INTRODUCTION

Health-seeking behaviour is a complex phenomenon and requires the understanding of various disciplines like health sciences, social sciences, and behaviour sciences etc. Mass media is an important social institution, which plays a crucial role in influencing, and shaping the behaviour of the general public in any community, society, or nation. Globally health communication messages are disseminated through mass media as part of health promotion under Public health programmes, which aim for improving the quality of life of the target audience WHO\(^1\) (1998). Over last couple of years, the discipline of health communication has developed as a dynamic and pragmatic field of study.

As a niche area of health communication, this study examines the roles and applications of mass media in health seeking behaviour of human being. The integration of applications of communication theories & principles with the health practices & techniques, leads to a broader area for exploration of health communication.

The health issues are complex and necessitate systematic understanding & knowledge of the topic that goes well beyond the health sector to address them. The creation of this knowledge involves a number of social sciences disciplines working together with the medical professions.

Health communication enquiries examine various levels of social context through different types of communication including intrapersonal, interpersonal, group, and mass communication.

Due to its potential role in the influencing and shaping human health behaviour, & public health; health communication has attracted a lot of attentions from academics, social scientists, health care professionals, policy makers and other stakeholders.

Health seeking behaviour is an important area of study which encompasses common man’s psychology, cultural & personal beliefs, political ideology, and socio-economic conditions, and the factors which influence them.
The present study tries to assess the impact of mass media on the health-seeking behaviour of general public.
To have a simplistic & systematic understanding of the complex nature of the topic, we have divided this chapter into SEVEN sections.

Part ONE deals with the concept of health, communication; and health communication. It explains definitions, nature and scope of these terms.

Part TWO deals with the concept of public health, health promotion, and health education

Part THREE speaks about different type of mass media and public health

Part FOUR is exclusively devoted to television and its role and influence on Audience.

Part FIVE deals with different theories & principles related to health-seeking behaviour and mass media

Part SIX deals with the context of the study – India, and the state of Rajasthan

Part SEVEN – explains about the significance of the study
The term HEALTH COMMUNICATION is composed of two words i.e. HEALTH & COMMUNICATION. Let’s first try to understand their meanings.

1.1 HEALTH

The word health is taken from was the English language word ‘hoelth’, which means a state of being sound, and it is generally used to reflect the soundness of the human body, as mentioned by Dolfman\textsuperscript{2}.

Presenting the ancient views on health, Cook\textsuperscript{3} mentioned that the concept of health is not new; it is as old as the humanity. In old texts, the term health is mentioned as Healen, which meant’ to heal’. During medieval English, the term health was used as helthe, meant to be in a state of sound body, mind, & spirit. The Greek define medicine as a way to prolong life and prevention of illness and disease / sickness (i.e. to maintain health of people)

WHO defined health as ‘a state of complete physical, mental and social well-being, not just the absence of disease or infirmity.’ World health organisation mentioned that health is not just physical state of health. It includes health & wellbeing.

The above-mentioned definition of health by WHO has been criticized\textsuperscript{4} over a period for different reasons, yet this is the most widely accepted definition of health across the globe.

The original WHO’s definition has been modified in subsequent discussions at the world level. In November 1986, the first International Conference on Health Promotion was held in Ottawa, Canada. WHO’s this definition of health was modified in the Ottawa chapter (1986). The Ottawa Charter of WHO tried to include this multidimensional concept\textsuperscript{5} of health. World Health Organisation (1986) Ottawa Charter stressed that education, food, shelter, income, peace, a stable ecosystem; sustainable resources, equity, and social justice are necessary inputs for health.

Ottawa Declaration (1986) stated that an individual or group must be able to identify and realize aspirations, to satisfy needs, and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities.
Ottawa declaration (1986) emphasised that health is an important resource for life, which enables common man to recognise and realise his/her daily needs and help individuals to achieve them while coping with the changing circumstances around them. The declaration further states that the health is a positive and multifaceted concept combining many personal traits and social resources. It said health is positive concept for everyday life, and all the individuals must be able to fulfil their daily needs and desires by recognising it and should be able to satisfy them.

Bircher defined that health is a dynamic state of well-being, which is characterised with mental and physical soundness that satisfies the requirements of life according to the culture, age, and personal and social responsibility. Health is combination of mental and physical characteristics in tune with contemporary social and cultural values enabling a person in fulfilling his/her social responsibilities according to the age, mentioned Bircher.

According to Saracchi, Health is one such condition of well-being, which is characterised by the absence of sickness, and infirmity. And it is a universal and basic human right. Saracchi sees health as a basic human right, and emphasises that it should be available to all the human beings on the planet. Saracchi’s view about health is in accordance with the WHO’s modified definition of health.

Australian Aboriginal people take the wholesome view on health. They defined it that ‘health is not just the physical well-being of an individual; it also includes the spiritual, emotional, and cultural well-being of the whole community’ NHMRC.

Wellbeing, as defined by WHO is the optimal state of health of individuals and groups; involves the realization of the fullest physical, psychological, social, spiritual and economical potential of an individual; the fulfilment of one’s role expectations in the family, community, place of worship, workplace and other settings.

Health and wellness are often used interchangeably for the sake of convenience, yet technically both are different in nature.

Paul (2006) suggested that health is the basic foundation of humanity, which helps all the human beings and communities to exist. Therefore, the state of health in any given population not only indicates the well-being of the people, it also reflects upon the human development of the given population as well. Paul emphasises that besides
being the basic foundation of life, health is an indicator of human development in any
given society.
We can say that health is the greatest gift of God to the mankind. Health is so
important for any individual that one cannot imagine a normal life without being in a
good shape of health. An individual needs to be in good health for following reasons:
1. To efficiently perform daily chores
2. To discharge duties at workplace
3. To fulfil responsibilities towards families / society
4. To live a normal life useful to him as well as to the society
5. To contribute to the development of the society and nation
Health is a multidimensional concept; Health is not just physical state of health as it
includes mental, physical, social, psychological, and economic health etc. Health
includes wellbeing also. It sounds simple to define health, yet it is much more complex
than physical /biomedical health. It has many facets i.e. physical health, mental health,
spiritual health, family health, social health & well-being. In fact, health is a
combination of many facets of an individual’s personality.
Sharma et al.\textsuperscript{10} have stated that health is much more than the biomedical health. Heath
includes physical health, mental health, spiritual health, family health, social health &
well-being etc. Health is the combination and result of many activities of an individual
governed by the prevailing socio-economic conditions.

1.1.1 HEALTH IN ANCIENT INDIAN TEXT
According to old Sanskrit texts, ancient Indian health system is known as Ayurveda\textsuperscript{11}. The existence of Ayurveda dates back to 5000 BC. Ayurveda is considered among the
most important Indian texts – a collection of write-ups / book on health & different
aspects of health. It was written some 5000 years before. And it is still considered as
an authority on ancient Indian system of medicine
Ayurveda consists of two words:
1. Ayu (Life) – Human Life
2. Veda (Science) – Systematic study of a subject
A brief explanation of these words reveals the real meaning of the Ayurveda. Here Ayu (Life) means human life and Veda (Science) means the systematic study of a subject. Ayurveda means the systematic study of human life. Ayurveda says the body and the mind are two separate entities, yet both are connected inextricably. Health depends upon the harmony between body and mind. Since the mind governs the body, mind plays an important role in the overall health of a person.

Combining the two words gives its meaning as “the science of life”. We know that health is an important constituent of life. Thus, Ayurveda focuses on achieving the optimal health conditions.

The Ayurveda is a large compilation of texts related to the life and different aspects of life and longevity. Health is an important ingredient of health throughout the life. Ayurveda treats a human being as a complete unit. It treats the human health in a holistic way. It emphasizes on maintaining a good health by respecting the environment and synchronizing the body and mind along with promoting good behaviour (healthy living habits in tune with nature). The Ayurveda (the ancient Indian traditional medicine system) says that the complete health is the result of maintaining the delicate balance between the physical body, its senses & mind.

Anamika et al. 12 said that Ayurveda has clearly defined the ways to lead a healthy and happy life. Ayurveda mentions about living a healthy life during different season. Each season is different in nature so we should a routine which suits the nature.

![Ayurveda Diagram](image)

**Figure 1.1**
Ayurveda says health is a delicate balance of three elements of Vata Pitta & Kapha in the human body. To be in good health means all these three elements of the body should be in perfect state of synchronisation. According to Ayurveda, health is not simply the absence of disease. It is rather a state of balance among body, mind, and consciousness. The scope and ambit of Ayurveda is vast. Ayurveda includes every aspect of human life and longevity. Besides curing the diseases, Ayurveda emphasizes on the promotion of health along with the prevention of disease. During 1500 BC, Sushruta emphasizes on the complete health of body, and mind. As the saying goes, ‘A healthy mind resides in a healthy body’. Body and mind cannot be separated from each other. To understand it in the today’s modern terminology, they are like software & hardware of the body, mentioned Neelaama\(^\text{13}\). In simple words, we can say that if the Body is the hardware, mind can be called as software. If the body needs to be in perfect shape, the mind should also be in a perfect shape and vice versa. If the mind is not working well, e.g. a person is under stress, depression, anxiety, or tension; it would have a direct effect on the function of a body.

Yogi\(^\text{14}\) mentioned that basic principle of healthy living is to know about life and keep away from impurities. Impurities cause disease & sickness in life. Knowledge is important to stay healthy and keep away from impurities in life. Knowledge can spread awareness about health promotion. (Swasthy rahne ka mool mantra hai jeevan ke bare main jaano, aur ashuddhiyon se door raho. Ashudhiyon hi jeevan main rogon ka karaan banti hai. Swasthy rahne ke liye & rogon se bachne ke liye unki jaankari jaruri hai. Jaankari se hi swaasth ka prachaar ho sakta hai)

Shastri\(^\text{15}\) (1978) suggested that health is one of the most important aspects of life. Ayurveda teaches us to lead life in proper way. According to Ayurveda, only a healthy person can lead a healthy life. (swasthyamaanav jeevan ka ek bahut mahatvpoorn ghatak hai. Tatha Ayurveda hame jeevan jeene ka sahi dhang sikhata hai. Ayurveda ke anusaar ek swasth vyakti hi sahi jeevan ji sakta hai). Acharya\(^\text{16}\) was of the opinion that if we live life according to the principles of Ayurveda we would never fall sick. That would help create the society of healthy and wise people. Only healthy and wise people can be helpful for the society.
Vaidya\textsuperscript{17} mentioned that Ayurveda emphasizes on the prevention and complete cure of disease. Ayurveda suggests that to stop disease, one should be aware of root cause of sickness. Vaidhyaaage kahate hai ke … Ayurveda ka pura jor bimari ki rokthaam aur bimari ka jad se eilaaj karne pe hai. Ayurveda kahta hai ke agar Bimari ko rokna hai hai to uski rokthaam hi sabse behtar tareeka hai. Bimari ke bare main logon ko jaagrook karna.

Tirtha\textsuperscript{18} (2007) explained health as a balanced synchronisation of body & mind. To be in a good state of health, body and mind should be in a synchronised state. Health is a balanced combination of many three different elements. These are body, mind and soul. In other words it is also called as physical, mental & spiritual elements of human being. With a balance in all these elements, a person cannot be called to be healthy, as explained by Ramona\textsuperscript{19} (1999)

After discussing about meaning and definition of health, let’s take a look at the meaning & definition of communication

This part of introduction deals with different concepts of communication.

1.1.2 COMMUNICATION

In common parlance, communication means human communication. Communication helps human being in conveying meaning between individuals & groups. This process of conveying the meaning occurs through some words, signs & symbols.

Communication connects, informs, entertains and educates.

Social scientists have tried to define communication in different ways. A few of the definition of communication are given below.

Charles E. Osgood\textsuperscript{20} says communication is “One system influences another system”

OSGOOD- SCHRAMM MODEL OF COMMUNICATION

![OSGOOD- SCHRAMM MODEL OF COMMUNICATION](image)
Claude Shannon\textsuperscript{20} defines communication as “One mind affecting another mind.”
Collin Cherry\textsuperscript{20} defines communication as “the transmission of stimuli.”
Wilber Schramm\textsuperscript{20} defined it as the mechanism through which human relations exist and develop.

**WILBER SCHRAMM’S MODEL OF COMMUNICATION**

![Figure 1.1.2](image)

Another definition\textsuperscript{20} says it as “the transfer or conveying of meaning to other person.”
Another definition\textsuperscript{21} says communication is the “Sharing of experiences on the basis of commonness.”
Although there are many definitions given by social scientists, communication experts, and philosophers; yet is there not any agreement on any single definition of the communication.

If we try to develop an acceptable definition of communication, we can say that communication is a process of sharing or exchange of ideas, information, knowledge, attitude, or feeling among two or more humans.

**TRAITS OF COMMUNICATION**

After analysing the above; we see that communication has following traits:

1. **IT IS A PROCESS OF**
2. **SHARING OR EXCHANGING OF**
3. **KNOWLEDGE, INFORMATION, IDEAS, AND**
4. **ATTITUDE OR FEELINGS,**
5. **AMONG TWO OR MORE PERSONS,**
6. **THROUGH CERTAIN SIGNS AND SYMBOLS,**
7. **WHICH MAY BE SOUND, WORDS, PICTURES, GESTURE ETC.**
BASIC COMPONENTS OF COMMUNICATION

Here, we find that for any communication to take place there must be:

A. A SENDER (a person who gives information/idea/knowledge)
B. A RECEIVER (a person who receives it)
C. A MESSAGE (an idea/information/attitude to be shared)
D. A CHANNEL (through which the message is sent)

Based on the above traits, a basic model of communication was developed:

A BASIC MODEL OF COMMUNICATION

As the model of communication represents:

- There is a sender who encodes the message and sends it to the receiver.
- The message is carried through a channel.
- The receiver of the message decodes the message to grasp the meaning.

For communication process to continue, feedback is required from the receiver of message. Based on the feedback, sender improvises the message according to the needs and understanding of the receiver. And the process goes on and on.
ROLE OF COMMUNICATION

Communication is vital to human existence. Being at the core of all the human activities, communication plays a vital role in any venture\textsuperscript{22}. Be it an enterprise, business, community service, government or any other activities, communication plays an important role in the success of any human activities. Communication plays a variety of roles in the society. Communication connects with others, communication removes hurdles in the way of persuasion, communication helps the work done by making people understand, communication helps in development of a society and much more, as suggested by Siltrauz et al.\textsuperscript{23}.

