

## **Role of media in reproductive health: an empirical study**

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**Abstract:** *Women play a very important role in our society. They are one of the significant force behind maintaining the health and well being of their communities. Even women have the right to the enjoyment of the highest attainable standards of physical and mental health. The enjoyment of this right is vital to their life and well being and their ability to participate in all areas of public and private life. However, health and well being elude the majority of women as they are still facing many reproductive health issues. Women are subject to particular health risk due to inadequate responsiveness and lack of services to meet health needs related to reproduction. The quality of women's health care is often deficient in various ways, depending on local circumstances. Women are often not treated with respect, nor are guaranteed privacy and confidentiality, nor do they always receive full information about the options and services available. The present paper is the outcome of a study that was conducted in Irongmara Village in Cachar district of Assam which analytically explores the media exposure on women reproductive health issues specifically for the women residing in the village. As required by its nature, the main objective of the paper is to assess how effective the modes of media are educating the women of the area on the reproductive health issues. The paper is based on survey method where 105 women from Irongmara village were randomly selected and interviewed in order to gather the data. Hence, an assessment of the interrelation between the socio-economic background and mass media exposure and awareness about reproductive health care of women in Irongmara village of Assam was carried out in the research study.*

**Keywords:** *Media Exposure, Reproductive health, Family planning, Public Broadcaster*

### **Introduction**

Women health issues have attained higher international visibility with the help of media. While targeted policies and programs have enabled women to lead healthier lives, significant gender-based health disparities remain in many countries. Knowledge regarding women's health and family planning is a universal phenomenon now. But it has a long way to go down in practicality in society. Acceptance level is low due to religious, education level, traditional values and beliefs (Rao, 1947).

In the developing or less developed countries, women are in very deplorable condition especially in the rural areas. So, special attention and interest must be given to the women. Due to biological reasons they pass through different phases of life and accordingly face different types of health problems.

The magnitude of women reproductive health problems in India is immense. Women also suffer silently from a large number of reproductive health issues that are termed as the silent

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emergency. This understanding leads to women's health researchers and activists focusing more on women's health, especially in the field of reproductive health (Agarwalla, 1992).

Women in the rural areas are mostly less educated and conservative in their thoughts. They face unhygienic living conditions over-populated living areas and low-income source. Beliefs and traditional mindsets craft the society they live in. It is a true fact that the health status of rural women is not well (Chauhan,1990). Nwagwn (2011) and Meeker et. al. (2007) were of the view that poor access to health information in low- and middle-income countries is a major challenge in society, particularly among rural women and adolescent girls.

With regard to women's literacy, it can affect reproductive behaviour, the use of contraceptives, children's health and education, proper hygiene practices, access to jobs and women's overall status in society. In educating society, female health care providers can play an important role in recognizing their health and nutritional needs. Improving the health and nutrition structure in India requires empowerment of women at all levels (Buckshee, 1997).

There have been number of studies to substantiate that mass media impacts public health, knowledge, attitudes, beliefs and behaviors (La Croix et. al., 2014, Naugle, 2014, Robinson, 2014). Meadows and Foxwell (2011) examined the role of community broadcasting in health and social well-being and suggested opportunities for health care agencies to consider the potential of community broadcasting in health campaigns. Thus the researchers have attempted to assess the interrelation between the socio-economic background and mass media exposure and awareness about reproductive health care of women in Irongmara village of southern Assam.

### **Objectives of the Study**

The study is based on the following objectives:

- i) To know the socio-economic background of the respondents.
- ii) To access the media habit of the respondents.

### **Methodology**

The researcher has employed survey-based research. The Interview Schedule was used to collect the information from the respondents. The researcher further used Purposive Sampling Technique for the selection of the ward of the concerned village. The sample was collected from the voter list and the data were gathered through the convenient sampling technique. The researcher had carried out research on 105 childbearing women of the selected village.

### **The Study Area**

The proposed study is located in Cachar district of Sothern Assam. This village comes under the Dholai constituency of Cachar district in Assam. The rationale of selecting Irongmara village is that, it is one of the oldest village and closer to the Central University as compared to other village areas of Cachar district. After the opening of the Central University, this area is becoming significantly important, as many outsiders are residing in this place. Moreover, being a flood prone area people face immense hardship. Thus, the researcher wanted to assess if mass media has played any significant role in promoting awareness about family planning and reproductive health care in this region since the government has introduced many schemes for the upbringing of women in connection with reproductive health.

