

Original Research Article

An epidemiological study regarding role of television about health awareness in rural and urban areas of district, Amritsar, Punjab, India

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ABSTRACT

Background: Television is not only a source of entertainment but also a major source of information including that related to health content. So this study was conducted to know the role of television in awareness about health programs and their utility.

Methods: In this cross-sectional study, 1000 respondents (500 urban and 500 rural) were studied in 5 rural and 5 urban from field practice area of Government Medical College, Amritsar. They were interviewed with the help of pretested and semi-structured questionnaire.

Results: Almost all the respondents had watched television with 94% respondents in rural and 100% in urban. Those respondents who did not watch were due to non availability of television sets. Majority 3/4 of the respondents spent half to 2 hour per day watching television. Almost 2/3 of total respondents were aware about health related programs being shown on television and out of these 79.00% were actually watching these programs. 42.16% respondents were aware about health related advertisements. Respondents using these products 91.20% followed through self awareness whereas 8.80% were motivated by someone.

Conclusions: Television viewing is almost a universal phenomenon but still in areas where it is more needed very few were being aware about health related content being shown on television and even those who were aware were not watching these programs.

Keywords: Healthcare, Health programs, Health advertisements, Television

INTRODUCTION

Communication (from Latin *commūnicāre*, meaning "to share") is the act of conveying intended meanings from one entity or group to another through the use of mutually understood signs and semiotic rules.¹ The way we communicate with each other influences our personality and to do so we need data, relevant facts. Television is a form of electronic media which was considered a part of luxury in 1950s is now a part of common household thing.

Television in India has been in existence for about four decades. For the first 17 years, it spread haltingly and transmission was usually in black and white. Sales of television sets, as reflected by licenses issued to buyers were just 676,615 until 1977.²

Television has come to the forefront only in the past 21 years and more so in the past 13. There were initially two ignition points in the history of Indian Television. The first in the eighties when color television was introduced by state-owned broadcaster Doordarshan (DD) timed

with the 1982 Asian Games which India hosted. The second turning point in the history of Indian television came in the early nineties with the broadcast of satellite television by foreign programmers like CNN followed by Star TV and a little later by domestic channels such as Zee TV and Sun TV into Indian homes. More foreign programmers and Indian entrepreneurs flagged off their own versions. From two channels before 1991, Indian viewers were exposed to more than 50 channels by 1996 and more than 800 channels in 2016.^{3,4}

Television is the source of the most broadly shared images and messages in history. It is the mainstream of the common symbolic environment into which our children are born and in which we all live out our lives. Even though new forms of media seem to sprout up weekly, television's mass ritual shows no signs of weakening, as its consequences are increasingly felt around the globe.

India is 3rd largest television market in the world after USA and China. India has a large broadcasting and distribution sector, comprising approximately 800 satellite television channels, 6,000 multi-system operators, around 60,000 local cable operators, 7 DTH(Direct to home) operators and 4 IPTV service providers. Penetration of about 65% (expected to reach 72% by 2017).⁵

All the medium of communication while focusing mainly on entertainment, also gives some programs related to health. Advertisements are another way to sell the products related to health as food items, cold drinks, some medications etc. Health being a major concern in one's life they are picked up also

'Health' is a term which means the condition of being safe and sound or whole. According to WHO the term 'health' comprises the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.⁶

Television is affecting our health in all the three ways i.e. physically mentally and socially. Television's power to impact public perception and the degree to which people are exposed to television representations makes it one of the most significant influences in developing societies.

Television consists of programs and advertisements relating to health which can be for wellbeing of people as well as a source of making money by misguiding people.

METHODS

The proposed study topic "an epidemiological study regarding role of television in healthcare in rural and urban areas of district Amritsar" was conducted in 5 villages which were selected randomly from list of villages that were attached with the department of Community Medicine, Government Medical College,

Amritsar as well as in 5 wards of urban area of Amritsar city. The study was conducted after approval from institutional thesis and ethics committee. The list of all villages and wards were collected from revenue department, Municipal Corporation and civil surgeon office. Period of study was from 1st January 2015 to 31st December 2015.

500 houses were taken, 250 from rural and 250 from urban area which means 50 houses from each village and 50 houses from each ward. 1000 cases were taken, 500 from rural area and 500 from urban area. From one house two persons were selected and interviewed, one 16-50 years old (male or female) and second >50 years old (male or female). Male and female were selected randomly. If in the given house inclusion criteria is not met then we moved to another house.

