

Abstract

This research aims to study the health communication, in rural areas of the northeastern region, by local media, in terms of their potentials, roles, factors contributing to problems and barriers, demands and expectations of community members as well as seeking guidelines to maximize the health communication in the area.

The research comprises of data collecting from focus groups in Khon Kaen and Nakhon Ratchasima provinces with four researching tools including (1) Semi-structure interviews with 20 local media personals inclusive of chiefs of television programming department, major radio DJs and managers of broadcasting tower in villages. (2) Semi-structure interviews with 80 audiences/general people. (pls help choose a proper word: Nong) (3) Interviews 400 audiences of local media. (4) Analysis of five kinds of local media comprising of major radio broadcasting, community radio broadcasting, broadcasting towers, newspapers and cable TV.

The research found that (1) Local media obtains potentials in health communication for their executives, qualification and management. In details, those executives themselves are the planners for contents and presentations. Their qualification potential is based on being reliable sources of information and having proximity to local audiences. It also has certain time of broadcasting while information is of local interest. The potential of local media management is shown in their independence, mostly, in operating and the planning of contents and presentation. (2) The role of local media is mainly for providing information and educating people in communities about health issues. (3) Problems and obstacles in health communication are including the lacking of independence in broadcasting, budget inadequacy in providing health issues, the declining of local media popularity, the outdated technology for broadcasting, the insufficiency of knowledge and experience as well as the lacking of skills to produce interesting contents. (4) The requirement and expectation of people toward local media. The sample groups have high level of satisfaction for the media qualifications of information they received, as well as the benefit from health issues they learn from local media, the quality of content concerning health from the media and the frequency and quantity of health content in the local media. The sample groups express satisfaction, more or less, toward physical qualification of local media. Meanwhile these focus groups have high level

of expectations on content qualifications and the benefit of health content they receive from the media as well as those content's physical qualification and their quality. The relationship between satisfaction and expectation was low level in the same direction at .01 level of statistical significance. In addition, the sample groups recommend that DJs are needed some improvements. They should have knowledge and understanding on broadcasting contents and be reliable. The local media themselves should simplify the information so audiences are able to understand easily. While the presentation should broadcast content which is easy to understood too. (5) Suggested guideliness of employing the local media in health communication are including; on health communication approach, the local media should be implanted with the responsibility, among various duties, to promote health information in their communities; on health content approach, the information should concern harmful foods, illness, their causes and consequences; on expected roles of the local media in the northeastern region, they should created roles to educate people about health, to campaign for health prevention, to create health promotion and build up the health network in communities.