<table>
<thead>
<tr>
<th><strong>Title</strong></th>
<th>Role of media in promoting public health and nutrition in South Asian countries.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Author(s)</strong></td>
<td>Kejariwal, O. P.</td>
</tr>
<tr>
<td><strong>Date</strong></td>
<td>1985</td>
</tr>
<tr>
<td><strong>URL</strong></td>
<td><a href="http://hdl.handle.net/10220/540">http://hdl.handle.net/10220/540</a></td>
</tr>
<tr>
<td><strong>Rights</strong></td>
<td></td>
</tr>
</tbody>
</table>
Role Of Media In Promoting Public Health And Nutrition In South Asian Countries

By

O P Kejariwal
ROLE OF MEDIA IN PROMOTING PUBLIC HEALTH
AND NUTRITION IN SOUTH ASIAN COUNTRIES

Paper by

O.P. KEJARIWAL
Chief (Media)
Ministry of Health & Family Welfare
Govt. of India

Presented at
Roundtable on "Mass Media and Promotion
of Public Health and Nutrition in South Asia"

COLOMBO
September 11-13, 1985
Please permit me to begin my paper on a personal note. I think it was in 1968 that I came across an essay entitled "One Hundred Best Books for an Education", by the famous philosopher-historian, Will Durant. In this essay, the author had not only listed the hundred books he thought were essential for a person's education but also provided reasons why the books should be read in the order that he had listed. It came as a surprise to me to see that the second book on this list was Logan Clendening's *The Human Body*, and the third was J. Kellogg's *The New Dietics*. Giving his reasons for giving these two books priority over even Plutarch, Goethe, Gibbon, and Shakespeare, Tolstoy and Darwin and many other illustrious names, Durant explained: "It will not do to leave for the last some knowledge of the art of health; what if after four years, we are learned and dyspeptic, philosophers in imagination, and ruins in the flesh?" I must admit I was very impressed with the argument and resolved to take the earliest opportunity to lay my hands on these books, read them and put into practice whatever they prescribed, for who in the world does not desire a sound health and a good physique?

This, as I said earlier, was in 1968. Till today, that is 1985, I have neither got these books nor have I read them: though I have not given up the pious resolution. This incident in a way highlights the two subjects I would like to deal with in this paper: First, the efficacy of the media and ways to enhance it, and secondly, its limitations.
When Will Durant wrote the piece on the hundred books in the early sixties, we can be fairly certain that the thought that he was utilising a powerful media, that is the printed word, to promote consciousness about the need to maintain sound health was far from his mind. There can, in fact, be little doubt that the concept of combining communication and information systems with the need to make people aware of health problems is comparatively a late development. We, as students of mass communication, in the late sixties always thought of the need for information systems to engender social change and to an extent to promote family planning, and though there were a few films made on health and there may have been some TV and radio programmes, health was never on the priority list. As for the printed word, articles and features on health were almost confined to the woman's page giving the feeling that maintenance of good health, especially of the child, was exclusively a woman's preserve. We are thus late starters in the field and have to make up for lost time and lost opportunities.

The scenario has no doubt changed. Perhaps the greatest impetus to bring about this change was provided by the adoption of the goal of "Health for all by the year 2000" by the World Health Organisation in 1977 and the subsequent Alma Ata Declaration on Primary Health Care in 1978. Now, the Indian television carries regular features on health in the form of interviews with medical personnel, programmes of health quiz, etc. The radio too has substantially increased its coverage of health problems. As regards the printed word, I am afraid, health has still to come out of the women's page so that it is made the concern of every individual.

In spite of the noticeable change much remains to be done. How far mass media can be effective in fostering health awareness is perhaps evident from examples of some developed countries where "there has been a remarkable trend to take up jogging, cycling, and other types of physical exercise, and a raised awareness of the importance of
Controlling health signals such as high blood pressure." I remember that sometime back the Time magazine had features a cover article on jogging which the magazine felt was a national pastime. Now we see cover articles on AIDS. Unfortunate as this may be, it does highlight the growing awareness of the importance of mass media in bringing about health consciousness.

Considering this, our group has miles to go. The mass media in the developing countries, even if they are in the public or organised sector, have to raise the level of their own awareness to do justice to public health and nutrition problems through the services they offer. Here I would like to put forth some suggestions for consideration. First, let us take up the most potent of all mass media, Television, and the media which has the widest reach, the Radio. In most of the developing countries, television as well as radio are in the Government sector: still they have not shown the awareness towards health problems which is required to reach the goal set for the year 2000. It is now proposed that this group discuss ways and means by which television and radio organisations in various countries can be persuaded to set aside at least 10% of their broadcast and telecast time for health and related problems. Five per cent of this time must be during the prime viewing and listening time. Also care must be taken to repeat certain programmes and messages so that they are certain to be carried even to irregular and inattentive viewers and listeners.