After explaining the purpose of study the informed consent was taken and a predesigned and pretested questionnaire were filled in vernacular language. So information was collected in pre-designed and pre-tested proforma. This information included the socio demographic profile, effect of television on healthcare of people, attitude of person toward healthcare advertisements and topics given in television. The information thus collected was presented and subjected to statistical analysis and a valid conclusion was drawn.

RESULTS

Majority 64.80% of the respondents belongs to Sikh religion followed by 31.40% Hindus. Majority of respondents belonged to general caste (57.00%) followed by scheduled caste (33.20%) and then OBC caste (8.60%) (Table 1).

Almost all the respondents had watched television with 94% respondents in rural and 100% in urban (Table 2). Almost 2/3 of total respondents were aware about health related programs being shown on television and out of those 79.00% were actually watching these programs with almost equal ratio between urban and rural (Figure 1). Reason for those who did not watched was lack of time among 80.72% of urban respondents in contrary to 29.58% in rural, followed by programs being not interesting among 64.79% respondents in rural in contrary to 13.25% in urban. Rest of the respondents (5.63% in rural and 6.03% in urban) stated that they fear they will get such diseases if they will watch such programs (Figure 2).

42.16% respondents were aware about health related advertisements and when asked that cold drinks, food products and creams also are affecting health almost all respondents responded that they were aware about these advertisements (Table 3). 31% of rural and 39% of urban respondents used health related advertisements. Out of 340 respondents using these products 91.20% followed through self awareness whereas 8.80% were motivated by

someone like friends and shopkeeper (Table 4). 630 respondents who were not following these advertisements reason was ill health because of these products (54.29%) followed by waste of money (27.62%), don't like these products 16.98% and 1.11% also said that they lack

money to buy such products (Table 5). 84.93% in rural and 65.40% in urban, respondents said such advertisements should not be telecasted on television (Figure 3).

Table 1: Distribution of respondents according to sociodemographic profile (N =1000).

	Rural	Urban	Total (%)
Religion (N=1000)			
Sikh	428 (85.60)	220 (44.00)	648 (64.80)
Hindu	40 (8.00)	274 (54.80)	314 (31.40)
Christian	32 (6.40)	6 (1.20)	38 (3.80)
Caste(N=1000)			
General	280 (56.00)	290 (58.00)	570 (57.00)
SC	190 (38.00)	142 (28.40)	332 (33.20)
OBC	30 (6.00)	68 (13.60)	98 (9.80)
Family(N=1000)			
Nuclear	133(26.60)	174(34.80)	307(30.70)
Joint	367(73.40)	326(65.20)	693(69.30)

Table 2: Distribution of respondents on the basis of television viewing.

	Rural	Urban	Total(%)
Viewing television (N=1000)			
Yes	470 (94.00)	500 (100.00)	970 (97.00)
No	30 (6.00)	0 (0.00)	30(3.00)
Time spent (hours) (N=970)			
0-1/2	58 (12.34)	8 (1.60)	66 (6.80)
1/2 -1	160 (34.04)	207 (41.40)	367 (37.84)
1-2	215 (45.74)	195 (39.00)	410 (42.27)
2-3	33 (7.02)	80 (16.00)	113 (11.65)
3-4	4 (0.85)	10 (2.00)	14 (1.44)
>4	0 (0.00)	0 (0.00)	0 (0.00)

Table 3: Distribution of respondents according to awareness about health related advertisements (creams, cold drinks, food products related to health).

View	Rural No (%)	Urban No (%)	Total No (%)
Yes	432 (91.93)	500 (100.00)	932 (96.08)
No	38 (8.07)	0 (0.00)	38 (3.92)
Total	470	500	970 (100.00)

Chi Square=42.07; p-value< 0.05.

Table 4: Distribution of respondents according to action for use taken on these advertisements.

	Rural	Urban	Total No. (%)
Action taken (Used) (N=932)			
Yes	145 (33.56)	195 (39.00)	340 (36.48)
No	287 (66.44)	305 (61.00)	592 (63.52)
Action			
Self	137 (94.52)	8 (5.48)	310 (91.20)
Motivated	173 (88.72)	22 (11.28)	30 (8.80)

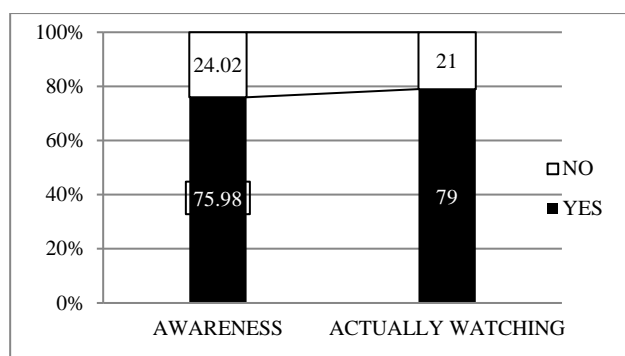


Figure 1: Distribution of respondents on the basis of awareness and actual viewing of health related programs being shown on television.

