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Use of mass media for health promotion: An interview based study

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Abstract

The purpose of this study was to determine the extent to which health professionals in Jalandhar district of Punjab are using mass media for health promotion. Results from 121 health professionals indicated that: (i) they widely use media as a tool for health promotion; (ii) they use many communication strategies in working with television, radio stations and newspapers; (iii) they often cite increased awareness and dissemination of information as outcome objectives; (iv) They usually use foreign-language media channels; (v) their attitude towards media is positive; (vi) they primarily consider barriers to effective media use as time and money; (vii) they feel the need for additional training to use mass media; And (viii) they rarely use formal and summative assessment. Our results raise concerns about whether media is being used as effectively as possible to improve health. We recommend that future research focus on understanding the process of turning research into behavior.

Keywords: Mass media, health promotion, interview based

Introduction

Communication and public health scholars have long debated the effectiveness of the mass media in promoting healthful behaviors. Most media impact research posits that outcomes are mediated by: (i) audience attention to the message, existing knowledge and behavior, and behavioral experience, (ii) to what extent media messages capitalize on the perceived needs of the audience, (iii) the ability of the campaign designer to limit counter-messages in the media environment, (iv) the extent of interpersonal communication about media program content, and (v) supplementation of media programs.

Furthermore, we are more likely to achieve our goals when we identify the audience's needs to test the message concepts and make excuses, and to target audiences through the creation of media and selective messages. Conducts initial research (production and production). While researchers work to improve our understanding of media effects, they have paid little attention to how the health practitioner acquires research results, what is gleaned from research reports, and how interpretations are transformed into behavior. We aim to describe how health professionals in district of Jalandhar use the media extensively to promote health practices. The lack of a systematic method for disseminating research information can contribute to a broadly superficial understanding of how media can best contribute to health promotion. This limited understanding may also influence practitioners' use of media-based intervention strategies. Three key deficiencies in reporting media effects research (as well as other applied research) influence practitioners' behavior: (i) the lack of attention in research reports to how results can be applied at a local level; (ii) a failure of journal articles to draw attention to how to adapt research efforts to contexts unlike the research setting; and (iii) the absence of specifics about how campaign design principles (e.g. audience needs analysis, audience segmentation, and channel analysis) can be integrated into health promotion programming.

Methodology

Questionnaires were sent to the directors of all health education and alcohol and drug abuse divisions in the district health departments of Jalandhar and also to all the doctors of the local heart, lung and diabetes associations in the district. We obtained the names of potential respondents from existing listings.

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The final mailing list had 195 names - 108 (55%) from health departments and 87 (45%) from voluntary associations. In a one-time mailing, 121 completed questionnaires were extracted, with five reported to be accurate. The overall response rate for the single mailing was 62%-substantially greater than other mailed questionnaires. The health department respondents may have felt a greater urgency about participating in the study and may have been more interested in its findings. Overall, 57% of the 121 respondents were from health departments.

Questionnaire

A six-page instrument was designed to address several areas of interest. Four questions assessed the intervention strategies used with television, radio, newspaper, and for supplementing media. Strategies included, in television, developing and producing public service announcements (PSAs), distributing PSAs, stimulating new coverage of events, participating in talk shows, participating in television special programs, developing special programs, purchasing advertising time, using television community events listings, and co-sponsoring (with a television station) community events. Additional questions asked how participants used other mass media: community-wide promotional events, press conferences, billboards, health fairs, brochures, mass mailings of health information, and newsletters. Respondents answered three questions about their purposes in using different media, indicating with a 1, 2, or 3 their first, second, and third objectives. Objectives included: to increase knowledge or awareness, change attitudes, change health behavior, promote specific health policies (e.g. requiring smoking areas or warning labels on alcoholic beverages), recruit people into programs, increase visibility of their organization, and raise funds. Participants indicated how likely their organization was to use media for each of six possible reasons: to reach large numbers of people, to reach underserved populations, to promote community awareness of health issues, to motivate individual health behavior change, to promote healthful social norms, and to influence community support of public health policies. Six attitudinal statements (using a 5-point scale, with 5 as strongly agree and 1 as strongly disagree) indicated respondents' perceptions about the role of mass media in health promotion. A series of seven items identified barriers to using mass media while seven other questions asked about training needs which, if met, might improve how mass media get used. Four questions assessed demographic characteristics of the audience and an additional three questions asked about media in languages other than English. We mailed the instrument with a letter explaining the purpose of the survey and a pre-stamped, preaddressed return envelope. Eighty per cent of the respondents indicated they would like to be sent a copy of the study's findings.