FUNCTIONS OF COMMUNICATION

Communication performs many functions in any society. These are:

1. INFORMATION
2. INSTRUCTION
3. EDUCATION
4. ENTERTAINMENT
5. PERSUASION
6. DISCUSSIONS & DEBATES
7. INTEGRATION

Let’s discuss the above mentioned functions of communication in a brief.

1. INFORMATION

First and foremost function of communication is to inform people. Communication provides people huge information about almost every subject under the sky. These information are useful for human being. For example it provides information about preventive measures to avoid water borne disease; it provides information about health & hygiene; it provides information about weather, business & day-to-day activities etc. Communication provides information about issues such as cyclones, rains, windstorm etc. It helps people taking appropriate decisions and save their lives, money and assets. In the absence of these information, life of a person could be miserable, said Devvy\textsuperscript{24}. 
2. **INSTRUCTION**

Another important function of communication is to instruct people about important issues in society. This starts from the early childhood and continues throughout the life\(^{25}\). At homes we get instruction about our daily customs and traditions of our society. We are instructed about ethics in life. Similarly at many places in our daily life communication provide us instruction to make our life useful.

Instruction function of communication is used in our daily life at various levels. Be it home, workplace, market, or playground. Instruction function of communication facilitates human being performing different activities smoothly at numerous times in daily life.

3. **EDUCATION**

Education is also an important function of communication. Communication provides us education by supplying enormous knowledge, expertise, and skills that helps us effectively managing the complex issues in our life.

In the ancient times when formal education system was not in place, it was communication which provide informal education. This informal education was usually provided at temples, mosques, shrines and other religious places (Steve et al)\(^ {26}\).

Since our birth, throughout the journey of our life, we use the education function of communication. Taking from the primary school’s class rooms to the gathering of a religious congregation, we constantly get benefitted from the education function of communication.

4. **ENTERTAINMENT**

To break the monotony of life, human beings need entertainment. To skip the tensions in daily life human being needs to be diverted from troubling issues. Communication provides entertainment for this diversion, and helps feel relaxed and revitalising us.

Communication provides entertainment through movies, drama, music, dance, art etc.

5. **PERSUASION**

Aristotle had said that persuasion is an important function\(^ {27}\) of communication. It helps persuade the other party. By persuasion, communication helps reaching agreement between two parties. It helps resolving the conflict among different parties. It is a
well-known fact that lack of communication creates misunderstanding among people. In fact, communication acts as a bridge to resolve misunderstanding.

6. DISCUSSIONS AND DEBATES

Communication helps us carrying out discussions and debates on the topic of public interests. Communication helps different parties in presenting their view on the complex issues. By providing opportunity in clarifying the conflicting viewpoints on controversial issues, through discussions and debates; communication helps reaching a consensus.

7. CULTURAL PROMOTION

There are numerous cultures among different parts of world. Communication helps us promoting and preserving our culture. Communication helps individuals to sustain and maintain the individual urges.

8. INTEGRATION

Communication is a great integrating tool. Through knowledge and information; different cultures, individuals, and groups are able to know about each other, and also understand and appreciate each other’s way of life. By this way, they develop tolerance towards each other. Communication plays an important role in the integration of different segments of society. By providing information and knowledge, communication helps people know each other and develop understanding and tolerance among different groups in society. It is a fact that no person, society, community or tribe can survive without communication.

TYPES OF COMMUNICATION

Human being is involved in different types of communication activities. These can be divided into four types of communication. These are:

i. INTRAPERSONAL COMMUNICATION

ii. INTERPERSONAL COMMUNICATION

iii. GROUP COMMUNICATION

iv. MASS COMMUNICATION
Now we discuss a little about the characteristics of above-mentioned communication:

i. **INTRAPERSONAL COMMUNICATION:**

Intrapersonal means inside a person. Intrapersonal communication takes places inside the mind of person. It means what transpires in the mind of a person. It happens all the time. A human being thinks all the time. He/she is always involved in thinking, conceptualizing, contemplating and giving shapes to the idea, thoughts and beliefs etc. Intrapersonal communication happens even in sleeping\(^\text{29}\). During sleep, when we dream, we communicating within ourselves. It is a kind of intrapersonal communication, which happens within oneself.

ii. **INTERPERSONAL COMMUNICATION:**

Interpersonal communication is the most common form of communication among human beings. Interpersonal communication takes place between two individuals. It is a person–to–person communication. It includes everyday communication, which takes places through sound, words, gestures, postures, facial expression, etc. Interpersonal communication is a face-to-face interaction between two persons\(^\text{30}\). In this type of communication both the persons take part in the process of communication. This is the best form of communication because both the parties involved in the communication get immediate feedback. This immediate feedback comes in different forms, which help communication takes place effectively. It is very useful in times of crises.

iii. **GROUP COMMUNICATION:**

When more than two people are involved in the process of communication it is called group communication. This type of communication takes places in a group where participants come together to discuss and exchange ideas of common interest. Group communication is an extension of interpersonal communication\(^\text{31}\). Communication in a group, big or small, is very useful for collective decision making. Group communication requires more organised efforts than interpersonal communication, because many people are involved in the process of communication.
iv. MASS COMMUNICATION (MASS MEDIA)

As the name suggests itself mass communication refers to the communication that takes place with the masses. Mass communication is a unique form of communication and it is different from group or interpersonal communication. Any mechanical device that multiplies messages and takes it to a large number of people simultaneously is called mass communication. Mass communication takes places through some mechanical device. This device multiplies messages and takes it to huge number of audiences scattered over vast geographical area i.e. Newspapers, magazines, Radio, TV, and Internet etc. For the sake of convenience, mass communication is also called mass media. Different types of mass media are radio, TV, Newspaper, Magazines, web media / new media etc.

We will discuss about mass media in detail in next parts.

1.1.3 HEALTH COMMUNICATION

Combining the two words health and communication – we get health communication. According to WHO (1998) health promotion glossary, “health communication is the use of the mass media, multimedia and other technological innovations to disseminate useful health information to the public, with a view to increase awareness of specific aspects of individual and collective health (Public Health) as well as importance of health in development”, as mentioned by WHO.

![Figure 1.1.4](image)
While going through the definition of health communication given by WHO; we see that health communication is:

A. The use of mass media, multimedia, and other technological innovations.
B. To disseminate information to public
C. With a view to increase awareness.
D. About specific aspects of individual health and collective health (public health)
E. And to highlight the importance of health in development.

Here we see that health is an important ingredient in development. WHO emphasises that health is a basic constituent of development. We see that development of a nation depends upon the health status of its population.

Let’s examine some other definitions of health communication.

Schiavo\textsuperscript{33} (2007) said that health communication is a multi-disciplinary and multifaceted approach of communicating with diverse audiences who have a common concern among them i.e. they seek health related information. The goal of health communication is to influence the attitude of the audiences, to shape their behaviour to help improve their health outcome. These audiences include all the stakeholders of health i.e. individuals, families, communities, health-care professionals, patients, policymakers, authorities,

Kreps\textsuperscript{34} (1988) suggested that health communication can be used for health promotion & health education for different aspects of prevention of disease and it is useful in various situations. It includes formulation of public health messages and disseminating them for promoting healthy behaviour among the common populace.

Health communication means producing and exchanging the useful information with a view to motivate, influence or educate different audiences i.e. individual, general public, institutions, communities or societies, as mentioned by Maibach et al\textsuperscript{35} (2007).

The study of health communication is an applied area of research in social & behavioural sciences. As an applied area of research, health communication tries to examine the influence and impact of communication on different facets of human
behaviour and its relationship with healthcare management system with respect to its social, cultural, economic, and personal forms.

Juliana\textsuperscript{36} mentioned that as an applied research discipline health communication tries to identify a problem related to human behaviour and health care management and focuses on the solution of these problems with the help of different communication theories and principles along with the application of different communication models. Based on the above-mentioned definitions of health communication, we try to summarise about the nature of health communication. We find that:

Health Communication is:

A. A multidisciplinary and multifaceted concept, that
B. Uses different types of communication (interpersonal, group and mass), and
C. Employs various type of media (mass media, multimedia, new media),
D. To produce / create health messages,
E. According to the needs of target audiences (individual/ general public/ institutions / communities)
F. To educate / influence or motivate them
G. For promoting health behaviour or
H. Leaving the previously earned unhealthy behaviour,
I. And treat health as part of development

Health communication experts employ different strategies to develop health messages to impart health education and to shape & modify the health-seeking behaviour of an individual & the community at large.

SCOPE OF HEALTH COMMUNICATION

Since health is related to each and every individual on earth, the scope of health communication is vast and varied. Health communication works for every individual (i.e. general public) in different societies, cultures and nations. Health communication is an integral aspect of every human being. Health communication touches the life every child, man, & woman in a family, society, and nation.
HEALTH COMMUNICATION IS AN APPLIED RESEARCH

As an applied research; health communication tries to evaluate the impact and influence of human communication on the different facets of health care management. By trying to improve the quality of healthcare system, health communication helps to promote public health and health education.

Health communication enquiries are unique in nature. They try to:
1. FOCUS ON A PROBLEM, And
2. TRY TO IDENTIFY THE SOLUTION
3. OF HEALTHCARE ISSUES WITH A VIEW TO
4. PROMOTE PUBLIC HEALTH
5. IN A SOCIETY, COMMUNITY, OR NATION

Health communication professionals try to identify the contexts, channels, messages and reasons that will create & disseminate health messages to motivate individuals to use health information to promote the public health.

The scope of health communication is very wide. Health communication includes:
1. PUBLIC HEALTH
2. HEALTH PROMOTION
3. HEALTH EDUCATION

It is a common fact that public health status of developed nations is often better than those of developing nations or third world nations. Any country cannot grow fast, if the health of its citizens is in poor shape, as the health communication is an important ingredient of development. Effective health communication can play an important role in increasing awareness about health risks among common men in a particular society. Health communication can also motivate the people and help them acquire necessary skills required to reduce these health risks. On one hand effective health communication can play a great role in creating demand for appropriate health services; on the other hand, it can reduce the needs for inappropriate health services.
HEALTH COMMUNICATION IS A NICHE AREA

We know communication is at the core of all human activities, and it plays a very powerful role in the success of any efforts, or ventures. The dynamics of communications are varied in different contexts. The applications of communication in healthcare management are multichannel and multifaceted. Health communication tries to simplify the complexity of nature of healthcare issues.

Health communication enquiries examine the production, dissemination, and consumption of different useful health information, which are disseminated through various media to a variety of audiences who are dispersed across different geographical boundaries.

Health communication employs numerous channels of communications that includes:

1. **INTRAPERSONAL COMMUNICATION**
2. **INTERPERSONAL COMMUNICATION**
3. **GROUP COMMUNICATION**
4. **MASS COMMUNICATION**

Examples of different types of communication in healthcare system:

1. **INTRAPERSONAL COMMUNICATION**

   Intrapersonal communication takes place within a person. Examples are:
   
   A. An introspection by the patient about his/ her medical history,
   
   B. Perceived treatments or consequences of health issues by a patient
   
   C. Assessment of a health status / diagnostic reports of a patient by healthcare professional
   
   D. Suggested treatments of health issues by a healthcare professional of a patient

2. **INTERPERSONAL COMMUNICATION**

   Interpersonal communication takes place between two persons. Examples are:
   
   A. Communication between the patient and doctor;
   
   B. Communication between patient and healthcare professionals;
   
   C. Communication between two healthcare professionals
   
   D. Communication between a patient’s relatives or
   
   E. Communication between two patients or health-care professionals
3. **GROUP COMMUNICATION**

Communication activities that take place among a group of more than two persons are called group communication. Examples are:

A. Discussion about a health topic among health care professionals  
B. Discussion about a health issue among the family members  
C. Discussion about a health issue among patients and healthcare professionals  
D. Discussion among different stakeholders of health care system  

4. **MASS COMMUNICATION**

Communication that takes place through different channels of mass communication is called mass communication. Examples are:

A. Dissemination of health messages through print media i.e. newspapers/magazines/books/leaflets/pamphlets etc.  
B. Dissemination of health messages through electronic media i.e. Radio, TV, and Cinema etc.  
C. Dissemination of health messages through internet, social networking websites etc.  
D. Interaction/discussion among different stakeholders of health through SNWs

![Figure 1.1.5](image_url)
1.1.4 HEALTH INFORMATION

As the name suggest that information related to one’s health is called health information. Health information are the data related to an individual’s medical history, & course of treatment. Health information include: diagnosis, symptom, medication advised, and the outcome of all these medical procedures.

Kreps et al. \(^{37}\) (1984) said that health information are those information which related to the topics and issues concerning with past, present, or future state of health. Health information are also called health related information. Health information are related with the health of an individual or the general state of health in a tribe, community, or society as well.

Kreps mentioned that health information is the key element in the process of health promotion and health care management, because it helps in diagnostic of health related issues, formulating their treatments, taking appropriate decision, and formulating the strategic policies.

Health information is the outcome of interaction between the healthcare service providers and the patients. When the knowledge accrued through these interactions, between patients –health care providers; are converted into information they are called health information.

[Note: Both the terms health information & health related information are used interchangeable. For the purpose of this study both the term represent same meaning.]