**Operational definition of the terms**

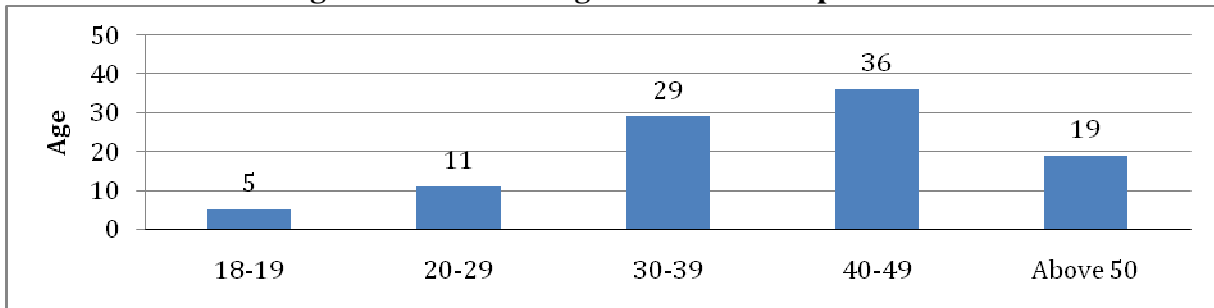
- i. Mass Media Exposure of Women: Mass media exposure of Women refers in terms of their exposure to the print media i.e. newspaper, access to audio-visual media i.e. television, the access to audio medium i.e. radio
- ii. Reproductive Health: Reproductive health is a state of complete physical, mental and social well-being, and not merely the absence of reproductive disease or infirmity. Reproductive health deals with the reproductive processes, functions and system at all stages offline.

**Findings**

**Social Background of the Respondents**

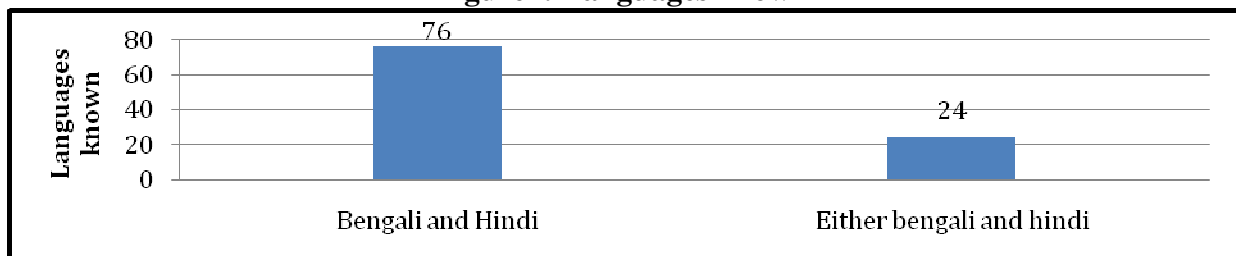
The findings reveals that among 105 respondents as shown in Figure 1, 5% of the respondents belongs to 18-19 years age groups, 11% respondents belongs to 20-29 years age groups, 29% respondents belongs to 30-39 years age groups. 36% respondents belong to 40-49 years age groups and 19% of the respondents belong to the above 50 years age group. All the respondents belonged to Hindu religion.

**Figure1 : Social Background of the Respondents**



92% respondents have Bengali language as their mother tongue followed by Hindi speaking majority. In respect of languages known, 76% of respondents know two languages both Bengali and Hindi followed by 24% of the respondents who knows one language either Bengali or Hindi as shown in Figure 2. In term of class status, 66% respondents belong to lower middle class while 34% respondents belong to low class.

**Figure2: Languages known**

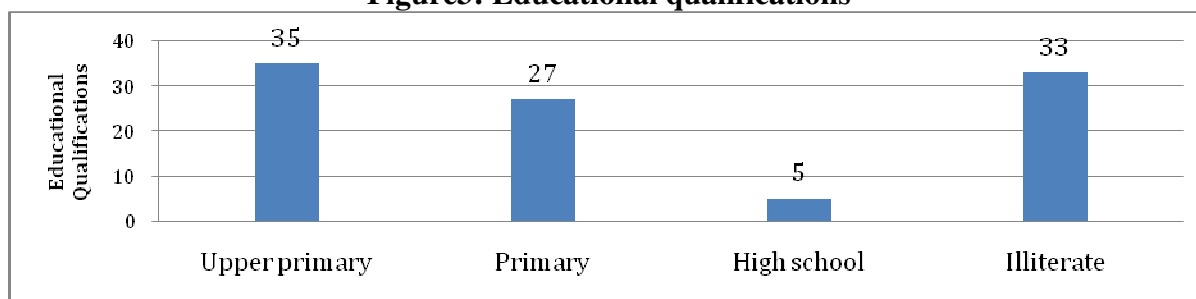


With respect to educational qualification the findings reveals (Figure 3) that among 105 respondents, 35% respondents studied up to upper primary i.e. class VIII, 27% of the respondents studied up to primary level and 5% of the respondents studied up to high school and

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by 33% of the respondents are illiterate. In terms of occupation of the respondents 85% of them were involved in domestic chores while 15% were housewives.

