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*The Journal of Media and Social Development* is an initiative to create scholarship in the area of media and social development by encouraging scholarly work by the academicians in interdisciplinary areas of social sciences. The Journal is a platform for publishing high quality original research and experiments in the significant areas of economic, political, social, cultural and media perspectives of development.

# Journal of Media and Social Development

Changing Socio – Cultural Prospects through DTH in Hubli – Dharwad Region  
VAGDEVI H.S.,  
N.S. ASHOK KUMAR

Role of NUHM in Improving the Health of Urban Poor: Analysis of Implementation and Communication Strategies Used  
VAHINI

Modern Birth Control Measures :  
Attitude and Perception of Rural Indian Women  
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Media Intervention in Science and Technology Communication among Rural Women  
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*A Perspective*  
Digital Communication and Media Inclusion  
USHA RANI N.

The Impact of Radio Siddhartha Community Radio Station on the Integrated Development of Tumkur Taluk - A Sociological Study  
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NAGARAJA S.

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The Project has established Centre for Area Studies. The Centre has started M.Phil in '*Area Studies - Karnataka Studies*' for the first time in the state of Karnataka. The Project has established state of art infrastructure in the Department of Studies in Communication and Journalism, University of Mysore to make media education more relevant and meaningful. The Project has ventured into publishing a Quarterly Newsletter, *ABHYUDAYA* (meaning Development) to create awareness about human development and its indicators among Research scholars and students.

# **JOURNAL OF MEDIA AND SOCIAL DEVELOPMENT**

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## Changing Socio – Cultural Prospects through DTH in Hubli – Dharwad Region

**VAGDEVI H.S.,  
N.S. ASHOK KUMAR**

### **Abstract**

*Television is undoubtedly the king of entertainment and in the flow of information. The biggest advantage of TV is that, since it is a visual medium, its impact transcends without social, cultural, economical and educational barriers; specially, in a country like India where each one hails from a diverse background. As per the Deloitte study, TV remains a favorite media source for most consumers across age irrespective of domicile: 92% of the respondents rank 'watching TV' as their top media source (Deloitte Study, 2010). Digitization is here to stay. With the present Indian government mooted 'digital India' the beginning of this new revolution is only going to grow by leaps and bounds. As per Media Partners Asia report, 2011, India is the second-largest digitized market in the world with 48 million digital homes, still only around 30 percent of total TV households in the country. This means that, there is a vast scope for growth and expansion of DTH services in Indian sub continent. India has an attractive FDI policy also and thus makes the DTH market more lucrative. DTH is growing at a great pace not only in urban centers but also in rural areas as well. It is thus, pivotal to study the impact of this technology on life and habits of people. Marketing Research firm, Francis Kanoi have claimed that 70% of DTH connections in India are from rural and small towns (Sinha, 2009) challenging all the logic. When we look into the changing space of culture in rural context as satellite television is making direct inroads into rural areas and since India is opening more towards multinational media entrepreneurs and fetching its arms towards digital India where the vision is to get every village connected digitally, television viewing will undergo a sea change and thus will also affect the changing cultural space in the society. The paper is part of the research, which tries to study the socio – cultural impact of DTH technology in rural areas of Hubli-Dharwad region in Karnataka State. This paper will look into the descriptive statistics on socio –cultural impact with the items listed.*

*The whole study is theorized on Albert Bandura's 'Social Learning Theory', which states that, people learn from one another, via observation, imitation, and modeling (Bandura A., 1977). He further adds that, people learn through observing others' behavior, attitudes, and outcomes of those behaviors (Ibid).*

**Keywords:** Television, DTH, Digital, Culture, Rural,

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## INTRODUCTION

Communication has progressed from symbolic drawings of Indus Civilization to Emperor Ashoka's rock edits to phonemic or etymological symbols to much recent finger printing. A significant revolutionary step in the development of written communication was embodied with the invention of the printing press, which allowed a rapid reproduction of written materials. The breakthrough came in with broadcasting which in India can be traced to British period which saw the growth of radio. It was the inexorable television that swept nation with all galore. Television is undoubtedly the king of entertainment and in the flow of information. The biggest advantage of TV is that, since it is a visual medium, its impact transcends without social, cultural, economical and educational barriers; specially, in a country like India where each one hails from a diverse background. This is one medium that is preferred across all sects and region as most popular form of entertainment. A global Deloitte study on 'Media democracy' in 2010 covering 2000 respondents confirms this domination and throws some interesting insights. As per the study, TV remains a favorite media source for most consumers across age irrespective of domicile: 92% of the respondents rank 'watching TV' as their top media source (Deloitte Study, 2010). Digitization is here to stay. Being digital, will bring in the capability to persistently enhance services, which will largely increase the number of channels and enhance the quality of reception. This will also enable the growth of new services

like, pay-per-view, video-on-demand, e-commerce and Internet etc. The picture and sound quality in digital is indisputably superior to that of analogue. With the present Indian government mooted 'digital India' the beginning of this new revolution is only going to grow by leaps and bounds. The major ways today where audiences receive television services are:

- Terrestrial transmission
- Cable TV
- Direct-to-Home (DTH) Satellite
- Digital Subscriber Line (DSL) or Ethernet borne broadband TV

Of all the new digital technologies, the one that has picked up fast and is growing strong is Direct to Home technology popularly addressed as DTH. The DTH service is a digital satellite service that provides television services direct to subscribers anywhere in the country. Since, it makes use of wireless technology, programs are sent to the subscriber's television direct from the satellite, eliminating the need for cables and any cable infrastructure. This is particularly valuable in remote and difficult to reach areas where cable and in many cases, terrestrial television services are poor or nonexistent. The mushrooming of small-sized Ku-band antennae emerging on rooftops not only in metros but also in rural areas reminds us of initial days of Doordharshan when DD antennas mushroomed all over the country. The tempo at which DTH is growing shows the trend where, DTH dish gazing at the sky is bound to escalate in the coming years. Usha Manchanda rightly terms it as 'Invasion from Skies' (Manchanda, 1998).

The total number of TV owning households in India which was estimated at 153 million in 2011 -12 has increased to 168 million in 2014. Out of this, Cable and Satellite households are 145 million and Digital connection households are 78 million as per TAM Media Research 2014. The digital household has seen 8% growth in past one year. The DTH industry is currently pegged at 2.6 million subscribers. The Indian DTH industry is estimated to have clocked revenue of about \$ 1.5 billion in 2012. Hong Kong based research firm, Media Partners Asia has said that, DTH industry revenues will reach \$ 3.9 billion by 2017 and \$ 5.3 billion by 2020 as per the

Bussinessline report in 2013. Currently, DTH penetrates 30 percent of India's 168 million television households. With DTH being easy to access and affordable, its entry to rural markets is swift. As per Media Partners Asia report, 2011, India is the second-largest digitized market in the world with 48 million digital homes, still only around 30 percent of total TV households in the country. This means that, there is a vast scope for growth and expansion of DTH services in Indian sub-continent. India has an attractive FDI policy also and thus makes the DTH market more lucrative.

DTH is growing at a great pace not only in urban centers but also in rural areas as well. It is thus, pivotal to study the impact of this technology on life and habits of people. Marketing Research firm, Francis Kanoi have claimed that 70% of DTH connections in India are from rural and small towns (Sinha, 2009) challenging all the logic. Today, we live in digital world which is constantly altering our lives both public and personnel. This is influencing our ways of communication, learning and understanding the happenings around us. The impact of this technology on our education, politics, art, culture and in all the different aspects of society is deictic. It is not just the digital technology that concerns us but what is more important is that the social change that comes along. This new technology is slowly but steadily changing the way people live their lives. If we look at the TV penetration in the state, as per TAM media research 2014, Karnataka has 87 million TV households. Today, we live in the midst of revolution in communication technologies, which is transforming every aspect of our lives. Its major influence can be seen in our changing cultural and social practices. With DTH being easy to access and affordable, it is entering rural markets quite fast. The wide variety of programmes viewing availability through different channels and the influence it is going to have on the audience cannot be marginalized. It is necessary to study how audience reacts to changing subjects and why they react that way and what influences them in rural context. The paper is part of the research, which tries to study the socio-cultural impact of DTH technology in rural areas of Hubli-Dharwad region. This paper will only look into the descriptive statistics on socio-cultural

impact with the items listed. The whole study is theorized on Albert Bandura's 'Social Learning Theory', which states that, people learn from one another, via observation, imitation, and modeling (Bandura A., 1977). He further adds that, people learn through observing others' behavior, attitudes, and outcomes of those behaviors (Ibid).

## **REVIEW OF LITERATURE**

The advent of satellite television in the 1990s is a watershed in the history of television broadcasting in this country as it changed the television landscape forever and led to issues that we are still grappling with. Indian television suddenly became much for entertainment driven (Page and Crawley, 2001; Singhal and Rogers, 2001; Singha, 1998). Various theories and research suggests that mass communication can act as a positive agent of social change for some people while impeding and obstructing change for others (Johnson, 2000). It is seen many research studies which relate to media effect on human psychology where it states that, media creates a psychic mobility among people living in countryside societies in turn, resulting in geographical and social mobility owing to people's longing for modern life and salaried employment of the cities. The image created by media more so of television brings about a longing for change in rural areas. This change in behaviour and attitudes results in change of culture of a society, which slowly adopts new ways and means (Thussu, 2009). There are few popular studies like that of Binod Agrawal, Melissa Butcher, Arjun Appadurai who deal with cultural dimension of transnational television the focus is more on content. There are many research studies that talk of media influence on culture with reference to urban areas like media influence on urban youth in Karnataka, Devdas & Ravi (2013), Firoz (2014) and Jha (2013) speaks of influence of DTH in Dehli Metropolis. When we look into the changing space of culture in rural context as satellite television is making direct inroads into rural areas and since India is opening more towards multinational media entrepreneurs and stretching its arms towards digital India where the vision is to get every village connected digitally, television viewing will undergo a sea change and thus will also affect the changing cultural space in the society.

## METHODOLOGY

The study used a non-probability Judgement Sampling. This kind of sampling helps, when doing research on a large population where it is impractical to study every single member of the group or when the universe of the research is not known like in the present study. In judgement sampling researcher relies on his or her own judgement when choosing members of population to participate or place in the study. A judgemental sampling is a non-probability sampling method in which the elements preferred for the sample are selected by the judgment of the researchers. The researcher in this study has selected the Hubli - Dharwad region based on certain insights. It is often seen that when we compare the districts of north Karnataka with that of south Karnataka more frequently it is observed that, the south Karnataka fares well in all demographic indicators as compared to north Karnataka. It can also be seen that the rural parts of the south districts are connected with better transport, health and education facilities and a lack of which can be observed in rural parts of north Karnataka districts. Keeping this in mind and after thoroughly examining the performance of districts through their demographic indicators the regions of Hubli - Dharwad was selected which falls in between which is neither outstanding nor poor. The areas selected are; Mansur, Mangundi, Hulkoppa, Navlur and Kusugal. It was also taken into the account that the areas under the study fall within the 10 kms of the city/urban centre. This was done to see whether even after being at such close proximity to that of city, what are the reasons that prompted the residents in these rural areas prefer DTH over the cable connections. The survey method was used to collect the data. For the purpose of the study a survey through a structured questionnaire was carried on among the 400 respondents. The age of respondents is between 18 -70 years and thus excluding children and adolescents from the study.

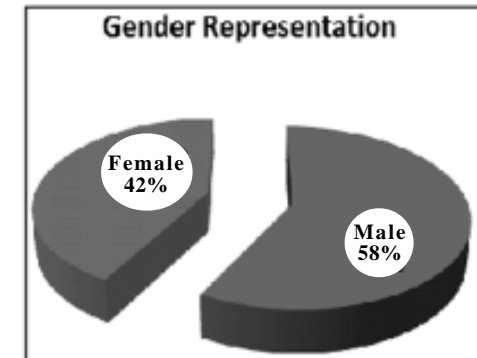
## OBJECTIVES OF THE STUDY

- The principal objective of the study is to assess the impact of DTH television on cultural values of the people in Hubli – Dharwad region.
- To find out the relationship between the viewing of television channels

through DTH connection and its implications on socio-cultural norms like food and dress; lifestyle, values related to family, marriage, customs and tradition.

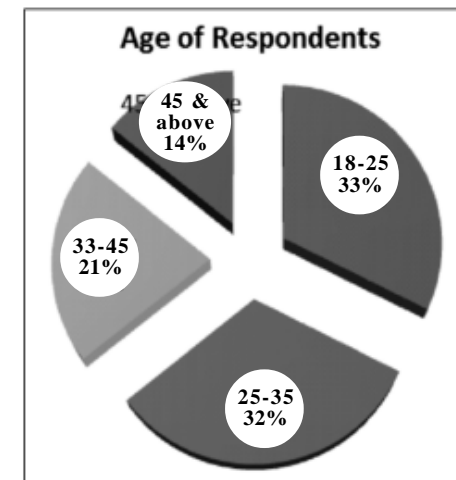
## ANALYSIS

**Graph 1:  
Gender Representation**



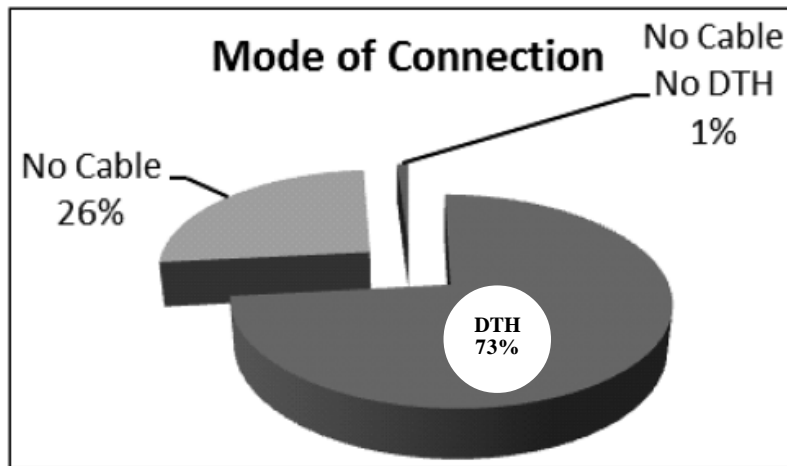
The classification of respondents by their gender shows that, 58.0 percent of the respondents are male and remaining 42.0 percent are female. This shows that though, it is commonly understood that female watch TV more than males, but, because of the social construct in study areas not many female respondents were keen to come out and answer and be a part of this study. Even when female respondents answered many a time, the researcher noted that the male supervised or prompted the answers.