I would further like to impress upon the programme planners to give special attention to health problems affecting children. In fact, when we see the magnitude of the problem, it almost comes as a surprise that not much attention has so far been paid to the subject. In India, for instance, where children constitute 40% of the population, one in every three is born underweight, one in seven dies before the age of five and "an estimated three million die each year from conditions which could be prevented by oral rehydration and immunization alone".
Certainly ways could be found to reach most parents through mass media and educate them in elementary precautions and the need for timely immunization of their children. The immunization programme in India is already in operation and I am glad to report that in November, it is being geared up by launching the Universal Immunization Programme in select areas in the first instance. The Ministry of Health is presently engaged in devising media strategies whereby the full potential of radio and television can be harnessed to make the programme a success.

One of the advantages of having the media in the public sector is that they are more open to conviction about carrying educative programmes. This becomes somewhat difficult in the unorganised sector and especially the print media which is so diverse. How to persuade them to reserve a portion of the print area for the purpose of promoting health awareness is indeed a difficult question and this group may like to discuss ways and means of achieving this. One very welcome feature in recent times in this field in India has been that leading industrial concerns have of their own been running advertisement campaigns in leading newspapers about health and family welfare problems. While industrial concerns may do it as a gesture of goodwill and in national and human interest, for the newspapers themselves it perhaps means so much more money. Moreover, such advertisements hardly find their way to medium and smaller newspapers especially in different local languages. Ways, therefore, must be discussed to persuade all newspapers and popular magazine and journal publishers to reserve a percentage of their print area for running health campaigns. Here, mention must be made of the "social responsibility" shared by the Malaysian press which on its own has launched a campaign against drug abuse. In fact, come to think of it, it seems to be an irony that whereas even the smallest paper would not perhaps hesitate to print such things as weekly or monthly forecasts (and not two papers ever seem to agree on this, putting the reader at a loss about his fate and destiny), they have to be persuaded to print information about such an important area as public health, which as opposed to birthday forecast can to some measure ensure a person's destiny.
Along with ensuring coverage of health programmes in various media, it is also necessary to devise a system of feedback. To a large extent, mass media is considered to be impersonal in nature carrying information in one direction: from the source to the audience. On the other hand, health issues by their very nature constitute an element of curiosity. Every programme is bound to give rise to a number of questions in each member of the audience. No programme can possibly carry all the information about any one ailment or health problem. To overcome this obstacle, even to a limited extent, it is imperative to urge media managers to have regular programmes wherein audience's questions can be answered by competent medical personnel. Similarly, print media must ensure a column depending upon the periodicity of publication in which the readers' mail is attended to. There are such columns in big or leading journals but this must be made compulsory for even medium and smaller publications so that their catchment areas are served to satisfaction. Once this concept grows and the reader or the audience comes to take it for granted that his or her query would be attended to, it will not only have a salutary effect on the publication itself but will also increase public health consciousness.

While speaking of programme planners of mass media it is essential to emphasise the two levels at which the media works: the macro and the micro. There are some problems which are common to all countries and awareness about them can be spread through comparatively simpler methods and messages. Smoking, for instance, is injurious to health everywhere. Drug abuse is a growing menace in practically every country. Tensions of modern life leading to ailments of heart are becoming a common phenomenon. Similarly many messages about them developed in any country can be successfully replicated in others. The other day, for instance, I saw a campaign in an American journal against dangers of smoking and the photograph showed a person loading a revolver with cigarette instead of cartridges. What a powerful copy. I am sure that if I were a smoker I would have given up smoking or at least tried to, after seeing the advertisement. How I wished that this copy could be reproduced in India's periodicals. Similarly I am certain that all the countries assembled here have such powerful messages which can be
replicated by others. I would, therefore, urge this Conference to devise ways and means whereby there may be a greater and regular exchange of ideas on these problems. Round tables like these are a help but the periodicity between two of them is very long. Closer links must be forged between programme managers of different countries so that each can benefit from the other's experience. As it stands at present, we stand confined to our own little islands even while talking of the concept of the global village.

If this give and take is necessary at the macro level, no media campaign can succeed fully unless it takes into account the local milieu and the mental and cultural make-up of its target audience. A communicator is often referred to as the teacher; but a successful communicator is one who is constantly learning -- not only for acquiring the latest skills in communication but also about his audience. Needless to say, to the extent that he is a good student to that extent he can become a good teacher. Unless he knows his audience thoroughly, not only will his messages not register but may also be misunderstood.

This brings me to the last point of this paper: the limitations of the media. Certainly no discussion on media can be complete without discussing its limitations. In this connection I would like to recall the incident with which I began the paper. I am aware of the importance of health and diet education and yet I have not taken the first step in spite of harbouring a pious resolution for nearly fifteen years. This limitation of the media is evident in the gap that exists between awareness and the intended action. To quote a communication expert: "The persuasive force of the impersonal movie, newspaper story or radio programme is insufficient by itself to overcome inertia, taboos, or deeply ingrained traditions". Effective ways, therefore, must be found to strengthen and fully utilise the grassroot infrastructure to carry the message of health and family welfare to every door.

This brings me back to my old guru -- Will Durant. In another book entitled The Pleasures of Philosophy, he talks about how he brought up his daughter. Regulating her diet from childhood, making her breathe the fresh air and training her in physical exercises, he brought her up in a way that she was a stranger to doctors and disease, and often asked, "How does it feel to have a stomach-ache?" Certainly this is the ideal we all must aspire for — and harness all media, mass, traditional and personal to achieve this goal on a global scale.