

Co-creating for community radio: Creating awareness about key mother and child health issues

SUKRITI NAG* AND SARITA ANAND

Department of Development Communication and Extension, Lady Irwin College,
University of Delhi, Delhi (India)

ABSTRACT

The importance of Mother and child health issues in the global development agenda was recognized in the Millennium Development Goals (1990-2015) and is universally accepted even in recently articulated Sustainable Development Goals (SDGs) to be achieved by the year 2030. High infant and mother mortality ratio is a challenge for the world that can be dealt by creating awareness about safe motherhood practices of the people at the grassroots through a medium of communication sensitive to their needs and culture. A participatory action research was carried out to create awareness about key mother and child health (MCH) issues among rural women, by responding to the information gaps regarding Mother and Child Health (MCH). It attempted to co-create a radio series and examined the effectiveness of the programmes in changing the awareness level of the women exposed to the intervention. The study was carried out in Mewat region in Haryana with 56 women in the age group of 18-40 years. The women were purposively selected with the inclusion criterion of being a mother of at least one child in the age group of 0-2 years. These women were part of two groups, one for co creating and narrowcasting and the other for broadcasting. The study was conducted in two phases. In phase-I, the radio programme series “Safarnama-ek nanhi zindagi ki or” with five (5) episodes dealing with issues of Antenatal care, Diet, Institutional delivery and Early initiation of breastfeeding and exclusive breast feeding for first six months was prepared. In phase-II the change in awareness among women from both the groups after being exposed to radio series was assessed using a close ended knowledge test. The mean scores were compared to understand the change in awareness level of women of both the groups post intervention. The findings revealed that active participation and building sense of ownership among stakeholders in co-creation of radio programme can help the intervention to be successful. The pretest scores show that narrowcasting is the most engaging way to impart information to the group with initial low awareness level whereas broadcasting can be used with regular listeners to reinforce their exiting knowledge and not in retention of new knowledge because of lack of active engagement. It was also observed that one time intervention may enhance the awareness level of the people but it is important to reinforce the messages at a frequent intervals can bring improvement in their knowledge level.

Key Words : ICTs, Participatory research, Community radio, Maternal and child health, Millennium development goals (MDGs), Sustainable development goals (SDGs)

Cite this Article: Nag, Sukriti and Anand, Sarita (2016). Co-creating for community radio: Creating awareness about key mother and child health issues. *Internat. J. Appl. Home Sci.*, 3 (5 & 6) : 221-229.

INTRODUCTION

Earlier economic development was considered to be the only indicator of country's overall development. In the 1960s the identification of development with economic growth came under increasing criticism. Authors such as Mahbub ul Haq (1976) and International Labour Organization (ILO, 1976) claimed that development cannot be explained only by economic factors and the concept of development includes more than mere changes in the economic indicators. According to Amartya Sen (1998), "Freedom is the most important goal and principal way of development." It is not just the end but also the means of achieving developmental goals, a country can grow quickly, but still do badly in terms of literacy, health, life expectancy and nutrition. As a result, United Nations Development Programme (UNDP) introduced the concept of human development as "a process of enlarging people's choices".

The 1990 Human Development Report (HDR) introduced a measurement tool, the Human Development Index (HDI), a multidimensional composite index which was swiftly acknowledged as well suited for the task of measuring country's progress in terms of development over time, not economic growth alone. It is a summary measure of average achievement in key dimensions of human development: a long and healthy life, being knowledgeable and have a decent standard of living. It firmly established the idea of individuals as participants in – rather than beneficiaries of – the development process. So for making any programme/ policy successful, it becomes essential to involve stakeholders at solution designing process for seeking people's participation.

Community Radio is one such medium where intended stakeholders are the key elements of solution designing process. From 2006, the Community Radio stations have been playing a very crucial role in processing local knowledge, content and stories retaining the flavor of the community and its culture. Community radio also encourages open dialogue and local transparency with high penetration and sense of ownership. Therefore, helping community of media grey regions to be in charge of their own affairs (Parvarala and Malik, 2007). Prior to this in the year 2006 in the Indian context, P.B. Sawant (1995) claimed that, - airwaves are the public property and must be used for public good. So, community radio can work as a complete mouthpiece for voiceless community as it is the storehouse of region specific context and stories.