**Graph 2:  
Age of Respondents  
under the Study**



Looking at the age group of respondents it is clearly evident from Graph 2 that in four class intervals of age group defined viz., 18 to 25, 25 to 35, 35 to 45 and 45 and above respectively, 32.3 percent of respondents are in the age group of 18 to 25 years and 32.0 percent of respondents in the age group of 25 to 35 years. Similarly, 21.3 percent of them are in the age group of 35 to 45 years and 14.3 above 45 years of age. The survey has tried to get representation from all age groups to get viewing habits, choices, and perceptions of different age group in the survey under its purview.

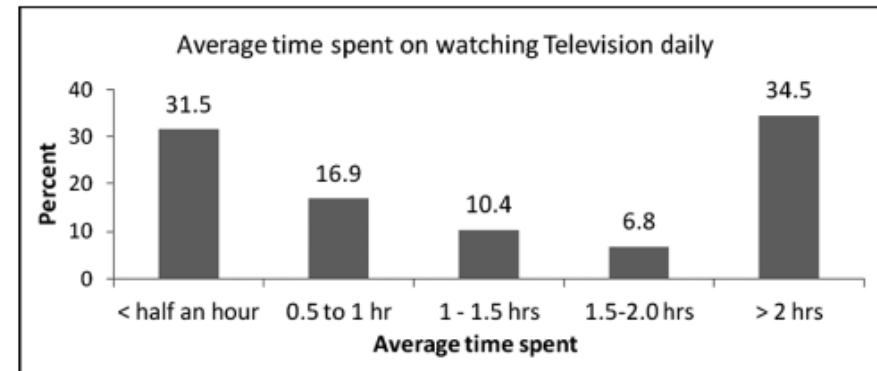
**Graph 3: Mode of Connectivity**



These statistics also point at the fact that, the reliance on DD as primary source of channel for entertainment, news, information have decreased over the years and private channels through means of cable and more recently DTH have taken the prominence. Through field study researcher noticed that, there is a shift from cable to DTH i.e. the homes which had cable connection prior are shifting towards DTH. It is also observed that, the homes which have more proximity to city have cable connections like that in Hubli region than in Dharwad where, more people opted for DTH connections. However, both are twin cities, the geographies differ and thus play an important role in choice of television viewing. Slowly, the trend in DTH is catching up to an extent so much that DTH is television much like Xerox became the identifier for the good old photocopier!

On the issue of average time spent on watching television in a day, it emerges from Graph 4 that 31.5 percent of respondents on an average watch less than half an hour on a given day. Similarly, 16.9 percent of respondents devote about half an hour to one hour to watch television programmes and another 10.1 percent of respondents spend about one to one and half hour in watching their favourite sports programme. Interestingly, about one third (34.5 percent) of respondents under sample study watch more than two hours a day in watching television programmes. The statistics to certain extent give a benchmark in analyzing the impact of television in case study areas. It is widely believed that higher age groups are more likely to spend more time on watching television as compared to lesser age group (youth).

**Graph 4: Time spent on watching Television**

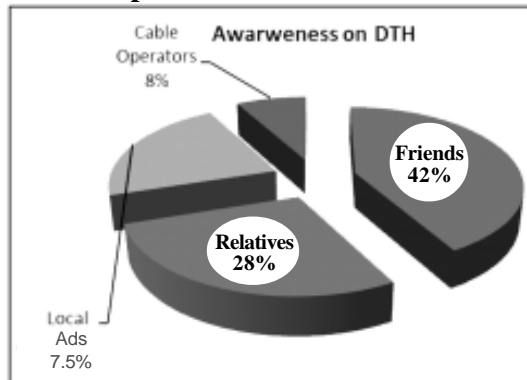


When asked them the source of information to get to know about the concept of DTH service, it emerged that 42.2 percent of respondents (Graph 5) say that they got to know about DTH services through friends and another 28.3 percent of respondents got to know through their relatives. Nearly, one-fourth of respondents (22.1 percent) respondents and another 7.5 percent disclosed that the source of information with regard to availability of DTH facilities was through local advertisement and cable operators. In many a cases, the respondents who have gone to the city would have come across the advertisement and there by prompted for the connection. Through research, it was understood that, for many respondents the DTH connection came as an offer when they acquired new television. The television itself is



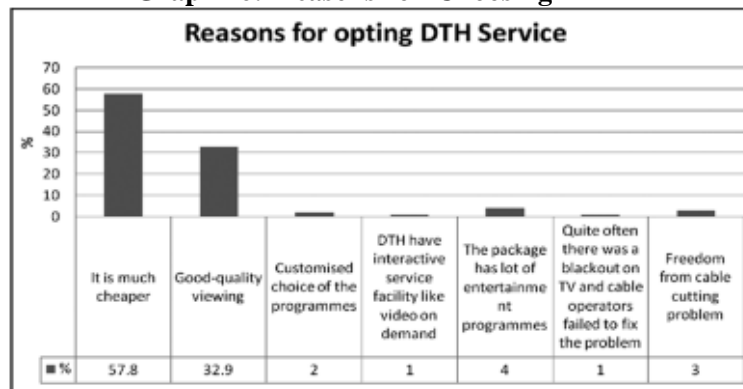
a new phenomenon and their introduction to private channels was through DTH itself. It is also seen that, due to geographical barriers at times the local cable operator himself has suggested the option of DTH. However, the word of mouth has been the biggest publicity for DTH. Where, a suggestion from neighbour or a person you know is valued and trusted than an advertisement in newspaper or on television.

**Graph 5 : Awareness on DTH**



Secondly, answering to the query on the reasons that prompted them to avail the DTH facility, about 58 percent of respondents (Graph 6) said that it is much cheaper in monetary terms in the long run. Similarly, 32.9 percent of respondents informed that because of good quality viewing, they opted for DTH services. Many respondents also felt liberty of payment as and when they have money, which means, there will not be cable operator at their doors every month end to collect the fee.

**Graph 6: Reasons for Choosing DTH**



The DTH provided option to have the set up and recharge whenever they had money. Unlike, cable where the operator will take away the whole set up if monthly remuneration is not paid. Respondents also feel that, DTH have clear quality of picture as opposed to cable where picture quality is jeopardized by tapping here and there. First of all the geography poses a challenge to have cable wire run so long where the picture quality is lost and to add to that problem of tapping. This is not there in DTH. Respondents are of opinion that, the DTH platform gives more liberty in choice of channels as opposed to cable where the choice of channels is at operators wish. Though, the local cable operator goes with the likes of the regional people yet there will be some channels that is of his choice and which may not be watched by respondents but nevertheless the subscription fees are to be borne by the subscribers. The respondents feel that, in rural areas there will be power cut for 6-8 hours and in this time there won't be any transmission and finally when there is power in respondents place, there might not be power elsewhere and hence access to programmes again is disturbed, in DTH this is not so. The DTH provides a way out where, even though the power cut is prevalent the television can still be viewed with inverter being the supplier of the electricity. Surprisingly, few precisely 1 percent of the respondents spoke about interactive services as an option which made them shift from cable to DTH platform. Interestingly, few also find redressal more quick and faster in DTH as compared to cable network. It was known in the survey that, the LCO never turned up after many calls where as the customer service centre atleast took the calls and lodge complaints and few even claimed that their approach to solve problems is faster.

**Table -1 Descriptive Statistics on level of agreement on the coverage of social and cultural programmes with Conditional Access System (DTH channels)**

		DTH channels (in %)					Mode	Sd
		S.D	D	N	A	S.A		
1	More often, I watch programmes aired in recent times	3.0	12.3	28.7	38.3	17.7	4.0	1.02
2	More often, coverage of general news is better	0.7	9.7	24.3	40.3	25.0	4.0	0.95
3	More often, coverage of Sports related events are better	2.7	8.0	28.0	42.0	19.3	4.0	0.96
4	More often, coverage of local based events/ activities are better	1.3	6.0	25.3	42.0	25.3	4.0	0.92
5	More often, coverage of agricultural programmes are better	5.3	19.0	31.0	27.0	17.7	3.0	1.13
6	More often, airing of entertainment based programmes are better	3.3	5.3	32.3	39.0	20.0	4.0	0.96
7	More often, programmes such as health, rural sanitation etc., are aired better	4.7	17.7	30.3	31.0	16.3	4.0	1.09
8	More often, the value based programmes are aired better	7.0	18.3	30.3	27.3	17.0	3.0	1.16
9	More often, educative programme are aired better	2.3	8.0	25.3	45.0	19.3	4.0	0.95
10	More often, stories on politics are better covered	12.0	14.7	18.3	30.0	25.0	4.0	1.33
11	More often, reality shows aired are better	3.0	9.3	25.3	38.3	24.0	4.0	1.03
12	More often, programmes related to astrology, horoscope or any related topics broadcasted	2.0	12.7	29.0	33.3	23.0	4.0	1.03
13	More often Cookery show through DTH have influence on your eating habits	3.3	13.0	31.7	30.3	21.7	3.0	1.07

14	More often, Movies and movie based programmes broadcasted better	2.7	11.0	27.0	40.3	19.0	4.0	1.00
15	More often, Music and related programmes better	1.7	11.3	31.3	37.0	18.7	4.0	0.97
16	More often, Law programmes are better	1.7	7.7	27.0	41.7	22.0	4.0	0.94
17	More often, there has been a change in my traditional menu after watching food channels	2.7	11.0	31.3	38.0	17.0	4.0	0.98
18	More often, news on Science & technology are better	3.3	13.0	31.7	30.3	21.7	4.0	1.01
19	More often, Crime & related stories are better covered	4.7	12.0	31.0	35.3	17.0	4.0	1.06
20	There has been a change in dressing style after watching fashion and other family drama serials	4.3	15.7	26.7	36.0	17.3	4.0	1.08

After briefing on the profile and perception of the respondents relating to reasons for opting DTH services by way of descriptive statistics, this section addresses the defined objectives of the study. In essence, the perception of respondents [through quantitatively] on their Socio Economic and Cultural impact and Changing trend from cable to DTH channels and DTH based programmes in relation to case study areas is being discussed. First, information was gathered on a Likert scale based questions. In other words, the set of relevant questions was based on item scoring pattern. This part of the questionnaire consisted of 20 items related to Socio Cultural impact and Changing trend from Conditional Access System (CAS) to DTH. The Scoring was on a five point Likert ordinal scale from 1 to 5. No reverse scoring item is given in the questionnaire. The pattern is as follows: Strongly Agree – the score is 5, ‘Agree –4’, Neutral– 3, Disagree – 2 and Strongly Disagree -1.

A brief descriptive statistics is provided in Table-1 for those items related to their Socio Economic impact and changing trend from cable to DTH channels and DTH based programmes with similar Likert scale description. The percent of five Likert scale scoring of each item is provided which is self explanatory. Furthermore, Mode and standard deviation is also provided. Accordingly, for the first item, the modal score is 5.0 indicating respondents are strongly agreeing that they are more oriented to watch DTH services with about 73 percent strongly agreeing while only five percent of respondents strongly agreeing they are more interested in watching DD in recent times as compared to DTH aired programmes.

The standard deviation 1.1 indicating the variation is about one mark from each individual respondent's score. Likewise, most of other items have modal score of 5.0 indicating that respondents consent their view with just agreeing and not either strongly agreeing themselves in present context. A similar scenario is observed with respect to coverage of general news. It is again observed that more than three fourth of respondents (76 percent) of them overwhelmingly giving credit to DTH based channels are better while eight percent of respondents strongly agreeing that general news is better in DD channels. Surprisingly, 51 percent of respondents remained neutral while answering this query. This is indicative of the fact that, there are situations where the respondents have stuck to DD news and at times have wavered to private channel broadcast through DTH. It was observed through field study that, many a time people even though watched news of private channels, they would still wait for news on DD to find out the accuracy of the news telecast on private channels.

However, on aspects namely programmes such as health, rural sanitation, value based programmes and educative programme, it was said that, DD aired better programmes where nearly 70 percent of respondents strongly agreeing while only about 25 percent of respondents strongly agreeing for DTH based channels. Again, the same scenario is observed with respect to airing of agricultural based programmes, it is the DD channels, which are ahead in terms of percentage of people strongly agreeing as compared to

DTH channels. This point to the fact that, even today with respect to specific areas people trust DD than any other private channels. Given the rural set up and agriculture the primary occupation, farmers rely on agricultural news. This is broadcast in DD Chandana in regional language, Kannada. Therefore, for most respondents with farming background any information related to agriculture was equal to DD in itself. It can be said here that in many areas of education, health and informative programmes, DD still ranks among the top.

## CONCLUSION

Television has an influencing role on people as it can stir the sensation of emotions among them. Today, DTH industry is mainly focusing upon increasing customer base and average revenue per users (ARPU). On one hand, DTH operators are focusing on domestic customers. The Indian DTH sector is passing through a dynamic transformational phase, as it is undergoing the operation of market forces of demand and supply. The respondents in the study area though accepted the changes that are brought in by DTH this change are not just associated with science and technology but also changes in human nature and behavior as such. It is in economic terms that we talk growth but when we talk of development it is holistic in nature and what DTH has done to society is making space for a fusion of traditional with modern ideas. The adaptability and acceptability of new thinking, new lifestyle, and western ideas are some of the aspects that respondents were vocal about. The primary data based on statistical analysis shows that, the influence of DTH on the respondents of the study area is visible whether male or female from any age group. What is known through the study that, the eating habits of the local people are slowly seeing a change so also is their sense of dressing. The exchange of words and their behavior everything is seeing a change, which is seeping in making it as a part of the existing culture. As Arvind Singhal et. al. (2006) points out, media programs can facilitate social change by stimulating the development of social capital in community.