HEALTH INFORMATION vs HEALTH COMMUNICATION

Health information are the data collected through the different diagnostic tests, interviews, visits and other important inputs used to make decisions in the health care management. While the main aim of health communication is to process the health information and customize these processed information with a view to suit the needs of the audience. As we know that communication is at the core of any human activity, use of communication in healthcare becomes essential for success of health-care ventures. The study of Health communication is an applied area of research Jackson et al \(^{38}\) in social & behavioural sciences. As an applied area of research, health
communication tries to examine the influence and impact of communication on
different aspects of human behaviour and its relation to health care management
system along with different aspects of it e.g. social, cultural, economic, and personal.
The discipline of health communication works in tandem with different other
disciplines\textsuperscript{39}. These disciplines include Public Health, Health Education, Interpersonal
Communication, Group Communication, Mass Communication, & behavioural
sciences.
Part TWO of this chapter deals with the concept of public health, health promotion,
and health Education.
1.2.1 PUBLIC HEALTH

World Health Organisation’s (1986) health promotion glossary defines that Public Health \(^1\,^40\) is the science and art of promoting health among common public. It aims at the prevention of disease, and prolonging the life of people. This prevention of disease and prolongment of life is done through the well-coordinated and organised efforts of different segments of society. Going through the WHO (1996) definition of public health, we see that Public Health is the

A. SCIENCE AND ART OF
B. PROMOTING HEALTH
C. AMONG COMMON PUBLIC
D. WITH THE OBJECTIVES OF PREVENTION OF DISEASE
E. AND PROLONGMENT OF LIFE THROUGH
F. WELL-COORDINATED AND ORGANISED EFFORTS OF
G. DIFFERENT SEGMENTS OF SOCIETY

The public health programmes are aimed at empowering people to make use of available health infrastructure for attaining improved health conditions, as health is an important input in the process of overall development. The Public health infrastructure\(^40\) includes health-care facilities, health information and health communication. Health communication is an important input in any health infrastructure set-up.

Noar\(^41\) (2006) mentioned that mass media have been employed for public health programmes for a long period of time. Mass media are used to disseminate health communication messages to millions of people through newspapers, magazines, radio and televisions, internet etc. Public health programmes are used for a variety of health topics and customised health messages are developed according to the needs of audiences. In any given society, health requirements of kids, youth, mature, and old age people are different and diverse.

Wakefield\(^42\) (2010) suggested that to make a public health programme successful, Health communication messages should be a right mix of different factors i.e. following the local and social norms; and a persuasive message. Wakefield further said that health communication messages should be used according to the needs of the
audience, and should be in tune with the prevalent customs and traditions of the society. These messages must be persuasive.

The mass media are extensively used in public health programmes. Huge amount of money is spent yearly on productions and dissemination of health communication messages e.g. booklets, pamphlets, advertisements / article in newspaper, radio programmes and documentary / advertisements for television programs.

This intensive use of media is done at every stage of public health programmes with a view to achieve three main objectives:

1. Imparting of accurate health information
2. Changing the health beliefs and attitudes
3. Promoting a healthy behaviour and lifestyle

![Coughs and Sneezes Spread Diseases](image)

Figure 1.2.1

1.2.2 HEALTH PROMOTION

**WHO**\(^1,43\) (1996) mentioned that health promotion is a key component of Public Health. In fact, the very basic structure of public health is based on health promotion. Health promotion aims at promoting the health of each and every individual, in a family, which is part of a community in any given populations. Thus health promotion tries to transform the health of individuals, families, and communities. Analysing the WHO (1996) definition of health promotion, we find that health promotion:
A. Aims at promotion the health of
B. Each and every individual
C. Which is part of a family / community
D. In a given population

Main aim of health promotion is to transform the health of individuals, families and communities.

Wright et al\textsuperscript{43} mentioned that health promotion is at the core of public health activities. Main objectives of health promotion activities are to enhance the knowledge of common public about different prevailing health issues. By providing relevant and timely information related to prevailing health issues; health communication can play a crucial role in boosting the health promotion activities in a society into health promotion practice, a research and training infrastructure is needed to develop, model, and coordinate activities. For this purpose, centers for excellence located in academic institutions, national organizations, or research centers would be instrumental to meet scientific and practical needs.
1.2.3 HEALTH EDUCATION

Health education is an interdisciplinary social science\textsuperscript{44} that draws from many disciplines i.e. medical sciences, psychology, education, environment, biology, and other disciplines, with an objective of providing information and instructing individuals, groups, and communities to achieve & maintain better health. Health education is an important constituent of public health & health promotion.

World Health Organisation\textsuperscript{1,45} (1986) health promotion glossary defines health education as consciously constructed opportunities for learning involving some form of communication techniques designed to improve health literacy, that includes improving knowledge, and developing life skills, which are conducive to individual and community health……..

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure1_2_3.jpg}
\caption{WHO’s health promotion glossary explains that health education is the combinations of learning experiences, which are designed to help individuals and communities have improved control over their health. This improvement in health control is done by increasing their knowledge about the surrounding or influencing their attitudes towards health. This health promotion glossary further elaborates that health education is not only limited to the dissemination of health-related information, but also inspiring and motivating the populace, to take necessary action to improve health.}
\end{figure}
Green et al\textsuperscript{15} emphasized on the communication of information concerning the underlying social, economic and environmental conditions impacting on health, as well as individual risk factors and risk behaviours, and use of the health care system. Health promotion glossary further explains that main objective of health education is not only to increase knowledge about personal health behaviour, but also to develop skills demonstrating the political feasibility and organizational possibilities of various forms of actions to address social, economic and environmental determinants of health.

Going forward by the above mentioned definition of health education, we find that WHO emphasizes on the:

1. Dissemination of health related information
2. Inspiring and motivating the population
3. For taking necessary action (behaviour change)
4. To improve health, &
5. Maintain healthy behaviour / lifestyle

Motivating a large number of people simultaneously is a herculean task. That is done at several levels. By imparting health information and by addressing health issues, health education aims to empower individuals, groups, organizations, and communities, with an objective of positively influence their health behaviours.

HEALTH PROMOTION VS HEALTH EDUCATION

Health promotion and health education are two different concepts of public health. Unfortunately over the years they have been used interchangeably. Whitehead\textsuperscript{46} (2008) said health promotion and health education are two entirely different concepts. While health promotion emphasizes on environmental and socio-economic determinants and participatory involvements; health education focuses on empowering individuals and communities by providing information and teaching techniques to achieve better health. Health education is a vital component of health promotion. Health education aims for positively influencing the health behaviour of people by informing & instructing common populace about health & hygiene and other health related issues.
Here we can say that both health promotion and health education have common goals of achieving better health for people. Over last few decades mass media has been playing a crucial role in disseminating health information and increasing awareness about health education.

**MASS MEDIA & PUBLIC HEALTH**

Amezcua, et al.\(^{47}\) (1990) in their research found that mass media has been employed extensively by public health professionals for being the most powerful channel for persuading the audience, shaping their behaviour and them modifying the attitudes towards a accepting healthy lifestyle and rejecting the previously unhealthy practices and behaviour. Since media have the potential of reaching and influencing the mass audiences they are the best channel to be used for implementation of public health policies. Hornik\(^{48}\) said that mass media are used strategically to reach out to millions of target populations for the promotion of public health policies.

Wallack\(^{49}\) (1989) mentioned that the use of mass media is very economic for public health programmes. Media is capable of reaching a large number of audiences spread over different geographical locations simultaneously. Media reaches the globally scattered population in an instant, and delivers the health messages in a cost effective and efficient way.

Mass media can be very effective in public health programmes, as they provide the most important input of any health venture i.e. health information. Mass media can educate a large number of audiences through various types of health information and content related to the community’s health needs.

**MASS MEDIA & HEALTH EDUCATION**

Gupta et al.\(^{50}\) (2015) suggested that mass media impart necessary health information in our daily life enabling common people to take appropriate decision about different aspects of their lives; especially about health.

Evidences suggest that mass Media play a central role in informing & educating people about important events / changes happening around the world. Especially because media connect the audience to the world beyond their immediate reach. In
other words, media bring the world closer to the audience and increase their reach and access.

Mass media is one such institution which has the ability and potential to influence every individual’s life in a big way. We see that media has ability to influence, our behaviour, our culture and even it can affect our thinking and attitudes towards different issues in our daily life, Gupta⁵¹ (2006). Mass media is one such social organisation having wide reach and access that can influence the public by improving their health education level.

Across the globe public health promotion activities focus on health education to influence health behaviour of the target audiences.

By disseminating health information and increasing awareness, mass media plays a crucial role in health education. Media not only spread awareness, but also inform and educate people over a period of time. This ultimately helps in the change of attitude & behaviour of audience for achieving better health.

In other words, media is instrumental in bringing behavioural changes in knowledge, beliefs, and attitudes about health and healthy behaviours.
1.3.1 MASS MEDIA / MASS COMMUNICATION

Mass media are the vehicles of mass communication. Mass media have assumed a significant place in the mass society because they carry messages to the millions of people, scattered over a large geographical area, simultaneously.

Both the terms mass media and mass communication have been used interchangeably. Mass media, in short, is also called as media. Mass media is divided into THREE broad categories.

1. PRINT MEDIA
2. ELECTRONIC MEDIA
3. NEW MEDIA / WEB MEDIA

Let’s examine these media in brief: We will look into the unique characteristics of each media.

1. PRINT MEDIA

As the name suggests print media means the media, which serves the messages in printed format. It includes books, magazine, newspapers, posters, leaflets and other printed material.

The printed words, a carrier of knowledge, wisdom, and vital information, have been in vogue in different Asian countries thousands of years ago. However, commercial use of the printed words could become possible only after the invention of printing press by Johannes Gutenberg of Mainz (Germany).

During 20th century demand for print media increased phenomenally because of the increase in literacy in India. Many newspapers were launched, in different parts of India in vernacular languages as well in English languages, during last few decades.

A. NEWSPAPERS

During 20th century newspapers were the fastest growing print media in the world. They have been catering to millions of audiences every day. The newspapers provide information on almost every subject related to human being. Since newspaper is a medium of words, it is used mostly by the literate people.

Print media, especially the newspapers, are great source of information. They offer extensive news coverage and in-depth treatment of themes. They provide a larger
variety of coverage, through different kinds of writings, than any other media. They have some advantage over other media i.e. affordable, ease and convenience in using them. Newspapers are also called readers’ university. Newspapers have an advantage of convenience and ease in using them, as one can use the newspapers while on the move. Newspapers can also be kept for record sake. They can be used for future references. Besides providing lots of information, newspapers bring advertisements to the audiences. Besides being very cheap to buy, people can read newspapers whenever and wherever it is convenient to them – at home, in transit, in office, or back at home in the evening. That is not possible in the case of other media, as they are expensive and time scheduled. Moreover, the old issues of newspapers can easily be preserved in the libraries and also produced as evidence for future references and records.

B. MAGAZINES

Magazines also have the same characteristics as the newspapers. Generally speaking magazines have much more shelf life than the newspapers. Magazines are printed on more glossy and colourful paper. Apart from this, magazines cater to a niche segment of audience.

C. BOOKS

A book is a collection of literary work on printed papers about a particular subject. These papers are compiled together at one edge. Every paper is called a page. Historically, books existed long before the modern printing technologies. Books become part of mass media after the Gutenberg’s invention of printing press. Printing of papers made the books easily available for circulation. Books are still among the most respected means of communication. Books are dependable, durable, and convenient to use and easy for reference purposes. Holy books in different religions are preserved through ages and handed over from one generation to another generation.

D. PAMPHLETS / LEAFLETS

A pamphlet / leaflet is a loose piece of paper usually printed with some sort of information on it. It may be printed on one side or both sides. They are also used as a type of mass media.
2. ELECTRONIC MEDIA

Electronic media includes radio, television (Satellite TV, cable TV), and cinema etc. Besides informing people, electronic media provide entertainment to a huge number of audiences. The electronic media needs electricity to efficiently delivering messages across geographically dispersed mass audiences. Each medium of mass communication has some unique characteristics. Electronic media are quicker than print media in delivering the message to audiences. The users of electronic media need to be equipped with some technology to use the messages delivered electronically.

Let’s examine each of these electronic media in brief.

A. RADIO

Radio is among the oldest form of electronic media. Radio has the widest reach among the audiences. Radio can deliver the messages in the middle of sea, in the deep of jungle, and at the peak of a mountain. India’s national radio started in 1920s. Today the number of radio set users in India are in millions.

UNIQUE FEATURES OF RADIO:

- Unlike the newspapers, which can only be used by literate people, radio broadcast can use be used by the literate and illiterate audiences in their own languages
- Since radio mostly runs on battery, they can be used without electricity.
- Having a radio is relatively inexpensive than Television or Mobile or Laptop, So it is available to many people.
- One of the unique features of the radio is that radio is a medium of voice that comes through environment. And the user of radio can continue with his work while using radio as a medium of mass communication. This feature is not available with other mediums of mass communication.

B. TELEVISION

Television, popularly known as TV is one of the most important technological invention, which has shaped the life of people across the globe. TV is an audio-visual medium. TV has both sound and sight. A TV broadcast is conceived, produced, and
received in audio-visual terms. TV is a supreme medium of mass communication. With the support of the satellite technology, TV has reached in every corner of the world. Because of its reach, TV has widened the mental horizon of viewers. TV audiences now treat themselves as global citizen. In recent years TV has emerged as the most powerful medium of mass communication. TV audiences can educate themselves by viewing different programmes related to various themes and topics on health, education, environment, polity, business, weather, relationship etc.

C. CINEMA

Cinema is also considered as a medium of mass communication, as it has mass appeal and huge influence on the audiences. Cinema in India is mainly commercial media. It is a booming industry in India which gives employment to millions of people. Indian cinema industry is the second largest cinema in the world. Indian cinema industry produces movies in many languages. Indian commercial cinema is a huge source of entertainment to audiences, which is mainly a mix of fantasy and glamour. On an average, approximate 1000 movies, Barua et al. 53, are produced in India every year. In a cinema hall a few hundred people sitting together can watch a movie on the screen. In that way it is a form of group communication. When the same movie is released in a nation and shown on the screen across the nation at the same time, it is a form of mass communication. (For the purpose of this study, cinema is considered as the extension of TV).

3. NEW MEDIA / WEBMEDIA

New media are internet / web based communication technologies. Examples of web / new media are websites, blogs, YouTube, social media, and social networking websites etc. Social Networking Websites (SNWs) e.g. face book, Instagram, Twitter, WhatsApp, Snapchat etc. The cost of delivering messages through new media / web media is more economic than other media. New media has converge all the other media i.e. all the other media (radio, TV, newspapers, magazines, etc.) are now available on the new media. But for the users of new media it is still expensive due to following reasons:

a. It is highly individualised medium as it is used only on electronic gadgets
b. It needs internet / data connection to receive messages
c. Internet / data connection connectivity is not available in every part of country
d. Internet / data availability is concentrated mainly in metros/commercial centres
e. Internet / data is expensive and unaffordable / out of reach of common men

1.3.2 DYNAMIC NATURE OF MASS MEDIA

Mass Media is a dynamic and continuously evolving industry. Media landscape have changed a lot over last hundred years. Gutenberg’s invention played an important role in it. Gutenberg invented the first printing machinery, called printing press that added a new dimension to the already defined groups of communication- individual / intrapersonal / group communication.

