Safe Motherhood and ICT Tools in BCC


Introduction:

Every minute of the day, somewhere in the world and most often in a developing country, a woman dies from complications related to pregnancy or childbirth. That is, 515,000 women, at a conservative estimate, die every year. Nearly all maternal deaths (99%) occur in the developing world – making maternal mortality the health statistic with the largest disparity between developed and developing countries.

Every day in India, on an average, 360 women die during childbirth. Problems are particularly acute in Uttaranchal, Uttar Pradesh, Jharkhand, Bihar and West Bengal. Of every 1,00,000 childbirths in India, there are 440 maternal deaths, as compared to 10 in the USA.

When a mother dies, children lose their primary caregiver, communities are denied her paid and unpaid labour, and countries forego her contributions to economic and social development. A woman’s death is more than a personal tragedy – it represents an enormous cost to her nation, her community and her family. Any social and economic development that has been made in her life is lost. Her family loses her love, her nurturing and her productivity inside and outside the home.

Maternal deaths are rooted in women’s powerlessness and their unequal access to employment, finances, education, basic health care and other resources. Preventing maternal death and illness is an issue of social justice and women’s human rights. Making motherhood safer requires women’s human rights to be guaranteed and respected. These include their rights to good quality services and information during and after pregnancy and childbirth and the removal of barriers – legal, political and health that contribute to maternal mortality.

In this scenario, safe motherhood is the watchword and preventing maternal deaths and illness is an issue of social justice and women’s human rights. Safe motherhood means ensuring that all women receive the care they need to be safe and healthy throughout pregnancy and childbirth.

Role of ICTs: In the modern world Information and Communication Technologies (ICTs) are widely used to produce, store, process, disseminate and exchange information. The term ICT encompasses a wide range of technologies including the “older” ICTs – radio, press, TV, film, walkie-talkies and telephone to “newer” ones – email, CD-ROMS, websites, computers, cell phones, palm pilots, digital video cameras etc.

ICTs can play a decisive role in behavioural change communication and safe motherhood. They can raise awareness levels among people, contribute to training and capacity building and help in advocacy at the grassroots level. ICTs will help in improving connectivity for individuals and communities, which in turn may provide access to critical transformational information. They are used to create, nurture and manage human connectedness, for example, equalizing opportunities across barriers of poverty, education, gender, socio-economic status and regional disparities.

Mainstreaming Gender and ICTs for Development Gender is the most pervasive form of social inequality and without gender equality the leveling off of economic and social inequalities leading to overall development will continue to be a myth. Gendered division of labour in
productive, reproductive and community spheres are seen to have historically tipped the scales in favour of men, with the women having to take on the triple burden of all the reproductive (unpaid) and much of the productive (lower paid or informal) and community (e.g. care giving, relationship building) work.

Women’s workload often leaves them with no time off and this ‘triple burden’ leads to ‘Time Poverty’. Women are not in a position to spare time to gather knowledge about themselves or about their family or occupation and thus they are unable to realize their true productive potential.

It is rightly said that information is power. The acquisition and propagation of relevant information can empower communities in myriad ways and is specially important for women. In its transforming nature and form ICTs can ensure equal participation of men and women in all activities.

Information can serve to explode myths, dispel doubts and showcase roadmaps and best practices that communities can use. It can help networking and advocacy to inform and influence policy. It can provide a platform for sharing knowledge about various services as well as for monitoring the efficacy of these services. No one can deny the fact that ICTs can be instrumental in laying down strong foundations of people’s participation in governance and uphold the pillars of the national integrity system.

The widening technological gap between the sexes has slowly been observed to be re-enforcing the traditional forms of power dynamics and hierarchies whereby gains made in social and economic empowerment in the last two decades are left redundant in the new knowledge economy where a large proportion of women in the region are ill equipped in terms of ICT capacities.

**Behavioural Change Communication**: Behavioural Change Communication (BCC) is a part of an integrated, multi-level interactive process with communities aimed at developing tailored messages and approaches using a variety of communication channels.

