

# Impact of Media on Health Awareness and Changing Opinion for Women Empowerment

- 1) Authors Name – \* Sharmila Kayal
- 2) Authors Institution/Affiliation/Address – Assistant Professor, Department of Journalism & Mass Communication, Adamas University, Kolkata
- 3) E mail – [sharmilakayal@gmail.com](mailto:sharmilakayal@gmail.com)

## Abstract

A remarkable feature of the career of the concept of development is its broadening and deepening concerns. The concept of development which until recently signified economic growth has taken on new connotations that are indicative of its enlarging concerns. The direction in which the concept of development is extending is from merely economic to increasingly human concerns. The present study aims at the impact of media education increasing health awareness and how it acts like a change agent in the process of changing opinion for women empowerment especially through television.

**Keywords:** - changing opinion, health awareness, empowerment

## **Introduction:-**

The importance of women as an important human resource was recognised by the Constitution of India which not only accorded equality to women but also empowered the state to adopt measures of positive discrimination in their favour. A number of Articles of the Constitution specially reiterated the commitment of the constitution towards the socio economic development of women and upholding their political right and participation in decision making.

Drawing the strength from the constitutional commitments, the Government of India has been engaged in the continuous endeavour of concretely translating all the rights, commitments and safe guards incorporated in the Constitution for women from *de jure* to *de facto* status.

Mass media are tools for the transfer of information, concepts, and ideas to both general and specific audiences. They are important tools in advancing public health goals. Communicating about health through mass media is complex, however, and challenges professionals in diverse disciplines. In an article in the *Journal of Health Communication*, Liana Winett and Lawrence Wallack wrote that "using the mass media to improve public health can be like navigating a vast network of roads without any street signs—if you are not sure *where* you are going and *why*, chances are you will not reach your destination" (1996, p. 173).

### **Objective of the study:-**

This qualitative paper attempts to identify how media can supplement and educate these effects by having a comparatively better impact on the motivational, behavioural or attitudinal aspects of women's health.

### **Area of Research –**

Pondicherry is the union territory in India which has both the rural and urban population. As it is a coastal area, majority of the people belongs to fisherman community considered as marginalized people in the society. This study would address the health issues faced by them and also identify the role of media in spreading the health related programmes conducted by Indian Government

### **Research Questions:-**

In this the following research questions have been analysed and guided for the study .To find out the importance of media education on fostering health awareness in the context of women empowerment

- 1) To find out the impact of media and its reinforcing role
- 2) To find out the changing opinions of women regarding media education
- 3) How it carries effective role of disseminating health messages for women empowerment

### **Methodology:-**

The analytical case study and focus group discussion methodology in qualitative study will be used for this paper. It will give the detailed information of how different programs, advertisements in media promoting health awareness for fostering women's health and make them empowered.

### **National Policies for Empowerment of Women:-**

The National policy for Empowerment of Women 2001 has as its goal bringing about advancement, development and empowerment of women in all spheres of life through creation of a more responsive judicial and legal system sensitive to women and mainstreaming a gender perspective in the development process. The strengthening and information of relevant institutional mechanisms and implementation of international obligations/ commitments and co-operation at the international, regional and sub- regional level was another commitment. The present Government in their National Common Minimum Programme have laid down six basic principles of governance one of which is to empower women politically, educationally, economically and legally.

Eight Millennium Development Goals (MDGs) have been established in the Millennium Declaration at the General Assembly of the United Nations in the year 2000. These include promoting gender equality and empowerment of women and improving maternal health. Though only these two are explicitly gender specific, gender equality is at the core of achievement of MDGs – from improving health and fighting disease, to reducing poverty and mitigating hunger, to expanding education and lowering child mortality, to increasing access to safe water, and to ensuring environmental sustainability.

### **Role of Media:-**

The role of media in portraying women and the female gender as a whole leaves much to be desired. Press and the print media are generally found to unduly sensationalise traumatic events such as rape etc thereby invading the privacy of the victim. Very few positive stories of girls/ women who have stood up for their rights or are achievers are published. Similarly, the electronic media and films portray serial/ films highly derogatory to women, glorifying subservience of the woman before her husband/ in laws, celebrating the birth of the boy child and portraying the disappointments of the family at the birth of the girl child etc,. As a result the general populace are fed on a regular diet of stories/ news that are highly gender abusive, thus reinforcing traditional views that the woman are an inferior race and can be freely exploited.