The new dimension is called mass communication. Gutenberg’s invention of printing press helped mass societies to connect together. With the help of printing technologies, sellers of news, and commercial information were able to distribute the newspapers / commercial journals among the mass society and fulfil their information needs. It was the result of industrial revolution taking place in different part of the world.

Continuous research and innovations Development in new technologies have helped the media industry in spreading to other parts of the world. The advent of modern communication technologies have revolutionised the way of traditional communication practices, as the old societies converted into big and expanded new mass societies. People need new ways of communication to connect with everyone at the same time. Printing press enabled the industrialist and news sellers to make it possible to publish and distribute newspapers to people in the morning living in different part of a city/ town/ village.

20th century can be called the age of modern communication technologies or mass media technologies. These technologies have altered the ways, the world used to communicate in the previous centuries. The present century truly belongs to media communication technologies.

The present century is called the age of convergence. With the availability of internet, one can have access to any type of mass media from anywhere in the world. The internet has made it possible to view any TV programmes or watch any Movie, or
read any newspaper / magazine and listen any radio programme on the mobile / tablet phone sitting anywhere or even on the move.

1.3.3 MEDIA IS AN INTEGRAL PART OF OUR LIFE

Rapid development of industrialization gave rise to new technologies which were instrumental in bringing about a change in the process of communication. After world war-II, there was a tremendous growth and development of communication technologies which changed the very nature of our society. What we call mass media today, are the product of technologies operating directly in our society. Just close your eyes and think of life without newspapers, radio, TV, mobile phones and internet. Mass media have become an integral part of our life and our society. Media has been integrated so much to our daily activities that we cannot separate media from us, in any place. In fact, media has become integrated part of our personal life, professional life, social life. And even our leisurely life is unimaginable without media. Social scientists have found that an average person spends more time with the media than without them. Thus, the mass media touch nearly every one of us every day, personally, socially and culturally. The media are waiting to keep us company as they provide for us news and other useful information that helps shape our private worlds and our realities. They are an integral part of our daily life. Truly speaking, a whole new media culture is emerging in our life, which is governing and shaping our daily life. Biagi\textsuperscript{55} mentioned that an average adult spends more than half of his / her working time using media, which accounts more than their time spent in sleeping or working. We are so dependent on media that we cannot live without them as we all interact through media round the clock. In today’s world we can’t even think of living without communication & communication technologies. We communicate all the time e.g. 24 hours a days, seven days a week, 365 days a year. At home, in office, in the market, on the travel, in the dressing room, in the bedroom, even while we are sleeping, we are engaged in some kind of communication.
Whether it is intrapersonal (thinking/dreaming), interpersonal (talking/chatting), group communication; or mass communication (through some kind of media device) we are always engaged in some kind of communication activities.

The media are pervasive in any modern society. Be it home, office, markets, party, or function; indoor or outdoor, we are always surrounded by media e.g. Newspapers, magazines, radio, TV, internet, or mobile. From the moment we wake up in the morning until the time we go to bed at night; we use media for so many purposes. We use media for news & view along with other useful information that helps us in daily life. Contemporary society is permeated by the media, to an extent that the media may no longer be conceived of as being separate from cultural and other social institutions.
1.4.1 INVENTION OF TELEVISION

Twentieth century witnessed the invention of a lot of modern technologies, especially in the field of communication technologies. A revolutionary addition to this series of modern communication technology was the Television (TV). The experiments with TV broadcasting started in the USA in 1920s. But the available technology was not good enough to provide good quality pictures. In the next five years came the certain inventions like the picture tube, electronic camera and TV sets. They made it possible for NBC (national Broadcasting Co) in the thirties to setup a TV station in New York. BBC (British Broadcasting Corporation) too started a TV station in London. Satellite TV revolutionised TV broadcasting from 1962 with the function of first satellite called ‘Early Bird’. In 1965 came Intelsat, a big multinational communication system. Another such system, Intersputnik, was added in 1971.

Since then (1920s) TV has occupied its place in millions of households, Rai et al., in every nook and corners in the world. The numbers of TV viewers are actually much higher than the TV sets in the world, as one TV set is being watched by many people in a family. This number grows manifold when TV is watched at a public place like cafeteria / restaurant or a hotel.

Gordon (1965) who is considered as the prophet of media communication had mentioned that TV has converted this big world into a small global village, as far as we are concerned with the exchange of idea and thoughts.

McLuhan said that TV camera goes to every nook and cranny of this planet, and brings the live images to our homes. These images can be seen anywhere in the world. For example a person sitting in his / her drawing can watch the live football game happening in the far distant places. Muurgan (1990) opined that TV is one of the most revolutionary inventions of modern times, which shaped the way of looking at life of billions of people in different countries across the globe.

TV broadcasts are considered to serve many purposes in the mass societies. TV broadcasting has played a vital role in the shaping the opinion of people and changing their belief and attitudes about different issues in society by creating social realties on the small screen. While sitting in their own bedroom / drawing rooms people watch the world events as if these events are happening live in front them. Social scientists and
communication researchers have emphasised that TV is among the most powerful medium of mass communication in the 20th century. It has been instrumental in influencing the lives of millions of people and reshaping their daily life in society. The influence of TV in India is immense and yet to be nurtured, Rawat et al. 59 (1999)

1.4.2 UNIQUE CHARACTERISTICS OF TV

TV as a medium of mass communication has many unique characteristics. Due to these characteristics, TV emerged as one of the most effective medium of mass communication.

Following are the unique features of TV.

1. MEDIUM OF TWO SENSES
2. TV IS AN INSTANT MEDIUM
3. A HIGHLY CREDIBLE MEDIUM
4. A MEDIUM OF GLAMOUR
5. A MEDIUM OF CLOSEUP
6. A LIVING ROOM MEDIUM
7. DEMOCRATISING MEDIUM
8. WIDE REACH OF TV
9. TV CATERS ADVERTISEMENTS TO AUDIENCES

Here, we discuss these unique characteristics of TV in brief.

1. MEDIUM OF TWO SENSES

TV captures two senses i.e. visual and audio. It means that when you see something in front of your eyes; you tend to believe it without many arguments, even though it seems impossible. Unlike other mediums of mass communication (i.e. Newspaper / Radio), TV is a medium of two sense i.e. eyes and ears, while newspaper is only a medium of eyes and that too mostly for the literate people. TV conveys the message across the board for literate and illiterate as well. Radio is a medium of ears only, which affects only one sense i.e. ear. Being an instant medium affecting two sense
TV becomes one of the most influential, medium of mass communication.

Interestingly TV is more of visual and less of audio medium that makes TV a unique medium which has the maximum potential to affect audiences among all the media. Psychologists suggest that the potential influence of TV as a medium of mass communication is much greater than other mediums. They say that as far as a message is concerned eyes absorb more than that of the ear in a given period of time. The retention powers of eyes are more than the retention power of ears at a given time. This means eyes retain any message for a longer period of time than the ears retain the same message. What the eyes see on TV screen is felt by the mind as if it is happening in real life.

2. TV IS AN INSTANT MEDIUM

TV is a medium of immediacy. It shows the events live, as they are happening. Unlike newspapers, yesterday’s news is no news on TV. It would make TV look outdated. In audio visual terms, TV is an instant reporter. TV reports events and incidents here and now. You may remember the minute by minute reporting about important events from ground zero. TV reports in a fixed time schedule. Every programme is allotted a time slot. This time allocation must be respected both by the producers and the audiences.

3. A HIGHLY CREDIBLE MEDIUM

There is a saying in English 'seeing is believing’. This saying goes well with the TV, as TV makes us believe what we see on the TV screens. Many things which people may not otherwise believe, they believe it when they are shown on TV screen. TV is a great medium of mass communication. Satellite technologies have made it possible to beam the live images directly into our bedrooms and drawing rooms. TV is a highly credible medium of mass communication. It is also called a believable medium.

4. WIDE REACH OF TV

The TV has a wide reach. It reaches everywhere. The camera goes to every corner of this universe. TV camera goes under water, TV camera goes to the sea, and TV camera goes to wildest of jungles, TV camera shoots from the sky.
In fact, the TV has widened the mental horizon of human being. As a great educating medium, TV has helped us learn a lot about new and unconventional things happening around us.

5. **A MEDIUM OF GLAMOUR**

TV is a medium of glamour. We watch glitterati on TV i.e. fashion shows, and film festival, international personalities, and events, important conferences and festivals, sports meet, travel shows, world leader’s interviews and much more. Because of all this glitterati, TV is also called a magic box. We can watch all sorts of programmes at any time during the day. This round the clock availability of all types of contents makes the TV a magical medium for audiences. A very few people can resist the glamour of TV. Interestingly some critics also call the TV, an idiot box, as TV programmes don’t follow any set rules & regulations. TV caters all sorts of programmes to all types of audiences. That includes good, bad, sensible, nonsense, watchable, non-watchable etc.

6. **A MEDIUM OF CLOSEUP**

TV is also called a medium of close-up. It is an ideal medium for expressing reactions and interaction between people in a programme shown on TV, for presenting interview and discussions etc. Moreover, because of its small screen, it’s an ideal medium for small gathering. It is close-up of human faces, rather than showing longs shot of the subjects.

7. **A LIVING ROOM MEDIUM**

TV is mostly watched in the drawing room or living room, so it is also called a living room medium. TV is a medium of entertainment and information for family at home. TV brings cinema and theatre to the living room. Popular soap operas become living room theatre. Films and other theatre drama convert TV into a living room theatre. Earlier, people used to go to cinema and theatres to enjoy them. For that they used to get specially dressed to watch them. But now it is all available in the convenience of their homes.
8. **DEMOCRATISING MEDIUM**

TV is a democratising medium, Mithali et al.\(^6^2\), as it is available to everybody. Irrespective of ages, colour, cast, creed, religion; TV caters to the audiences of all age group. Be it kids, children, youth, mature or old people, everyone can enjoy the programmes sown on TV. TV being a medium of mass communication caters to all sections of society. It provides information and informal education to everyone in a democratic way.

9. **TV CATERS ADVERTISEMENTS TO AUDIENCES**

Besides catering news, views, and information about important topics in life; one of the important qualities of TV is catering advertisements\(^6^3\) to the audience. TV takes advertisements of different products and services to millions of people. This way TV is much more effective medium for companies to reach out to huge number of actual and potential customers than newspapers of hoardings.

**TELEVISION COMES TO INDIA**

Television comes to India rather very late, on September 15, 1959. For first few years, it was caught up in the debate whether a poor country like India could afford TV. It was asked debated that TV might alienate us from our cultural and social roots. It might spread consumerist culture. But, different pressure groups keep pressurising the Indian government to open its skies for TV. Ultimately, Indian government yielded and allowed to set up a TV station at Delhi on an experimental basis. The declared aim was to discover the potential of TV in achieving community development and formal education.

School TV (STV) was launched in 1961. It was meant to train science teachers of Delhi schools. The first rural programme ‘Krishi Darshan’ was launched from Delhi on Republic Day, January 26, 1967. In October 1972, Bombay’s TV station started functioning. ON pressure from public and TV set manufacturers, entertainment programmes were started on August 15, 1965. They were broadcast daily for one hour only. Today, we have thousands of TV channels beaming 24X7.different programmes
on news, business, weather, politics, foods, health, hygiene, relationships, entertainment etc.

1.4.3 THE LANDMARK SITE EXPERIMENT -1975

In 1967, a UNESCO study was conducted in Indian on satellite TV’s use in the country\textsuperscript{64}. The study concluded that India can and should use satellite for national development.

The SITE experiment of 1975 was a landmark experiment about TV and its influence on the society. The SITE -1975 The experiment was an experimental programme designed by the joint venture of ISRO (Indian Space Research Organisation) and NASA (National Aeronautical Space Agency of USA). The duration of SITE experiment was one whole year i.e. starting from August 1, 1975 and ending at July 31, 1976. The experiment was conducted in over 2400 villages in around twenty districts of 6 states of India. These states were: Bihar, Orissa, Andhra Pradesh, Karnataka, Rajasthan, and Madhya Pradesh.

The software content for these Television programmes were produced Remen et al\textsuperscript{65} keeping in mind the literacy level of the target audiences. These programmes content were created with the help of All India Radio (AIR). The programmes were aired through NASA satellite-ATS-6 (Applications Technology Satellites-6). During the SITE experiment The satellite was placed in the space orbit above India. Various international organisations supported the experiment.

These organisations were:
1. United Nations Educational Scientific & Cultural Organisation (UNESCO)
2. United Nations Development Programme (UNDP)
4. International Telecommunication Union (ITU)

The main aim of SITE experiment was to assess the efficiency of Television on the following main issues i.e.:

1. POPULATION CONTROL
2. IMPROVING AGRICULTURAL PRACTICES
3. IMPROVING SANITATION PRACTICES
4. PROMOTING NATIONAL INTEGRATION  
5. DISSEMINATION INFORMATION  
6. SPREADING AWARENESS  
7. EDUCATING PEOPLE ABOUT HEALTH & HYGIENE  
8. USING TECHNOLOGY FOR COMMUNITY DEVELOPMENT

The ultimate aim was to improve the quality of life in rural areas in the country. The SITE experiment was a grand success. Following were the achievements of the SITE experiment.

1. It showed that technology can be successfully used for informing people  
2. It proved that the use of media technologies in spreading awareness about health & hygiene  
3. It showed the use of technology in improving the life of people.  
4. It proved the proper use of technology can bring change in the attitude and behaviour of people  
5. It showed that TV is a great medium to influence the audience behaviour  
6. It proved that TV has a huge impact on the audiences

Besides, it helped India in developing its own satellite programme-called INSAT (Indian National Satellite System)

The SITE experiment was very successful in achieving its aims and objectives. The same types of experiments were used in various countries for spreading awareness; informing and educating the people about different socio-economic issues. Health issues were among them.

1.4.4 TV’s HUGE INFLUENCE ON AUDIENCE

TV has been very popular in Indian society. Many TV soap operas, and reality shows are among the most popular programmes in the world. Millions of people watch their popular programme at the same time in different cities of the world. Some of the most popular TV programmes in India and world are Big Boss, Big Brother etc. Now a person sitting in a remote village of Bikaner or Barmer District can watch a football match happening in the Amsterdam or Sydney in the comfort of sitting in their
drawing room.

