Awareness of Health related advertisement: A comparative study of Mysore and Chamarajanagar District

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The study aims to identify awareness about health related Social advertisements by respondents from Mysore and Chamarajanagar district. A total of 402 respondents of which 175 (114 male and 61 female) were from Chamarajanagar and 227(91 male and 136 female) were from Mysore district selected through stratified random sampling technique. A structured questionnaire was developed by the first author to identify the awareness of the respondents on health related advertisements. One sample t test was used to find the awareness level of the people and Independent samples t test was used to find out the difference between the respondents on various demographic variables. Results revealed that the selected sample had higher levels of awareness than the expected level. Further the results revealed that the awareness of respondents on health related advertisement to be similar among male and female; urban and rural; Mysore and Chamarajanagar districts as there was no significant difference observed among them.

Key words: Public Service Advertising, Social Advertising, Health related Advertisements, Media of advertising, Advertising Awareness, Advertising Knowledge.

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1. Introduction

Advertising is a form of communication used to persuade an audience (viewers, readers or listeners) to take some action with respect to products, ideas, or services. Most commonly, the desired result is to drive consumer behaviour with respect to a commercial offering. Advertising is the practice of calling public attention to one's product, service, need, etc., Advertising messages are usually paid by sponsors and disseminated through various traditional media; including mass media such as newspaper, magazines, television commercial, radio advertisement, outdoor advertising or direct mail; or new media such as social networking sites and text messages.

The advertisements which are related to the social issues are popularly called as ‘Social Advertisements’ or 'Public service Announcements’. Social advertising is about “applying marketing and advertising principles to promote health and social issues and bringing about positive behavioural change” Like any other form of advertising, social advertising intends to capture target customers who need to change, modify, or reject certain practices such as smoking, drinking, careless driving etc. Jaishri (2006) in her book ‘Advertising management’ says that social advertising has the ability to change both the attitude and behaviour of the people.
According to Philip Kotler and Gary Armstrong (2006) “Social advertising is the design, implementation and control of programs seeking to increase the acceptability of a social idea, cause or practice among a target group”. According to Lazer and Kelly (1973) “Social advertising is concerned with the application of marketing knowledge, concepts and techniques to enhance social as well as economic ends. It is also concerned with the analysis of the social consequences of marketing policies, decisions and activities”.

The current research has chosen to study the awareness of people about health related social advertisements. Health awareness is just being aware of health related aspects. The main objective of Health awareness is to provide health related knowledge to the people for preventing and curing disease. However health scheme aims at large-scale systematic plan or arrangement in improving the health of a community. Health awareness is important for the successful implementation of various health schemes by government and non-government bodies.

It is important to create awareness among people about the various health-related issues. In an article [The Hindu March 22, Online edition] “Awareness is half the battle won” was about a program that aimed at spreading awareness about cervical cancer and breast cancer as an initiative for cancer-screening programme called DEEEPAM, an acronym to Detect Early, Ensure Prevention and Management organised by Dr. P. Guhan, Dean, of Oncology Department, Sri Ramakrishna Hospitals, Coimbatore in which he suggests, “awareness is half the battle won”.

One of the most appropriate tools to create awareness among people is through advertising. In almost all the countries advertisements related to social issues are communicated on a regular basis using different media. In India thousands of social advertisements are advertised though different media covering many different topics such as Pulse Polio, Women rights, National Integrity, Swach Bharath, etc. Hence it was thought necessary to assess the level of awareness about social advertisements of Karnataka State Government among the people from Mysore and Chamarajanagar districts, and hence the study titled “Awareness of Health Related Advertisements: A Comparative Study of Mysore and Chamarajanagar District”

2. Review of Literature

Meenakshi (1998) in her book ‘Advertising the social ad challenge’ defines social advertising as those advertisements which deal with social causes aimed at welfare and wellbeing of the people. She studied the trend towards the use of advertising for social causes. She observed that it has been increasingly realized by the business houses, government, profit and nonprofit organizations that they can definitely contribute to the welfare and well being of the masses.

Monali (2010) in a study titled “Can Public-Service Advertising Change Children’s Nutrition Habits? The Impact and Relevance of Familiarity” conducted a research in France that tested a framework for the effectiveness of pro-nutrition public service announcements targeted at children. She found that using popular elements in advertising increased fruit consumption by children. Advertisements found to be a key factor in encouraging children, both in terms of attitudinal and behavioural change.
William (2006) in an article on “Public service advertising” quoted that Public Service Ads have evolved far beyond their wartime origins and late night airings to become a frequent presence in American mass media. Public Service Advertisings support diverse public campaigns and have an influential presence in American society. From a technical point of view, these ads demonstrate the flexibility and adaptability of advertising methods, showing that they can be used to promote positive social behaviours as well as commerce.