The media has perforce to become gender sensitive and more responsible when portraying the woman and thus play a significant part in bringing about attitudinal changes in the society. A gender friendly media policy needs to be formulated for this purpose.

### **TYPES AND FUNCTIONS OF MASS MEDIA -**

Sophisticated societies are dependent on mass media to deliver health information. Marshall McLuhan calls media "extensions of man." G. L. Kreps and B. C. Thornton believe media extend "people's ability to communicate, to speak to others far away, to hear messages, and to see images that would be unavailable without media" (1992, p. 144).

It follows that employment of mass media to disseminate health news (or other matters) has, in effect, reduced the world's size. The value of health news is related to what gets reported and how it gets reported. According to Ray Moynihan and colleagues:

*The news media are an important source of information about health and medical therapies, and there is widespread interest in the quality of reporting. Previous studies have identified inaccurate coverage of published scientific papers, overstatement of adverse effects or risks, and evidence of sensationalism. The media can also have a positive public health role, as they did in communicating simple warnings about the connection between Reye's syndrome and the use of aspirin in children (1999, p. 1645).*

### **Media: The New Communicator:-**

The use of electronic media for social change has already seen an impressive evolution. Since the fifties many associations, unions, community groups or NGOs, have challenged the dominant radio and television networks with small stations broadcasting towards specific communities. While bigger and bigger trusts are concentrating the control of the most influential mass media in the world, alternative networks of information and communication are flourishing often supported by the use of Internet.

The challenges of communication are constantly evolving, as new possibilities and new needs emerge. The new communicator has the capacity to navigate from one media to another, to choose between the multiple communication tools and adapt strategies to a particular

situation. His or her experience may range from helping to strengthen union organisations to covering social issues for media stations, devising participation strategies for development projects at the community level, facilitating the networking of non-governmental organisations, and or producing educational materials. This flexibility to use communication strategies in various cultural contexts provides a training that is second to none.

The following could be the main premises for the new communicator –

- The new communicator must be equipped with the understanding that technology is a tool and nothing else but a tool. Technology may support the communication process, but the latter should not be totally dependent on it. Also, it is important to understand that technology doesn't only involve computers, satellites and internet. A pencil is an astonishing piece of technology, and communication techniques that have proved their efficacy range from popular theatre to community murals.
- The new communicator must deeply understand that communication for social change deals essentially with culture and a very special sensitivity is needed to support the process of social change in a developing world that has nothing else to hold on to than its cultural identity. Development and social change must be possible within a process within a process of horizontal and respectful cultural exchanges.
- The new communicator must be familiar with this concept: in communication for social change the process is more important than the products. In journalism, the articles, the video documentaries, or the radio programmes are valuable results for a skilled professional. But in social change and development, the process of communication with the people and within the communities is more important than the printed or audio-visual aids that may emerge from that dynamic. It is in the process of communication and participation that social change starts to happen.

## **Television and Mass Communication –**

There is no exaggeration in saying that mass media has an important role to play in achieving national goals everywhere. The UNESCO report on various aspects of communication and society provides eight following functions of mass media (Robert Browning):

- a) Dissemination of information
- b) Socialization
- c) Motivation
- d) Promoting debates and discussion on public issues
- e) Education
- f) Cultural promotion
- g) Entertainment and Integration

The television, the popular electronic medium, performs all these functions effectively and with perfection. Television is one of the bestest invention of man. It has overcome the barrier put up by illiteracy' which is the main hurdle with the print media. It provides a unique communication process, in a way helping mass communications becoming very simple and speedy. It is a multi-media system pre-dominated by the visual medium. It is recognized that there is an urgent need for mass education and communication media for accelerating social change, creating awareness and inculcating scientific temper among the masses. Television, the powerful medium of communication, is an outcome of the ongoing modern

communication revolution. It commands bigger influence on the perceptions, emotions and the outlook of the masses than any other media.

### **The Role of Media in Health Promotion -**

*“The media is an important ally in any public health situation. It serves the role of being a source of correct information as well as an advocate for correct health behaviours. But before the media can take on that role, it needs to understand the virus, the issues surrounding it, policy and practices, and finally, recommended correct behaviours.”* (Health Communication Course: Module 5)

The local and international media play a vital role as the link between health workers and the larger public. Health authorities educate and entrust the media with essential health information, which is then relayed to the public in readily accessible formats through a variety of media channels. For instance, in order to disseminate information about the avian influenza to the wider public, the U.S. Government tasked the Academy for Educational Development with the responsibility of developing a training program to help the local media understand the complexity of this disease so that they would be able to report about it effectively.