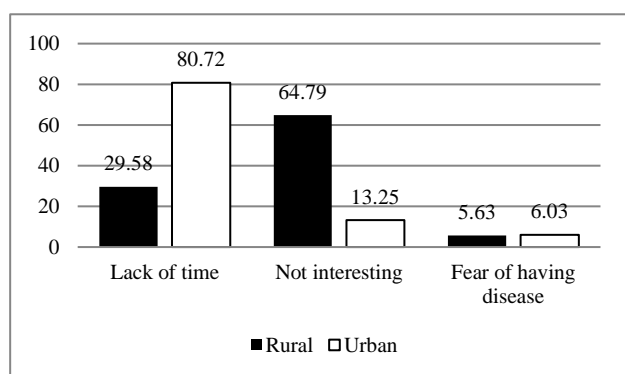


Figure 2: Distribution of respondents on the basis of reason for not viewing (N=154).

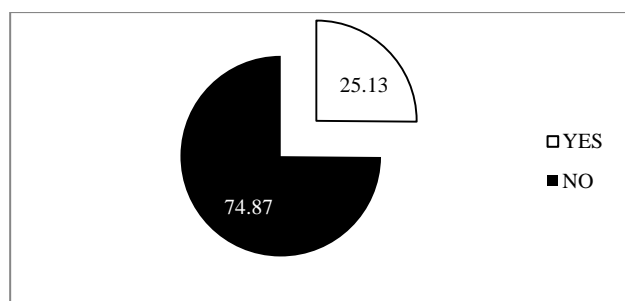


Figure 3: Distribution of respondents based on whether such advertisements should be shown on television (N=970).

Table 5: Distribution of respondents according to reason for not following (N=630).

Reason	Rural No. (%)	Urban No. (%)	Total No. (%)
Ill health	178 (54.77)	164 (53.77)	342 (54.29)
Don't like	49 (15.08)	58 (19.02)	107 (16.98)
Waste of money	93 (28.62)	81 (26.56)	174 (27.62)
Lack of Money	5 (1.54)	2 (0.66)	7 (1.11)
Total	325	305	630 (100)

DISCUSSION

According to the 2011 Census of India, Punjab has roughly 58% of the population belonging to the Sikh faith. Around 38% of the population practices Hinduism. Other faiths include Islam, Buddhism, Christianity and Jainism.⁷ According to IAMR (Institute of applied manpower research) report 2013, Punjab has 28.85% of SC population.⁸ This was in accordance to this study.

According to FICCI KPMG Report, the number of television households in India increased to 168 million in 2014, implying a television penetration of 61 per cent⁹. According to (all-India, urban) report India has an average daily viewing time of 3 hours 16 minutes¹⁰. According to this study almost all the respondents had watched television and those respondents who did not watched were due to non availability of television sets, majority i.e. 3/4 of the respondents spent ½ to 2 hour per day watching television. This data is in contrast to my study can be due to different circumstances which can be related to literacy and employment factors.

According to a study by Vishnupriya in rural women of Bihar showed that 75% of women were not aware about the diseases and 17% were aware through various means of media and rest were aware through other means.¹¹ In this study almost 2/3 of total respondents were aware about health related programs being shown on television and out of those 79.00% were actually watching these programs with almost equal ratio between urban and rural so this is in contrast to present study and this can be due to educational and socioeconomic status higher in Punjab than in Bihar.

According to the 2015 MARS (Military Auxiliary Radio System) Consumer Health Study, 167 million adults have seen or heard healthcare advertising in the last 12 months, 3 out of 4 have seen or heard healthcare advertising on television and more than half have seen or heard healthcare ads in a doctor's office.¹² 42.16% respondents were aware about health related advertisements and when asked that cold drinks, food products and creams also are affecting health almost all respondents responded that they were aware about these advertisements so we interpret that people are not considering these products are related to health which was found to be statistically significant. 31% of rural and 39% of urban respondents used health related advertisements.