Follow-up phone survey

In order to gain more in-depth information about media use, especially preliminary research and evaluation, we conducted a small follow-up study of high media users. We selected 10 respondents for phone interviews by classifying all mail survey respondents into high, medium, and low media users, and selected 30% of the 30 individuals in the high-usage group. All 10 people selected for phone follow-up were interviewed. Interviews averaged 15 min and included 20 questions on frequency of media use, use of formative and summative evaluation, audience segmentation techniques, and media supplementation activities. Interviews averaged 15

minutes and included 20 questions on frequency of media use, preliminary and summative assessment, audience segmentation techniques, and use of media supplementation activities.

Results

Patterns of media use

Large-scale media strategies are clearly a staple in the programmatic efforts of the health professional. Overall, 95% of the respondents said that they had used radio, television or newspapers for health promotion in the last two years. Among media users, 71% reported working with television stations, 56% with radio stations and 40% with newspapers. He showed a clear tendency to become involved with more than one type of media.

Objectives of media use

Reaching large numbers of people and promoting community awareness are by far the most frequently cited reasons for using mass media. About 70% of the respondents used newspapers for health awareness and the number for both television (57%) and radio (62%) were slightly less. The next most frequent primary objective was 'increasing the visibility of the organization', cited by only -18% of respondents. Attitude and behavior change were infrequently listed as objectives for media use, as were promoting specific health policies (e.g. no-smoking ordinances), raising funds, or recruiting people into programs. When first, second, and third most-common are combined, the general picture remains the same. Increasing awareness, knowledge, and organizational visibility are the key; health professionals generally do not choose more complex uses of mass media.

Expectations of media use

Overall, - 75% of health professionals stated that their expectations were met, while 19% reported unexpected expectations. Another 8% said their expectations were exceeded. For the future, the majority of respondents (62%) felt they would increase their media usage, and 35% planned to maintain their current usage levels.

Use of media supplementation strategies

Overall, 85% of respondents using media reported that their large-scale media efforts are complementary with at least one other local level strategy. On average, respondents cited five of the eight complementary strategies listed on the questionnaire. The most popular strategy was the distribution of health fairs (76%) and printed materials such as brochures (72%). Community-wide promotional events such as Health fairs and 'Fun Runs' (54%) and newsletters (55%) were the next most popular. Press conferences (42%), mass mailings (44%) and billboards (16%) were cited less often, possibly because they are more expensive or not part of an agency's routine operations. Minimal or brief-contact events such as health fairs were most commonly used.

Conclusion

This study indicates the need for research to improve our understanding of the use of mass media by front-end health professionals. Mass media can be a powerful ally or weak partner in health promotion. To ensure that mass media are used to their greatest potential, research can fruitfully focus on a number of areas related to consumer needs: (i) the process by which health professionals seek and adopt information about new media usage; (ii) the process by which

health professionals fail to use the standard practices of media planning (eg research and audience segmentation); (iii) realistic constraints in developing effective applications of mass media in the day-to-day world of health agencies;; And (iv) the process by which the media responds to the health promotion needs of local agencies and groups. It is necessary to attend to the practical needs of health professionals to bring to mind the big picture of mass media and health promotion.

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