Millennium Development Goals (1990-2015) laid stress on reducing child mortality (Goal-4) and Improving Maternal Health (Goal-5) and Sustainable Development Goals (2015-2030) have again emphasized on Good health and Well-being (Goal-3) with the target of reducing global maternal mortality ratio to less than 70/100,000 live births (UNDP, 2015). According to UNDP report of 2012, India was ranked at 136th position with Human Development Index of 0.554 and, Gender Inequality Index of 0.610. According to UNICEF, 2015, Indian health statistics indicates unacceptably high Maternal Mortality Ratio as 216 deaths per 100,000 live births and according to WHO health indicators, under-five mortality rate was 56/1000 live births (WHO, 2012). Thus, it became important for India to improve its health indicators and community radio is one such medium with a high potential to impact the health seeking behavior which ultimately will contribute towards Sustainable Development Goals.

Therefore, it became imperative to take care of Mother and Children during the crucial 1000 days starting from conception till the child is 2 years of age as these first two years of life are considered a 'critical window of opportunity' for prevention of growth faltering (UNICEF, 2013). So to prevent this, there are some key components that need to be taken care of. These are Antenatal care checkups and Registration of pregnancy, Mother and Child Nutrition, Institutionalized delivery and Early Initiation and exclusive breastfeeding. The National Rural Health Mission 2005-2012 (Ministry of Health and Family welfare, Govt. of India, 2005) envisaged that that effective antenatal care (ANC) can improve the health of the mother and give her a chance to deliver a healthy baby. Regular monitoring during her pregnancy can help detect complications at an early stage before becoming life-threatening emergencies. For this study, Mewat district (now known as Nuh) of Haryana was selected as the locale because it has reported consistently high percentage of Infant and Maternal Mortality death rate. Since Average literacy rate of Mewat is 54.08%. Male literacy rate was 69.94% and female literacy rate was 36.60% (Census of India, 2011). For such a population group, Community Radio holds a potential to be an effective catalyst to address the information needs of the community and by the community stakeholders only as a long term communication strategy for sustainable development. Health is an important concern and is raised by the community radio station for providing information about health concerns and available services. For the purpose of this research study, community radio set up of Alfaz-e-Mewat was taken up. This study was planned to assess the effectiveness of the health programmes co-created with the community women in generating awareness about the key Mother and Child health issues.

METHODOLOGY

This study was carried out in the year 2014-2015 in Mewat district, Haryana in two phases. In phase-I a radio programme called "Safarnama-ek nanhi zindagi ki or" with five (5) episodes on key MCH related health behaviors namely, Registration of pregnancy and Antenatal care, Nutrition and Diet during pregnancy, Institutional deliveries and Breastfeeding (early initiation and exclusive breastfeeding), Radio drama depicting real life situations of pregnant women and the last episode was about the interaction between a health worker and community women about the problems faced by them during pregnancy were co-created after focused group discussion for the purpose of need assessment. This phase was conducted in two (2) villages of Mewat namely Bhadas & Satakpuri with Radio station manager, local ASHA Worker appointed under the National Health Mission and women in the age group of 18-40 years with at least one child in the age group of 0-2 years.

A baseline analysis of the knowledge of the respondents about mother and child health issues was carried out in four villages of Mewat. Narrowcasting was conducted at Bhadas village in Nagina Block and broadcasting was conducted at Mau, Kaliyavas and Gohana villages of the same block. In phase-II, the change in the level of awareness related to Mother and Child health issues of the respondents, after listening to the five episode radio series was examined. The respondents were classified into two groups one who were listeners of the programmes broadcasted through the CR and the others who were part of the group who sat together and heard the programme in the community (Narrowcasting). They were

administered the same knowledge test to find out the difference, if any in the about mother and child health issues after listening to the five programme radio series about key MCH issues.

