



## Research Article

### A STUDY ON THE ROLE OF MASS MEDIA IN PROMOTING AWARENESS OF AYUSHMAN BHARAT YOJANA

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#### ABSTRACT

Background: The mass media, especially radio and television, as one of the main pillars of education and information in the society can take a good role in promoting public health. Nabi et al noted that the media has a great power in influencing individual and public health. Also, the media shapes an important knowledge resource about health literacy at the individual and public levels. By informing and educating, the Media play a main role in increasing the health literacy of the community. Broadcasting health channels are established to improve health literacy and public health worldwide. Ayushman Bharat – Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) was launched by government of India on 23 September 2018. Aim of the Scheme was to provide health cover of rupees five lakh per family per year for secondary and tertiary care hospitalization to cover over 10.741 crore families from the weak economic and vulnerable section of the population, based on the deprivation and occupational criteria of the Socioeconomic Caste Census (SECC), 2011. Method: It was A Quantitative Randomized control trial research approach and an experimental (two group pre-test post-test design) design used. The sample size of the study was 400. The sampling technique used for the study was two stage Simple Random sampling (randomized by lottery method). Result: In pre-test mean score is 13.6 along with 5.7 SD. In Post-test mean score is 20.4 and SD is 5. T value is -5.69 and P value is <.0001 which shows effectiveness of awareness program on level of recognition regarding Ayushman Bharat. Conclusion: awareness programme on level of recognition and approach regarding



Ayushman Bharat Yojana among household family members was found effective in improving knowledge. Hence it is recommended by researcher that government of India shall take initiative to aware public in rural and urban areas about advantage to register under Ayushman Bharat scheme and urge people to take advantage of this scheme to reduce own expenses for healthcare needs of individuals.

Keywords: Ayushman Bharat, PMJAY, Mass Media, Household family members, out-of-pocket expenditure.

## INTRODUCTION

Communication has always been important in human growth, and mass media is a powerful tool. The word "media" comes from "medium," a carrier that spreads news, information, and public awareness. Mass media, like everything else, has pros and cons. India is known for having the most extensive democratic system in the world. The media has a considerable presence and substantially affects the nation. The mass media, particularly radio and television, serve as significant platforms for education and information dissemination within society. These mediums can potentially play a crucial role in enhancing public health. The media significantly influences the health of individuals and the public. Additionally, the media has a substantial role in shaping the knowledge base surrounding health literacy at the individual and societal levels.<sup>1</sup>

The Information, Education & Communication (IEC) strategy aims to create awareness and disseminate information regarding the benefits available under various schemes/programmes of the Ministry and to guide the citizens on how to access them. The objective is also to encourage build-up of health seeking behaviour among the masses in keeping with the focus on promotive and preventive health. The IEC strategy has catered to the different needs of the rural and urban masses through the various tools used for communication. All the IEC activities had a print media component coupled with TV and Radio Plans. Social Media and Outdoor Media activities substantially strengthened these. The Media Plan was monitored at the highest level to ensure due implementation and mid-course correction, and possible change in the focus to suit the need.<sup>2</sup>



The mass media, by communicating with people in large numbers, can have a huge impact on the public's knowledge, beliefs, perceptions, attitudes, and behaviours, not only as individuals but also as families, communities, and wider society. The power and reach of the mass media can influence all aspects of people's lives, including health and well-being, and can be harnessed to promote health by informing, motivating, and empowering people to change behaviour and by providing a platform for advocating healthier policies and civic action.<sup>3</sup>

### NEED OF THE STUDY

WHO says “Health literacy implies the achievement of a level of knowledge, personal skills, and confidence to take action to improve personal and community health by changing personal lifestyles and living conditions. Thus, health literacy means more than being able to read pamphlets and make appointments. By improving people’s access to health information, and their capacity to use it effectively, health literacy is critical to empowerment.” Improving health literacy in populations provides the foundation on which citizens are enabled to play an active role in improving their own health, engage successfully with community action for health, and push governments to meet their responsibilities in addressing health and health equity. Efforts to raise health literacy will be crucial in whether the social, economic, and environmental ambitions of the 2030 Agenda for Sustainable Development are fully realized.<sup>4</sup>

Ashutosh Kumar Pandey, Dr. Amit Sharma, and Amitabh Srivastava (2022) conducted A Study of Bihar State to assess a Health Awareness and Government Schemes (Specifically Prime Minister Surakshit Matritva Abhiyan) in India. The goal of the current study is to determine how informed people are of health-related initiatives. This study is descriptive in type. It uses a quantitative approach. To collect data from the population, a cross-sectional research design used along with voluntary sampling technique. total of 167 responses from residents of eight rural districts in Bihar. Results of the study shows that One-fourth of the rural population of Bihar is unaware about the Prime Minister Surakshit Matritva Abhiyan. Half of the rural population of Bihar is getting the information regarding the health awareness campaigns from the opinion leaders like health worker or known person. Half of the population accept that there is publicity about health schemes in rural area. One-third of the rural population claims that the publicity of the health campaign of Govt. of India is done through public meetings (Gram Sabha).<sup>5</sup>



## AIM OF THE STUDY

The aim of the present study is to assess Role of Mass Media in Promoting Awareness of Ayushman Bharat Yojana.

