

## ROLE OF MEDIA CAMPAIGN IN PROMOTION OF HEALTH SEEKING PRACTICES AMONG WOMEN.

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*Abstract: Over the past few decades, media campaigns have been used in an attempt to affect various health behaviours in mass populations. Such campaigns have most notably been aimed at tobacco use and heart-disease prevention, but have also addressed alcohol and illicit drug use, cancer screening and prevention, sex-related behaviours, child survival, and many other health-related issues. Campaigns in the media can last for a short time or for a long time. They can stand alone or be linked to other organised programme components, such as clinical or institutional outreach and simple access to new or current products or services, or they can be used to supplement policy changes. If health initiatives are part of larger social marketing activities, other techniques of distribution may be employed.]*

Various media campaigns have been utilised in an attempt to influence various health behaviours in large populations throughout the last few decades. Campaigns have targeted tobacco use and heart disease prevention, as well as alcohol and illicit drug use, cancer screening and prevention, sex-related behaviours, child survival, and a variety of other health-related concerns. Typical campaigns have used big-audience media, such as television and radio, as well as outdoor media, such as billboards and posters, and print media, such as magazines and newspapers, to deliver messages to huge audiences. The majority of people are passively exposed to such messages as a result of their daily media consumption.

Campaigns in the media can last for a short time or for a long time. They can stand alone or be linked to other organised programme components, such as clinical or institutional outreach and simple access to new or current products or services, or they can be used to supplement policy changes. If health initiatives are part of larger social marketing activities, other techniques of distribution may be employed. The power of mass media campaigns comes in its capacity to deliver well-defined behaviorally targeted messages to huge audiences repeatedly, over time, in an unobtrusive manner, and at a low cost per head.

Media campaigns can endure for a short period of time or for a lengthy period of time. They can be used to augment policy changes or stand alone. They can be linked to other organised programme components, such as clinical or institutional outreach and simple access to new or present products or services. Other distribution tactics may be used

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if health efforts are part of bigger social marketing campaigns. It's also possible to modify behaviour in a non-direct way. First, mass media messages can set the tone for and enhance the frequency, depth, or both of interpersonal discussions on a specific health issue within a person's social network, which, when combined with individual exposure to messages, can support (or undermine) certain behavioural changes. Second, because mass media messages reach broad audiences, changes in behaviour that become standards within an individual's social network may have an impact on that person's decisions even if they were not directly exposed to or first convinced by the campaign.

### **Female hygienic practices in India:**

Adolescent girls in low and middle-income countries are unable to manage their feminine hygiene habits due to a lack of proper facilities and assistance from society. Adolescent girls are unprepared for their first menstruation and lack the required preparation and understanding to regulate their periods in a healthy manner. Menstrual Hygiene Management (MHM) is limited in adolescents who are experiencing menstruation for the first time due to practical, social, economic, and cultural factors such as the cost of commercial sanitary pads, a lack of water and latrine facilities, a lack of private rooms for changing sanitary pads, and a lack of education about the facts of menstrual hygiene. Menstruation is an essential and natural element of human life, if not existence, and menstrual hygiene is an important part of the basic hygiene, sanitation, and reproductive health care to which every woman and girl is entitled. The most difficult aspect for females in Bangladesh, particularly in rural regions, is that they lack sufficient sanitary facilities, therefore they neglect the necessary hygiene component or are unwilling to maintain it according to health guidelines. According to data, 86 percent of teenage female students use an old cloth during menstruation, with just 12 percent of those students washing it properly with detergent and drying it in the sun.

According to the survey, 40 percent of female pupils in Bangladesh abandon school during menstruation due to inadequate bathroom facilities. Females will feel more confident in many parts of their lives if they practise proper menstrual hygiene. They will also have less serious feminine ailments and will feel healthier. Menstrual hygiene habits, on the other hand, will enhance the vulnerability to reproductive health-related problems. Women have continued to succeed in numerous fields in the twenty-first century, but they have yet to overcome societal taboos and misconceptions. Today's technology outperforms our expectations, as seen by the media's role in raising awareness, communicating with society and its citizens, and facilitating collaboration on a variety of social issues. Globally, one of the most popular and cost-effective public health promotion instruments is the media. Media is the most handy tool for promoting awareness among Bangladeshi women from Teknaf to Tetulia (Areas in Bangladesh). The method of communication should be based on the audience's attractive approaches. Not only women, but also men in contemporary culture, need to be aware of this natural process in order to have a better

grasp of the natural biological process and the critical topics on which they should concentrate.