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# Role of NUHM in Improving the Health of Urban Poor: Analysis of Implementation and Communication Strategies Used

VAHINI

## Abstract

*Health is an important indicator of individual's development and well-being. Irrespective of enormous investments in the sector, subsidies, and free treatment facilities by both government and NGOs, the health profile of an average Indian shows a poor status of affairs. The surest way to improve the health profile is to increase the health awareness accomplished by health communication. The central government had implemented National Urban Health Mission (NUHM) as part of National Health Mission keeping urban poor in view to improve their health condition. The present study would throw light upon Programme Implementation Plans of NUHM with specific reference to information dissemination and programme promotion strategies. This study grounded on theories such as health belief model, theory of reasoned action, social cognitive and agenda setting. The study aims to analyze the objectives of NUHM and its implementation plans with special reference to communication aspects incorporated in program execution. Research will look into "how communication strategies are made and implemented in NUHM and how does it help in effective implementation?" It is a qualitative research. Data is collected using interview and secondary data analysis. Research found that NUHM has the potential to improve the urban health in all perspectives. It had contributed to the betterment of infrastructure and better staffing. The communication is meticulously planned on paper but the execution lacks at all levels. Communication training would improve the quality of service provided under NUHM and it will accelerate the achievement of NUHM goals.*

**Keywords:** NUHM, Urban Poor, Health communication, Awareness, Programme Implementation Plans.

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## INTRODUCTION

There has been considerable growth in urbanization in India since last decade. Census 2011 shows that there is increase in urban population with 377 million. As per UN projection if India's urban population grows at this rate then 46% of the population will be living in urban areas by 2030. Due to rapid urbanization, there is influx in migration, expansion of city boundaries and parallel rise in slum population and urban poverty. Out of 377 million urban population, about 100 million are living in slums facing variety of health problems due to improper sanitation and unhygienic conditions and prone to communicable and non-communicable diseases. Out of more than 2 million births among urban population, 56% of the delivery takes place at home. Over 60% of the urban poor children do not receive complete immunization. 47.1% of the urban children are underweight, 59% of the women are anemic, and several other health indicators are poor compared to that of rural population. The common reasons cited by the officials for poor health condition among urban poor are social exclusion, lack of information and assistance, expensive private health care facilities, perceived unfriendly treatment at government hospitals, non-availability of caretakers, ineffective outreach, and weak referral system, lack of basic health infrastructure etc.

## RATIONALE FOR THE STUDY

The extent to which India's health system can provide for this large and growing city based population will determine the country's success in achieving universal health coverage and improved national health indices. During 11<sup>th</sup> plan the Crude Birth Rate (per 1000) is 19.1, Crude Death Rate (per 1000) is 6.0, IMR (per 1000 live births) is 40.0, Prevalence of Anemia among Children (6–35 months) is 72.7%, and Prevalence of Anemia among Pregnant Women is 54.6 %.

Recognizing the seriousness of the health problem the government took up urban health as a thrust area in 12<sup>th</sup> five-year plan. In 2005, the Prime Minister Manmohan Singh launched the National Rural Health Mission (NRHM) to improve the health care among rural population. Later in order

to cater to the health needs of the urban poor government made a broad umbrella called National Health Mission (NHM). Government brought NRHM and National Urban Health Mission (NUHM) under NHM. NUHM was launched in May 2013 with the objective of meeting the health care needs of the urban population with the focus on urban poor, by making available to them essential primary health care services and reducing their out of pocket expenses for treatment. NUHM planned to cater to the health needs of urban poor, homeless, rag pickers, rickshaw pullers, street children, sex workers, construction workers, and temporary migrants. The goals of NUHM is to facilitate equitable access to quality health care through a revamped public health system consisting of partnership with NGO's, community based risk pooling and insurance mechanism, active involvement of local urban bodies and synergizing the existing system.

## LITERATURE REVIEW

Provision of good health care to the people is an essential component of the health strategy adopted by the state. The public expenditure of health is about 0.9 percent of GSDP during 11<sup>th</sup> plan period. The 12<sup>th</sup> Five Year Plan (2012-17) is aimed at controlling population and reducing infant and maternal mortality through strengthening health services. Karnataka has performed relatively better in population control with total fertility rate 1.9 by reaching 12<sup>th</sup> Five Year Plan target in 2013 itself. Infant mortality rate is reduced to 32 per 1000 live births in 2013 from about 50 in 2004 (SRS, 20014). Karnataka has more than one-third of its women (35.5%) with Body Mass Index (BMI) less than 18.5 kg/m<sup>2</sup>, indicating high prevalence of nutritional deficiency. There is also high prevalence of anemia among women (51.5%) and children (70%) (DLHS-4, 2014).

Gochman (1997) defined health behavior as “those personal attributes such as beliefs, expectations, motives, values, perceptions, and other cognitive elements; personality characteristics, including effective and emotional states and traits; and overt behaviour patterns, actions, and habits that relate to health maintenance, to health restoration, and to health improvement”.

Socioeconomic status has been linked with both health status and health behaviour, with less affluent persons consistently experiencing higher morbidity and mortality (Berkman & Kawachi, 2000). The study done on effectiveness of behaviour change communication (BCC) for increasing immunization coverage by Nair & Nair (2012) concluded that use of BCC as an effective strategy for scaling up coverage of immunization is successful. Communication messages and tools for different interpersonal and mass media communication channels are carefully planned for BCC, designed and pretested based on the local situations through appropriate audience segmentation (Pencheon et. al., 2005). The research done in Cambodia using survey method concluded that complete immunization had increased 20 percent in one year and sharp reductions in measles are the result of increased educational efforts and different communication channels for community mobilization.

The programme based on adolescent health titled 'I need to know', has been successful in Nigeria in bridging the gap between parent and child, while encouraging open dialogue on adolescent sexual health issues as well as encouraging policy makers to provide adolescents access to information and youth friendly services.

A radio talk show 'Window of Love' was used in Vietnam to educate adolescents on sensitive aspects of reproductive health. It was popular among adolescents than other programmes. Health communication programs in developing countries often face great barriers due to the target audience's lower levels of education, restricted individual agency, immediate concerns that take precedence over health, and resource constraints at the individual and community levels.

Health communication partnership (HCP) programme of USAID had reinforced the notion that successful evidence based communication programs can influence the public agenda, advocate for policies and programs, promote positive changes in the socio-economic and physical environment, improve the effectiveness of service delivery systems, stimulate debate and dialogue for health, and encourage social norms that benefit health and quality

of life. In health communication, messages affect attitudes only when people understand, process, and remember them (Krauss & Fussell, 1996) and feel motivated to apply them in their everyday life. Knowledge and attitude change are also influenced by the way information is presented. Establishing open and trusting communication is often the first step in creating a receptive environment in which information can be perceived as reliable and worthy of consideration. All successful communications and interactions usually require a reasonably good understanding of the other person's point of view (Brown, 1965).

Interpersonal behaviour and communications are highly influenced by cultural, social, age, and gender related aspects, as well as literacy levels and individual factors and attitudes. Health communication experiments in India have proved that the localized, need based, relevant health messages framed with the socio-cultural and economic consideration would yield better results. It is also revealed that health communication should incorporate the audience centric treatment for the messages. Human values, aspirations and economic and social background, environment essentially influences the reception and interpretation of health messages.

Polio Communication campaign design identified the need for developing separate communication strategies by considering social reasons for the refusal of vaccination at different levels. As it is mentioned in Polio Communication Quarterly of WHO (2011) "Despite meeting a milestone, work may still remain to meet the needs of the country specific context; classification of risk has therefore been determined using both a quantitative as well as a qualitative lens."

## **THEORETICAL FRAMEWORK**

According to Health Belief Model individual health behaviour is determined by the individual belief system including perceived susceptibility, perceived severity, perceived benefit, perceived self-efficacy and perceived barriers with cues to action. Gender, age, ethnicity, personality, socioeconomics and knowledge are the modifying factors.

The Theory of Reasoned Action (TRA) and the Theory of Planned Behaviour (TPB) focus on theoretical constructs concerned with individual motivational factors as determinants of the likelihood of performing a specific behaviour. It assumes the best predictor of a behaviour is behavioural intention, which in turn is determined by attitude toward the behaviour and social normative perceptions regarding it.

The Social Cognitive theory emphasizes reciprocal determinism in the interaction between people and their environments. SCT posits that human behaviour is the product of the dynamic interplay of personal, behavioural, and environmental influences.

Sir Douglas Black from London said “The main determinants of health and diseases lie outside the realm of direct medical competency”. This statement emphasizes the significance of nonmedical interventions. Therefore, health is one of the prime research areas for social scientists. The focus of the present research is to find out the existing state of communication strategy usage in NUHM and its significance in effective implementation of NUHM .

## OBJECTIVES

The study aims to analyse the objectives of NUHM and its implementation plans with special reference to communication aspects incorporated in program execution. Research will look into “how communication strategies are made and implemented in NUHM and how does it help in effective implementation?” It will also look into the effectiveness of NUHM in Bangalore city and its localized implementation strategies. Further study specifically seeks to ;

1. find out the health facilities available under NUHM and use of these facilities
2. know the use of various media in impacting health knowledge and attitude,
3. examine the implementation of communication strategies to involve communities
4. assess the program implementation plans (PIP),

5. study strengths and lacunae of health information dissemination system under NUHM.

## METHODOLOGY

It is a qualitative research using interview and secondary data analysis techniques . The interview was conducted among state and BBMP health department officials who are involved in implementation of NUHM. A total of 20 officers working for NUHM and doctors were interviewed. The policy documents and PIPs are analyzed for their relevance and to know the strategies. The implementation pattern and monitoring system was examined by evaluating organization structure. The previous research finding are referred to know the effectiveness of various media in bringing health awareness and positive influence on health practices. The documents such as NUHM implementation guidelines, PIP 2014-15 and 2015-16, NUHM framework and quality standards for urban PHCs 2015 formed the basic secondary data for this study.

## ANALYSIS AND DISCUSSION

The data compiled through secondary data analysis and interviews are presented in narrative manner. The documents' evaluation was done with specific focus on communication strategies adopted by these agencies. The Programme Implementation Plans of Bangalore City for the period of 2014 to 2016 were analysed.

### Challenges of Urbanization

Urbanization has posed many challenges due to migration, leading to increased growth of slums that lack infrastructure, basic amenities like safe drinking water, sanitation, housing etc, increasing the risk of both communicable and non-communicable diseases etc. The challenges of urban health exist in terms of administrative issues, policy issues, operational issues, and large size of the population. The possible solutions can be ensuring adequate and reliable health related data, inter-sectoral co-ordination, sharing

of successful experiences and best practice models, reducing the financial burden of health care through improved financing techniques, strengthening public private partnerships and strengthening public health care facilities. Migration among urban poor resulted in overcrowding, unhygienic living condition, illiteracy, communicable diseases, life style modification, non-communicable diseases, crimes, stress and mental illness etc. The key elements of health among urban poor are marriage and fertility, maternal health, child survival, family planning, environmental conditions, infectious diseases and access to health care. The NUHM is one of the flagship programmes of Central government to address urban health challenges. The ground realities illustrate that comprehensive health policy and programmes are required to address these challenges.

#### **Health facilities available under NUHM and use of these facilities**

National Urban Health Mission (NUHM) aims to improve the health status of the urban poor particularly the slum dwellers and other disadvantaged sections, by facilitating equitable access to quality health care through a revamped and reoriented public health delivery system, partnerships with community and with the active involvement of the Urban Local Bodies (ULBs). NUHM covers all the district headquarters and other cities/towns with a population of 50,000 and above in a phased manner. The emphasis will be to improve existing public health delivery system with a thrust on making available adequate health human resources, upgrading the existing health facilities in terms of infrastructure and equipment, and establishing new health facilities wherever necessary by providing specialist care as well as strengthening emergency response systems.

The strategy will comprise of strengthening the existing primary health care centers, establishing new primary health care centers wherever appropriately needed. Further, special outreach camps are conducted by Auxiliary Nurse Midwives (ANM) and Urban-Accredited Social Health Activists to ensure health care delivery at the doorstep. Community participation will be facilitated by the *Mahila Arogya Samithis* (MAS) which

will act as a bridge between the communities and the nearest health facility. The U-ASHAs will play the role of provider of first contact care and generate community awareness with regard to various health issues, sanitation, and nutrition. Special care is taken to ensure that MAS would be constituted by drawing people from local population by ensuring adequate representation to the SC, ST and minorities. A comprehensive baseline survey and mapping has been undertaken to gain insight into the dynamics of health needs of existing listed and unlisted slum pockets, urban poor concentration areas and other vulnerable population.

Service delivery infrastructure is developed by establishing Urban Primary Health Centers (U-PHC), mobile PHCs, referral hospitals. The execution of program plans is done by city program management units and zonal program management units. ANMs are assigned to conduct one outreach camp once a month in her area. The health officials have appreciated the facility provisions under NUHM. Due to NUHM implementation, the maternity homes are called as Urban Population Welfare Health Centers. It works as 24 hours maternity centers and provides facilities given under PHCs. It is considered as first referral unit. As specialists care is not affordable by the urban poor, NUHM had developed the referral system. Big hospitals are linked with specialists care. Panel of specialists is appointed and their service is provided across Bangalore city. NUHM has made the provision to hire more human resources from appointing ASHAs, ANMs and doctors. It has reduced the burden on existing staff and has improved the quality of service.

#### **Use of media to influence health knowledge and attitude**

Media bring change and shape social interaction, influencing people's thinking and opinion. They undermine traditional values and bring new values in the system. All over the world, it is observed that individuals and villages that welcomed modern media have more modern attitudes, are more progressive, and moved to modern roles faster than those who didn't (Pool 1996).



The dissemination and utilization of any idea depend not only on the mass media but also on interpersonal communication between people. However, mass media have a tremendous impact on the attitudes, taste, and worldviews of people. Through reading, watching movies, listening to radio, and viewing television, people in the villages and impoverished cities discovered a land of their hearts' desire and came to know different ways of life that were different to their inherited rut (Pool 1996).

In the 1970s, the idea of using television as an instructional/ development medium appealed to both administrators and development experts because of its immense potentials in propagating useful ideas and practices. Singhal and Rogers (1999) points out that entertainment-education programs either directly or indirectly facilitate social change:

- At the individual level by influencing awareness, attention, and behavior toward a socially desirable objective;
- At the larger community level of the individual audience member by serving as an agenda setter, or influencing public and policy initiative in a socially desirable direction;

In this approach, educational contents are embedded in entertainment programs in media such as radio, television, records, videos and Folk Theater. Effects tend to be mostly cognitive changes, though some changes have been recorded that require behavior and value shifts.