## METHODOLOGY

**Research Objective** To determine the role of mass media on Level of recognition and approach regarding Ayushman Bharat Yojana. To correlate the Level of recognition with approach regarding Ayushman Bharat Yojana. **Study Design & Setting** Quantitative descriptive research design. **Setting of study:** - In present study selected villages in Meerut. **Study Population** Household family members in selected villages Meerut. U.P. **Sample Size & Sampling Technique** The sample size of the study was 400. The sampling technique used for the study was two stage Simple Random sampling (randomized by lottery method). **Tool & Data Collection** A structured questionnaire was prepared, and it was divided into three sections. The section I includes basic demographic variables of household family members, Section II contains – Self-Administered Structured Knowledge Questionnaires for assessing the effectiveness of educational program on knowledge regarding Ayushman Bharat Yojana and Section III- self structured Likert scale on Ayushman Bharat to assess attitude towards Ayushman Bharat Yojna. **Reliability** Reliability is the extent to which the measurements of a test remain consistent over repeated tests of the same subject under identical conditions.<sup>6</sup>

The “Test-retest method” by using “Karl Pearson’s formula” is used to check the reliability. According to Karl-Pearson Correlation Coefficient if “r-value” is more than +0.70 then the tool is reliable.

## RESULTS

The data collected was checked for completeness and were analysed using descriptive statistics.

Most samples were from 20 to 24 years of age group, equal male and female samples participated in study, majority 52.5% had completed their graduation, 60% of participants were Hindu, 35% of samples were married, 65% were having previous knowledge about Ayushman Bharat card and 50% of samples received information from Mass Media.



| Effectiveness level of awareness | Mean | SD  | T-value | P-value | Remark      |
|----------------------------------|------|-----|---------|---------|-------------|
| Pre-Test                         | 13.6 | 5.7 | -5.69   | <.0001  | Significant |
| Post Test                        | 20.4 | 5   |         |         |             |

**Table 1:** Percentage wise distribution of pre-test and post-test knowledge regarding effectiveness of awareness programme on Level of recognition regarding Ayushman Bharat Yojana.

Table 1 shows that in pre-test mean score is 13.6 along with 5.7 SD. In Post-test mean score is 20.4 and SD is 5. T value is -5.69 and P value is <.0001 which shows effectiveness of awareness program on level of recognition regarding Ayushman Bharat.

| Co-relation Awareness of Knowledge | Mean | SD  | T-value | P-value | Remark      |
|------------------------------------|------|-----|---------|---------|-------------|
| Pre-Test                           | 13.6 | 5.7 | 0.85    | <.0001  | Significant |
| Post-Test                          | 20.4 | 5   |         |         |             |

**Table 2:** Correlation of the Level of recognition with approach regarding Ayushman Bharat Yojana.

Table 2 shows that in pre-test mean score is 13.6 along with 5.7 SD. In Post-test mean score is 20.4 and SD is 5. T value is 0.85 and P value is <.0001 which shows significant co-relation of the level of recognition with regarding Ayushman Bharat.

## DISCUSSION

Edlin Glane Mathias et. al. (2023) conducted Community based health literacy interventions in India. In India, at least nine out of ten individuals lack health literacy. Additionally, India has a high rate of general illiteracy and extreme poverty, both of which have a negative impact on HL. Poor health insurance coverage in India is one of the main effects of low HL. Results of study revealed that a total of nine studies were included from the searches conducted in databases. Of these, five focused on the change in behaviour and four identified the importance of education in improving HL among people in the community. The interventions included: traditional interventions, art-based interventions, interactive learning-based interventions, and technology-based interventions.<sup>7</sup>



Rashmi Gahlowt, Dr. Nima John, a study of the need for and importance of use of mass media in health communication. Study aims to critically look at some of the research studies on government schemes, their implementation and outcome and the use of mass media by the government in the same. Results of the study revealed that around information about awareness of around 14 government schemes analysed and it is found that the role of mass media has not been highlighted. Communication mostly involves several forms of media such as print, electronic media (radio, television), outdoor media new media etc. These media also act as tools for empowerment. These different forms of media can be used productively to communicate knowledge and information to the masses.<sup>8</sup>

Melanie A. Wakefield, Barbara Loken, Robert C. Hornik, Use of mass media campaigns to change health behaviour. This was a Review and researcher discuss the outcomes of mass media campaigns in the context of various health-risk behaviours (like- use of tobacco, alcohol, and other drugs, heart disease risk factors, sex-related behaviours, road safety, cancer screening and prevention, child survival, and organ or blood donation). Researcher concluded that mass media campaigns can produce positive changes or prevent negative changes in health-related behaviours across large populations.

## CONCLUSION

The aim of the present study is to assess effectiveness of awareness programme on Level of recognition and approach regarding Ayushman Bharat Yojana among household family members. A Quantitative Randomized control trial research approach and an experimental (two group pre-test post-test design) design used. The sample size of the study was 400. The sampling technique used for the study was two stage Simple Random sampling (randomized by lottery method). The research committee of the faculty of nursing established the validity and reliability of the tool. The tool was divided into three section, section 1 included demographic variables which includes- Age in year, Sex, Religion, Marital Status, previous knowledge received regarding Ayushman Bharat Card, Source of information. Section 2 included Self-Administered Structured Knowledge Questionnaires for assessing the effectiveness of educational program on knowledge regarding Ayushman Bharat Yojana. Section 3 was a self-structured Likert scale on Ayushman Bharat to assess attitude towards Ayushman Bharat Yojna. Pilot study was conducted to assess effectiveness of tool and it was found effective. Data was collected and analysed by descriptive and inferential



statistics. Results of the study shown that there were changes in mean of knowledge scores before and after implementation of awareness program. Therefore, awareness programme on level of recognition and approach regarding Ayushman Bharat Yojana among household family members was found effective in improving knowledge.

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