### **Mass Media: Expanding Reach & Health Promotion -**

The mass media helps health workers expand their audience reach, which is crucial considering the fact that face-to-face channels of communication often require too many human resources and reach only a small number of people in large, underserved rural areas. The mass media provides an important link between the rural residents and vital health information.



The mass media, in the form of the radio and television, are an effective way to persuade target audiences to adopt new behaviours, or to remind them of critical information. Besides informing the public about new diseases and where to seek help, they can also keep the public updated about immunization campaigns. The mass media can “empower rural populations to fight major causes of infant mortality such as diarrheal dehydration and diseases which can be prevented through vaccination, inform large numbers of people of seasonal or daily variations for such activities as an immunization campaign or availability of a new product or service, teach new health skills such as how to mix oral rehydration solution, promote new health behaviours such as taking inter-vaccine once a year, motivate ad hoc or organized listening groups, and increase community acceptance of health workers.”

### **The Internet Revolution -**

As Internet access continues to expand, it will increasingly serve as a rich health resource in environments that lack health expertise. Regardless of location, the Internet allows people to gain access to a wide array of health-related information from worldwide at a mouse click. The local cyber café may even begin to serve as a health information hub. Since the Internet transcends geographical barriers, there is plenty of potential for websites to provide a valuable source of health information, thus enhancing health and wellbeing for people in developing countries.

However, there is one important caveat. As the amount of information grows at an unprecedented rate, so does the amount of false and potentially harmful information. Misinformation, either due to inaccurate information, misleading information or misinterpretation of health information, can have potentially dire consequences, triggering mass panics, misleading uninformed policy-makers etc.

*“As access increases in the developing world, many health-related crises could parallel social and political movements that have resulted, at least in part, from these technologies (e.g., the use of the Internet by the Falun Gong in China or the role that SMS played in the destabilization of a Philippine government). Hong Kong, for example, narrowly missed mass panic as a result of misinformation being posted to a falsified website concerning SARS. Elsewhere, decision makers have been misled by, or chosen to misuse, information found on the Internet (e.g., South African President Mbeki’s stance on HIV/AIDS). For health communication programs, the Internet may become a countervailing factor and an obstacle as a source of misinformation and myth, particularly in the areas of infectious diseases and HIV/AIDS.”* (Health Communication Course: Module 5)

### **Printed Media –**

The distribution of pamphlets and leaflets created by specialized health bodies can disseminate vital health information reliably.

### **Participant Recruitment and Procedures –**

Participants were actively recruited from the Pillai Chavadi village, which have the most number of people whose main occupation is fishing and it has the maximum number population of fishermen communities. All participants were required to attend an orientation session. During this session the research procedures were explained, informed consent was obtained, and assistance in creating their awareness level about government health programmes which is disseminated through media or by the health communicators.

Approximately 26 participants participated in a brief health promotion intervention of focus group discussion. Prior to the intervention of health promotion; it was given the opportunity

to participate in a focus group interview which was divided into two groups that is for women for measuring their different awareness, perspectives, accessing media for different government health programmes by media. All of the intervention/ discussion sessions were held in an open field near to their residing area which was selected on the basis of their convenience. All recruitment and data collection for the study was completed over two day's period.

## **Data collection**

Data collection included qualitative measures. Upon completion of the intervention of focus group discussion, data was collected that assessed overall program rating and intention to utilize the health programs in the future as well as usability and participant satisfaction.

Four focus group interviews and discussions were also held. There were a total of 21 participants, all of whom had participated in the intervention. The first FGI was conducted face-to-face about government health interventions. This FGD lasted approximately 45 minutes and was digitally recorded.

The first focus group was held in person in order to not only discuss the health intervention program the participants experienced in, but also to gain insight into other aspects related to how they are using that programmes in day to day life (for example polio intervention programme for children 0-6 years). Since all FG participants were new to that discussion and interview, we wanted at least one discussion where all verbal and non-verbal cues would be available and feedback would be immediate. This setting was the best way to gather new insights we could ask later groups. This group then helped solidify and confirm the questions we would ask in the later FGIs, which all took place in that place which was very convenient for them.