The research done in Cambodia using survey method concluded that complete immunization had increased 20 percent in one year and sharp reductions in measles are the result of increased educational efforts and different communication channels for community mobilization. In this research BCC activities involved local NGOs and religious leaders along with extensive use of mass media and other interpersonal communication (IPC) tools (Soeung et al., 2007).

The study done during 2004-05 at five districts of Tanzania on acceptance of Malaria vaccine found that 96 percent mothers and their spouse agreed for vaccination post intervention. The BCC material developed using community champions and they were found to be highly effective.

The researcher has used Inter personal communication (IPC) through community health workers, mothers and community own resource persons, branding posters (Mushi, 2008).

A research conducted during 1990-94 in 56 countries marked increase in the vaccination coverage post intervention using different communication channels addressing adverse reaction of vaccination. It used BCC to improve knowledge through public health intervention, address concerns of people regarding vaccination through mass media and other communication tools (Atkinson, 1994).

A survey research done in Africa by Cutts et al. (1991) used mixed approach of addressing the low motivation level of health worker using BCC material and better planning of vaccination program resulted in coverage of measles vaccine increased from 16 percent in 1983 to 45 percent in 1988.

The researches on the role of BCC in the health sector has proved that multiple communication strategies considering all the stakeholders of the health system along with the support of technology would bring in behaviour change. Several studies done in India, Pakistan, USA, Canada and African countries related to immunization efforts have tried BCC with the help of telephonic reminders, post card reminders, automated phone message followed by letters, IEC activities addressing barriers at individual and community level, parents education, mobile vaccination units and computer based telephone client reminders.

Health communication partnership (HCP) programme of USAID had reinforced the notion that successful evidence-based communication programs can influence the public agenda, advocate for policies and programs, promote positive changes in the socio-economic and physical environment, improve the effectiveness of service delivery systems, stimulate debate and dialogue for health, and encourage social norms that benefit health and quality of life. Health communication experiments in India have proved that the localized, need based, relevant health messages framed with the socio-cultural and economic consideration would yield better result.

**The implementation of communication strategies to involve communities**

Under NUHM All the IEC / BCC activities will be planned at Urban Primary Health Centers (Urban-PHC). It is mentioned that IEC and BCC have an important role especially in urban areas where the influence of media and advertising needs to be countered effectively, especially against use of junk food, aerated drinks, tobacco and alcohol consumption, etc. Provision of Rs. 5 per capita for IEC/BCC has been allocated. Since PHCs are present in slums/ underserved areas in addition to the above activities NUHM emphasized on creating awareness about prevention of malnutrition and control of communicable and non communicable diseases in slums. As per NUHM implementation plan information will be provided through Group Inter Personal Communication (IPC) and discussions at the ward level to inform the public about U-PHCs and facilities offered including health and nutrition day observances at the UPHC level to improve immunization compliance, adequate nutritional knowledge and encourage neonatal checkups. According to strategy Awareness programs at ward level for reducing the prevalence of communicable diseases such as Tuberculosis, diarrheal diseases, Vector-borne diseases such as Dengue, Malaria and Chikungunya and other communicable diseases, information is provided through Group IPC and discussions held at the ward level to inform the public. Increased participation of NGOs, Slum Associations and local bodies will ensure better prevention and control of these diseases. Awareness program at ward level is focused on reducing unhygienic practices, garbage disposal, waste management and encouragement of good sanitation practices, creating demand for safe drinking water facilities, demand for toilets and their usage. Girls are collectively given a platform at slum level to visit the U-PHC to share their concerns and discuss good health measures.

*Mahila Arogya Samithis* are engaged in creating awareness on non-communicable diseases through group communication activities. Vulnerable groups such as auto drivers, vegetable vendors, guards/security personnel, maid servants, coolies, manual labourers, unorganized labourers, and daily wagers are identified through local NGOs, *Mahila Arogya Samithis* for awareness programmes. The NUHM programme is supported for developing web based HMIS component. A grant of Rs. 50,000 is allocated per UPHC

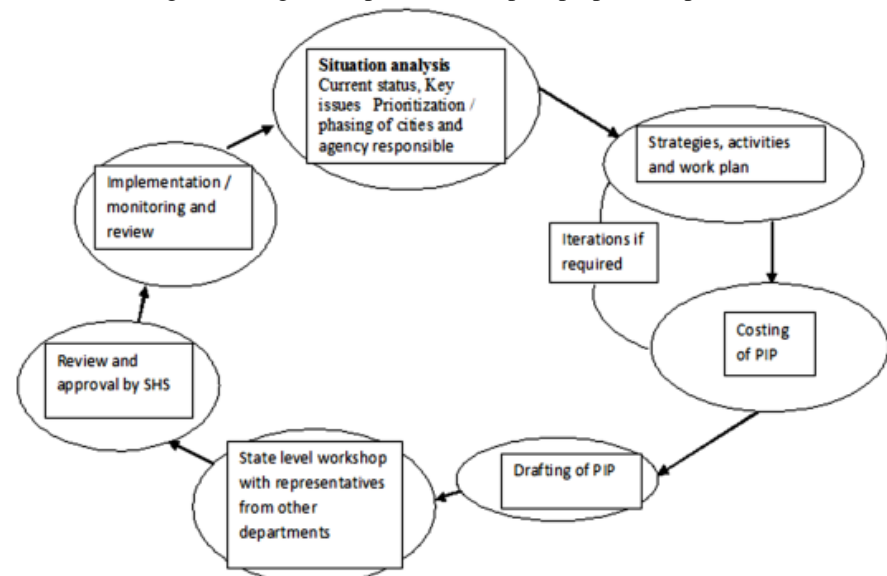
for procurement of computers and accessories for implementation of HMIS.

In order to provide primary health care to the population living in clusters and where it is not possible to construct urban Primary Health Centres an existing unused BBMP community building can be declared as a Health Kiosk in Bangalore city. There are 35 such kiosks in Bangalore. Under the NUHM, provision of Mobile Medical Unit (MMU) is one of the strategies to improve access. NUHM has IEC Material production provisions on health including personal hygiene, proper nutrition, use of tobacco, diseases, PNDDT Act, RT/STI and HIV/AIDS.

**Assessment of the Programme Implementation Plans**

Overall operationalizing of the scheme is the responsibility of the District Collector/District Magistrate who is the chairperson of the District Health Society. States/UTs need to prepare City Health Plans (CHP) for the identified cities/ towns. The CHP would consist of a situation analysis, key issues, strategies (including identification of facilities to be upgraded / location of new facilities, PPPs/ innovations, etc.), activities, work plan, program management arrangements including monitoring indicators/ results framework and proposed budget.

Figure 1-Program implementation plan preparation process



State need to constitute a planning team including representatives from other departments, in particular Urban Development Department / Directorate of Municipal Affairs/ Slum Board, etc. The State NUHM Plan needs to be presented and approved by the State Health Society prior to submission to Ministry of Health and Family Welfare. The interview with officers revealed that the meticulous planning and target group's involvement had made the PIP more target oriented. Need assessment is done with bottom up approach. There is relaxation in the PIP to adopt to local needs. Supplementary PIP can be made in September of every year. PIP has specific budgetary allocation for implementation. PIP has provided budget for data gathering, mapping, human resources, mobility support, office expenses, orientation of urban local bodies, training of ANM/paramedical staff, training of medical officers, orientation of specialists, constitution and training of MAS, selection and training of ASHA, strengthening of health services, drug procurement, outreach services/camps, renovation of upgradation of existing facilities, operating cost, school health programme, ASHA intensive, baseline/end line survey, research studies in urban public, and IT based monitoring initiatives etc.

### **Strengths and lacunae of health information dissemination system under NUHM**

The IEC officer said “NUHM has introduced the new information dissemination system by establishing *Mahila Arogya Samithi*. There is provision to train these people to handle emergencies in the community. ASHA will be the chairman of this *Samithi*. They are provided with Rs. 5000 for emergency drug purchase. NUHM has established City Health Society. A doctor who is actively involved in programme implementation said, that “the lessons learnt in Polio campaigns are integrated in implementation of NUHM. For the inter departmental coordination the District Task Force, Taluk Task force and Block Level Task Force are constituted to achieve effective reach of programs and cooperation at all levels. These bodies meet once in month to review and plan the implementation”.

Interviews with officials revealed that the demands and suggestions for health improvements by civic society are considered at the PHC while preparing and modifying PIPs, SHGs, Red Cross, *Charan Seva Samaja*, Lions and Rotary are also involved. The Civic bodies meet once every quarter in Bangalore. Through NUHM measures are taken to upgrade the infrastructure. NUHM has added need based infrastructure and provided specialist care. The Outreach and community counseling are made compulsory for its employees. The State health department is taking care of IEC material production and distribution along production of radio jingles and television health programs. Under NUHM, IEC material production provision is provided to districts. Rs. 1.75 lakhs per year is allotted to every PHCs for local planning. Local planning committee, *Rogi Kalyana Samithi* and *Mahila Arogya Samithis* are constituted for undertaking publicity. The branding of government health services is done by introducing more attractive colors, designs and codes. Mission *Indra Danush* programme has been designed to improve the immunization system. This programme is run on the lines of polio programme campaign.

NUHM expects to decrease the disease prevalence in urban areas, more institutional deliveries, positive health behavior change etc. But the implementation limitations are still curtailing the objectives of NUHM. The plans and policies are well worked and prepared. However, the result is not so glossy.

The infrastructural growth is not meeting the approved plan. As per the officers' opinion in 2014-15 Karnataka state received a huge grant of Rs. 1300 crore but it was not utilized. For the current year Rs. 1800 crore is allotted but concerned departments are not able to spend according to plan. However, there are repeated notifications on recruitments and the process has not begun in BBMP. ASHAs are the primary link between the community and the system. They are not well paid and they do not have fixed salary. Through the incentives they earn very meager amount. Therefore, there is discontinuation of work and ASHAs are doing their duty on part-time basis. The training of ASHAs are not conducted on fixed intervals and the

discontinuation also poses challenge for training. The retraining and reviews are very essentials for effective communication and motivation, which is not happening in BBMP frequently. Hospital employees' behavior with patients matters a lot for continuation of service utilization, but such trainings are not provided.

The effective communication skills are not taught to the grassroots workers. The ASHAs are having less education and find it difficult to communicate health messages. Presently the IEC officers take one session of one hour once in 2 days or week to train ASHAs and ANMs. Supportive supervision is lacking in Bangalore. Though health awareness and education is key strategy in NUHM it has failed to deliver.

The urban poor's priority is to earn rather to attend outreach programmes. It is major challenge for the workers to reach those people according to their convenience. The multi lingual set up has become major barrier in communication. Urban slums are cosmopolitan in nature, which requires specific plans. There is lack of *Anganawadi* centers, day care centers that is not included in NUHM. Unhygienic conditions, unclean water, and shifting of people due to rapid urbanization are the other challenges.

The communication training is very essential for health workers at all levels. The health department is focusing more on information dissemination rather than its format and impact. Training and retraining of the workers along with supportive supervision is required to meet the challenges. The electronic media penetration is very high in urban areas, which can be tapped as opportunity.

## CONCLUSION

Research found that health had close connection with the socio-cultural, economic and environmental aspects of the community. The NUHM has improved the infrastructure in urban areas and provided adequate staff. The communication plans are specifically focused on group communication. It has also emphasized the production of printed materials and usage of outdoor advertisements, radio and television to reach the target group. The outreach

programmes are planned meticulously and the workers are given responsibilities. The community involvement is encouraged through community based action groups to motivate them to become opinion leaders in the community related to health.

The analysis of previous program evaluation reports and research studies reveal that behavior change communication should incorporate audience centered approach and it should be community specific. Television has greater role to play when the entertainment education programmes are produced and transmitted on health. Programme Implementation Plans have provided budget head for communication and training. ICT is also incorporated for programme monitoring. Substantial funds are provided for the grassroots research and data collection to conduct need assessment studies of the community.

The programme is very strong according to policy. Adequate budget is also provided under NUHM for the betterment of urban health. However, the execution is still far behind even after 2 years of implementation. The NUHM planned to provide multi specialty facilities to the public with preventive health care. The communication training for the health workers is major limitation of the programme. Lack of motivated employees, urban migration, multi lingual nature, reaching the target on their convenience and environment hurdles are major threats for urban health. A good urban community health policy suffers due to bad implementation.

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## Modern Birth Control Measures: Attitude and Perception of Rural Indian Women

**NAGRAJ HALLIYAVAR**  
**SHRUTHI P.K.**

### Abstract

*Population control has become the biggest challenge for Indian Government. The government is making serious endeavours to spread the awareness about birth control measures in rural India. However, the level of awareness is very low in the rural parts of India. Rural women are using unsafe measures of birth control, which are affecting their health in different ways. The Government is spending lot of money on advertisements in order to spread awareness about birth control measures. Unsafe birth control measures are bringing down the productivity and leaving behind a number of long term effects. Therefore, this study will find out the level of awareness among rural Indian women about modern birth control measures. It will analyze the opinion of rural women about birth control measures and their attitude towards them. It will also measure the effectiveness of advertisement in bringing awareness among Indian rural women about birth control measures. The study will provide measures to promote modern birth control measures in a more effective manner.*

**Keywords:** Birth Control Measures, Rural Indian Women, Awareness

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### INTRODUCTION

India is aiming to become a superpower by the end of 2020. It is focusing on technological advancement and transference in administration. Though the government is investing a huge amount for the development of masses, it is not able to get the expected outcome. The population explosion is the

foremost problem, which is acting as an obstacle to the development. As per the 2011 census, 1.34 billion people are living in India making it the second populous country in the world. It means India has over 17.85% of world population. In a few years, India is all set to grab the top position as the most populous country in the world by 2030. China has the highest population in the world with 1.41 billion people. Since 1952, the Government of India has introduced health policies underlining the importance of checking the population growth. India has vast rural population constituting over 72.2%, which still lives in over 6.38 lakh villages whereas 27.8% live in urban towns and cities. The population of some of the states in India is perhaps more than population of many countries. Uttar Pradesh in India has a population of 190 million with a growth rate of 16.16 % is said to be equal to the population of Brazil. However, there is decline in Total Fertility Rate (TFR) from 3.3 in 1991 to 2.3 in 2013 but still a long way to reach replacement level of 2.1 TFR. This higher level of fertility is contributing the rapid growth of population. National Population Policy 2000 assumes importance as it was implemented in the same year when India's billionth baby was born. The policy has suggested constructive proposals and approaches to strike a balance between growth of population and the growth of economy.