The knowledge test with close ended structured statements was administered to the 30 women respondents each from broadcasting and narrowcasting groups. After being exposed to intervention, 30 respondents from the narrowcasting group and 26 respondents from the broadcasting group- who were available for both pre and post intervention, were considered for analysis and interpretation of the study.

RESULTS AND DISCUSSION

Phase I :

Demographic profile of respondents :

Around 33% of respondents from both narrowcasting and broadcasting group belonged to the age group of 18-22 years and three-fourth among them, were illiterate. Majority of respondents from both the groups were homemakers with around 39% of the respondents from narrowcasting and 54% of the respondents from broadcasting group had family income of around Rs. 6000 per month. Also, the family size of around 45% respondents from narrowcasting group was between 5-7 members whereas in broadcasting group maximum respondents 65.38% had family size of around 2-4 members. So, in terms of profile, the respondents from broadcasting group seem to come from economically better families and also had better educational level and smaller families.

Demographics	Age (%)		Educational level (%)		Family Size (%)		Economic profile (%)		Family income (%)	
	18-22 years	28-32 years	Illiterate	Up to class 5	2-4	5-7	Driver	Daily wage laborer	Up to 2000 rupees	Up to 6000 rupees
Narrowcasting (n=31)	32.25	16.12	70.96	12.90	35.48	45.16	16.12	48.38	25.08	38.70
Broadcasting (n=26)	34.61	23.07	73.07	3.84	65.38	23.07	26.92	30.76	15.38	53.84

Listenership of radio programmes :

During the preliminary visits to the villages under study, it was found that Mewat is a region where watching television is still considered as a taboo so in such a media dark location, community radio can play an important role in imparting the information. During the pre-intervention stage, Focussed group discussions revealed that among the narrowcasting group, less than 50% of the respondents were regular listeners of the Alfaz-e-Mewat community radio though 77.41% of them knew about the station. In the broadcasting group all respondents were aware of the Alfaz-e-Mewat community radio station and more than 75% of respondents were listeners of the health related programmes on Alfaz-e-Mewat.

Assessment of information needs :

Before co-creation of the new programmes, it was important to understand the existing knowledge and gaps in the awareness level about the key MCH issues, so focused group discussions were conducted to understand the information needs. Through the discussion, it was found that, a large number of women were not aware of the importance of early registration of pregnancy, ANC checkup, danger signs during pregnancy and government schemes related to mother and Child health. Keeping these into consideration, a radio programme series “Safarnama-ek nanhi Zindagi ki or” was developed.

Process of programme development :

With the support of Community women, a five (5) programme radio series was developed in different formats. The first programme episode was about early registration and regular antenatal care checkup which was presented as an interview based programme where a local ANM was interviewed. The idea was to ask relevant questions and the responses from health delivery personnel from the area would help women in meeting their information needs about the first milestone important for any pregnant woman. Second programme was about the nutritional needs of the pregnant women where local knowledge was elicited and was augmented with the expert advice, third programme was about importance of institutional delivery and the incentives available under Janani Suraksha Yojna (JSY) and the importance of early initiation and exclusive breastfeeding, Fourth programme was a role play depicting the local situations and how could a family overcome the old custom of delivering a baby at home and the fifth programme was an interactive programme where ASHA worker solved the queries raised by the local women about the key MCH issues. All the interviews and recordings were made by upholding the research ethics.

Phase-II :

Effectiveness of the programmes developed :

The co-created programmes were narrowcasted at the house of the local ASHA worker in Bhadas village where all the women were requested to gather to listen to the radio programme. Before broadcasting this programme series, a promo went on air through the CR for one week to inform the people the date and time of commencement of the programme. Respondents were especially called before the commencement of the programme to ensure their listenership. The effectiveness of the programme in generating awareness about key MCH issues was assessed using pre-post knowledge test.