According to the 2015 MARS Consumer Health Study Among adults that have seen or heard healthcare advertising, 1 out of 3 took some action as a result.¹⁰ A report from the Television Bureau of Advertising and Knowledge Networks Inc reveals that 37 percent of television viewers make purchase decisions after watching advertisements on television compared to 7 percent for social networks.¹³ In the present study out of 340 respondents using products affecting health, 91.20%

followed through self awareness by regular using whereas 8.80% were motivated by someone like friends and shopkeeper but how this self awareness was generated in first place was not indicated.

Abhilasha Mehta (2000), in his research topic "Advertising attitudes and advertising effectiveness" had analysed that buying interest of the consumers are based on how much the consumers are liking to look an advertisement, the value of the advertisement for the brands advertised and how informative or truthful an advertisement is 630 respondents who were not following these advertisements in the present study, reason was ill health due to these products (54.29%) followed by waste of money (27.62%), don't like these products (16.98%) and 1.11% also said that they lack money to buy such products.¹⁴

A study by Ajay V revealed that of the respondents, majority 34% said that to a greater extent the product information given in the television advertisement was reliable and also respondents felt that there should be more laws to govern misleading Indian advertisements.¹⁵ According to present study 84.93% in rural and 65.40% in urban, respondents said such advertisements should not be telecasted on television as they put a wrong impact and there should be some regulatory body to check the authenticity of the advertisements that are given on television.

CONCLUSION

- Television can be a major source of information regarding health related topics for the masses so Government should utilize this mode of media for education and creating awareness.
- Health related information should be made interesting like in form of carry home messages in movies and programs so that more people watch it.
- There should be some regulatory body to judge the relevance and authenticity of health related content in programs and advertisements.
- Timings of such programs should match the prime time for viewers for wide dissemination.

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REFERENCES

1. Douglas H. "communication". Online Etymology Dictionary. Retrieved. 2013-06-23.
2. Indiantelevision dot com's History of India's television broadcasting [Internet]. [cited 2016 Oct 16]. Available from:

- http://www.indiantelevision.com/ indianbroadcast/history/historyoftele.htm
3. Shah. Advertising and Promotion. Tata McGraw-Hill Education; 2009:1019.
4. Why television matters - Livemint [Internet]. [cited 2016 Nov 6]. Available from: <http://www.livemint.com/Opinion/Na6I5rUOzUr8K56egECeAK/Why-television-matters.html>.
5. TV, movies, radio, newspapers [Internet]. [cited 2016 Oct 15]. Available from: <http://www.diehardindian.com/tv-movies-radio-newspapers>. [cited 2016 May 4]. Available from:
6. World Health Organization. <http://www.who.int/about/definition/en/print.html>
7. "Population by religious community: Punjab". 2011 Census of India. Retrieved 2015-08-27.
8. Punjab - report202013_1857.pdf [Internet]. [cited 2016 Oct 14]. Available from: http://iamrindia.gov.in/writereaddata/UploadFile/report202013_1857.pdf.
9. TV industry to touch Rs 975 billion in 2019: FICCI KPMG Report [Internet]. Indian Television Dot Com. 2015 [cited 2016 Oct 6]. Available from: <http://www.indiantelevision.com/specials/event-coverage/ficci-frames/tv-industry-to-touch-rs-975-billion-in-2019-ficci-kpmg-report-150325>.
10. Why television matters – Livemint. [cited 2016 Oct 6]. Available from: <http://www.livemint.com/Opinion/Na6I5rUOzUr8K56egECeAK/Why-television-matters.html>.
11. Vishnupriya. Awareness of Diet Related Diseases in Women of Rural Indian Society through Mass Media- A Study Based on Rural Women of Bihar. 2013;4(8):829-34.
12. Healthcare advertisements & their impact on consumers. <http://www.kantarmedia.com/us/thinking-and-resources/blog/healthcare-advertisements-their-impact-on-consumers#ixzz4CBzEhqDh>.
13. The Influence of Television Advertising | Chron.com [Internet]. [cited 2016 Oct 13]. Available from: <http://smallbusiness.chron.com/influence-television-advertising-64010.html>.
14. Mehta A. Advertising Attitudes and Advertising Effectiveness", Journal of Advertising Research. 2000;67-71.
15. Ajay V. Perception of Indian Consumers Towards Indian Advertisements", International Journal of Research in Humanities, Arts and Literature. 2014;2(2).

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