BCC aims to foster positive behaviour, promote and sustain individual, community and societal behavioural change and maintain appropriate behaviour. BCC is an integral component of a comprehensive reproductive health programme and with reference to safe motherhood it can do many things including the following:

- Increase knowledge
- Stimulate community dialogue
- Promote essential attitude change
- Reduce discrimination
- Create demand for information and services
- Improve skills and self efficacy

**Behavioural Change Theory**: Audiences along a Behavioural Change Continuum: Possible Communication Strategy.
ICT in Health Sector

Given that reliable information and effective communication are crucial elements in public health practices, the health sector has always relied on the use of technology. While information covers needs assessments, health strategies and monitoring, communication is the essential element for disseminating knowledge to patients and to health practitioners. The use of appropriate technology can increase the quality and the reach of both such health information and its communication. Good health is knowledge based and socially driven. On one hand the knowledge base is about information, which enables people to protect their own health. On the other hand, social organizations can help people to achieve health through health care systems and public health.

ICT presents opportunities and challenges to improve public health, but the use of ICT should not isolate the poor communities, which do not have access to information technology.

**Successful ICT intervention: few studies:** The Commonwealth’s new initiative “Commonwealth Connects” first project “Re building after Tsunami: using ICTs for change” is being launched by One World South Asia. The Project aims to offer quality web development, e-mail communication services and training to organizations working on tsunami rehabilitation and re construction efforts in Sri Lanka and India. It is expected to bridge the deepening divide across its member countries, specially least developed countries and their communities. The aim is to facilitate local, regional and international linkages through the worldwide web and to enhance access to information, networking opportunities and electronic commerce.
In Kenya an organization called “Women Kenya-ABC (Advocacy, Behavioural Change and Communication)” was formed in 2002 to address 10 priority development issues including poverty and spread of HIV/AIDS and improving reproductive health. An ICT Youth Resource Centre was set up in the city of Kisumu. It had 20 computers all with internet connections. It targeted 250 school dropouts, trained them in basic computer skills and on effective use of the internet for communication. After 6 months all the people were able to communicate effectively through email and to search for any information on the net.

A similar programme was conducted in India in Tuljapur Taluka, Osmanabad district, Marathwada region, Maharashtra. A grant was awarded in Oct 2003 to One Village One Computer to establish an ICT Service Centre that will cater exclusively to women. It has been very successful as per reports and there are many similar cases as well.

**Conclusion:** As we are aware, technology can be useful provided few important issues are taken care of. The following points may be kept in mind for ICT intervention to be more relevant and useful especially in the field of safe motherhood:

- The projects on the aforesaid issues should be gender sensitive
- Safe motherhood should be given top priority
- Select best suitable technology and keep on updating the technology status that will meet the current needs.
- Arrange meetings, training camps and key events with ICTs & safe motherhood from an interdisciplinary perspective.
- The processes adopted should be participatory, inclusive and enabling.
- There should be adequate and relevant know how and capacity building on use of new technology.
- There should be strong support structures for facilitating and counseling through changing processes.

ICTs can assure contraceptive safety, prevent spread of HIV and other sexually transmitted diseases, improve maternal care and facilitate access to quality reproductive health services.

Women have a lot of potential if they are given opportunities to grow. Even though they live in backward communities, given unchallenging tasks, they can change the destiny of any nation. Nothing is stagnant in this society and things are changing very fast. Women can’t and shouldn’t stay at the backdoor. But at the same time if one wants the country’s women to actively participate in every sphere one also needs to sensitize the men. And I strongly feel that both men and women can jointly minimize the drudgery of women, and women will act as active partner in the developmental processes of any nation.

Also it is felt that the Public Health, the Women & Child Development Departments and various related departments who work for attaining the ‘child survival’ and ‘safe motherhood’ goals must work synergistically. Creating an integrating mechanism that recognizes the specialized functions performed by one department and yet gets the timely collaborative support from the other in achieving their common objectives is the challenge.

For safe motherhood and behavioral change communication, the role of ICT interventions is extremely important. Women have to be educated about its importance and there is still the need to have a sustained efforts and programs for safe motherhood from Govt. as well as non-
governmental organizations. And the issues raised in the beginning must be met successfully and we can achieve a more healthy and prosperous society.

**Bibliography:**

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**Source:** [www.developmentgateway.org](http://www.developmentgateway.org)