Table 2 : Scores of women in different aspects related to mother and child health issues		
Categories	Maximum possible score (in points)	Maximum scores attained (in points)
Antenatal care and registration of pregnancy	14	11
Diet and nutrition	06	05
Delivery related information	06	03
Post-natal care and Breastfeeding	12	09
knowledge about government schemes	10	10
Total	48	38

The knowledge test was divided into five sections namely Information about- Antenatal care and registration of pregnancy, diet and nutrition, institutional delivery, post-natal care and knowledge about government schemes and services related to pregnant women. Each category carried around 5-15 questions. The respondent was asked choose the best possible option for the question pre and post listening to the radio programme series. Every correct answer yielded one point to the respondent. The comparative difference between the pre and post intervention scores determined the shift in awareness level of the respondent.

Differences between narrowcasting and broadcasting listeners:

Overall comparative analysis of mean score post intervention :

Findings revealed observable change in scores of narrowcasting group. This may be due to the greater degree of attention and active participation of the listeners during narrowcasting. This technique of narrowcasting also helped the respondents to clarify and reinforce their existing knowledge. In the broadcasting group, initially the average knowledge score was around 64 but post intervention the knowledge level increased to around 82. So there was a considerable difference of 18 points observed post intervention indicating recall of existing knowledge along with the gain of new information among broadcasting group members.

	Narrowcasting		Broadcasting	
	Pre-test	Post-test	Pre-test	Post-test
Information about				
Antenatal care and registration	53.95	87.39	55.59	80.06
Diet and nutrition	60.64	93.54	53.07	81.53
Institutional delivery	61.29	92.47	60.25	87.17
Post natal care	75.62	95.34	70.51	90.17
Government schemes for mother and child health	72.58	89.35	49.61	72.69

Overall gain in knowledge about mother and child health (MCH) issues:

In the narrowcasting group, prior to intervention the overall awareness level of around 71% respondents was categorized under medium range category but post intervention 100% of respondents scored much better and moved up to the high score category. In the broadcasting group, prior to intervention, only about 15% of respondents belonged to high score category which increased to 69.23% post intervention. This clearly indicates that respondents of broadcasting group did possess knowledge about the Mother and Child Health related issue as they were regular listeners of Alfaz-e-Mewat Community radio station. The post intervention shift indicates that intervention reinforced their information among broadcasting group members whereas in narrowcasting group because of active involvement the overall awareness level of the participant women shifted to high score category.

Aspect wise change in the scores of narrowcasting and broadcasting group about key mother and child health issues :

From the findings, it can be concluded that in the narrowcasting group, there was a

marked shift in the awareness level of 97% respondents about antenatal care and early registration of pregnancy post intervention. This is due to the active engagement of the women during narrowcasting and participation in discussions with the researcher post intervention. The respondents of the broadcasting group had better score on the awareness level as 20% of the respondents belonged to the high score range category. It was also observed that post intervention; there were no respondents in the low awareness level category. This upward shift in awareness level could be because they were active listeners of Alfaz-e-Mewat community radio for a long time and listening to these programmes reinforced their knowledge

Change in the scores of respondents about diet related information :

Before intervention, majority of the respondents from the narrowcasting group belonged to medium score category but post intervention there was a shift in the awareness level of all the respondents about diet related information which shows that they were actively listening to radio programme. In the broadcasting group before intervention, 65.38% of the respondents belonged to medium score category but post intervention, 69.23% shifted to high score category.

	Narrowcasting				Broadcasting			
	Pre test		Post test		Pre test		Post test	
	N	%	N	%	N	%	N	%
Low (Up to 22)	6	19.35	0	0	14	53.84	0	0
Medium (23-28)	22	70.96	0	0	8	30.76	8	30.76
High (29-38)	3	9.67	31	100	4	15.38	18	69.23
Total	31	100	31	100	26	100	26	100

Change in knowledge of respondents about institutional delivery :

Prior to intervention in narrowcasting group, around 39% of the respondents belonged to low score category but post intervention, there was a gain in awareness levels of all the respondents about institutional delivery which indicates that intervention proved to be useful for the group. In the broadcasting group, earlier 69.23% respondents had substantial information about delivery related aspects but post intervention 96% respondents shifted to high score range.