The population policy of India has brought in qualitative change in the intervention of variety of integrated programmes to control population growth. It has introduced a variety of birth control measures under the Family Planning Programmes now rechristened as Family Welfare. However, nothing has prevented the high growth of population illustrating the poor influence of government's family welfare programmes. Though there is marginal decline in both birth rate and death rate, it has not achieved the accepted level. Birth rate is 22.22 that means number of children born per thousand persons in a year whereas death rate is 6.4, showing number of persons dying per thousand.

In India, family planning was dominated by sterilization programmes that was believed to be a programme meant more for women than for men. In a traditional society like India, women more than men became the target

of sterilization programme and was branded as government programme especially in rural areas. Therefore, the other birth control measures were relegated to the background and suffered due to lack of aggressive programme to promote them. Statistics reveal that over 50 percent of the population uses some form of birth control or the other illustrating increased level of awareness among public. Today, due to decentralization of birth control products in the market, people can afford wide range of contraceptives. However, rural women are not giving much importance to birth control measures owing to ignorance, exploitation, and superstition in traditional families. The women have become the biggest victims of increasing population explosion. In rural India, a large number of women are illiterate (rural literacy rate 71% and urban 86%) and female literacy in rural area is very low at 58.8% and face gender inequality. They do not have the right to decide their family life. Superstitious beliefs in villages have affected the adoption of birth control measures. Many a time, women try unsafe non-medical means to terminate the pregnancy, which either becomes fatal or permanently damages their reproductive health. The perception of women towards birth control measures depends on their cultural background, education, economic status and the number of living children. This study will analyze the attitude of rural Indian women on the modern birth control measures.

## **OBJECTIVES**

The objectives are framed in accordance with the need of the researcher to analyze the attitude and perception of rural Indian women on the modern birth control measures;

- To study the rural women's awareness about modern birth control measures
- To find out the reasons, which are preventing women from using modern birth control measures
- To study the approaches to create awareness about modern birth control measures

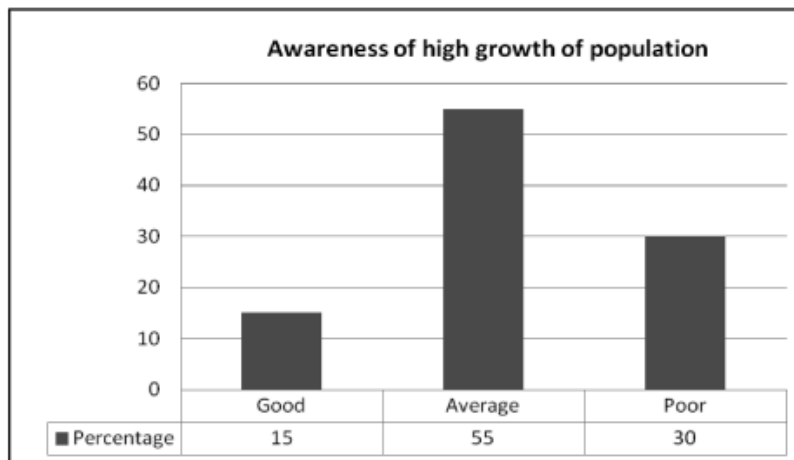
## METHODOLOGY

Since the study is wholly based on audience perspective, survey research method was found appropriate. The study was conducted between July and September 2016. The data was collected through survey using questionnaire. Sample was selected using simple random sampling method. A sample of 50 rural women were selected from 3 villages of Sullia Taluk in Dakshina Kannada district in Karnataka state. The respondents were between the age group of 20-28 years. Dakshina Kannada district comes under Mysore revenue division and is the coastal belt of Karnataka. It has high literacy, GDP and media penetration in the state. Rural people practice agriculture in this region and speak Kannada and Tulu languages. It shares border with Kerala integrating culture, social norms and economic prosperity of two regions.

Most of the young girls surveyed have completed their metric level education. Majority of them support their husbands in agriculture related works. They are also the members of self-help groups. Equal number of sample was collected from three villages. Questionnaire consisting both open ended and closed ended questions were distributed to the respondents with prior instructions.

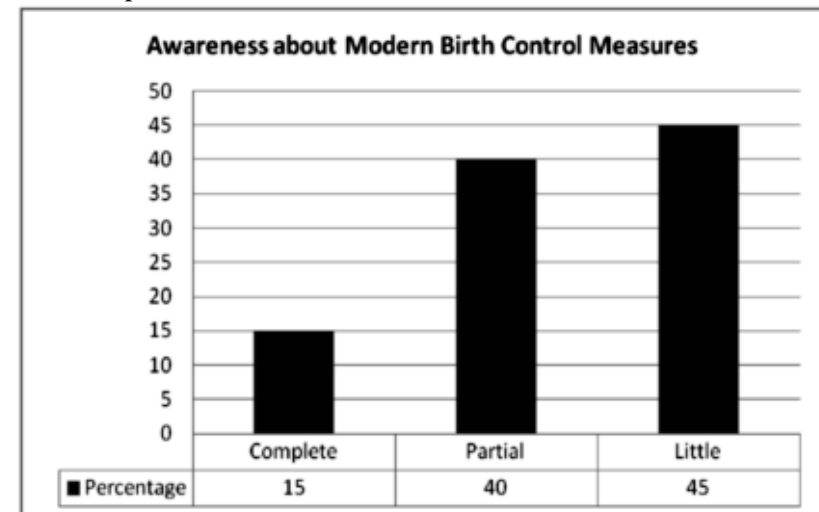
## DATA ANALYSIS AND FINDINGS

Graph 1 Awareness about high growth of population



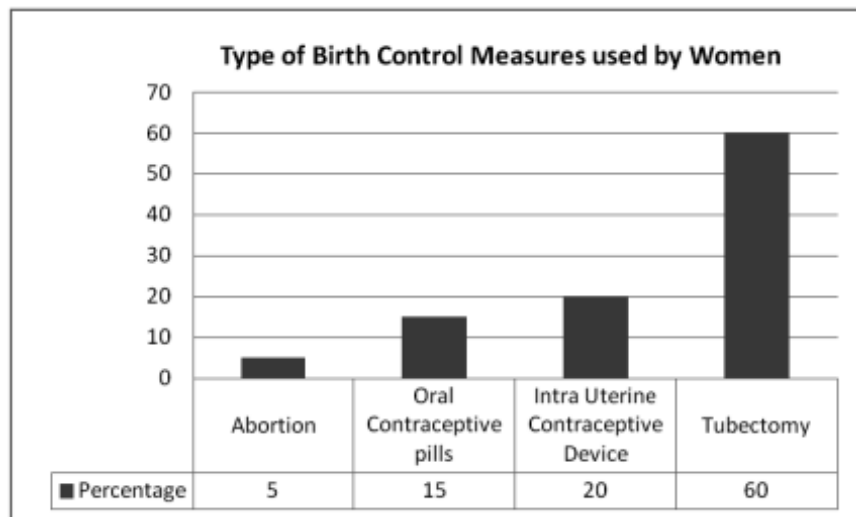
It is clear that rural Indian women are aware of population explosion. They know that high population is a problem in the society. Among the respondents, 15% are completely aware of the negative impact of population growth. They regularly hear about the negative impact of population on India's development. However, the awareness level is low at 30% among rural women. As far as majority of women surveyed is considered, (55%) their level of awareness about the high growth of population is average. 55% of the respondents are partially aware of population growth and they do not know how it is affecting the country. They also feel that it is a long time problem. The remaining 30% are completely unaware about population growth.

Graph 2 Awareness about modern birth control measures



More than half of the respondents are aware of modern birth control measures. Only 15% are having the complete knowledge about modern birth control measures. 40% of respondents say they have heard about few modern measures which are highly popular. 45% say that they have little knowledge about birth control measures. They recall the advertisements on birth control on television. However, they never attempted to know more about birth control.

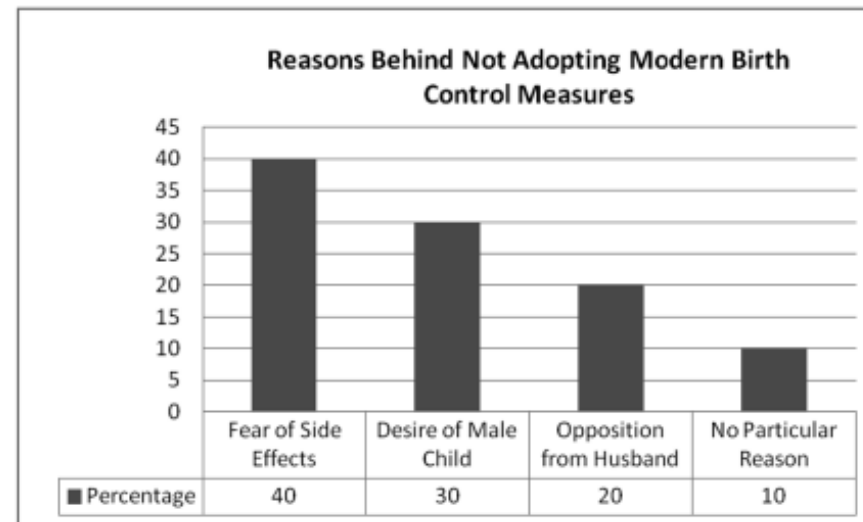
Graph 3 Type of birth control measures used by respondents



Only 5% of the respondents say that they have opted for abortion to terminate the unwanted pregnancy. The deformity of fetus is cited as the reason for abortion in all these cases. 15% of the respondents have used oral contraceptive pills. 20% respondents have used Intra Uterine Contraceptive Device (IUCD), which is the temporary solution. Around 60% of the respondents have accepted permanent female sterilization called Tubectomy. In India less than 1% of males have undergone vasectomy increasing the burden of women in prevention of pregnancy. In Karnataka only 0.2% of men have opted for vasectomy against 57.4% of women opting for tubectomy. The gender divide in preventing pregnancy is a big challenge to policy makers.

When probed about reasons for not adopting birth control measures, 40% of respondents cited fear of side effects denoting misconceptions about the modern birth control measures. They believe that they will encounter a number of health problems after adopting modern birth control measures. Most of them are depending on agriculture. In their opinion, they may not be able to work in the farm after the medical procedure. Other contraceptive measures like pills are expensive for them. Few women have shared that

Graph 4 Reason behind not adopting modern birth control measures

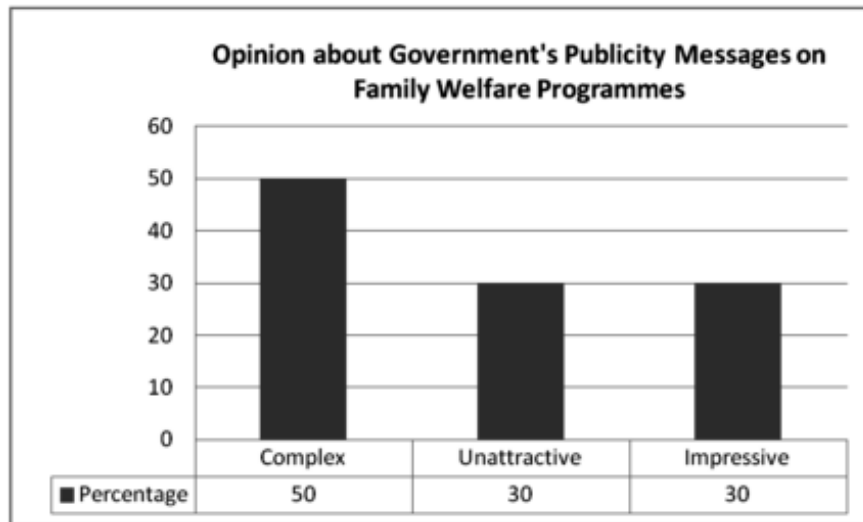


trying birth control measures will affect the health of the baby, which they conceive in future denoting myths surrounding these scientific preventive measures.

Majority of the women desires to have at least one male child. The study reveals that 30% of respondents say that they could not try any contraceptive methods. Because they and their families strongly believe that a male child is necessary for a family. Using contraceptive will reduce chances of having a male child as producing a male offspring in Indian family is not only mandatory but also a great responsibility. Aspiring for male child is part of Indian social norm as it is linked with continuation of family. This attitude is supported by their religious beliefs too and family with male offspring is considered as fortunate. It is the desire for a male child that keeps increasing the size of the family and produces more daughters. Interestingly 20% of the respondents say that their husbands do not feel comfortable to have sex when they use a birth control measure. However, 10% of respondents do not have any particular reason for not using any of them and do not feel great about modern birth control measures.



Graph 5 Opinion about Government's efforts in creating Awareness about modern birth control measures



Interestingly, 30% of the respondents feel that governments' initiative to create awareness about modern birth control measures is impressive. However, 50% of the respondents say that the information disseminated is complex. They are not comprehensive. Only 20% of respondents feel that they are unattractive. Nevertheless, they also feel that the publicity tools used by the Government are reaching the rural mass.

- Most of the women are aware of birth control measures. However, the number of women using birth control measures is very less.
- Religion has a dominant role in keeping the birth control measures away from the women community. Women believe that preventing birth of a child is a sin committed against God.
- Even though no respondent has publicly admitted choosing abortion to kill the female foetus, they are in favour of male child.
- Women are not able to take independent decision. Family members especially husband and mother-in-law decide the number of children in a family.
- Men have a negative attitude towards modern birth control measures. Therefore, always women are forced to take care of preventive methods.

- Women have many misconceptions about the impact of birth control measures.
- Women also feel that some of the birth control measures are expensive.
- Public service advertisements about modern birth control measures are not highly effective.
- Women rarely discuss about birth control measures. Most of them feel that it is not a topic, which can be discussed in public.

