



# Interpersonal Communication & BCC

State Institute of Health & Family Welfare, Jaipur



Listen to Learn

Learn to Listen



# IEC

IEC –A one-way process

- Focused on “messages”
- Implicit assumption that awareness creation will automatically lead to behavior change
- Emphasis on creating messages, entertainment and media



# BCC

BCC (Behaviour Change Communication)

- Outcome oriented
- Research-based
- Consultative process of addressing knowledge, attitudes, and practices through
  - Identifying
  - Analyzing
  - Segmenting audiences and participants
  - Relevant information and motivation



- Using an appropriate mix of interpersonal, group and mass media channels
- Participatory methods



# Behavior change

- K - Knowledge
- A - Approval
- I - Intention
- P - Practice
- A - Advocacy

# IPC v/s Mass communication



<b>Characteristics</b>	<b>IPC</b>	<b>Mass communication</b>
Nature	Personal	Impersonal
Reach	Fast	Very fast
Audience	Specific	General
Message	Focused	Generalized
Purpose	Helping decision taking	Create awareness
Cost	Expensive	Cheap
Feedback	Instant	Delayed
Message retention	Long time	Short time
Support of other media	Makes it effective	Supplements



# Classification of Communication Methods

- Inter-personal communication
  - Friends / Neighbors/ Influential
  - Mahila mandals/Voluntary organizations
  - Health functionaries
- Use of traditional media
  - Puppetry
  - Street plays/Dramas
  - Dances
  - Drum Beating
  - Tamashas/Story Telling



- Group communication
  - Meetings/Group Discussion/Lectures
  - Seminars/Workshop/Panel Discussion
  - Melas/Festivals/Exhibitions
  - Campaigns
- Mass communication
  - Radio
  - Television
  - Printed Materials



# Process of communication

## **Source**

- Knowledgeable
- Respectable
- Credible
- Trustworthy
- Fulfilling the promises



# Process of Communication

## **Target audience**

- Homogenous Group
- Segmentation of Audience
- Intended and Un-intended Audience
- Sociological/Psychological/Cultural Value system
- Knowledge
- Exposure to Media
- Willingness to change
- Social Participation



## **Attributes of message: 7C's**

- Command Attention
- Cater to the Heart and Head
- Clarify the Message
- Communicate a Benefit
- Create Trust
- Convey a Consistent Message
- Call for Action



# IPC Skills

## Listening

- Keep your mind open
- Be flexible
- Find area of interest
- Listen to ideas
- Judge content, not delivery
- Resist distractions
- Hold your fire
- Work at listening
- Capitalize on thought speed



## Speaking

- Face the audience
- Maintain eye contact
- Use appropriate aids, if you can
- Use appropriate language
- Focus on the needs of the audience
- Be brief, to the point, without ambiguity



## **Interviewing/questioning**

- Understand the audience profile
- Put questions in such a way the audience understand and reply favorably
- Start questions from simpler to complex
- The way you ask questions is important
- Do not put questions in such a way which may embarrass you



# Initiating IPC

- Introduce yourself
- Explain the purpose of visit
- Establish mutual understanding
- Allow the audience to speak more and facilitate
- Win the confidence of the audience
- Understand his/her problems
- Analyze whether your interest and his/her problems are the same or different
- Do not make false promises/pose yourself



# Sustaining IPC

- Create conducive atmosphere
- Be knowledgeable about the subject
- Ensure confidentiality of issues shared
- Clarify the queries raised
- Give complete information
- Check whether the receiver has understood as explained



# Terminating IPC

- Leave good impression of yourself
- Have issues for next meeting
- Identify contact people/influencers
- Develop sense of belongingness
- Give an opportunity for the audiences to come with their real problems



# Barriers to Behaviour Change

## **Socio-Cultural Barriers**

- Gender discrimination; son preference
- Norm of early child bearing/early marriage
- Colostrums feeding & other new born care practices
- Dietary pattern of eating two meals a day, women eat last



## Health Services

- Lack of regular outreach services at the village level
- Health provider attitude and low motivation levels
- Lack of trust in public sector services



## **Socio-Economic and Infrastructure**

- Transport constraints
- Households with food insecurity

## **BCC**

- Too much focus on awareness creation
- Limited reach of mass media in rural areas
- Weak systems for BCC supervision
- Community based BCC (IPC, group meetings, community events) is limited
- Uncoordinated mass media campaigns



# Priority Areas for a BCC Strategy

- Antenatal Care
- Institutional Deliveries
- Post Natal & New Born Care
- Married Adolescents
- Gender discrimination (female feticide, infant girl, under 5 girl, son preference)
- Unmet need for family planning
- Nutrition through the life cycle (infant, under three, adolescent, woman)



- Routine immunization
- Hygiene and safe water practices
- Marginalized groups and households including urban poor
- Need for supportive supervision of ASHAs
- Capacity building of BCC skills for service providers across NRHM
- Workload definition and structuring of workload for the ASHAs



# Messages to be addressed

- Age at marriage > 18 yrs
- Delay first pregnancy till 21 years
- Eat three times a day (women and adolescent girls)
- Eat 3-4 times a day (pregnant women)
- Early registration <12 weeks



- 3 ANC check ups
- Institutional Delivery
- Stay in the hospital for 24 hrs after delivery
- Immediate health seeking behaviour
- Immediate and exclusive breast feeding within one hour of birth



- Continue exclusive breast feeding up to six months
- Keep the newborn warm with skin to skin care
- Complete Immunization/ Booster / Vitamin A
- Complementary feeding from six months 4-5 times a day in addition to breast feeding
- Wash hands with soap after defecation and prior to feeding child



- Increase birth interval to three years
- Adopt any limiting method after two children even if both are girls
- Early detection of TB
- Empty and dry water containers once a week



# BCC Activities in Rajasthan

- MCHN Day
- Home visits by ASHA.
- Group meetings by ASHA and ANM
- Swasthya Camps at the block level with video vans (Pilot basis)
- Child to community BCC for hygiene behavior, routine immunization and prevention of mosquito breeding sites
- Folk performances and Nukkad Nataks



# Thank You

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