Joyce (2004), in a study titled “Misguided Optimism and College Student Smokers: Leveraging their Quit Smoking Strategies for Smoking Cessation Campaigns,” explained the efforts to find out the effectiveness of public service advertising. He found that the misguided effort to change the smoking behaviour of college students using the same anti-smoking messages created for young teens apparently stems from the misplaced marketing belief that ads designed to prevent young teens from smoking can also effectively encourage college-student smokers to quit. When college students were asked to respond to current anti-smoking messages, non-smokers championed the anti-smoking cause while smokers responded with defiance, denial, and other counter-productive behaviours. These studies show that persuading legal-age young adults to quit would require new message strategies which show greater respect for the individual, greater support for the effort in quitting, and ways to counter faulty logic.

Jeff, Lisa et.al. (2008) in a study titled “Message Design Strategies to Raise Public Awareness of Social Determinants of Health and Population Health Disparities” found out that although few studies have directly tested message strategies for raising awareness of social determinants of health (SDH) and health disparities, the accumulated evidence from other domains suggests that population health advocates should frame messages to acknowledge a role for individual decisions about behaviour but emphasize SDH. These messages might use narratives to provide examples of individuals facing structural barriers (unsafe working conditions, neighbourhood safety concerns, lack of civic opportunities) in efforts to avoid poverty, unemployment, racial discrimination, and other social determinants. Evocative visual images that invite generalizations, suggest causal interpretations, highlight contrasts, and create analogies could accompany these narratives. These narratives and images should not distract attention from SDH and population health disparities, activate negative stereotypes, or provoke counterproductive emotional responses directed at the source of the message.

Tara (2008) Chairperson of Admar and Result, wants advertising to become an instrument to accelerate the process of change in the urban and rural society. According to her, social advertising should be much more than mere formality with a potential to do public relation jobs.

3. Objectives
1) To assess the awareness of people towards health related social advertisements
2) To investigate the influence of demographic variables-district, area and gender on awareness of respondents on health related social advertisements.
4. Hypotheses
H1: Social advertisements increases awareness of public towards health.
H2: Demographic variables – district, area, and gender – have significant influence on the awareness of advertisements related to health and hygiene.

5. Research Design
This research involved both exploratory and descriptive research. A survey was carried out to collect data from the respondent of Mysore and Chamarajanagar district. Stratified random sample technique was used to collect data. The sample size was 402 and questionnaires of English and Kannada were used to record the data.

Sample
The sample consisted of, 402 respondents of which 175 (114 male and 61 female) were from Chamarajanagar and 227(91 male and 136 female) were from Mysore district selected through stratified random sampling technique.

Table 1: Distribution of Sample Population

<table>
<thead>
<tr>
<th>Area</th>
<th>District</th>
<th>MAL E</th>
<th>FEMA LE</th>
<th>TOTA L</th>
<th>PERCENTAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>Chamarajana gar</td>
<td>76</td>
<td>26</td>
<td>102</td>
<td>57%</td>
</tr>
<tr>
<td></td>
<td>Mysore</td>
<td>46</td>
<td>30</td>
<td>76</td>
<td>43%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>122</td>
<td>56</td>
<td>178</td>
<td>44%</td>
</tr>
<tr>
<td>Urban</td>
<td>Chamarajana gar</td>
<td>38</td>
<td>35</td>
<td>73</td>
<td>33%</td>
</tr>
<tr>
<td></td>
<td>Mysore</td>
<td>45</td>
<td>106</td>
<td>151</td>
<td>67%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>83</td>
<td>141</td>
<td>224</td>
<td>56%</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>205</td>
<td>197</td>
<td>402</td>
<td>100</td>
</tr>
</tbody>
</table>

Procedure
To find out the level of awareness of advertisements related to health, a list of various advertisements prepared by Karnataka State Government and advertised by the State Government’s Information and Broadcasting Department were collected. Based on those advertisements, questions were framed and questionnaire was developed. As far as the total awareness is considered, a total of 24 questions were framed and the respondents were expected to give their responses on a 5 point Likert scale technique. The maximum score a respondent can get would be 120 (24 x 5) to be aware of the health related advertisements the researcher considered that the respondent should score at least 3 points and hence a test value of 72 (24x3) was treated as a standard cut-off. The questions were supposed to be answered on a 5 point Likerts scale ranging from ‘strongly disagree’ to ‘strongly agree’. The answering pattern would be -1-Strongly disagree, 2-disagree, 3-Cant say, 4-Agree, and 5-Strongly agree. The above questionnaires are validated by the researcher and experts in the field using face
and content validity. Later reliabilities for the questionnaires were established through Cronbach alpha reliability technique.