### CONCLUSION

The present study analyzed the attitude of rural Indian women on the modern birth control measures. No doubt, modern birth control measures are helping control the population growth. However, the pace is very slow and there is no rapid decline in growth rate, which hovers around 22. Nevertheless, according to reports, between 1965-2009 period, the percentage of married women accepting birth control measures increased from 13 % to 48% illustrating change in the attitude of women. The Government has to focus on creating awareness about modern birth control measures. The message of family planning must be reached in an effective manner. The fear about the effects of birth control measures can be removed only by enhancing the awareness. The creative advertising campaigns with simple messages can make difference. The collaboration of government and nongovernmental organizations can strengthen the family planning program. Those women who are accepting birth control measures like tubectomy must be able to receive proper medical care. More men should be encouraged to accept vasectomy to protect the health of women who naturally suffers from biological weakness after childbirth. The financial incentives to those families who accept the modern birth control measures can encourage others to choose the same path.

Today more and more girls are going to school. However, the formal schooling is not able to touch the sensitive issues like birth control due to conventional education system. Providing special education to women about family planning can change their perspective and attitude towards the modern birth control measures. The rural women must be able to discuss about birth

control measures without any fear or awkwardness. To create such environment for women, Government, NGOs and Civil Society must work hand in hand and run aggressive integrated family welfare programmes.

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# Media Intervention in Science and Technology Communication among Rural Women

SRI JOTHI  
M. NEELAMALAR

## Abstract

*Recent developments in Science and Technology communication have led to the growth in the socio-economic status of the individuals in India. Still, the rural areas of the country continue to lag behind in technology development. In this state of affairs, it becomes essential to use the mass media effectively not only to communicate science and technology messages of relevance but also to motivate rural people especially rural women to participate in the process of developmental activities linked with science and technology. Many people in rural areas have no regular access to information through mass media due to poor socio-economic status and illiteracy; This study analyses the role and the effectiveness of media in creating awareness and knowledge of science and technology among rural women for development.*

**Keywords:** Science, Techonology, Women, Media, Rural, Development

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## INTRODUCTION

The growth and development of science and technology communication is for the betterment and improvement of human life. However, with the rapid development of science and technology communication, it has become difficult for the public, especially to the rural people to keep pace with scientific advance and understand the issues. In rural areas, people lack basic knowledge about science and technology due to lack of education and lack

of access to information gateways.

It is understood that science is linked to technology through its applications (Abdulkalam 2011). Technology is linked to the growth of the economy and environment, which promotes development of the society. As technology advances, the need for scientific information also increases. Accordingly, India should soon witness a similar increase in science communication and popularisation. Indeed, the success of the information technology industry is proof of growing scientific awareness in India. India has undertaken a number of science communication initiatives and innovative approaches (Agarwal 2006).

Rural women are a major force in environmental and societal protection because they live and work in close contact with the ecosystem, possess an intimate knowledge of local biodiversity and can help safeguard natural resources for the future by practising sustainable agriculture, forestry and fisheries. Science and technology communication processes can give rural women strength to advocate changes in policies, attitudes and social behaviour or customs that negatively affect them. Science and technology communication can help rural women to exchange experiences, find common ground for decisions, take more control of their lives and add value to their role as active partners in rural and sustainable development. The purpose of this research is to understand and find the effectiveness and impact of science and technology communication through mass media on rural women.

## **OBJECTIVES**

- To identify the level of knowledge and awareness of science and technology information among rural women
- To analyse the role and importance of science and technology communication in improving the life of rural women.
- To find the role of media in communicating science and technology information for empowerment of rural women.

## **LITERATURE REVIEW**

### **Role of Media for Development**

Vervoort et al (2010) in 'Stepping into futures: Exploring the potential of interactive media for participatory scenarios' state that media are now being increasingly viewed as the most effective and sought after means of communication. In fact, media now influences all walks of our life -personal, social and professional. Interactive media like Internet plays a vital role in the participatory and interactive communication globally.

The media are able to expose large number of people to messages and generate conversation among audiences and others who were not earlier exposed (Rogers 1998). Social learning and decision-making are not limited to considering media messages but also involve listening and exchanging opinions with a number of different sources. Hence, Bandura (1994) suggests that interventions cannot solely resort to the mass media. Although television, radio and other media are important in disseminating messages, social networks are responsible for the diffusion of new ideas. In a way, edutainment programmes activate social networks, peer communication, and enable the diffusion of information (Rogers et al 1999). Similarly, information given through the media is also important in raising awareness and knowledge. The current developments in information and communication technology sector in India and its implications are transforming the country into a knowledge economy (Tripathi 2006).

According to Kumar (2006) in 'Folk Media and Rural Development', the Indian society is a complex social system with different castes, classes, creeds and tribes. The high rate of illiteracy adds to the inadequacies of mass media to reach almost 80% of the people who reside in villages.

### **Communication and Rural Development**

According to Adisa (2012) in 'Rural Development - Contemporary Issues and Practices', very few years were given for the achievement of the MDGs. It is almost certain that the goals are far from being achieved in most of the developing countries for which the MDGs were essentially set.

The struggle thus continues for rural development. As long as problems of poverty, disease, illiteracy, unemployment, poor infrastructure, environmental degradation and others persist (or increase) in rural communities, better and more result-oriented solutions to perennial and emerging problems of rural communities would be required. However, rural development, in spite of the variations in thresholds of rurality among nations, is not exclusively a Third World developing countries process, owing to its multi-dimensionality.

Biswas (2004) in his study of 'Sustainable rural development and poverty alleviation in Bangladesh' stated that the village business in Bangladesh are based on selling the solar electricity generated from photovoltaic (PV) technologies. The poor rural people do not have the knowledge about generating electricity. The training and knowledge on this information was given to rural people through interactive communication method. The knowledge of such information has helped them to improve their standard of living and this additional income has increased their economic level. Biswas states that the knowledge of scientific and technical information empowers the individuals to develop their life sustainably.

Thus, the potential role of academic and research institutions in sustainable initiatives inevitably could raise the issue of the role and importance of scientific knowledge in society. In democratic societies, it can be argued that science–society relationships should be based on establishing and institutionalizing mutual dialogues, making public concerns not only visible but also make the public as equal partner (Bodorkos and Pataki 2009).

Mchombu (1992) in his study 'Information needs for rural development: the case study of Malawi', remarks that the availability of improved agricultural and environmental conservation technologies might improve the living conditions of rural farmers. Studies over the past three decades have revealed that in many developing countries, most development programmes meet with little success because of ineffective communication strategies.

### Science and Technology Communication for Women's Development

The role of science in improving the quality of life is now more significant than ever. According to the UNESCO, women's active inclusion and

participation in science is crucial to countries' efforts to alleviate poverty. Encouraging women to take part in science would allow any country to maximise its valuable human assets, empower its women and improve its economic prospects (UNESCO 2007).

According to Wieseman (2009), women's leadership within science education has, until now been largely invisible. Therefore, women's leadership within science education should be addressed. Moreover, it embraces relational ways of being a foundation for leadership and takes bold steps by exposing our innermost tensions, dilemmas and feelings about leadership, making them available to others. The power and promise of feminine approaches to transform traditional leadership cultures is also addressed.

### METHODOLOGY

Survey research method was employed to identify and analyse the knowledge of S&T by selecting a sample of rural women. The multistage sampling method was used to select the sample from the total population. A multistage sample is one in which sampling is done sequentially across two or more hierarchical levels, such as first at the country level, second at the census track level, third at the block level, fourth at the household level (Lavrakas 2008). In this research, the multistage sampling technique was used to select the Nattarmangalam village from Vallam block in Gingee Taluk in Villupuram district of Tamil Nadu state. (Statistical Hand Book-2011)

**Table 1 Population details of Nattarmangalam village**

Gender	Population (2011)
Male	568
Female	492
Total	1060

Source: Census data 2011 of Nattarmangalam village

Survey is one of the quantitative methods of research to collect individual opinions and views from the sample by posing similar questions to every respondent. Survey method was adopted for the study to identify the status

of the media and the role of communication in creating awareness and educating them in various aspects of S&T among the rural women. This method helped to find out how S&T information is communicated to the women of the village by the mass media for the sustainable growth of their life. The survey was conducted to analyse and find the exposure of women to science and technology communication.

The available population of women during the survey in the village was 364. (Those who are below 18 years and above 45 years were not included as respondents). Education profile of women of this village shows more illiterates (52%), semi-illiterates (30%) and literates (18%). Sample predominantly consisting of illiterates were included using purposive sampling in the survey. Most of the women were involved in agriculture related works and a few worked as daily wagers. Adopting the census survey, out of total 492 women residing in the village, 364 women were selected as sample for the study.

### Questionnaire Design

The questionnaire for the survey is a structured research tool used as an interview schedule as majority of the respondents are illiterates. It was designed so that the survey would enable the researcher to find the following details regarding the sample; standard of life, self-motivation, employment opportunities, educational development, socio-economic development, agricultural development, health development and the exposure of scientific and technical knowledge, availability and the usage of media. The first part of the questionnaire contained questions on demographic and economic information about the sample. The second part of the questionnaire consisted of questions related to knowledge of media and information and the third part of the questionnaire contained questions related to awareness of science and technology communication.

### ANALYSIS AND INTERPRETATION

Survey method was adopted for the study to identify the role and the effectiveness of media in creating awareness and knowledge of science

and technology information among the rural women in the village. Survey is one of the quantitative methods of research to collect individual opinion and views from the sample. By understanding the reality of the science and technology communication as the potential source of life, this method helped to find out how women receive communication on scientific and technical information for their sustainable growth. Based on census sampling was done to select 364 rural women. (Children below the age of 18 years and women above 45 years were not included as respondents). The study helped to find the effectiveness of media among the rural women community by taking a small village in Tamil Nadu state of India. The collected survey data (standard error 0.01) from the women respondents were analysed and tabulated to derive the results.

Table 1 Communication Means of government messages

Sl.No	Mode of Communication	f	%
1	Traditional Announcements	73	20
2	Media advertisements	175	48
3	Word of mouth	116	32

N= 364

Table 1 shows that most of the information on development schemes, policies and other useful information from the government are received through mass media (48%). 20% also receive information from village *panchayats* whereas 32% of the respondents said that information reaches the people by word of mouth, reiterating the intervention of interpersonal communication.

Table 2 Media Access in the Village

Sl.No	Media Facilities	f	%
1	Cable television	280	77
2	DTH	15	4
3	Cinema Theatre	Nil	Nil
4	Newspapers and magazines	69	19
5	Internet	Nil	Nil

N= 364

As shown in Table 2, the village does not have facilities like theatres, but every house in the village has television set with 77% having cable connections, 4% of them have DTH and 19% of respondents have access to newspapers and magazines. Both college going girl students and working women who are few in number do not have access to the Internet. Internet is not a preferred means of communication even among educated women.

Table 3 Media Access to Rural Women

SI.No	Media Access	f	%
1	Television	218	60
2	Radio	73	20
3	Newspaper	62	17
4	Internet	11	3

N= 364

Table 3 reveals that television plays a major role in communication among rural women with 60% of the respondents admitting that television is like one of the members of the family and life without television becomes monotonous illustrating the obsession of women with visual medium like television. Despite radio being the cheapest medium for the rural communities, only 20% of the respondents access radio. 17% of the respondents have access to the newspapers and only five houses buy English newspapers and the rest prefer the regional dailies. 3% of the respondents who are college students have access to the Internet only in their educational institutions.

Table 4 Favourite Media of Entertainment and Communication among Rural Women

SI.No	Favourite media	f	%
1	Television	295	81
2	Radio	44	12
3	Newspaper	25	7
4	Internet	Nil	Nil

N= 364

Table 4 shows that 81% of the respondents prefer television as their favourite medium, 12% of the respondents listen to radio for music and news, 7% of the respondents prefer newspapers. None of the respondents prefers Internet.

Table 5 Favourite Programmes watched by Rural Women

S.No	Programme preference	f	%
1	Educational programmes	29	8
2	News	36	10
3	Entertainment	299	82

N= 364

Table 5 reveals that the rural women have shown less interest in watching educational programmes on the TV channels (8%) and only 10% of the respondents are interested to watch news to update themselves with current affairs. Most of the respondents (82%) have shown interest to watch only entertainment programmes in the regional TV channels.

Table 6 Information and communication Preferences of Rural Women in Mass Media

SI. No.	Needed information and communication	f	%
1	Education	44	12
2	Agriculture	117	32
3	Science and technology	29	8
4	Current affairs	36	10
5	Advertisements	40	11
6	Health Information	51	14
7	Entrepreneurial training	47	13
	(N=364) Total		100

Table 6 reveals that most of the respondents (32%) prefer to watch agriculture related programmes and 12% of women prefer educational programmes. Only 8% prefer to watch science and technology related information whereas 10% would like to watch news and current affairs. Only 11% of the sample is interested in watching advertisements to know about the products information. In addition, 14% of the sample is interested

in watching health related information in the media. Moreover, 13% of the sample is interested in watching entrepreneurial training programmes for their personal development.

Table 7 Scientific and Technical Information Received from Mass Media

SI. No.	Scientific and technical information received from media	f	%
1	Yes	95	26
2	No	269	74

Table 7 reiterates the criticism that media does not give importance to science and technology. Vast majority (74%) have vouched for the fact they don't get science and technology information from media. Only 26% of the respondents said that they have received science and technology information from the media.

Table 8 Usefulness of Science and Technology Information in Shaping Life of Rural Women

SI.No	Usefulness of Science and technology information	f	%
1	Yes	91	25
2	No	273	75

Table 8 shows that 25% of the respondents feel that science and technology information is useful to improve their life as it increases knowledge and creates awareness. However, 75% of rural respondents say that science and technology information is not useful for their development.

Table 9 Adequacy of Media Information on Science and Technology

SI.No.	Received sufficient communication on science and technology	f	%
1	Adequate	44	12
2	Not Adequate	320	88

Table 9 makes it clear that only 12% of the respondents have received adequate information from media that has enriched their knowledge and created awareness. However, a overwhelming women respondents (88%) feel that media information on science and technology is not at all adequate.

Table 10 Barriers of Communication

SI. No	Barriers of communication	f	%
1	Language	186	51
2	Technical difficulties	18	05
3	Message	160	44

Table 10 shows that nearly half the respondents (51%) find language as a barrier while accessing national programmes. 44% of the respondents could not understand certain messages due to poor content design and format of the messages. Only 5% of the respondents face technical difficulties like poor cable or satellite connection.