Over last few decades TV have emerged as the most powerful channel of mass communication which has the potential to shape and change the life of people. KATZ (1973) in its study on TV found that TV is used by the audiences to satisfy their psychological needs. Besides fulfilling the psychological needs, TV also fulfils their social needs which include:

1. TV helps in family bonding i.e. bringing family members closer
2. TV is a stress reliever
3. TV helps escape the routine worries
4. TV is a great diversion tool.
5. TV helps us in having a surveillance on society

TV CONSTRUCTS SOCIAL REALTY

TV is a live medium of mass communication that creates reality in front of the audiences. Doordarshan’s epic serials ‘Ham Log, and ‘Yeh Jo Hai Jindagi’ are an excellent example of Indian TV’s immense popularity. Fiske et al. (1994) in their studies found that there is a strong interrelationship between the messages broadcasted at the TV and the daily life realities. TV has influence on the everyday life of its audiences. TV influences and shapes the culture of the audiences.

We remember the times when the Mahabarat and Ramayana serials were aired in India. During that time the roads and the markets become deserted and people prepone/postpone their social commitments. People used to believe these serial as true as if they are the divine words of Lord Krishna or the divinity of Lord Rama. Even the characters (the actor/actress) of these epic serial were treated with a great respects. Wherever these characters go in their social life, people revere them and follow them with devotion. Many of the viewers of these epic serials even touch the feet of these characters, and seek blessing in life.
TV IS A VERY POWERFUL MEDIUM FOR PUBLIC HEALTH & EDUCATION

Because of its wide reach and believability, TV has emerged as the most powerful medium of mass communication. The social scientists have been trying to tap this quality to project the world from their own perspective. As far as health education is concerned, TV has emerged as the most effective medium of mass communication in:

1. Educating people about health and hygiene, and
2. Inculcating new healthy behaviours,
3. Motivating them to abandon unhealthy practices, and
4. Changing the unscientific health beliefs and
5. Developing healthy attitudes for achieving better health.

All these traits make TV a very powerful medium for Public Health & Education.
1.5.1 HEALTH–SEEKING BEHAVIOUR

WHO\(^1\)(1998) health promotion glossary says that health behaviour is any activity undertaken by an individual (i.e. general public), regardless of actual or perceived health status, for the purpose of promoting, protecting or maintaining health, whether or not such behaviour is objectively effective towards that end. Health-seeking behaviour may also be explained as a state in which a person, in normal health, actively seeks ways to alter personal health habits and / or the environment to move towards a higher level of wellness.

Ward et al.\(^69\) have defined that health-seeking/care-seeking behaviours are any actions, done by an individual, which is aimed at finding an appropriate remedy. This individual; seeks this remedy for the perceived illness, he / she has at the time of taking the action. This definition of health-seeking/care-seeking behaviour by Ward & Thomas is based on an explanatory model of particular cultural and its specific effects on the health-seeking/ care-seeking behaviour of an individual.

In general, we can say that any activity undertaken by an individual that has an impact on his/her health. Here, it is important to differentiate between the general behaviour and the health-behaviours which are specifically aimed at maintaining / improving the current state of health.

The concept of studying health seeking behaviours has evolved with the course of time and has ultimately become a tool for understanding how people employ the healthcare systems in their respective demographic, socio-economic and cultural circumstances. Health-seeking behaviour is a complex process and it is influenced by a lot of factors including an individual’s psychology, & its socioeconomic status. Besides, Education, income, age, & social position also affect the health-seeking behaviour.

Health-seeking behaviour may be explained as an area of study which tries to understand the efforts undertaken by an individual in order to maintain good health that includes physical, mental, and social aspects of health.
1.5.2 FACTORS AFFECTING HEALTH-SEEKING BEHAVIOUR

Mahindra\textsuperscript{70} claimed that health-seeking behaviour starts with a decision-making process that depends on many factors i.e. economic, cultural, social, political etc. Following are the main factors affecting health-seeking behaviour.

1. ECONOMIC
2. CULTURAL
3. SOCIAL
4. POLITICAL

Let’s Discuss these Factors in Brief:

1. ECONOMIC

Economic factors are the most important factors affecting the health-seeking behaviour of general public in any given society. Economic factors generally means money involved in treatment, cost of availing treatment/health service. It is often seen in rural communities that people tend to avoid the treatment of disease, which cost a huge bill\textsuperscript{70} on their pockets. Simultaneously, the availability of free treatment of chronic diseases also motivate the people to go for the chronic and lengthy treatments. The treatment of TB in India is an example of it.

2. CULTURAL

Culture plays a great role in the health behaviour in any community. Many families in different part of the world don’t allow women to go outside for any treatment, especially in traditional societies. For example a pregnant woman generally doesn’t go out for hospital for out for the delivery\textsuperscript{71} of the kid. It is managed at home with the help of midwife.

3. POLITICAL

In many parts of the world political decision-making has a huge impact on the health-seeking behaviour of general public (a common man). Due to the political decision making, many countries across the globe provide complete treatment of many diseases to their residents only; while this facility is not available to expatriate\textsuperscript{72} people working in these countries.
4. SOCIAL

Being a social institution, mass media play an important role in affecting the health-seeking behaviour of general public. Mass media constantly keep sending messages to people, through different channels, throughout a day. These channels may include TV, Radio, Newspapers, internet, & social media sites. Electronic gadgets e.g. Laptop, Desktop, Tablet Phones, mobile phones etc; through different web-based applications, have huge impact on general public’s health-seeking behaviour e.g. Facebook, Twitter, Snapchat, Instagram, WhatsApp, Telegram, & different other apps like S-health etc.

As mentioned above, health-seeking behaviour is governed by a complicated process entailing many factors. Having huge influences on audiences, media play a key role in all these health-seeking activities. Mass media is one such institution, which affects every aspects of human life. It affects our culture, our behaviour, and even our thinking patterns, suggests Gupta. In his work Gupta mentioned that media affects every segments of society. Whether it is a business class, or service class, men, or women; media affects each and everyone in the society.

Amina et al mentioned that each year millions of people suffer from different preventable and treatable diseases / illness across the globe. Majority of these people die for the lack of biomedical treatment in time, as their health seeking behaviour is determined by several socio-cultural factors.

POSITIVE & NEGATIVE ATTRIBUTES

Health-seeking behaviour may be called as a state in which an individual (irrespective of his health conditions) seeks ways to alter his / her personal health habits / surroundings with the objectives to attain better health / wellness status using health related information through mass media, to improve an general public’s health and wellness. Based on attributes, health behaviour or health-seeking behaviour can be divided into two broad categories, e.g.

1. POSITIVE ATTRIBUTES
2. NEGATIVE ATTRIBUTES.
1. POSITIVE ATTRIBUTES

Positive attributes are those which promote healthy behaviour among the general public. These attributes are considered healthy for human being. For example:

A. Eating healthy food
B. Quitting tobacco use
C. Encouraging protected
D. Adopting active lifestyle
E. Personal hygiene etc.

2. NEGATIVE ATTRIBUTES

Negative attributes are those which promote negative behaviour among the general public.

A. Encouraging alcohol consumption
B. Encouraging tobacco use
C. Promoting sedentary lifestyle
D. Encouraging unprotected sex
E. Neglecting personal hygiene
F. Promoting immoral conducts etc.

1.5.3 HEALTH-SEEKING BEHAVIOUR STUDIES

Health-seeking behaviour is a crucial element in overall health management of a person, yet it is often overlooked. Health-seeking behaviour is influenced by several socio-economic and psychological factors. These factors are generally categorised as determinants of health-seeking behaviour. Media, being a social institution has a huge impact on health-seeking behaviour of general public.

Many health-seeking behaviour studies have been conducted in different parts of the world. Some studies focussed on the effects of economic elements on the health-seeking behaviour of general public. Some studies focused on the effect of cultural practices on the health-seeking behaviour of general public. Mallberry mentioned that the culture has a vast influence on the health-seeking behaviour of people. The culture defines the
perception about health in any culture. Illness/sickness is defined and expressed differently in different cultures. Some studies focused on the effect of family decision-making on the health-seeking behaviour of people. In many tribal communities family decision making play an important role in health-seeking behaviour. Normally it is the head of the family who decides about the type of health-care sought. Some researchers focussed on the impact of availability of health services on the health-seeking behaviour of general public. Anselmi et al., in their studies concluded that the availability of healthcare facilities increases the possibilities for healthcare seeking behaviour. Interestingly, availability of huge referral facilities have no significant effects on health-seeking behaviour; while increased availability of equipment and staff raise the possibility of seeking healthcare. On the other hand, some studies focused on the impact of cost of health services Miller et al. on health-seeking behaviour of an individual found that higher cost of availing healthcare facilities have a huge impact on health-seeking behaviour of an individual. In their study they fund that None of the studies or a very few studies have tried to find a relationship between the impact of mass media on the health-seeking behaviour of general public.

The Health Belief Models (HBM) were the initial studies trying to explain the health-seeking behaviour of an individual (i.e. general public).

1.5.4 HEALTH BELIEF MODEL
Health belief model (HBM) was first developed in the 1950s by social psychologists Hochbaum, Rosenstock and Kegels, working in the US public health Services. It attempts to explain and predict health behaviour of people by focussing on the attitudes and beliefs of general public. Glanz et al. mentioned that till today Health Belief Model (HBM) is the most commonly used theoretical framework on the area of public health, health promotion, and health education. They are used as a guideline for the researchers who are interested in knowing general public’s behaviour related to health related issues in society.
HBM was developed in the middle of 20th century (1950s). Main concept of the HBM is based on the fact that health-behaviour / health-seeking behaviour of an individual is mainly decided by his/her personal beliefs or perceptions about the occurrence of illness/ and the availability of treatments or strategies to reduce the occurrence of illness.

Becker et al. (1984) said that HBM is a conceptual framework, which is used by researchers, to understand the health behaviour of an individual and the possible causes of non-compliances of recommended health behaviour. The HBM provides a framework to assess the possible compliance or non-compliance of health behaviour.

Initially HBM provided four construct to predict human behaviour related to health issues. These are:

1. PERCEIVED SERIOUSNESS OF ILLNESS
2. PERCEIVED SUSCEPTIBILITY OF ILLNESS
3. PERCEIVED BENEFITS AND
4. PERCEIVED BARRIERS

Let’s discuss all these construct in brief
1. **PERCEIVED SERIOUSNESS**

It tries to explain about an individual’s belief / perception about the seriousness of the illness. It is generally believed that perception about seriousness of illness is based on an individual’s knowledge or some personal experiences about health information or illness. This knowledge or experiences may be acquired throughout his lifespan as a result of his upbringing in family / educational system/ religious institution/ cultural practices or general public’s interaction with different social organisations.

2. **PERCEIVED SUSCEPTIBILITY**

It is another important construct of HMB, which motivates an individual to adapt or not adopt particular health behaviours. General perception is that the greater the perceived risk, greater are the chances of adopting a particular behaviour to reduce the risk. For example women / people use sun lotion to protect them from any sun burn and keep their skin in natural shape and avoid any damage to the skin. Jain et al\(^8\) in their studies mentioned that there is growing trend among young women to use sunscreen to prevent their delicate skin from being damage, due to the continuous expose to sun. They are easily influenced by the advertisement shown on TV screen by different sun lotion/ skin cream producers. It is understandable that an individual is prompted for particular health behaviours according to his / her perceived susceptibility to the illness. Higher is the perception of susceptibility to a particular illness, higher are the chances to adopt a preventive behaviour.

It is often noticed that when a perceived susceptibility is linked with seriousness, which might result in a serious threat, people are more prone to behaviour changes. Media as a social institutions helps in the perception of a particular illness, media also provides clues / suggestions to adopt particular health behaviour.

Shail et al.\(^8\) (2010) found that often the great perceived threat motivates people to change behaviour. The advertisement campaign by Delhi government about the outbreak of Dengue fever, due to stagnating water around our homes; and its consequence motivated people to keep a check on the stagnating waters in, and around their homes. This resulted in prevention of outbreak of dengue fever in many areas in Delhi.
3. **PERCEIVED BENEFITS**

The assumption of perceived benefits are about how an individual thinks of benefits accruing from a new benefit. It may be related to leaving / changing an already existing behaviour or adopting a new behaviour. Jonathan\(^84\) (2014) says that tribal women in Meghalaya hesitated in the mammography unless they were made aware of the benefits of detecting the chances of breast cancers at earlier stages. Interestingly they were sceptic of the side effects of the mammography. They were under impression that mammography would spoil their body shape their beauty.

4. **PERCEIVED BARRIERS**

We have to understand that changing a person or bring a change in someone’s behaviour isn’t an easy task. HBM tried to address this by understanding the perceived barriers in modification of health behaviours. According to this construct, if an individual wants to start a new behaviour or change an old behaviour, he / she should have more weightage than old behaviour i.e. the consequence of adopting new behaviour should be outweighed by changing old behaviours. These perceived barriers are the hurdles in adopting / starting a new behaviour. For example women suffering from obesity, are often advised to lead an active life. That includes morning and evening walk to remain active. The culture comes as a hurdle in this walk for the women in small towns and rural areas in remote places of India. Soni\(^85\) (2014) suggested that the cultural practices prohibits the women walking alone in some part of India, especially in rural areas and far flung areas. In these areas women are supposed to be accompanied with a male to hang around. Later on, one more construct was added by social scientist Bandura\(^86\) in the original Health Belief Model (HBM). This construct was Self-efficacy.

5. **SELF-EFFICACY**

Bandura in his work suggested that people who have faith in their own ability to do something, they only try to adopt new behaviour. It means those who don’t have faith in their own ability generally don’t take up the things which they feel they cannot take
do it, Amrita\textsuperscript{87} (2014). Fasting during Navratis (Hindu festival of nine days-celebrated twice in a year, mainly in north & western India) is an example of it.

Amrita suggested that people try to change a particular behaviour if they are sure that they can successful compete the change of behaviour undertaken by them e.g. Nine-day continuous fasting during Navratri fasting is an uphill task, which is usually impossible for first timer.