To maximize participation, we conducted the remaining one FGI of fishermen communities and held them immediately following one of the scheduled health promotion interventions. Those who had previously signed up could attend, but it also provided the opportunity to recruit participants immediately. Each of these FGIs lasted about 45 minutes and was held in an open air pavilion. Questions focused on two key areas: participants' reactions to the health campaign they experienced by government provided health programme.

### **Data Analysis –**

Qualitative Analysis was conducted for this study. Focus group interview transcripts were analyzed using the descriptive analyzed method. To protect subjects' anonymity, numbers were assigned to each focus group participant.

### **Results –**

Several key themes were identified in two focus groups. Participants overwhelmingly thought the health information presented was useful and informative, which would then cause them to rethink their current health behaviours. Many remarked, however, it was information they already knew and while they might think about their health behaviours, they will not necessarily make any specific behavioural changes. In addition, they thought the health intervention conducted by the traditional way by their ancestors was creative, they appreciated the anonymity of the format, While participants thought the health information was useful in general, many commented it was information they already knew.

### **Focus Group Discussion:-**

The first group had 13 numbers of who does fishing related work and other were 9 that are helping their spouse as well as do household works; they stated that their main health

problem is caused by drinking water. And they have to face many skin diseases which is basically happening due to water. And they also stated that major health problem among children is diarrhoea, fever, cholera, malaria.

### **Government Funds -**

They were not aware of any government funding which is provided by government of India. And there was no community radio functioning and the people of that area using radio for only gratification process, especially for the F.M only.

“Janani Suraksha Yojana” (Safe Motherhood Programme) is working there. And pregnant women are getting 6,000 rupees for delivery. In this context the Accredited Social Health Activist plays a major role.

### **Awareness of Diseases from Television-**

More than television the advertisement posters of government and face to face communication plays a vital role in creating awareness on polio and filaria.

Women are getting information and awareness through advertisements and different women health related programmes which are shown by television.

The main awareness of other diseases from television is:-

- 1) cancer which top the list
- 2) cardio vascular diseases specially cardiac arrest

### **Family Planning -**

Family Planning is quite familiar among women. And they came to know about family planning programme and policy through the television advertisements which come in between their daily television serials.

### **Shift in awareness-**

Both communities confessed that the awareness level was much higher for past 4 years but now it has been shifted to local/seasonal diseases like fever, malaria.

There was a slight shift in traditional and orthodox belief. That women are started to believe in allopathic than the traditional way of getting well. But some of them still believed in traditional way of treatment. For example, snake biting and all they usually do traditional way of treatment for it.

### **Preference of Hospitals-**

There is a new and interesting thing that came to know by this focus group that now a days that community started to preferring private hospitals which is more convenient for them in comparison to government hospitals.

The overall result from focus group discussions is that the government posters plays a vital role in disseminating information (especially in child health programmes like pulse polio), and television advertisements and health programmes also plays an important role. And the social health activists regular coming and their given necessary intervention is become an

integral part to their day to day life for healthy living and for also getting necessary information's.

## **Conclusions -**

Health communication is an important field of study in the area of global health. By developing effective health communication strategies, and thereby equipping communities with the necessary knowledge and skills, communities can better cope with the debilitating effects of disease and illness. The barriers to effective health communication, such as low health literacy, limited Internet access, lack of health communication research activity in poor communities and proliferation of dubious online material, must be addressed. There must be training centers for health communication professionals, collaboration between governments and nonprofits, as well as development of health communication materials for public health promotion. At the community level, creative strategies, such as the issuance of the vaccination diploma, to transmit health information and encourage specific health behaviors could be used. Health communication programs must be customized to meet the specific needs of each target audience with regards to education level and language.

From this study, now we can say that the media has a significant impact on disseminating health information and awareness for their empowerment.

Having effective interpersonal communication skills is vital for health providers. They must be able to cultivate sound relationships between themselves and their patients, as well overcome any social distance that may be present.

By now, it is clear that the media plays a pivotal role in health communication, serving as the conduit of health information from the government and specialized health bodies to the public. With their extensive reach, the media can persuade target audiences to adopt new

behaviors necessary to deal with a health crisis. The Internet now disseminates information on an unprecedented scale. Public health officials must communicate risk to the public in a responsible and transparent manner, and at the same time identify and dispel misleading notions held by the public.

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