Table 11 Media Preference of Respondents to Receive S & T Information

S.No	Media preference	f	%
1	Television	306	84
2	Radio	44	12
3	Newspaper	14	4
4	Internet	Nil	Nil

Table 11 shows that the television plays a major role in disseminating science and technology information since it is an audio and visual means of communication. Obviously, 84% of the respondents have shown interest in television to watch science and technology information if it is communicated in their regional television channels. Only 12% of the respondents prefer radio whereas 4% of the respondents prefer newspapers. Internet was not preferred even among the educated women to receive science and technology communication for development denoting lack of access and low level of awareness.

From the interpretation of survey, it is understood that the rural women have poor access to mass media. Nevertheless, television plays a major role in communication since it is a common medium for illiterates. The study shows that rural women have low level of knowledge and awareness on science and technology. Women show interest in learning about science and technology information related to their daily life through television, which should be in the infotainment (Information+Entertainment) and edutainment (Education+Entertainment) format of programmes with easily understandable text in regional language.

## CONCLUSION

Communication of science and technology information is a powerful force for fostering learning, positive change and empowerment in the process of rural development. Effective communication has the potential to enhance people's quality of life, protect fragile environments and create a knowledge-based society that is more responsive to change and development issues. Schweiger (2000) states that people's perception of media credibility will affect their choices and preferences of a certain medium. Thus for rural women science and technology communication through television creates a better impact than the newspapers and radio. Effective science and technology communication through mass media can lead to the empowerment of women, enabling them to take control of their lives and participate in the process of rural development.

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*A Perspective*

## Digital Communication and Media Inclusion

**USHA RANI N.**

### **Abstract**

*Internet has broken the media stereotype of conventional news media. In the age of Internet, common people have experienced the joy of freedom of speech and expression in both democracies and totalitarian governments. The news consumers are already using interactive technologies to have global conversation on local issues. Digital media is hoped to fill the participation gap that bothered the society in the past. Participatory culture is a tool of empowerment through gateways of information. Participatory culture is a stepping-stone for media inclusion. Media exclusion starts with denial of access owing to economic and social factors, unequal news coverage, depriving right to be informed and discrimination in prioritizing news. Nevertheless, democratization of new media that has changed the way the news is distributed and consumed over Internet in postmodern age protects business interests and political interests.*

**Keywords:** Participatory culture, Media inclusion, Democratization, Public opinion

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### **INTRODUCTION**

Internet is the king of digital media. Popularly called the fifth estate, it has generated significant interest changing the dynamics of human communication. Political consequences of Internet are significant. Internet is recognized as a channel of expressing public opinion. The participatory approach reflects the emergence of alternative media to challenge the conventional political institutions, wisdom and ideologies. Throughout the history, mass media have grown as agents of political communication

influencing political and cultural beliefs. Media were established with an agenda to participate and challenge the political regimes in public interest in most of the cultures throughout the history.

The rapid expansion of Internet in India has influenced the tech savvy youth and middleclass people to be more participatory in the political process through civil society activities. Considerable increase in the involvement of youth and educated women in demonstrations, sending SMS, signing online petitions, writing blogs, tweets, forwarding mail and expressing their comments and opinions in online news media on issues of social importance cannot be overlooked as it illustrates the inclusivity of interactive media. The inclusion attribute of Internet is a measure of political empowerment of ordinary people.

**Table -1**

**Internet Penetration in India Overtook USA**

SI. No.	Country	Internet Users (2016)	Penetration (% of Population)	Population
1	China	721,434,547	52.2 %	1,382,323,332
2	India	462,124,989	34.8 %	1,326,801,576
3	United States	286,942,362	88.5 %	324,118,787

Source: *Internet Live Stats* (www.InternetLiveStats.com)

The unprecedented expansion of mass media raised the issue of public discourse in media and the presence of public perspective in news and views. It was Walter Lippmann who coined the phrase, 'manufacture of consent'. In democracy, he said 'the opinion does not spontaneously come from the public. Every leader is in some degree a propagandist. The official decides himself more and more consciously what facts in what guise he should allow the public to know. So, the leader manipulates information.' (Lippmann Walter, 1922).

## DEMOCRATIZATION OF MEDIA

It is a well-established fact that media have been portraying elitist opinion and the large part of readership is never involved in the churning of views,

opinions and point of view in the media. The issue of public perspective as framed by the media is central to the presence of disparity between public opinion and media opinion.

For ages, traditional media projected public opinion evolved without the consent or involvement of public. Readers, listeners, and viewers of news media are taken for granted and media portrayed the opinion without public dialogue. Today, the online media has forced the traditional media to create a platform for public discourse for news stories in their virtual editions. Jürgen Habermas, argues that 'a truly legitimate opinion is not a sum of all opinions, but rather the result after their deliberation', (Habermas, 2006). The reader or citizen's perspective in news that was missing in the traditional news media has made Internet news media more participatory and inclusive. Internet media can establish democratic space and pluralism in information production, distribution and consumption. Internet is against the principles of 'manufacture of consent' and on the contrary, it generates and distributes opinions of varying shades facilitating inclusion stimulating political participation and public opinion influencing the process of decision-making.

Internet has broken the media stereotype of conventional news media. The new media reach is increasing in India with 5 to 8 % annual growth increase in the readership of digital edition of newspapers. In India there are more than 82,000 newspapers and has registered a growth rate of 8% and is attributed to language press. Perhaps *Dainik Jagran*, a Hindi newspaper has highest readership than top English dailies like Times of India and Hindustan Times. Nevertheless, newspaper readership in India has not gone digital and Internet users have not patronized online editions of big daily newspapers. Indian print media has not followed the global trend and continues to be primary source of hard news. Online edition of newspapers with innumerable promotion links fails to give news in a conventional format consequently discouraging digital reading and readers do not get the experience of newspaper reading.

However, newspapers continue to be the primary source of news in India unlike USA where Internet is the primary source of news. India still

has low Internet penetration with 462.12 million, which is 34.8 % penetration in population. With Urban Internet Subscribers constituting 67% and Rural Internet Subscribers 33 % of the total Internet, reach in India. Thanks to mobile Internet it is showing signs of improvement.

In the age of Internet, common people have experienced the joy of freedom of speech and expression in both democracies and totalitarian governments. The experience of getting heard/ read / noticed gave visibility to the voice of the voiceless in societies where dictatorial regimes had oppressed the freedom of speech and expression of common man for ages. In democracies too, the perception of news and views changed adding different shades of perspectives. Social media changed the social norms, broke the media stereotype, and gave an impetus to journalism. Journalism across the globe was able to capture its lost sheen due to social media's entry into news. Journalism is not going to die but media are crucial in distribution and consumption of news. Many have predicted the end of newspapers but print continues to be a major source of information for all media. It has speculated that print may have to compete with its own digital edition of the paper in the years to come. People are going to read news either in print or digital edition but they are going to call the shots by choosing the device as well as the content.

The news consumers are already using interactive technologies to have global conversation on local issues. The media saw the emergence of a new brand of news consumer, who consumed news from converged media of choice and who could not be described as a listener, reader, viewer or browser because he converged different consumption patterns. The recent trends show most of the conventional newspapers including New York Times using the opportunity to launch new social media feed like Twitter to provide access to breaking news with editors to live tweeting stories establishing the migration of news to social media. Today Twitter and Facebook have been recognized as tools of news and major sources of news. Twitter is a valuable 24x7 source for news breaks, tool to follow newsworthy people and organization and is a gold mine for getting story ideas and to have continuous

dialogue with users. The analysis of Tweets will establish the mood of the public, pulse of the community and the degree of public opinion on issues of public concern. Perhaps, New York Times now has over 1.4 million digital-only subscriptions against its print circulation of 5.9 lakh ( 0.59 million) and twice as many readers on the micro blogging service than its most popular print edition. The Sunday paper of New York Times has a print circulation of 1.1 million but its followers on Twitter have crossed 4 million. Consequently, circulation of a newspaper has become complex with the facility of print and digital editions accessed by wide range of devices by news consumers.

## **PARTICIPATORY CULTURE**

Digital media is hoped to fill the participation gap that bothered the society in the past. It has facilitated participatory culture that has brought down the walls between peoples, government, and institutions. In this culture, there is free flow of information with low gatekeepers. Participatory culture is a tool of empowerment through gateways of information. This culture gives people an identity and a sense of belongingness and makes them feel important as the content shared by them receives attention in public domain. The whole community of new media users feels connected and derives psychological satisfaction of being heard and seen.

Participation is a potential tool to generate public opinion. The potential benefits of sharing information facilitate knowledge gain empowering the citizenry in the long run. It shapes thoughts, ideas, skills, and personality breaking the stereotype of monoculture institutions like schools, universities, and government. The best part of the participation is people realize their right to ask questions and gather courage to give opinion, comments, and ideas. Media shape perception of the world in traditional and conventional media. The difference with new media is they shape perception of the world with the participation of the people recognizing the common man's perspective on public issues. The concept of public interest assumes real meaning with the participatory culture.

Index of Participatory Culture consists of opening social media accounts,

active on Facebook, Tweets, Retweets, posting likes, participating in opinion polls, having Favourite, personal Playlist, active YouTube users by uploading or downloading or viewing content or Searching information, Blogging, forwarding mails, small group networking, messaging and participating in civic engagement.

Participatory culture is a stepping-stone for media inclusion. Media inclusion refers to creating equal opportunities to access media content and to enable people to participate or engage in civil and political events. Participation is fundamental to the process of inclusion as it provides an individual space in “Public Sphere” (Habermas, 2006) to deliberate on issues of public interest and to form public opinion. Participation means civic and political engagements. Civic participation involves behavior aimed at resolving problems of the community (Zukin, Keeter, Andolina, Jenkins & Delli-Carpini, 2006). Political participation both offline and online refers to behavior seeking to influence government action and policymaking (Verba, Scholzman, & Brady, 1995). Democratization of media is a prerequisite for media inclusion. Despite the information revolution and advances in communication technology, the writings in the mainstream media do not speak or reflect the mind of the masses. Media looks disconnected with the masses by giving more space for the opinion of politicians, bureaucrats or journalists. Media exclusion is the result of lack of public participation in public discourse. Inequities seen in the news coverage deprive the marginalized class to participate in news process. Media inclusion is about creating opportunities, recognizing their existence, using language of acceptance, and bridging the void between media and the masses. Increase in the quantitative and qualitative production of media content of deprived classes in news columns will facilitate their integration and visibility in the mainstream media.

## **MEDIA INCLUSION**

Media exclusion starts with denial of access owing to economic and social factors, unequal news coverage, depriving right to be informed and discrimination in prioritizing news. This theoretical framework will however

not work with the market controlled mainstream media compelling one to ponder over the potentialities of new media in establishing media inclusion. The new media have already provided platform for people irrespective of demographic variants to engage themselves in valuable political and civil activities and integrate with the process of development and decision-making. It is in this perspective, the debate on new media and media inclusion assumes importance.

Index of Media Inclusion consists of media reach and access; freedom of expression; opportunities for democratic debates; space for different layers of voice - divergent views, opinions and comments; diversity in media content; nondiscrimination in media coverage; space for opinion of women, Dalits and Minorities; Television discussion panels that are representative of the general public; Free from editorial, management and ownership control;

The reach of new media underlines higher degree of inclusion. In India there are 683.1 million mobile phone users and 462.12 million Internet users, which is comparatively overwhelming than total newspaper readership of 405 million and total TV households of 175 million 62% penetration of House Holds (869 TV Channels) with 658 million TV audience, (243 FM Radio Stations) Number of Community Radio Stations licensed (GOPA signed) are 237 of which 191 are Operational Community Radio Stations. India, therefore has vibrant media perhaps has high degree of freedom in the entire South Asia region. Indian Judiciary has struck down section 66(A) of Information technology Act (2000) that criminalized dissemination on the Internet of objectionable information. Though India overtook USA to become the second largest consumer of Internet after China, it still lags behind USA in terms of Internet speed, which is very low and lacks infrastructure to establish digital connectivity. India's Internet growth is attributed to increase in mobile penetration in 2016.

The enormous influence wielded by mass media compelled intolerant political regimes to control media in the guise of ethics, culture, communal harmony, security, and war. History is replete with instances of political regimes who believed in government control of mass media as media are

presumed to be the new power centre in the society.

Governments in democracies flaunting liberal media policy too want to control social media in the guise of ethics and privacy. Facebook has been banned in China since 2009. Media control is a greater threat to new media. There is increase in the attacks on Journalists and bloggers by intolerant religious groups. Kashmir is proving to be a difficult terrain for journalists due to frequent ban on media and government considers region as sensitive due to unrest and attacks across the Indo-Pak border. According to a Report, 'Internet and digital freedom in India slipped in 2016 from 2015, even as the number of Internet shutdowns by States and digital related arrests continued to rise' (Report 2016). The report says that as many as 17 people were arrested for sharing content on WhatsApp and over 40 requests were made by the government to Twitter for removal of objectionable content in 2015. Facebook removed over 30,000 pieces of content based on requests between 2014-15. The increased censorship of social media sites is serious obstacle in media inclusion.

However, the sheer ability of Internet to reach ordinary citizens has weakened the role of gatekeepers of traditional media as anybody and everybody can produce, distribute, and share information facilitating diversity in political communication enhancing the level of media inclusion. Nevertheless, democratization of new media that has changed the way the news is distributed and consumed over Internet in postmodern age protects business interests and political interests. The desperation of Google or Facebook to enter China is more a business proposition than to reach public in public interest. China has stepped up surveillance measures where its citizens are required to give real name authentication for tech companies in 2016 to check fake social media accounts citing reasons of cyber terrorism and social stability. China's censorship has targeted 'WeChat' social messaging app by blocking messages containing sensitive terms. China cannot do this alone without the help of tech firms. Business interests has compelled firms like Alibaba which is E-commerce giant and 'WeChat' owned Tencent Holdings to oblige the Chinese government.

There is considerable growth in digital media advertising and mobile advertising benefitting technology companies like Google, Facebook, Yahoo, Microsoft, and Twitter than news media. Newspaper continues to lose readership and suffers from decline in advertising revenue. The sustainability of media against this digital growth is compelling print and television to resort to unethical means. Unfortunately, it is feared that the malaise of traditional media propounding business interest over journalistic interest and sacrificing public discourse eventually may pose threat to the emergence of Internet news media as the people's media. Digital journalism is promoting business interest of digital revenue juggernauts like Facebook and Twitter than serving the cause of journalism. Digital media has enlarged media landscape reaching a big audience but has reduced journalism where opinion outweighs facts.