It is also seen that people try to take those behaviour change also which provide them with some flexibility in the execution. For example if someone is provided with the option of keeping fast on alternate days during Navratri, many people would be agree to undertake it. And many more people would try to do that.

CUES to ACTION

Apart from the above-mentioned construct, HBM suggested some cues to action that have huge influences on an individual’s behaviour change. These are:

- **PEOPLE**
- **EVENTS**
- **THINGS THAT MOTIVATE**

Graham\textsuperscript{88} (2002) says that some of the cues are sickness of a close friend or relatives/ a family member / or contents in media, public health campaigns, mass media campaigns, advice from friends etc. are some of the cues that prompt a person to adopt a particular heath behaviour.

For example during scorching summer media campaigns suggest people to consume plenty of water and cover full body to avoid heat-strokes. Media campaigns\textsuperscript{89} bring awareness to the common men and tell them the perceived seriousness, susceptibility, benefits & barriers. that motivates an individual’s health behaviour.

Similarly health messages mentioned on the labels of different products help people to take a certain action. Ali\textsuperscript{90} (2002) mentions that a reminder message from a health care provider or warning published on a product acts as a modifier to health behaviour of an individual (i.e. general public).
1.5.5 THEORIES OF BEHAVIOUR CHANGE

Various theorists and communication researchers have tried to understand the relationship between different components of mass communication and the effects of media on social changes, and behavioural changes on audiences. In the wake of continuous research on communication theories, the development communication emerged as an alternative for shaping the behaviour of people for developmental purposes.

Among all these theorists – two communication researchers emerged as the pioneer on developmental communication. These were:

1. DANIEL LERNER
2. WILBUR SCHRAMM

DANIEL LERNER

In his work ‘the passing of traditional society’\(^91\), Daniel Lerner mentioned that how media is useful in shaping and changing the behaviour of people for the sake of national development. His work on modernisation theory was pioneer in the field of developmental communication.

WILBUR SCHRAMM

Improving upon the work of Daniel Learner, his contemporary communication researchers, Wilbur Schramm\(^92\) in his research work tried to explain the influence of mass media on the developing societies.

These researchers tried to explore the studies of media development and developmental communication in developing societies.

The fundamental principle on which these two theorists worked upon was that media can help in producing desirable changes by carefully designed and delivered media messages. They established that media is very helpful in the socioeconomic development of any society.
SOCIAL LEARNING THEORY

In his work on social learning theory, Alburt Bandura\textsuperscript{93} mentioned in *Psychological Modelling: Conflicting Theories* (1971), that most powerful type of learning among societies is based upon the observation.

Bandura’s work focused on the learning process among human being. He found that imitation is a general tendency among human being, especially among children. Kids imitate the behaviour of their parents and teachers. They blindly follow what they see on TV and in their surroundings. Here we see that media plays the roles of a teacher for different segments of people in the society.

![Diagram](image)

**Figure 1.5.2**

In his work Bandura’s\textsuperscript{94} (1969) focussed on principles of behaviour modifications. He focussed on the ways and principles how the behaviour of general public can be modified in a directional way. He mentioned that through strategically coordinated efforts, one’s behaviour can be modified according to desired results. When people observe something happening in front of them they learn it quickly. In other words we can say it the learning by direct experiences, which is adopted by people quickly. This phenomenon, which we have believed for ages, Bandura tried to prove by his research work in a scientific and systematic way. Bandura mentioned in his work
social learning through imitation\(^{95}\) that for mass audiences, learning through media is an easy and efficient way. For this to happen media messages need to be designed and prepared in such a way that is it customised according to the target audiences. Social learning theory is practically applied in several part of our daily life. Especially in the practical classes of different educational and training centres, where the instructor demonstrate the work to the learners / students. Based on the direct observational experiences, these learners / students keep an account in their minds and reproduce it again when they are told to do it. Similarly we see that media have a huge impact\(^{96}\) on its audiences. It is proved by several copycat incidents of crime taking place in the different part of country. He proved that media is an effective tool in any democratic society to motivate citizens to participate in the process of national development.

**SOCIAL COGNITIVE THEORY**

Social cognitive theory (SCT) is one of the greatest works of Albert Bandura, professor of psychology, with the Stanford university. Bandura’s work *Social Foundations of Thought and Action: A Social Cognitive Theory*\(^{97}\) published in 1986 is the extension of his earlier work Social Learning Theory. Bandura’s (1986) works is very useful in social context in understanding the behavioural aspects of human being. Bandura tried to demystify the relationship among social learning patterns, communication process and its effects on human behaviour.

![Figure 1.5.3](image)

**Figure 1.5.3**
Social Cognitive Theory, also known as SCT— is commonly used in communication studies, tries to assess the learning process of an individual.

Social Cognitive Theory explains that the learning by an individual is directly related to the way he / she interacts in a given social context. The SCT explains that people follow the behaviours they learn though direct experiences, or represented through the media.

SCT says that a change in health behaviour depends upon three main factors. These are:

1. **SELF-MOTIVATIONS**
2. **GOALS OF THE INDIVIDUAL**
3. **EXPECTED RESULTS**

SCT further said an individual has its own way of learning & remembering the things from his /her surroundings or society. They further use this behaviour for subsequent actions in their own personal or social life.

Social cognitive theory provides us the basis on which environmental or social factors have an influence on people’s behaviour. Mass media play an important role in changing human behaviour role in society by influencing the thoughts of an individual (Bandura, 1986).

Bandura said that media has played an influencing role in the society, and tries to explained with the help of a model that there is a triadic reciprocal relationship between psychological functioning of an individual, environmental / social factors, and behavioural changes.

SCT emphasised that in any given society, an individual is self-conscious and actively involved with their social environment. They are not just the passive receiver of the media messages. Bandura said that they are self-reflecting and self-regulating well. They adapt the things, which they feel can bring useful changes in their own life.

**THEORIES OF REASONED ACTIONS (1980)**

The theory of reasoned action tried to understand the impact / influence of mass media on the recipients of the media messages.
THEORY OF REASONED ACTION\textsuperscript{99} was developed by Martin Fishbein with his contemporary psychologist Icek Ajzen in 1980. They proved that there is a direct relationship between the apparent behaviour and belief system of a person. The theories of reasoned actions suggested that people want to follow the action with a positive intention.

THEORY OF PLANNED BEHAVIOUR (1988)

The theory of Planned Behaviour was developed by PSYCHOLOGICAL SCHOLARS Ajzen\textsuperscript{100} (1985), who tried to establish a link between the belief system and the behavior.
behavioural action of a person. Through his research work he tried to understand how we can change the behaviour of the people. Ajzen explained how our belief system tend to influence us in a particular way to behave in different situation. Ajzen’s work was the extension of scholarly work of Fishbein (1980) theory of reasoned action. Ajzen’s work tries to predict the intended behaviour\textsuperscript{101}, as he was of the opinion that the behaviour of people is planned and intended.

The Social Learning theory explains how environment influences the behaviour of an individual. Sandy et al.\textsuperscript{102} (2009) suggested that Social Learning theory is particularly relevant to study the impact of mass communication because the description and portrayal of social life is a frequent subject in media content. Similarly, Altschull\textsuperscript{103} found that the mass media’s large presence has a big impact on our lives. The media have a role to play as a political force and it has the power to influence different aspects of our life in a big way. Health is one important aspect of an individual’s life.

Oanh\textsuperscript{104} observed that Males and females both have different attitudes about health-seeking behaviour and sickness patterns. Oanh mentioned that unlike male members, female members are not independent in selection of health services, and they are dependent on the male members of their family or community. Here economic status of a female member plays an important role in the health-seeking behaviour in the community.

### 1.5.6 KNOWLEDGE ATTITUDE AND PRACTICE MODEL

KAP model, also called as KAP survey, is another development in health behaviour enquiries. KAP Model exhibits the relationship between the knowledge attitude and practice behaviour of an individual. Knowledge attitude and practice have an interdependent relationship and thus constituting a triad trying to target the behaviour change of a person. KAP model have gained importance in recent years because of its importance in health care management.

KAP surveys also called KABP surveys (Knowledge, attitude, Behaviour, Practice) model tries Hausmann\textsuperscript{105} to establish the fact that Knowledge about the facts / issues
leads to the change in attitude towards certain issues in life. Stronger the attitude or belief about a certain issue would in turn bring it into practice of a person. Three elements of KAP model are:

1. **KNOWLEDGE**

Knowledge means the ability to comprehend, gain, and process relevant information about an issue and use them according to the required skill and experiences.

2. **ATTITUDE**

Attitude means an inclination towards a particular belief / behaviour in use and organise the thoughts and idea into and organised and coherent form.

3. **PRACTICE**

Practice means the application of knowledge and skills leading to a particular behaviour. Good practices are related to improvement of living conditions for an individual in the society.

**Figure 1.5.6**

Action competence : KAP Model

Action competence includes:
- knowledge about the problem
- an attitude towards the problem
- the ability to act to solve the problem
Health communication frequently uses mass media to play the catalytic role as change agent in the society. By informing and educating people about various health issues in the community, media provides knowledge and thus help bring a change in the attitude towards certain prevailing contemporary conditions / practices leading to better health practices in life. Mass media being a social institution plays the role of mass educator in the society, and in turn leads to the improvement of knowledge of the individual which changes the belief of them and ultimately results in better health practices. Several studies have shown a direct relationship between knowledge, Attitude, and practice (improved health behaviour) of an individual (general public).

MEDIA IS ALL PERVERSIVE

In today’s technology driven world we are surrounded by technology, and use different technological gadgets in our day-to-day life. When we wake up in the morning, many people like to get latest news so they switch on to the TV or radio while sipping the morning tea/coffee. Even in washroom while performing the call of nature or taking bath, many of us like to use mobile / tablet to get connected with friends/ relatives / business clients around the world. Besides, during commuting to office we use mobile / other gadgets to reply to messages to our SNW connections / emails. After reaching office / business we use different gadgets e.g. desktop/laptop/ other instruments to perform our daily work. In evening when we reach back home we use TV / Radio for entertainment, or other purposes. Biagi\textsuperscript{106} (2003) found that in today’s technology driven world, an individual who uses these gadgets spends more time with these gadgets than the time he spends in sleeping or for his work or business. Moreover advertising we see / listen / read on different media channels affect our habits / attitudes / thinking / beliefs related to many different issues, which are part of our daily life. Health is an issue among many of them, which can be achieved through a constructive use of entertainment / information / advertising.

Sharma\textsuperscript{107} (2015) suggested that print media (i.e. Newspapers, Magazines, leaflets, brochures etc.) plays an important role in informing and educating the people about
important events related to their daily life. Sharma further suggested that newspapers are among the most important sources of health related information around the world. The print media provide detailed information on almost every topic related to health.

1.5.7 HEALTH AS A SOCIO–PERSONAL TRAIT

Health doesn’t exist in isolation; it is a socio-personal trait. In fact, our health is determined by so many factors around us. These factors include different social and economic opportunities, which we have access to, the facilities and support we get from our homes, our neighbour and communities, and the qualities of services, which are provided\textsuperscript{108} to us e.g. the purity of air, we breathe in; the cleanliness of the surroundings we work and live, the cleanliness of water we consume; the way we interact in society; the way we live peacefully and celebrate our festivals cordially; the way we follow our culture.

Human being is a social animal and health is an important constituent of our life. Humans are influenced by social factors and ingredients e.g. it is seen that people often do overeating during the marriage sessions, consumption of sweets is often increased in festival seasons, people gain weight during long fasting month (Muslim holy month of Ramadan) / nine days fasting during Hindu festival of Navratri’s; while they are supposed to lose weight\textsuperscript{109} during fasting.

In short we can say that health doesn’t exist in isolation. It is necessarily a social phenomenon, and media being a social institution has a huge impact on the health-seeking behaviour of general public.

Health is reflected from everything we do\textsuperscript{110}, we enjoy, we follow, we pursue. Be it our homes, offices, colleges, market, social gathering or anywhere else, we follow our healthy schedules, we try to take care of ourselves by eating right, by consuming prescribed foods, by avoiding certain products; and following certain routine.

We follow our health by doing daily activities that start in the morning and goes on throughout the day. We follow it by taking prescribed immunization, and we follow our health by undergoing recommended treatment when we fall sick\textsuperscript{111}.
1.5.8 MASS MEDIA AS AN IMPORTANT SOCIAL INSTITUTION

In today’s world mass media is called the fourth pillar of any democratic society, and considered as an important social institution. As a social institution media informs, entertains & educates the people (general public). Moreover, media creates awareness among people about different issues by presenting the facts before the audiences. Media also plays the role of a facilitator by fostering consensus on matters of national importance through debates & discussions.

Different theories of mass media & Theories of behaviour change suggest that mass media has an immense impact on the behaviour of an individual (i.e. general public). Mass media have the potential to shape & modify the traditions & customs in a society or community on the whole and of influence the behaviour of an individual in general. Behaviour change theories suggest that by informing or educating the people media can play the role of an educator in moulding / shaping the opinion of an individual. Mass media can help people in motivating to lead healthier life by spreading health awareness, and influencing the people about different aspects of health & traits of it.

Media helps promote healthier lifestyle by motivating and informing common men, in improving their lifestyle.

Hillmand et al. [112] suggested that human mind is affected / influenced by direct or indirect observations from the environmental factors. These influences may affect them in an organised or unorganised way.

Heather et al. [113] in his studies concluded that since last century, the media has been used for garnering support for political decisions and influencing the mind-sets of people for political purposes and introducing new changes in the society. Apart from providing the information and knowledge about many topics, they have been used for promoting the cause of the publishers or the rulers, among the populace, in any given society.

Irrespective of the outcome of their behaviour change, they choose to follow the behaviour propagated by the media. Media provides ideas for a huge variety of people living in different social, cultural, and geographical environments.
1.5.9 MASS MEDIA AND BEHAVIOUR CHANGE

Different theories of mass media, and behaviour changes suggest that mass media has an immense impact of the behaviour of general public. Mass media have the potential to shape & modify the traditions & customs in a society or community on the whole; and of influence the behaviour of an individual in general. Behaviour change theories suggest that by informing or educating the people media can play the role of an educator in moulding / shaping the opinion of an individual, a family, a community (general public). Midgley suggested that human mind is affected / influenced by direct or indirect observations from the environmental factors. These effects or influence may affect them in an organised or unorganised way.

