

Study on Impact of TV Advertisements by National Aids Control Organization Campaigns

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Abstract – India has had a sharp increase in the estimated number of HIV infections, from a few thousand cases in the early 1990s to around 5.1 million people living with HIV/AIDS today. With a population of over one billion, the HIV epidemic in India will have a major impact on the overall spread of HIV in Asia and the Pacific, and worldwide. This article discusses the impact of a mass media entertainment-education campaign to prevent HIV/AIDS. This review systematically examined the effectiveness of 24 mass media interventions on changing human immunodeficiency virus (HIV)-related knowledge, attitudes and behaviors.

Human resource capacity building is a key strategy in the design, delivery, sustainability and scale up HIV treatment and prevention programmes. The review aims to present human resource capacity building initiatives undertaken by the National AIDS Control Organization (NACO) and to discuss the available opportunities in India.

Various opportunities to enhance and consolidate capacity building responses in HIV/AIDS in India may include mainstreaming of capacity building, appropriate management of knowledge and resources, effective delivery of training, measuring and documenting impact, accreditation of programme and institutes, use of information technology, identifying and implementing innovations and working for sustainability.

Growing demand for capacity-building in HIV/AIDS needs substantial efforts to ensure that these are implemented effectively and efficiently. NACO had made significant strides in these regards, but at the same time there are arduous challenges like measuring impact, quality, documentation, operational research, and sustainability. This review will provide feedback to the NACO for strengthening its strategic document for human resource capacity building.

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INTRODUCTION

Since first diagnosis of HIV in 1986 within the country, India now holds the second largest absolute number of HIV infections in the world, following South Africa. With an estimated 5.134 million people living with HIV in the adult population (15-49 years) in 2004, India accounts for almost 13% of the global HIV prevalence. Despite this large number of HIV-infected individuals, because of its large population size, India continues to be in the category of low prevalence countries with an overall prevalence of less than 1%.

Tracking the epidemic and implementing effective programmes is made difficult by the fact that there is no one epidemic in India. Rather, there are several localized sub-epidemics reflecting the diversity in socio-culture pattern and multiple vulnerabilities present in the country.

Though the overall national prevalence is low, six states have reached high prevalence (> 1%): Manipur, Nagaland, Andhra Pradesh, Tamilnadu, Karnataka and Maharashtra. Certain districts in Goa and Gujarat have also reported high prevalence. With more than doubling from 47 districts in 2002, a total number of 111 districts across the country are now showing a HIV-prevalence above 1% thus classifying as a generalized epidemic.

Sexual transmission is driving India's AIDS epidemic. This route accounts for approximately 86% of the HIV infections in the country. The remaining 14% are by other routes such as blood transfusion, mother to child transmission and injecting drug use, particularly in North-Eastern states and some metropolitan cities. Young people in India among those at high-risk of contracting HIV. Over 35% of all reported HIV-infections in

India occur among young people in the age group of 15 to 24 years.

Since 1998, the Government of India has been conducting annual nationwide sentinel surveillance to monitor the trends and pattern of HIV epidemic. The sentinel sites cover both high-risk populations such as attendees of Sexual Transmitted infections (STI) clinics, injecting drug users (IDU), sex workers and men who have sex with men (MSM) as well as perceived low-risk populations such as women attending personal clinics.

Surveillance data is collected both from public and NGO sites in addition to the number of sentinel sites going up from 184 in 1998 to 659 in 2004, the selection of these new sites has been mainly in rural areas.

India remains a low prevalence country with overall HIV prevalence of 0.91% (less than 1%), have this masks various sub epidemic in various areas in the country, based on high prevalence observed number of sentinel location sites.

Recent surveillance data indicate that in high prevalence states, the epidemic is spreading gradually from urban to rural areas and from high-risk groups to the general population. The epidemic continues to shift towards women with an estimated 39% of the infected being women, increasing the potential of pediatric HIV in the future.

REVIEW OF LITERATURE

The researchers purely on contents of the TV spot prepared by NACO are almost nil so far. However NACO and other bilateral agencies have been conducting studies time-to-time for formulating and updating their IEC (Information Education Communication) strategies on the basis of Communication Needs Assessment (CNA). Almost all the SACS (State AIDS Control Societies) had conducted CNA in their respective states but their aims and objectives were different to the existing study.

On the same pattern, National Behavioral Surveillance Survey was conducted by ORG-CSR in 2001 for NACO. This baseline provided basic information needed to strategize and prioritize programmes under NACP-II during its implementation. However, present study is different in its themes, objectives and aspects and it is concentrating in the TV spots produced by NACO.

OBJECTIVES

1. To study the various themes of TV AIDS messages.
2. To evaluate the appeals used in TV messages.

3. To analyse the various Communication skills adopted in AIDS messages.

METHODOLOGY

The researcher will arrange the HIV/AIDS social TV messages from NACO for the present study. The study will have a comprehensive view from every possible angle and bring out the comparisons and similarities, if any, in these messages. For this study the Content Analysis method will be adopted. This quality analysis will strive to undertake linguistic, cultural, artistic, socio-economic and individualistic element etc. attached to that particular social message.

Randomly selected messages of Hindi as well as English will be analyzed, keeping in mind the objectives of the study. The effectiveness of TV spots of NACO will also be analyzing through public opinion. The randomly selected samples of three hundred respondents will be adjudged through a questionnaire. The generated data of content analyses as well as public survey will be interpreted to give conclusions and summary along with limitations of the study.

CONCLUSION

The presents study has yielded a wealth of very rich data as findings. We have attempted to classify and organize this data in the study so that insights can be obtained, inferences can be drawn and conclusions can be reached. These would be useful for assessing the impact of the present media campaign and to develop effective campaign strategies in future. The media campaign, which used Television, Radio and Newspaper for communicating messages, was aimed at increasing the awareness, improving the knowledge and inculcating changed desirable behaviour among the target audience. The basic communication was woven around the theme of 'Prevention of Parent-to-child transmission (PPTCT)' of HIV/AIDS and therefore the conclusions that are included in this chapter will cover only the impact in that domain.

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