Raising awareness, hygiene education, and promotion, as well as the provision of inexpensive and accessible goods and facilities, as well as waste management, are the initial steps. Rather than non-traditional media, conventional media may be an easier medium to reach with clear messages throughout Bangladesh. Females in metropolitan regions are more open-minded than those in rural ones, thus marketers may transmit a similar message to urban audiences. However, because rural girls are conservative and are surrounded by numerous social taboos, this message is not appropriate. So, in rural areas, non-conventional mediums such as road shows, running video shows, demonstrations by service providers and brand fairs exclusively for women, folk theatre, folk songs, school visits by medical/health representatives, toll free health services, "UthanBaithak" (a group discussion sometimes with demonstration among community members in rural Bangladesh) and so on can be used to raise awareness about product usage, brand, and health services. Girls with literate parents, older females with premenstrual preparation, girls in secondary schools and above, exposure to commercials promoting the use of sanitary pads in the media, and family socioeconomic position all maintained good menstrual hygiene.

### **Birth-rate reduction and prevention of HIV infection:**

Reduced birth rates and the prevention of HIV infection necessitate large-scale behavioural changes. As a result, both of these topics have been the subject of ongoing mainstream media campaigns. Those focused at encouraging family planning were more significant in low-income countries, whereas those aiming at avoiding HIV infection were important in both low- and high-income nations.

It has been suggested that the shift from high to low birth rates necessitates a climate of thought "supportive of contemporary contraception usage and the concept of reduced family sizes." This viewpoint is supported by extensive evidence that the dissemination of information through the media, as well as initiatives to encourage family planning, are linked to contraceptive use. Positive results can be demonstrated when comparing between geographic areas, within geographic areas over time, or between people. Cleland and Ali, for example, have seen a significant increase in the use of condoms for contraception among young women in Africa (from 5 percent to 18 percent) between 1993 and 2001, which they ascribe to HIV-related condom marketing programmes. Although these temporal or cross-sectional associations are notable and, in some cases, independent of potential confounders, it is not always easy to distinguish the effects of exposure to modern values through ordinary media content from the effects of exposure to specific pro-contraceptive campaign content.

### **Child survival:**

Between the ages of birth and five years, a significant amount of early mortality and related illness occurs in many low-income nations. Inadequate treatment of

dehydration caused by diarrhoea, non-vaccination for avoidable infections, and failure to nurse exclusively and for a sufficient period of time are all major reasons of low child survival. Each of these concerns has been the subject of public awareness campaigns, with varying degrees of success.

According to one study, four of six kid vaccination campaigns that included mass media resulted in significant increases in vaccine usage, and the benefits were cumulative as the campaign's exposure increased. In Bangladesh, greater utilisation of vaccination services was attributable to national campaign exposure, according to one cost-effectiveness analysis. There were no other examples of mass media campaigns alone in a later examination of vaccine programmes. Rather, mass media was a commonly adopted technique in multicomponent vaccination campaigns across the world, with significant advances in kid immunisation being reported on a regular basis. Effects cannot be traced only to the mass media campaign component, as they cannot be attributed to other campaigns.

### **Conclusion:**

Mass media campaigns can cause beneficial or negative changes in health-related behaviours in large populations, both directly and indirectly. Multiple treatments are more likely to succeed when the target behaviour is one-time or episodic (e.g., screening, vaccine, children's aspirin use) rather than habitual or continuous (e.g., screening, vaccination, children's aspirin use) (eg, food choices, sun exposure, physical activity). To persuade those motivated by media messages to act on them, there must be constant availability and access to vital services and products. The establishment of policies that encourage possibilities for change adds to the drive to change, whereas policy enforcement might deter unhealthy or dangerous behaviours. Public relations or media advocacy initiatives that influence how the news and entertainment media treat a public health issue are also a viable addition to traditional media campaigns.

There are several obstacles to the effectiveness of mass media campaigns. Positive campaign achievements are frequently not sustained due to pervasive marketing for rival products or with opposing messages, the force of societal norms, and the drive of addiction. To extend the impacts, more and longer-term investment will be necessary. Rather from making wide exposure simpler, the increasingly fractured and congested media landscape makes it more difficult to get proper exposure to intended media messages. As a result, meticulous preparation and testing of campaign content and structure with target demographics is critical (panel).

Isolation of the independent impacts of mass media campaigns is challenging for all of the reasons stated above. However, extensive data has been gathered from research designs that, while not perfect in and of itself, add up to a substantial body of evidence supporting the conclusion that mass media campaigns may affect population health behaviours.

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