Aubrey et al. 114 in their studies concluded that since last century, media has been used for garnering support for political decisions and influencing the mind-sets of people for political purposes and introducing new changes in the society. Apart from providing the information and knowledge about many topics, they have been used for promoting the cause of the publishers or the rulers, among the populace, in any given society. Irrespective of the outcome of their behaviour change, they choose to follow the behaviour propagated by the media. Media provides ideas for a huge variety of people living in different social, cultural, and geographical environments.

IMPACT OF MASS MEDIA AS SOCIAL INSTITUTION

Mass media as a social institution affects every aspects of human life. It affects our culture, our behaviour, and even our thinking patterns, suggests Gupta Y K (2006). Being a social institution, mass media plays an important role in affecting the health-seeking behaviour of general public. Mass media constantly keep sending messages to people through different channels throughout a day. These channels may include TV, radio, newspapers, & Internet.

Even mobile phones have huge influence on an individual’s health-seeking behaviour through different social networking websites & applications like Facebook, Instagram, WhatsApp, & Telegram.
Health-seeking behaviour is governed by a complicated process, which is again heavily influenced by many social & cultural practices. Having huge influences on audiences, media plays a key role in all these health-seeking behavioural activities. Altschull\textsuperscript{103} (1995) explains that different mass media are largely present in our daily life and they have a big impact on us. These media play a great role as political and social force and they the power to influence different aspects of our life in a big way. Health is one aspect among them. By informing the important things about the health related issues, media helps in bringing the behavioural changes among the people. These changes may be related to change in the previous unhealthy habits, or wrong beliefs, or may be related to preoccupied attitudes, or aimed at reinforcing the existing beliefs of habits. Media have wide reach and access to influence millions of audiences, geographically scattered over thousands of kilometer in different territories, across the geopolitical boundaries. With these qualities media are intensively employed in health education programmes.

\textbf{MEDIA AS A CATALYST FOR BEHAVIOUR CHANGE}

Research studies conducted world over have suggested that media, through right mix of messages, have the potential to produce behaviour changes among the target populace.

Media play the role of change agent for positively influencing the health behaviour of people. In fact media can acts an instrument for reinforcing the existing health belief and behaviour. In short, we can say that media is instrumental in bringing behavioural change about knowledge, and attitudes about health and healthy behaviours.

Besides, curvy, shiny n smooth figure of female models/ movie stars attract the teenagers / housewives to have similar figures, and toned body. Those teenager girls and housewives start following the media advices to achieve that toned shaped & curved body with glowing skins. Similarly, a toned strong body with six pack abs/ biceps of Hollywood stars attract millions of youth across the globe. These youth start buying the advertised products\textsuperscript{115}, endorsed by these celebrities on different media platforms.
On the other hand, glowing & softy skin of movie actress forces vulnerable audiences to believe on the advertisements broadcast on the screen. Most of these vulnerable audiences believe that these characters themselves use the endorsed products and their glowing skin is the result of the use of the product advertised\textsuperscript{116}. These audiences try to imitate these advertisements /models by following their advices in the shape of buying / consuming the products / services they are endorsing. It reflects that media is a great catalyst for behaviour change.

Collins\textsuperscript{117} et al. (2003) suggest that media plays the role of change agent. It can influence the behaviour of people for the sake of better health by adapting to preventive measures which stop the spread of diseases e.g. use of condom to stop HIV/ AIDS. By informing & educating about different health issues, media help promote healthy lifestyle and positive behaviour changes among the common public.

Mass media is instrumental in affecting knowledge and attitudes of people for adopting / maintaining healthy lifestyle. It is a well-known fact that media influences our behaviour toward health belief by informing and educating people. Mass media interventions have great impact on general public’s knowledge, attitudes and behaviour towards health and healthy lifestyle.

Brauwn\textsuperscript{118} (2012) mentioned that on average, people spend more time each day with the mass media than without them. All type of mass media- books, newspapers, magazines, radio, music, movies, TV available 24X7 on one small device (mobile, tablet, laptop/ Personal computer) through internet, anywhere and anytime.

When someone spends so much of time with media, he / she is bound to be influenced by the media. This influence is so huge on human behaviour that we can apparently feel it. Globally media plays a key role in altering the belief system in any society

**IMPACT / INFLUENCE OF MASS MEDIA ON HUMAN BEHAVIOUR**

Impact and influence of media generally means the change in human behaviour after being exposed to the media content. In some cases these changes in behaviour are
instant just after consuming the media content, while in some cases these changes in behaviour occur after prolonged consumption of the media content.

This change in behaviour may occur at several levels. This may reflect in change of attitude / belief system of an individual (i.e. general public) or a change in a particular habit in a routine situation or in the decision-taking at a particular point in life.

With more and more studies published in the media about the side effects of use of chemicals / artificial ingredients in different consumer products, demand for herbal / Ayurveda products have increased phenomenally. This demand is much higher, especially in health related products / cosmetics products. On one hand, social media is highlighting the side effects of chemicals, on the other hand they are propagating the benefits of use of herbal products for self-consumption. The skyrocketed sales of Patanjali herbal products are an excellent example of it. This way media has a great impact on the audience buying behaviour aimed at improving health\textsuperscript{119}. 


THE CONTEXT OF THE STUDY

1.6.1 INDIA: UNITY IN DIVERSITY

India is a vast country with a land frontier of 15,200 km and its coastline is approximately 6100 km. Area-wise India is 7th largest country in the world. The population of India is approximately 122.1 crores (2011 census). India is a federation of 29 states and 7 union territories. The administrative capital of India is Delhi. This vast population of India has unique features.

1. They speak different languages
2. They belong to different tribes/ cast/ communities
3. They write different scripts
4. They follow different cultures
5. They have different faiths, and religions
6. They observer different customs and traditions
7. They eat different food
8. They wear different costumes
9. They follow different signs & symbols for communication
10. They come from different socio-economic backgrounds
11. They live in different geographical territories etc.

A MINIATURE WORLD

India spreads from Kashmir in the north to Kanyakumari in the south. From Gujrat in the west to Manipur in the east. Despite its spread, India reflects unity in diversity of different cultures. Indian is a unique blend of diverse cultures. Every region in India has a different and unique geography, culture, language, traditions and customs. Irrespective of the region, north, south, east, and west; the Indian-ness of the people gets exhibited clearly in the Indian way of looking at the life. Unity in diversity of India is the plurality of people. We have seen above that India represents a miniature world where people from different background live together with peace and harmony. Plurality is the hallmark of Indian society.
1. ETHNIC PLURALITY
2. LINGUISTIC PLURALITY
3. RELIGIOUS PLURALITY
4. SOCIO-ECONOMIC PLURALITY

1.6.2 RAJASTHAN: LAND OF SOCIAL, CULTURAL, & GEOGRAPHICAL DIVERSITY

Here is brief description about Rajasthan.

![Figure 1.6.1](image)

Among these 29 states of India, Rajasthan is the largest state of India. Rajasthan is situated in the western side of India. The state of Rajasthan was born on 30\(^{th}\) march 1949. Jaipur was declared the state capital of Rajasthan.

**A BRIEF HISTORY OF RAJASTHAN**

Rajasthan has a long & rich history. The history of Rajasthan dates back to the habitants\(^{121}\) of world famous Harrappan civilisation. Rajasthan has witnessed the rise and fall of many of historical dynasties & hundreds of the kings. So, it also called the land of the Kings.
Rajasthan witnessed the arrival of Aryans around 2000 BC. Aryans came to India from central Asia. The Rajasthan was under the regime of Mauryan dynasty around 400AD. Mauryan kings ruled a large part of India for a long period of time. A lot of development happened in Rajasthan during Mauryan rule. Rajasthan bore the brunt of ravaging attacks by Hoons and Scythians. During these attacks lots of properties were damages and lives were lost.

After the rule of Scythians, Rajasthan witnessed the rise of Rajputs, who were the results of genetic development of Indo- Scyttians. Rajput kings ruled the state of Rajasthan for hundreds of years. After few hundred years, different tribes of Rajputs were emerged across the Rajasthan. All these Rajputs tribes are known for their warrior-like qualities across the India.

During last few hundred years different Rajput kings have ruled numerous big & small kingdoms across the Rajasthan.

GEOGRPHY

Geographically, Rajasthan is located in the north-western corner of India. The border of Rajasthan touches Punjab in the north side, while it touches Uttar Pradesh & Haryana in the north-eastern side. In southern side Rajasthan border touches the state of Gujrat; while in the eastern side, Rajasthan border touches Madhya Pradesh. Aravalli range of mountains passes throughout the Rajasthan.

THAR DESERT

The western border of Rajasthan touches the international borders with Pakistan. The famous Hollywood movie ‘Border’ is based on this long international border of Rajasthan. Rajasthan accommodates one of the greatest deserts in the world, called Thar Desert. Thar Desert is spread over two countries i.e. India & Pakistan, Thar Desert is world’s 17th largest desert. The total area of Thar Desert is 320,000 Sq. Km. Thar Desert is world’s 9th largest subtropical Desert.

WEATHER

Weather of Rajasthan is generally dry and hot. Rajasthan is among one of the hottest and driest regions of India. Winters are pleasant in Rajasthan. During winters nights are biting cold while the days are pleasantly warm.
Monsoon usually visits Rajasthan during the month of July, August, and September. Rains in desert areas are scanty, while in the Aravalli ranges rainfalls are moderate to high.

The World famous hill station Mount Abu is also situated in the state of Rajasthan. Mount Abu is also known for historical Jain Temples. The flora & fauna of Rajasthan is quite rich & diverse.

DEMOLYGRAPHICS OF RAJASTHAN


TOURISTS ATTRACTIONS

Rajasthan has a lot of tourist’s attraction in every nook and corner of the state. Rajasthan is also known for its luxurious palaces, huge forts, old temples, shrines, museums, wild life sanctuary, zoo, flora & fauna. More than anything Rajasthan is known for its lively and hospitable people. Rajasthan is a vibrant state with lively people. Some of the popular tourist attractions in Rajasthan are: Amer Fort, Ajmer Sharif Dargah, Ana Sagar Lake, Bhrama Temple, Birla Mandir, Jagdish Temple, Chittor Fort, Chand Baori, Mehrangarh Fort, Hawa Mahal, Keoladeo National Park, Jaipur Zoo, Khatu Shyam Ji Temple, Ekling Ji Temple, Lake Pichola City Palace, Jai Mahal Jaisalmer Fort, City Palace, Jantar Mantar, Kumbhalgarh Fort, Dilwara Temples, Junagarh Fort, Sariska Tiger Reserve, Jaigarh Fort, Fateh Sagar Lake, Pushkar Lake, Jag Mandir, Umaid Bhawan Palace, Govind Dev Ji Temple, Pushkar Lake, Nahargarh Fort, Ranthambore National Park, Nakki Lake, Jaswant Thada, Moonsoon Palace, Bada Bagh, Shilpgram Udaipur, Saheliyon Ki Bari, Krrni Mata Temple, Raj Mandir Cinema, Lalgarh Papalce, Sambhhar Salt Lake etc.
CHAPTER I

IMPACT OF MASS MEDIA ON HEALTH-SEEKING BEHAVIOUR OF GENERAL POPULATION, SEX RATIO & LITERACY RATE

<table>
<thead>
<tr>
<th>SR. NO</th>
<th>NAME</th>
<th>INDIA</th>
<th>RAJASTHAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total Population (Crores)</td>
<td>121.01</td>
<td>6.86</td>
</tr>
<tr>
<td>2</td>
<td>Population Density (Per Km)</td>
<td>312</td>
<td>165</td>
</tr>
<tr>
<td>2</td>
<td>Sex ratio (per 1000)</td>
<td>940</td>
<td>926</td>
</tr>
<tr>
<td>3</td>
<td>Total Literacy rate (%age)</td>
<td>74.04</td>
<td>67.06</td>
</tr>
<tr>
<td>4</td>
<td>Male Literacy Rate (%age)</td>
<td>82.14</td>
<td>8051</td>
</tr>
<tr>
<td>5</td>
<td>Female Literacy Rate (%age)</td>
<td>65.46</td>
<td>52.66</td>
</tr>
</tbody>
</table>

Table 1.6.1

Infant mortality rate of Rajasthan is 55; while the maternal mortality Ratio is 318, which is much higher than the national ration.

![Map of Rajasthan](image)

Figure 1.6.2

ADMINISTRATIVE DIVISIONS OF RAJASTHAN

For the sake of administrative convenience, the state of Rajasthan is divided into following divisional headquarters, districts, blocks, and villages:

A. Seven (07) Divisions (Divisional Headquarters)

B. Thirty (33) Districts.
These are further divided into Blocks and Villages:

i. 237 Blocks

ii. 41352 Villages

Administrative Divisions of Rajasthan are following: AJMER, BIKANER, JAIPUR, JODHPUR, KOTA, and UDAIPUR.

1.6.3 MASS MEDIA SCENARIO IN RAJASTHAN

All types of medium of mass communications are available in almost every nook and cranny of the state of Rajasthan. Besides disseminating all types of news & advertisements in Rajasthan, media is spreading awareness about various socio-economic issues. Media has been useful in empowerment of women in Rajasthan. Media has proved its powerful role in the eradication of numerous superstitious practices in the remote area of Rajasthan. Media has also played an influential role in public health by increasing the level of awareness about health hygiene even in far-flung areas of Rajasthan.

NEWSPAPERS / MAGAZINES

Almost all the national / local dailies are available in different districts of Rajasthan. International dailies / periodical are also available at selected places. People can be seen reading newspaper in different places in Rajasthan. Different hotels/ resorts / restaurants coffee & tea shops keep many copies of daily newspaper / magazines / periodicals to attract the customers.

TV CHANNELS

TV has been a very effective tool of mass communication among Indian masses. TV has made a deep inroad into the drawing rooms of millions of people in Rajasthan. TV is among the most popular mass media in Rajasthan. Almost all the popular national & international TV channels, including news channels, entertainment channels, business channels, information channels, are available everywhere in Rajasthan.

RADIO

Different national and community radio channels are working round the clock in Rajasthan. Radio, has proven its potential in eradication of many unhealthy customs and traditions by spreading modern knowledge in remote areas of Rajasthan.
People from every walk of life enjoy the availability of radio in Rajasthan. In fact, radio is an integral part of life of many people in Rajasthan.