**Figure3: Educational qualifications**



Regarding the family structure of the respondents shown in Table 1, 67% of the families were in the nuclear structure where as 33% of the families were in the joint structure. Among 105 respondents, 19% of the respondents have married before 18 years while 81% married on or after 18 years of age. Among that 79% of the respondents have more than 2 children while 21% have either 2 or 1 children.

**Table 1: Family structure**

Nuclear Family	Joint Family	Married before 18 years	Married on or after 18 years	More than 2 children	2 or 1 children
67%	33%	19%	81%	79%	21%

In terms of respondents residing in Assam State, 94% are residing in Assam since childhood whereas 6% had migrated from other states viz Bihar, Jharkhand etc.

As shown in Table 2, regarding type of ownership of the house, 26% have their own house while the 74% are residing in rented home. In terms of source of drinking water among 105 respondents, 98% uses supply water and river water while 2% uses underground water. Regarding fuel used for cooking, 34% of the respondents cook food by LPG gas cylinder, 18% uses kerosene stove while 48% uses handmade oven. In terms of monetary savings of the respondents, 81% have accounts with chit funds followed by 8% who have bank accounts and 5% have post office accounts whereas 6% of the respondents do not have any account.

**Table 2: Households details of respondents**

House ownership		Source of drinking water		Fuel for cooking			Monetary savings			
Own house	Rented home	Supply water	Under-Ground water	LPG	Kerosene	Oven	Chit fund acc	Bank acc	Post office acc	No acc
67%	33%	98%	2%	34%	18%	48%	81%	8%	5%	6%

## Mass Media Exposure

### Traditional Media

As shown in Table 2, among 105 respondents, 93% of the respondents have attended *Kirtan* whereas 7% have not. Among 105 respondents, 94 % have attended *Ojha* dance whereas 6% have not. Among 105 respondents, 15% have attended meetings whereas 85% respondents have not attended the same. Among 105 respondents, 18% have attended speeches while 82% have not attended. Among 105 respondents, 83% have not attended campaigns whereas 17% have attended.

**Table 3: Traditional media exposure**

Kirtan		Ojha dance		Meetings		Speeches		campaigns	
Attended	Not attended	Attended	Not attended	Attended	Not attended	Attended	Not attended	Attended	Not attended
93%	7%	94%	6%	15%	85%	18%	82%	17%	83%
Themes on family planning/reproductive health care									
0	NA	0	NA	0	NA	0	NA	17%	NA

Among the 93% who have attended *Kirtan*, none have listened to any theme on family planning/reproductive health care. Among 94% respondents who have attended *Ojha* Dance, none have seen any theme on family planning/reproductive health care. Among the 15% who have attended meeting none have seen any theme on family planning/reproductive health care. Among 18% who have attended speeches, none have come across any theme on family planning/reproductive health. Among 17% who have attended campaign, 11% respondents have come across the theme on family planning and 6% of the respondents have come across the theme on reproductive health care. Among 91% of the respondents, 12% have seen hoardings, 79% have seen wall painting based on family planning programmes and 81% have seen wall painting, 10 % have seen hoarding on reproductive health care.

### Newspaper

Among 105 respondents, 5% respondents subscribe and read newspapers whereas 95% do not. Among 5% respondents who do, majority of 3% respondents read *Dainik Pranto Jyoti* followed by 2% respondents who read *Dainik Jugashankha*. Among 95% respondent who do not subscribe newspaper 12% respondents read newspaper. Among these 12% respondent, 9% respondents read *Dainik Prantojyoti* and 3% respondents read *Dainik Jugoshankho*. Among 105 respondents, 17% respondents read newspaper as shown in Table 4.

Among 17% respondents, 5% respondents read just the headlines, 2% respondents read health related news, 3% goes through just the front page of the newspaper, 1 % read current affairs, 2% respondents read zodiac sign while 4% of the respondents read entertainment page.

Among those, 17% respondents read newspaper daily followed by 4% respondents who read newspaper within 2-3 days and 8% respondents who reads newspaper once in a week. Among 17% respondents, 5% respondents read for just half hour, 12% reads for less than half an hour. Among 17% respondents, 12 % have goes through news/articles/advertisements/ stories related to family planning and 17% read news/articles /advertisements/ stories related to reproductive health care. Among 17% respondents, 11% respondents have seen advertisements based on family planning theme whereas among 15% respondents have seen advertisements based on reproductive health care.

