting and interact with community members. The findings support the propositions in the literature that people exposed to health messages on the radio are more likely to modify their health perceptions and behavior than those not exposed ([Green et al., 2021](#); [Majamanda, 2022](#)).

The interactivity that *Khanyisa Kukhanye Mhlobo* affords and the opportunity for listeners to receive firsthand and authentic information from the experts make it a key platform for promoting and improving health literacy. Furthermore, the parasocial relationship listeners have developed with the on-air personalities makes the reality presented by these influential personalities more likely to be accepted (4.1.4.1). It also creates a more personalised experience and influences the outcome, whether to create health awareness or modify health perceptions and behavior. As evident from the findings *Khanyisa Kukhanye Mhlobo*, an indigenous language

radio programme appears to enhance listeners' self-efficacy, which is necessary to promote personal health literacy.

The study offers a fresh perspective on the discourse surrounding radio's role in improving and promoting health literacy, particularly in rural, homogeneous communities. A unique insight gained from this paper is that using culturally relevant idioms and references makes *Khanyisa Kukhanye Mhlobo*'s content more relatable and engaging. This linguistic familiarity allows for deeper discussions and a more personal connection with the topics covered in the program.

The findings of this study are consistent with the extant literature, which suggests that making health messages available in the languages spoken by the population served can help improve health literacy ([Fang et al., 2020](#); [Brach, 2024](#)). Furthermore, by incorporating the lived experiences of people like them, audience members are motivated and confident to apply the knowledge gained from the program successfully. The perception of self-efficacy is increased when an individual performs a task successfully, according to [Bandura \(1997\)](#). As the findings suggest, most participants hold that the *Khanyisa Kukhanye Mhlobo* program has been effective in improving their personal health literacy.

6 Limitations and recommendations for further research

Due to the study's focus on a single province and a specific radio show, inferences were limited to these populations. The conclusion could have been enriched by a broader scope utilizing a representative sample of rural populations nationwide. Although the qualitative method used here is suitable for understanding human behavior, which is highly contextualized and individualistic, additional quantitative data could complement the qualitative findings examining the semantic information embedded in the manifest textual elements.

7 Conclusion

This study examined how UWFM utilizes its popular Show, *Khanyisa Kukhanye Mhlobo*, to promote and enhance health literacy and encourage healthy living among Xhosa language-speaking listeners. It was evident that *Khanyisa Kukhanye Mhlobo* has proved to be an effective media outlet for broadcasting truthful and dependable health-related information to the public, particularly at the grassroots level. It is a relatively collaborative set-up that helps to broaden and deepen listeners' engagement and interaction with the text. It allows individuals to construct their own meaning, make informed decisions about their health, and adopt healthier lifestyles. The combination of mother tongue and socially relevant health messages and stories that resonate with the listeners' way of life and experiences makes the Show relatable and inspires trust, making the information more effective and practical.

The study has shown that when health literacy is offered in a participatory manner and in the language of those who need it, it can increase the uptake of health information, modify behavior, and empower individuals to participate actively in community health initiatives. Indigenous language shows such as *Khanyisa Kukhanye Mhlobo* are crucial to raising awareness about pressing health issues and available resources for prevention and treatment.

For a country like South Africa, facing various public health challenges, including under-resourced public health systems, health literacy through Indigenous radio platforms can be critical in providing culturally nuanced health information that can modify audience behavior and attitudes, and enhance disease prevention, especially for communities on the margins. Moreover, preventive healthcare, including health literacy, can reduce the risk of chronic diseases and improve the quality of life, resulting in substantial cost savings for individuals and the regional and national healthcare systems.

The findings of this study highlight the importance of using clear and appropriate language in designing and communicating information to promote health literacy improvement. As evidenced by the findings, the audience values health information in their native language. Given its use of the mother tongue, indigenous language radio can help improve health literacy by providing simple and understandable health information in the native language of those it serves. The article provides insights into how program managers at indigenous language radio stations, health communication researchers, health professionals, and officers involved in designing health literacy initiatives in local municipalities can deliver quality health information to targeted communities. This study recommends, amongst others, that Indigenous language broadcasters allocate more time of broadcast to existing Xhosa language health programs or create more programs dedicated to health matters, rather than incorporating health as an integral component of a radio show. Public health organizations should leverage indigenous language radio health programs such as *Khanyisa Kukhanye Mhlobo* for their public health advocacy and campaigns. Similarly, Policymakers, particularly those in health departments, should incorporate the use of indigenous language radio into their health communication and community outreach policies.

Data availability statement

The raw data supporting the conclusions of this article will be made available by the authors, without undue reservation.

Ethics statement

The studies involving humans were approved by University of Fort Hare, Inter-faculty Research Ethics Committee. The studies were

conducted in accordance with the local legislation and institutional requirements. The participants provided their written informed consent to participate in this study.

Author contributions

KO: Investigation, Conceptualization, Writing – review & editing, Writing – original draft, Formal analysis, Methodology.

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