**LIST OF POPULAR MEDIA AVAILABLE IN RAJASTHAN**

<table>
<thead>
<tr>
<th>NEWSPAPER</th>
<th>MAGAZINE</th>
<th>TV CHANNELS</th>
<th>RADIO</th>
<th>INTERNET / SNWS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rajasthan Patrika</td>
<td>India Today</td>
<td>Times Now</td>
<td>All India Radio (AIR)</td>
<td>Email / Internet</td>
</tr>
<tr>
<td>Dainik Bhaskar</td>
<td>Outlook</td>
<td>ZEE NEWS</td>
<td>Alwar ki Awaaz</td>
<td>Facebook</td>
</tr>
<tr>
<td>Dainik Navjyoti</td>
<td>The week</td>
<td>CNBC Awaaz</td>
<td>95 FM Tadka</td>
<td>Twitter</td>
</tr>
<tr>
<td>Nafa Nuksan</td>
<td>Femina</td>
<td>India TV</td>
<td>Radio Mirchi Jaipur</td>
<td>Instagram</td>
</tr>
<tr>
<td>Seema Sandesh</td>
<td>Grihshobha</td>
<td>BBC World</td>
<td>Red FM 93.5</td>
<td>WhatsApp</td>
</tr>
<tr>
<td>Nav Bharat Times</td>
<td>Mera Rajasthan</td>
<td>Al JAzeera</td>
<td>Ano Radio Banasthali</td>
<td>Telegram</td>
</tr>
<tr>
<td>The Times of India</td>
<td>Manak</td>
<td>Sony TV</td>
<td>Gyan Vani</td>
<td>LinkedIn</td>
</tr>
</tbody>
</table>
INTERNET

India is one of the fast emerging markets for internet products. Due to the spread of technology, Internet is available in almost every village of Rajasthan. Of course, in commercial places and metro cities, internet signals are good; while in remote villages internet signals are still a problem. Yet, people from every segments of life can be seen using internet on different gadgets e.g. mobile, tablet computers, desk top etc.

CONVERGENCE

Through convergence, internet is providing all the media everywhere in Rajasthan. Be it a newspaper report, magazine article, radio programmes, TV serials, popular movies, breaking news, weather reports, business information or chatting with friends / relative; Internet is facilitating everything to a common man in every nook and corner of Rajasthan.

HEALTH SCENARIO IN RAJASTHAN

Over last few decades, governments of Rajasthan have tried to provide basic health facilities to the local community levels in every remote villages of Rajasthan. A huge infrastructure of health facilities is developed across Rajasthan. Here is a brief list.
PARTICULARS ABOUT HEALTH FACILITIES

<table>
<thead>
<tr>
<th>NO</th>
<th>PARTICULAR</th>
<th>REQUIREMENT</th>
<th>WORKING</th>
<th>SHORTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Primary Health Centres</td>
<td>2326</td>
<td>1528</td>
<td>798</td>
</tr>
<tr>
<td>2</td>
<td>Sub-centre</td>
<td>15172</td>
<td>11487</td>
<td>3685</td>
</tr>
<tr>
<td>3</td>
<td>Community Health Centre (CHC)</td>
<td>581</td>
<td>382</td>
<td>199</td>
</tr>
<tr>
<td>4</td>
<td>Doctor at PHCs</td>
<td>1528</td>
<td>1755</td>
<td>*</td>
</tr>
<tr>
<td>5</td>
<td>Obstetricians &amp; Gynaecologists at CHCs</td>
<td>382</td>
<td>14</td>
<td>368</td>
</tr>
<tr>
<td>6</td>
<td>Paediatricians at CHCs</td>
<td>382</td>
<td>11</td>
<td>371</td>
</tr>
</tbody>
</table>

Table 1.6.3

Government endeavour have been on making modern health facilities to every citizen of Rajasthan.

PARTICULARS ABOUT HEALTH WORKERS & ASSISTANTS

<table>
<thead>
<tr>
<th>SR - NO</th>
<th>PARTICULARS</th>
<th>REQUIREMENT</th>
<th>WORKING</th>
<th>SHORTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Health Worker (Male) at Sub Centres</td>
<td>11487</td>
<td>1592</td>
<td>9895</td>
</tr>
<tr>
<td>2</td>
<td>Health worker (Female) at Sub Centres &amp; PHCs</td>
<td>13015</td>
<td>17638</td>
<td>--------</td>
</tr>
<tr>
<td>3</td>
<td>Health Assistant (Male) at PHCs</td>
<td>1528</td>
<td>201</td>
<td>1327</td>
</tr>
<tr>
<td>4</td>
<td>Health Assistant (Female) at PHCs</td>
<td>1528</td>
<td>1420</td>
<td>108</td>
</tr>
</tbody>
</table>

Table 1.6.4
### PARTICULARS ABOUT PARAMEDICAL STAFF

<table>
<thead>
<tr>
<th>ITEM NO</th>
<th>PARTICULARS</th>
<th>REQUIREMENT</th>
<th>WORKING</th>
<th>SHORTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Radiographers at CHCs</td>
<td>382</td>
<td>260</td>
<td>122</td>
</tr>
<tr>
<td>2</td>
<td>Pharmacist at PHCs &amp; CHCs</td>
<td>1910</td>
<td>551</td>
<td>1359</td>
</tr>
<tr>
<td>3</td>
<td>Laboratory Technicians at PHCs &amp; CHCs</td>
<td>1910</td>
<td>2639</td>
<td>*</td>
</tr>
<tr>
<td>4</td>
<td>Nursing Staff at PHCs &amp; CHCs</td>
<td>4202</td>
<td>11926</td>
<td>*</td>
</tr>
</tbody>
</table>

Table 1.6.5

(Source: RHS Bulletin, March 2012, M/O Health & F.W., GOI)
SIGNIFICANCE OF THE STUDY

1.7.1 HEALTH IS WEALTH

An old proverb says ‘Health is Wealth’. It means the health is considered as an important & and valuable trait like money, gold or any other valuable assets. In fact, health is among the most valuable asset, an individual possess in his / her lifetime. A person cannot enjoy happiness or success without being in a good state of health. Even a wealthy person, without good health, cannot enjoy its wealth.

Interestingly, in today’s fast life people are busy in chasing their dreams or earning money & or achieving a particular level in their career. People are too busy in maintaining a balance between career goals & family expectations. In all these hustles and bustles of life; they often ignore their health in pursuit of wealth.

1.7.2 HEALTH IS A BASIC HUMAN RIGHT

The World Health Organisation’s constitution mentions that the health is a fundamental human right of every human being WHO (1986). WHO constitution says that each and every individual on earth has the right to the attainable standard of health. It is a basic right of every human being. This right to health includes access to affordable, accessible, appropriate & timely healthcare facilities. Who emphasises that health is an important input in development.

We generally believe that everyone want to be in a perfect shape of body and mind. Every one of us wants to accumulate the wealth of health. No one wants to have a lesser state of health than a perfect one. So, why do we lack in maintaining a good health in our daily life? This is a question haunting the healthcare professionals, policy makers, thinkers and social scientists.

Despite being an important part of life, health often takes a back seat. Here are a few examples of how people ignore their health.

1. Insufficient / improper sleep (e.g. less than 8 hrs/ day )
2. No exercise / less exercise
3. Inadequate water intake for body
4. Consumption of tobacco / alcohol
5. Eating unhealthy / imbalanced diet
6. Depression / stress in life.
7. Noise pollution in life
8. Uninvited obesity

The list is endless. Yet, most of us never take time to think about it. Most of us never think that in pursuit of our trivial things in life; we are ignoring the precious gift of God to human being i.e. health.

Since health is one such trait associated with the life of each and every individual; policy makers, government officials, academicians, researchers, and social scientists are all concerned to study different factors affecting the health-seeking behaviour of an individual (i.e. general public).

USES & GRATIFICATION THEORIES OF MEDIA

Uses & Gratifications theories of mass media have suggested that people use mass media for certain specific purposes. Over last couple of years, social scientists, media professionals, lawmakers etc. have tried to tap the potential of mass media in shaping / modifying the human behaviour by providing them accurate & appropriate information. For example wash hands campaign has been immensely successful in India.

Uses and gratification theories show us that across the globe, people rely heavily on media for information related to their daily needs. In fact mass media cater to a huge population on earth for their information needs, which are an integral part of their daily life. And health related information are among them.

MEDIA IS A POWERFUL SOCIAL INSTITUTION

We know that mass media is a very power social institution. An individual’s exposure to media has a great impact on the personality and life of an individual. Unfortunately, till now, no studies are done on the topic of “Impact of mass media on the health-seeking behaviour of general public.” We use media all the time i.e. 24 hours a days, seven days a week, 365 days a year. We use media at home, in office, in the market, on the travel, in the dressing room, or in the bedroom or any other place. We are
always connected with media. No one can live without media as we communicate round the clock.

Advancement in the field of media and technology has made people glued to using media & communication through some sort of technological gadgets. A huge chunk of an individual’s daily time is invested in using these gadgets. The media are pervasive in any modern society. Be it home, office, markets, party, or function; indoor or outdoor, we are always surrounded by media e.g. Newspapers, magazines, radio, TV, internet, or mobile. From the moment we wake up in the morning until the time we go to bed at night, we use media for news & views along with other useful information that helps us in daily life.

Studies show that exposure to media influences the decision-making process of a person. Mass media, as an important social institution, plays a vital role in our daily life. By providing immense information on any topic under the sky e.g. education, sports, jobs, health, history medicine, science, entertainment, technology, politics, relationship, etc.; media empowers an individual to take appropriate decision in life. It is the media who provides information to common men about the free treatment of TB, Eczema, or other disease. It is the media who provide information to people that AIDS is not a contagious disease. So the patients of AIDS need not be outcast. Pictures of hand wash campaign & Swachh Bharat campaign are given below.

![Steps to Wash Hands Properly](image_url)

**Figure 1.7.1**
Interestingly, to be effective these health information / health related information needs to be customised according to the target audiences. Also to be acceptable, this customization should be in tune with the local cultural beliefs and practices. A huge population depend upon media for their health information requirements. It is the mass media, which provides tips to people to take precautionary measure to save them from seasonal changes, cold wave / heat wave, monsoon related diseases etc. It is the media who spread awareness about the dengue fever, swine flu, H1N1 virus etc.

**Figure 1.7.2**

MASS MEDIA & MASS SOCIETY

Mass society and mass media are intertwined with each other in many different ways. Some social scientists feel that whatever media produces is the sheer reflection of society; while some researchers feel the other way round i.e. society tries to emulate what media caters to the society. The debate is ever ongoing. Yet, one thing is certain that mass media and mass society are inseparable and both influence each other in many ways.

Roy\(^{126}\) mentioned that an average adult spends more than half of his / her working time using media, which accounts more than their time spent in sleeping or working.

Weather they are walking or they are in office, or they are at home; or they shopping in mall, or meeting someone at a ceremony, or waiting at a doctor for their appointment, most of the people are using media. They may be chatting with someone, or writing / replying an office mail, or watching video, or reading latest news; they are in using media & communication technology. This regular interaction of human being with technology has great influence of human health.
HEALTH-SEEKING BEHAVIOUR STUDIES

Health-seeking behaviour is a complicated process. In fact, health-seeking behaviour of general public is the result & reflection of so many factor / prevailing conditions in a society. These conditions are dynamic and fluid. So far, numerous studies have been conducted in various parts of the world to understand the impact & influence of different socio-economic and cultural factors on the health-seeking behaviour of general public.

Most of these studies focussed on the economic cost or the availability of health services on the health-seeking behaviour of a person. A few studies focussed on the cultural aspect of health-seeking behaviour.

Health-seeking behaviour is the outcome of a combination of different factors that are part & parcel of daily life of an individual. These factor include different socio-economic factors (e.g. age, income, education, profession etc.), personal beliefs, social & cultural norms in a society etc.

Besides, availability & cost of healthcare services also play a vital role in determining the health-seeking behaviour.

MAJOR PUBLIC HEALTH ISSUES IN INDIA

Dengue, Diarrhoea, Chicken Gunia, AIDS/HIV, Malaria, Hepatitis, Typhoid, Anaemia in women, low female birth rate, adulteration in food, air & water pollution, sound pollution, use of chemicals in food items, child health & hygiene, women health & hygiene, sedentary life styles of people, radiation from the mobile towers, glare coming out of mobile phones/ tablet phones / laptops, fake or spurious drugs, lack healthy lifestyle habits among kids (i.e. not brushing the teeth, not washing hands before meals etc.), not wearing seat belt, not wearing helmet for two wheel drivers etc. are among a few public health issues in India.

This list is endless. Yet, we see that media has been playing an important role in highlighting these important public health issues and spreading awareness among common public.
NEED FOR THE STUDY

India is an ancient country and it has its own different traditional & folk media. Since ages, these media have been playing an important role in spreading information and raising the level of awareness about socially relevant issues. In the ancient times this was done through folk media, writing on walls, and inscription on the stones. During modern times, media have taken the role of mass educators\(^1\). Researches show that media have a great impact on almost every aspect of people’s life. Be it social, political, economic or cultural aspects. Media has been influencing people deeply.

In twenty-first century, media has become an integral part of our daily life. Media is so embedded in our daily life that we cannot imagine life without the media. On an average day, an individual interacts with media more than anything else. This regular interaction with media has far-reaching impact in our daily life. Studies have revealed that media is changing our culture in many different ways. Media is shaping our behaviour; media is changing the way we communicate, the way we live. Since technology has to stay, we have to bear with the technology in our daily life. Yet, we have to find the influence technology is having on us. This study tried to explore the impact of mass media on the health-seeking behaviour on general public. Over the last couple of years, a great amount of work is done in India, and across the globe in the areas of role of communication & its importance in the healthcare industry. Researchers have tried to find out that different approaches in communication in healthcare industry can make or break the communication process. For example: differences in the behaviour, belief, language, tone, attitude, and culture of the patients, and the healthcare providers may have serious impact on the outcome of the interaction between the two. For this reason, I feel that the enquiry into the field of health communication is very important. This study would provide valuable inputs for the health professionals, policy makers, researchers and common men that how media is used for public health.
ENDNOTES


CHAPTER I

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