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**Table 4: Newspaper reading habits**

Newspapers Subscribers			Non-subscribers		
Yes			No		
5%			95%		
<b>Dainik Pranto Jyoti</b>		<b>Dainik Jugashankha</b>	<b>Non-subscribers but reading newspapers</b>		
			12%		
			<b>Dainik Pranto Jyoti</b>	<b>Dainik Jugashankha</b>	
3%		2%	9%	3%	
<b>Total Newspapers readers: 17%</b>					
Reading headlines	Health relates news	Front page	Current affairs	Zodiac signs	Entertainment page
5%	2%	3%	1%	2%	4%

**Television**

As shown in Table 5, among 105 respondents, 41% respondents have television set at home whereas 59% do not have television set. Among 105 respondents, 41% watch television at their home, 19% watch television at neighbors' place and 40% respondents watch television at other's place. In terms of type of connection among 41% respondents, 25% uses DTH connection whereas 16% have cable connections. In terms of frequency of watching in a week, 63% respondents watch programs daily followed by 37% respondents who watch programs for 5-6 days. In terms of time spent on watching television in a day, 29% respondents watch television for 1-2 hours, followed by 48% respondents who watch for 3-4 hours and 23% respondents watch less than 1 hour.

**Table 5: Television**

Television set at home		Television set not at home	
41%		59%	
Type of connection			
DTH : 25%	Cable: 16%		
Frequency of watching TV			
<b>Daily</b>	<b>5-6 days</b>		
63%	37%		
<b>Time Spent</b>			
<b>1-2 hours</b>	<b>3-4 hours</b>		<b>Less than 1 hour</b>
29%	48%		23%

In terms of preferred time of watching, 12% watch television at night followed by 21% who watch television at afternoon, 64% watch television at evening and 3% of the respondents do not have a certain scheduled time. Regarding the type of programs preferred by the respondents, 42% respondents prefer serials, followed by dance programs and music programs with 16%, films with 18% respondents, Health related programs with 6%, children related programs with 18% respondents as shown in Table 6.

**Table 6: Preferred time of watching Television**

Preferred time				
Night	Afternoon	Evening	Not scheduled	
12%	21%	64%	3%	
Type of programs				
Serials	Dance and Music programs	Films	Health related programs	Children programs
42%	16%	18%	6%	18%

Among 105 respondents, 24% respondents have seen the advertisements or films based on reproductive health care and 6% have seen the advertisements or films based on family planning. Among 24% respondents, 21% have seen advertisement followed by 3% who have seen films based on reproductive health care and among 6% respondents, 4% have seen advertisements followed by 2% of the respondents have seen films based on the theme of family planning as shown in Table 7.

**Table 7: Watching advertisement based on health care and family planning**

Advertisements or films based on reproductive health care		Advertisements or films based on family planning	
24%		6%	
Advertisements	Films	Advertisements	Films
21%	3%	4%	2%

### Radio

Among 105 respondents, 2% listen to radio whereas 98% do not listen to radio. Among those who listen to radio, 2% respondents listen to radio occasionally. The type of programmes listened to the radio are folk songs or devotional songs. Among the 2% respondents, none have heard about news stories or advertisement on women reproductive health and family planning in the radio.

**Table 8: Radio**

Listening Radio	Not Listening radio
2%	98%

### Conclusion

The study that was conducted among the 105 respondents of the village consisted respondents from the age group of 40years-49years. The researcher observed that there is no close interrelation between the media exposure and reproductive health consciousness among the respondents. Though TV and newspapers have somehow tried to influence the attitude towards reproductive health, family planning etc., yet the contribution of radio and traditional media seem to very minimal. Television is the popular medium among the respondents.

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It has been observed that traditional beliefs and mindsets craft the society they live in. As the majority of the respondents are from lower middle economic background and are domestic helpers and have low academic background, it can be concluded that majority of the respondents have not accepted the message of '*Hum do Hamare do*'. Evidently, majority of the respondents have more than two children. It is shocking to know that most of the respondents gets married before 18 years even in the 21st century where the legal age of marriage is 18 in India.

Further, the Department of Health and Family Welfare, Assam and various NGO's should organize frequent campaigns, meetings, street plays, puppet shows and discussions on such contemporary issues like family planning and reproductive healthcare so that people get correct, authentic, and more detailed information to encourage the change in attitude. More emphasis should be given on traditional media rather than print media particularly in such areas. The contents of the programs on electronic media should be purely entertaining. Information on various schemes about education, general health and hygiene, reproductive health related issues, women welfare, women empowerment, family planning programs should be broadcast more and more in all private channels equally as their viewership is higher. The local media should extend hand in hand co-operation by making people informed about women oriented health issues.

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