In the first instance a pilot study was carried out by obtaining responses from about 100 respondents. The respondents were first briefed about the purpose of the present research study. They were asked to mark their responses honestly and that the responses given by them would be kept confidential. They were asked to read the question carefully and chose the response that suited them. They were also told about how they should score depending upon their choice. Questions were read for those who couldn’t read nor write and their responses were marked by the researcher himself. Later the responses were collected, tabulated and analysed.

The questionnaire was now modified based on the results obtained from the pilot study. Then the main research was carried out, by choosing to administer the questionnaire to respondents in each area and district. The respondents were chosen randomly. The main study was carried out on a sample population of about 402 respondents. The data collection was carried out over a period of 3 months. The responses were analysed using One sample t test and independent samples t tests.

6. Data Analysis

Table 2

<table>
<thead>
<tr>
<th>Observed value of Mean</th>
<th>Std. Deviation</th>
<th>Expected value of mean</th>
<th>‘t’ value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>89.90</td>
<td>15.16</td>
<td>72</td>
<td>23.61</td>
<td>.000</td>
</tr>
</tbody>
</table>

When this test score was compared with the sample mean of 89.90, using one-sample t test, a significant t-value was observed with a t-value of 23.61 and significance level of ≤.001. In other words, the awareness observed was found to be significantly high.

Table 3

<table>
<thead>
<tr>
<th>Variable</th>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>t value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AWARENESS</td>
<td>Male</td>
<td>203</td>
<td>91.13</td>
<td>14.34</td>
<td>1.65</td>
<td>.098</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>197</td>
<td>88.62</td>
<td>15.90</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Gender as a factor did not influence the awareness of the respondents as there was no significant difference observed between male and female respondents (t=1.65; P=.098) with the respective mean values of 91.13 and 88.62 for male and female respondents.
Table 4
Mean awareness scores of urban and rural respondents and results of Independent samples t test

<table>
<thead>
<tr>
<th>Variable</th>
<th>AREA</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>t value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AWARENESS</td>
<td>URBAN</td>
<td>222</td>
<td>90.17</td>
<td>14.64</td>
<td>.40</td>
<td>.688</td>
</tr>
<tr>
<td></td>
<td>RURAL</td>
<td>178</td>
<td>89.56</td>
<td>15.82</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Area as a factor did not influence the awareness of the respondents as there was no significant difference observed between urban and rural respondents (t=0.40; P= 0.68) with the respective mean values of 90.17 and 89.56 for urban and rural respondents.

Table 5
Mean awareness scores of Mysore and Chamarajanagar district respondents and results of Independent samples t test

<table>
<thead>
<tr>
<th>Variable</th>
<th>DISTRICTS</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>t Value</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AWARENESS</td>
<td>MYSORE</td>
<td>226</td>
<td>89.36</td>
<td>15.99</td>
<td>-0.80</td>
<td>0.422</td>
</tr>
<tr>
<td></td>
<td>CHAMARAJNAGAR</td>
<td>174</td>
<td>90.59</td>
<td>14.03</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

District as a factor did not influence the awareness of the respondents as there was no significant difference observed between male and female respondents (t=–0.80; P= 0.42) with the respective mean values of 89.36 and 90.59 for Mysore and Chamarajanagar respondents.

7. Findings
The selected sample had higher levels of awareness about health related social advertisements than the expected level.

The level of awareness among male and female respondents; urban and rural respondents; and respondents from Mysore and Chamarajanagar did not differ on health related social advertisements.

The researcher is of the opinion that the awareness of respondents chosen for the study, about health related social advertisements were found to be significantly high. To support this view Manickavelan (2013) in her article “A study on the effect of public service announcement in television” found that the respondents who were exposed to the television ads had higher recalling ability of the social issues and increased awareness regarding the same than the respondents who weren’t. Another study also Suganya highlights the role of Government in bringing about awareness among people about health issues. Subitha in her article “Role of government in public health: Current scenario in India and future scope” (2011) highlighted few important efforts made by the government in order to create awareness about health. One among many efforts is the government’s Public service announcements. The Karnataka state government has taken initiative in advertising certain issues which are related to health through various media. Hence the researcher found that the present study also obtained a result that shows people are exposed to the social advertisements in a large manner.
The researcher also found that the gender, area and district as a factor has no significant influence on the awareness of the respondents on health related social advertisements. As observed by the researcher the government has been making its efforts in creating awareness among the population in general and the efforts are equally made towards male and female; urban and rural; Mysore and Chamarajanagar which could be the reason for arriving at such a result. Hence the researcher concludes that the awareness level among the people irrespective of their gender, area and district are similar. The Government of Karnataka has been doing a commendable job on spreading awareness about health related issues among the population.

8. Conclusion

However, the researcher is of the view that there can be schemes that can be specific to men on few issues and women on few issues. Government and policy makers can design schemes separately for urban and rural populations and different schemes for different districts depending upon the conditions prevailing in the concerned area, which would help further strengthen the awareness of the people.

9. References

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