Change in score of the respondents about post natal care :

Eighty seven (87%) of respondents from narrowcasting group had substantial amount of information about post natal care which may be due to their close interaction with the ASHA worker of the village where the intervention was done, but post intervention, it was observed that 100% of the respondents knew about different aspects of post natal care. Whereas in the broadcasting group it was observed that there was an upward shift in knowledge from 80.76% to 96.15%.

Change in awareness about government schemes related to mother and child health:

Prior to intervention, around 45.16% of the respondents were in the medium score category of awareness related to government schemes, but post intervention a big shift was observed as 93.54% respondents came to know about government schemes. Among the broadcasting group, there was generally better awareness about government schemes but post intervention 46.15%, were aware of the schemes catering to Mother and Child health. They all knew that if a woman delivers in a government hospital/health centre they receive money but did not know about the name of the scheme.

Conclusion :

Thus, it can be concluded that for making any information based intervention successful participation of the stakeholders is necessary and the initiative must be tailor made as per the needs and socio-cultural context of the intended group. Any participatory activity such as co-creation of radio programme gives the stakeholders a sense of ownership. Community radio plays an important role in disseminating educational messages in entertaining way to the community. It reaches out to large number of people of that community with in a short period of time and their awareness about how to seek solutions to the health services available makes it a sustainable solution which with time can get permeated to other problems and solution seeking behaviors. Also, the role of local opinion leaders/ health workers and other stakeholders is important in creating awareness and motivating the people. It was found that narrowcasting is the best way to impart information to the women with initial poor literacy and low awareness level whereas broadcasting can be used with the people who are regular and active listeners of the Radio and their initial information can be reinforced.

REFERENCES

- Census of India. (2013). Maternal Mortality Ratio. Retrieved from http://www.censusindia.gov.in/vital_statistics/mmr_bulletin_2011-13.pdf last accessed on 26th January 2015
- Express News Service (2016). Gurgaon district to be renamed gurugram, mewat as nuh: haryana government. The Indian Express. Retrieved from <http://indianexpress.com/article/india/india-news-india/gurgaon-gurugram-rename-mewatnuh-haryana-government/> last accessed on 5th June 2016
- Gaur. S; Anand. S. (2009). Prospects and Challenges of Institutionalized Community Radio: An Exploration in Delhi. Unpublished Mater Thesis. University of Delhi.
- Goodpal. (2014) Amartya Sen's concept of development and poverty. Retrieved from <http://goodpal.hubpages.com/hub/Amartya-Sens-Concept-of-Development-and-Poverty> last accessed on 8th February 2015
- Malik. K.K. (2011). Ground realities-Community radio in India. Retrieved from <http://unesdoc.unesco.org/images/0021/002173/217381e.pdf> last accessed on 22nd September 2014
- MoHFW. (2012). NRHM state wise information. Retrieved from <http://nrhm.gov.in/nrhm-in-state/state-wise-information/haryana.html> last accessed on 22nd November 2014
- UNDP. (n.d.). About Human Development. Retrieved from <http://hdr.undp.org/en/humandev> last accessed on 12th October 2014

- UNDP. (n.d.). Human Development Index. Retrieved from <http://hdr.undp.org/en/content/human-development-index-hdi> last accessed on 12th October 2014
- UNDP. (2015). Sustainable Development Goals. Retrieved from <http://www.undp.org/content/undp/en/home/mdgoverview/post-2015-developmentagenda/goal-3.html> last accessed on 30th October 2015
- UNICEF. (n.d.). Millennium development goals. Retrieved from http://www.unicef.org/mdg/index_aboutthegoals.html last accessed on 9th October 2014
- UNICEF. (2015). Maternal mortality fell by almost half between 1990 and 2015. Retrieved from data.unicef.org/maternal-health/maternal-mortality.html last accessed on 14th June 2016
- WHO. (n.d.). Maternal mortality ratio. Retrieved from <http://www.who.int/whosis/whostat2006MaternalMortalityRatio.pdf?ua=1> last accessed on 25th January 2014