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# Impact of Radio Siddhartha Community Radio Station on the Integrated Development of Tumkur Taluk - A Sociological Study

RASHMI KUMARI A  
NAGARAJA S

## Abstract

*In the Indian context community radio has great possibilities of creating impact on society. India being a country of villages, rural population being predominantly engaged in different categories of employment, find it convenient to listen to the radio for both information and entertainment. Such a need can be effectively satisfied by the community radio stations. Our study focuses on understanding how the programmes are designed and their impact on the community of Tumkur taluk. The study was conducted in Tumkur taluk of Tumkur district in Karnataka state. Tumkur was selected because the community radio station services are reaching the people through direct broadcasting, narrowcasting and web streaming in this taluk. 80 respondents were selected purposively for the study through non-probability sampling technique. Questionnaire and interview schedules were used for data collection. The overall impact of community radio indicated that more changes have occurred in lifestyle and local culture of the respondents. This kind of research would help the researchers to understand how community radio plays an important role in integrated development.*

**Keywords:** Community Radio, impact, programmes, development.

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## INTRODUCTION

Community Radio is characterised by its limited local reach using low power transmission and programming content that caters to the educational,

developmental and socio-cultural needs of the specific community it serves. Community Radio is becoming very powerful communication tool playing a very important role in integrated development in India. In other words, Community Radio is part of development journalism.

Community Radio station is not a profit making institution. It is purely a service oriented system. Community Radio station can convey message or knowledge to the targeted listeners over radio regarding health, hygiene etc. As Community Radio stations broadcast / narrowcast / podcast (Web) their programmes over FM frequencies it is easy to listen through mobile phone having FM facility in variety of communication devices. Its minimum coverage area is 15 to 20 kilometers.

## LITERATURE REVIEW

There are very few studies on the impact of community radio in India. However, some studies which are available for reference have pointed out the need for more studies far and wide in India. Tabing says that community radio stations are operated in the community, for the community about the community and by the community. According to him the community can be territorial or geographical – a township, village, district or island and can also be a group with common interests, who are not necessarily living in one defined territory. (Pavarala, Vinod and Malik, 2007: 17)

According to D.S Mehta (1979:4) “The communication media should also promote understanding and involvement of people in the socio-economic changes and developmental activities taking place in the country. The media can quicken the process of development”. The point which the media need to emphasise is that development is perfectly possible within the democratic framework by reaching the information to grassroots level.

Pavarala Vinod and Malik (2007:178) opined that “Community Radio in India is not about playing alternative rock music, but it is a source of strength for poor people for addressing their basic needs”. Here the authors analyse how Community Radio has mobilised, mainly the civil society organisations, for participatory development. However the question whether Community Radio could transform the dominant public sphere and lay the

ground for a more complete societal transformation is another matter. The authors believe that the Community Radio has a long way to go before it can produce any “tangible results in terms of sustainable goals of social change”.

There are 16 Community Radio stations in Karnataka state. They are as following; *Namma Dhvani-Kolar*, *Krusha CR-Dharwad*, *Radio Active-Bangalore*, *Radio Siddhartha-Tumkur*, *Radio Sarang-Mangalore*, *Radio Manipal-Manipal*, *Antharwani-Gulbarga*, *Jana Dhvani-Mysore*, *Neladani-Bangalore*, *Ramana Dhvani-Bangalore*, *Radio Universal-Bangalore*, *Sarathi Zalak, Bangalore*, *KLEDani-Hubli*, *Venudhwani-Belgaum*, *Radio Ninada-Dharmastala* and *Nammura Banuli –Belgaum*.

### **Radio Siddhartha –Community Radio of Tumkur Taluk**

Radio Siddhartha FM 90.8 MHz is also known as voice of Tumkur. It is the first Community Radio station in Tumkur district. The main goal of Radio Siddhartha is to provide education to the rural and urban masses through inspiring awareness programmes related to agriculture, health, education, culture, entertainment etc., Tumkur district consists of 10 taluks and Tumkur taluk is one among them. Tumkur taluk consists of 374 villages. Radio Siddhartha covers 150 villages. Radio Siddhartha is the Community Radio station established in 2009 by Sri Siddhartha Education Society. It is empaneled with the Directorate of Advertising and Visual Publicity, a nodal agency of the government of India for advertising since 2013. Community Radio has given a platform to the marginalised sections of the society, and to the rural and urban masses to voice their feelings and emotions. It benefits students as well as general public. (Radio Siddhartha Souvenir, 2014:20)

### **OBJECTIVES**

- To study the impact of Community Radio on local communities of Tumkur Taluk.
- To study the role of Community Radio in holistic development of rural areas.

### **METHODOLOGY**

This paper is based on secondary and primary data. Primary data was collected from a sample of 80 respondents who are the listeners as well as the participants of local Community Radio of Tumkur taluk using survey method with scheduled questionnaire and interview.

### **Profile of Radio Siddhartha**

Radio Siddhartha, Community Radio broadcasts a total 9 hours programme scheduled according to the needs of the community between 6 a.m. to 9 a.m., 12 noon to 3 p.m. and 6 p.m. to 9 p.m. daily. According to the Community Radio guidelines the programme committee members and radio staff discuss the concept, identify local talents and concerned resource persons, provide them platform to express their feelings and views. Programme Committee comprises of different sections of the society. They are rural folks, slum dwellers, the labour class, social workers, HIV affected persons, artists, educationists, science activists and members of NGOs in and around the district. Radio Siddhartha has its own innovative programme formats. One of the programmes ‘Parivarthane’ (transformation) is well listened to by the listeners according to Community Radio staff. This programme is aimed at transforming those who have got hooked to evil habits which ultimately ruin their family and social life. Community Radio staff interview the de-addicts and their family members. It has brought awareness among the drug/alcohol/tobacco consumers.

Radio has been getting overwhelming appreciative responses from its listeners as revealed by their feedback through letters, phone calls and mobile messages. According to the staff of Radio Siddhartha, listeners are so inspired by the programmes that they have been coming out with requests for more programmes related to issues like environmental degradation, deforestation, gender discrimination, developmental programmes, especially financial assistance for the upliftment of the poor and the downtrodden.

Programme series like *Shikshanavani* (Educational Speech), *Navu mattu namma hakku* (We and our rights), *English time* (Spoken English), *Namma Desha Namma Samvidhana* (Our Nation and our Constitution),

*Namma Arogya* (Our Health ), *Akka Kelakka* (Listen Sister Listen), *Krushu Kanaja* (Agricultural Storage), *Prathibha kirana* ( Rays of Talent), *Amrutha Bindu* (Values in brief) ,*Visheshha Sandarshana* (Special Interview), *Janapada Jagattu* ( World of Folklore), Radio talks, dramas and many awareness programmes are broadcast by the Community Radio *Siddhartha*. Radio *Siddhartha* broadcast/ narrowcast/ podcast (Web) its variety of programmes. (www.radiosiddhartha.com)

### Success Stories

Aradhya S. S. basically a Professor of English and one of the resource persons of Radio *Siddhartha* says that it is not just a source of information but also a source of knowledge and wisdom. He has delivered over 200 episodes of programmes on communication skills in English. He says that these talks have made him popular because of English language teaching in Tumkur district. (Radio Siddhartha Souvenir, 2014:20)

Hosakere Rizwan Basha, a government high school teacher who is featured in India book of Records for giving more than 825 episodes of *Shikshanavani* ( Educational Speech) in Community Radio station proudly says that Community Radio *Siddhartha* moulded him into a good resource person.

This is how a Community Radio could bring marvellous changes and build a beautiful community. There are many success stories achieved by Radio *Siddhartha*. One of the examples is the ‘Pappad makers’ of Gulur village in Tumkur, which comes in the radius of Radio *Siddhartha*. Anjamma, Kamamma, Bhagirathamma, Laxamma, Geetha and others are aged women suffering from poverty. They were in a position where they could not lead their life without work and they were deserted by their family. They were also not getting any work due to their old age. Though these aged women have brought up their children to some extent, the latter were not taking care of their mothers. Suryanarayana, a listener of Radio *Siddhartha* got to know about the pathetic condition of these women and informed Radio *Siddhartha*. The Community Radio got into action and contacted Mr

Cheluvvaraju, a Pappad making trainer in Tumkur. Cheluvvaraju joined hands with Radio *Siddhartha*’s community work and trained the women. After proper training, the aged women are running their own small business of making pappad and selling it and earning their livelihood. Community Radio achieved the goal of community service by bringing a smile on the faces of the aged women and confidence of leading a good life. The women are now happy and have become role models for other women in their village.

Here is a success story of 84-year old retired teacher who hails from a tiny village Urukere. He is an arthritis patient. He rides his two-wheeler all the way from his native place to Tumkur to present programmes at Radio *Siddhartha*. He is none other than Huchchappadasa. He is a writer himself. He has written stories, composes poems and *Harikatha* (Story telling). He not only gives programmes but also inspires others to exhibit talent in Radio *Siddhartha*. He trains them, prepares them and motivates the rural talent to showcase their skills at Community Radio station. Station provides an opportunity and platform to tap his hidden talents, obviously local organisations began to recognise his talents and helped him to publish his articles. He was awarded ‘Taluk Rajyotsava Award’. Because of Community Radio station’s effort, now Huchchappadasa is a popular figure in and around Tumkur.

Radio *Siddhartha* has been continuously producing programmes to create awareness about HIV- AIDS among people. “*Jeevana Nauke, Mulugeethu Joke*” (Life is a voyage; without care it may Sink) a radio play, which briefs how negligence and bad habits destroys a person. Radio staff was successful in persuading the artists who are highly educated to voice the play, who hesitated in the beginning, assuming that people will mistake them to be AIDS infected! The play got a wonderful response from the audience.

Live Phone in programmes are well received by the people and they actively interact on selected subjects and thus clarify their doubts and solve their problems. Funding and infrastructure is provided by Sri *Siddhartha* Education Society. Society’s aim is to spread education to the poor sections of the society.



Community Radio *Siddhartha* helped the district to improve S.S.L.C. results from tenth to ninth place during 2014. Deputy director of Public Instruction says that Community Radio was one of the reasons for improvement in results. (The New Indian Express, 2014:13<sup>th</sup> May)

**ANALYSIS AND DISCUSSION**

A purposive sample of 80 respondents were selected from Tumkur Taluk. They are the regular listeners and participants in the programmes of Community Radio Station.

Table 1: Demography of Respondents

Male		Female		Urban		Rural		Literate		Illiterate	
f	%	f	%	f	%	f	%	f	%	f	%
48	60	32	40	50	62.5	30	37.5	65	81.25	15	18.75

Table 1 illustrates demographic details of the respondents. Sample consisted of 60% males and 40% females. Majority 62.5% are from towns and 37.5% from villages. Majority of them are literates (81.25%). Tumkur district has a literacy rate of 75.14% with male literacy at 82.81% and female 67.38% showing rapid increase in literacy among females.

Table 2 Programme Preferences

Programme	Education		Health		Agriculture		Environment		Women		Culture	
	f	%	f	%	f	%	f	%	f	%	f	%
Male	25	31.25	30	37.5	20	25.00	33	41.25	25	31.25	41	51.25
Female	20	25.00	25	31.25	15	18.75	21	26.25	28	35.00	31	38.75
%	45	56.25	55	68.75	35	43.75	54	67.5	53	66.25	72	90.00

Table 3 Purpose of Listening

Purpose	Informative		Awareness	
	f	%	f	%
Male	35	43.75	40	50.00
Female	30	37.50	29	36.25
%	65	81.25	69	86.25

As shown in Table 2 relating to programmes most liked by men and women shows 90% listeners like cultural programmes, 68.75% health programmes, 67.5% environmental programmes, 66.25% women’s programmes, 56.25% educational programmes and 43.75% agricultural programmes. As far as purpose of listening is concerned, 81.25% said that programmes are informative whereas 86.25% felt that programmes create awareness.

Table 3 Programme Effectiveness

Gender	Effective in inclusion of marginalized		Reducing caste and Religious inequalities	
	f	%	f	%
Men	42	52.5	30	37.5
Women	27	33.75	29	36.25

Table 3 illustrates 52.5% of men and 33.75% of women agreed that Community Radio is effective in inclusion of marginalised. This shows that Community Radio is engaged with marginalised sections in its programmes. 37.5% of men and 36.25% of women are of the opinion that Community Radio is powerful in reducing the caste and religious inequalities also.

Table 4 Derived Uses from Radio Programmes

Programme	Beneficiaries	
	f	%
Education	63	78.75
Health	71	88.75
Agriculture	60	75.00
Environmental	30	37.50
Women	45	56.25

As shown in the table 4, majority of respondents 78.75% benefited from educational programmes, 88.75% from health based programmes, 75% got positive results by listening and participating in agricultural

programmes, 37.5% benefited from environmental programmes and 56.25% benefited from programmes for women.

Table 5 : Need of Community Radio for the community development

Gender	Need of Community Radio	%
Male	45	60.00
Female	30	40.00
Total	75	100.00

As shown in the table 5, almost all listeners, 56.25% of men and 37.5% of women are of the opinion that Community Radio is essential for community development. Thus a total 93.75% of the respondents say that Community Radio as a developmental tool very essential for the development of community.

### CONCLUSION AND SUGGESTIONS

Community Radio is playing a very important role in development of Tumkur taluk. Radio *Siddhartha* is well received by the local community of Tumkur taluk. They respond positively for all the programmes broadcast by Radio *Siddhartha*. Majority of the respondents of Tumkur taluk liked variety of Community Radio programmes and benefited by them. 93.75% of the respondents say that Community Radio is a developmental tool essential for the development of community. Further, this kind of research reveals the challenges of Community Radio stations in its survival and in reaching the masses. In fact, this study may show an opening to many educational institutes, NGOs, Agricultural Universities and *Krusha Vigyan Kendras* to start their own Community Radio stations. This kind of research explains radio listening culture is still alive and how the Community Radio is needed for the integrated development of society by considering an individual as a role player in socio-cultural development. Central and State governments have to advertise more and include sponsored programmes and thereby garner financial support in order to strengthen the Community Radio stations.

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