

Political Factors Affecting Parents' Perceptions on Televised Polio Messages in Sindh, Pakistan: A Critical Investigation

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ABSTRACT

Television messages are one of the essential means to disseminate polio messages in the prevention of infectious diseases. However, little is known about the hegemony of political actors specifically government in power over televised health content and its impact on people's perceptions to adopt or reject a health attitude, particularly in developing countries. Theoretically, Bandura in his social cognitive theory (1997) has examined the change in mind-sets through observational learning, media and social surroundings. However, his research lacks to underline state dominance over people's health decisions with reference to political leadership. This study fills the gap by critically investigating political factors that obstruct Pakistani television channels to disseminate productive and informative polio messages, for boosting self-efficacy among lower middle class Jamshoro parents, thus encouraging them to vaccinate their children against polio in Sindh province of Pakistan. The methodological approach employs critical paradigm with qualitative investigation through in-depth interviews. Low level of awareness, less credibility of television channels and political hegemony over health messages contributed and enlarged self-efficacy to collective efficacy of political actors during findings of this research study as a new domain in social cognitive theory. In addition, this research sheds light by critically analysing the elements of corruption, unaccountability and lack of transparency involved in ineffective televised polio messages in developing nations as Pakistan, opening a space for policy makers and television officials for a positive health change in designing health awareness campaigns.

Keywords: *Television messages, parents' perceptions, polio, political hegemony, collective efficacy.*

INTRODUCTION AND BACKGROUND

Televised health messages always increase and strengthen the knowledge of targeted contagious diseases and health to a wider audience. The purpose of these health messages is to educate and inform large number of parents for vaccinating their children. Health education programmes in Pakistan started during the year 1990 through the collaboration with international health institutions. Unfortunately, health being the most imperative sector for human prosperity was not considered as a matter of concern to provide a better health to its citizens (Murtaza, Mustafa & Awan, 2015), distressing child health at large.

Pakistan is still one of the three countries of the world that has highest transmission of poliovirus (Ghafoor & Sheikh, 2016). An estimated US \$2.5 million was being consumed in Pakistan alone to focus on the elimination of polio for 2013 (GPEI, 2014). Even then, Global Polio Eradication Initiative Report (2014) suggested that the incapability of government to overcome this enduring disease intensified morbidity and mortality rates among children

which constitute 45% of total population in the state. However, in third world countries like Pakistan, there is urgency of media to disseminate awareness on polio disease to contribute towards the global polio eradication development process.

We argue that media content in the country is enormously hijacked by political actors in Pakistani region and private television channels are an array of political demeanour rather than focussing on social and health messages. Health messages highlight lack of political commitment due to intense political competition among political parties in Pakistan. It is not only financial corruption embedded in Pakistani culture but also corruption of information through political actors. Haroon (2014) also criticised that health corruption in Pakistan misleads important facts and figures and presents biased verification of research in order to gain their unfair political position among public. Thus, it is due to unaccountability and less transparency in health sector from government officials as these entities misuse their political power in public health care in the country by involving themselves in corruption. In this regard, studies have established that parents' lack of information regarding vaccines mostly result in low level of trust over government entities and health providers (Smailbegovic, Laing & Bedford, 2003). Furthermore, television channels give an image of political chauvinism in the form of news, its analysis and talk shows (Mezzerla & Sial, 2010). It is because political actors benefit television channels by making it commercially viable through the provision of funds, plots, and overseas tours etc.

Perception is based on one's beliefs and understandings of various realms that affect his/her motivation to accomplish a certain task. Mass media is the connection between public and policy schemas (Collins, Ellickson & McCaffrey, 2007). Therefore, parents' participation in childhood immunisation can contribute to the promotion of health awareness programs in a country. Al-Ilela, Bahari, Al-Qazaz, Salih, Jamshed and Elkalmi (2014) also stressed the participation of Iraqi parents in immunisation activities for the progress in reducing the vaccination ratio. Thus, in order to increase parents' involvement in child health care, good knowledge of immunisation is essential. It can be pointed out that communication strategy in national plan of polio eradication 2015-2016 in Pakistan did not realise the necessity of determining the factors that influences parents' trust and reliability over televised polio messages related with parents' acceptance or rejection in polio immunisation activities. This research study aims to fill the gap by looking into televised polio messages cited by parents that reflect inefficiency of political leaders as gatekeepers among lower middle class parents in Jamshoro district of Sindh province in Pakistan.

Hence, it is argued that perception of individuals does not exist in vacuum but is largely affected by variety of political determinants. "Mass media can, often do, play a critical role in policy making" (Soroka, Lawlor, Farnsworth & Young, 2013, p. 1). Therefore, this research states that political leadership is the significant constituent that needs further investigation in the prevention of health promotional messages, especially in Pakistan. Moreover, Khan (2013) also argued that there is a dire need to critically analyse media messages regarding health diseases. In this study, the resources and motives that frame the role of political leadership in parents' attitudes, as well as the leadership traits in the context of political players are identified.

Literature Review

In order to examine the research questions investigating the relationship between televised health messages and political actors as gatekeepers of messages in this study, we looked upon the available research literatures. First the literatures on political actors as gatekeepers of televised health messages are discussed. Secondly, health messages are reviewed. At last, all these literatures under a larger umbrella are discussed within the theoretical context of collective efficacy of social cognitive theory.

Political Actors as Gate keepers of Health Messages

Policy makers are in the position to form the media content through direct means, but at the same time, they can direct public attitudes based on their policies (Happer & Philo, 2013). However, in Pakistan on the one hand, television polio messages are retained to be efficient for the public effectiveness only without political hassles. It is because the policy makers are criticised by private television channels for their policies and misuse of power in various departments of health supported by opposition parties (Rasul & Proffitt, 2013; Ricchiardi, 2012). On the other hand, the television channels are indirectly controlled by the state and influential powers that supports the media houses on monetary basis (Yusuf & Schoemaker, 2013). Therefore, political actors' main concern is to publicise political party's agendas and policies for their involvement in establishment and power without realising public health issues and problems. In this scenario, parents' main source of health information is their social surroundings as neighbours or opinion leaders and not television.

Oku, Oyo-Lta, Glenton, Fretheim, Eteng, Ames,... and Cartier (2017) also postulated that there was a less political will among political leaders in Nigeria about the childhood immunisation. Mass media was not properly utilised and messages were delayed in some states of Nigeria resulting in low immunisation coverage in the country. Similarly, Nishtar (2010) reviewed that though the polio eradication program in Pakistan is highly funded, its delivery through the local government is questioned due to their malpractice. These studies only highlighted the factors related to low immunisation coverage but did not emphasise and critically analyse the role of government as the gatekeepers of dissemination of health messages through mass media as television.

The media and state's alliance in Pakistani region is quite vulnerable and fragile. Although private television channels in Pakistan are allowed freely to criticise the government, the state has restricted media leverage through benefits-based approach (Mezzera & Sial, 2010). Television channels are accused of utilising their freedom for specific political agendas and television ratings. Thus, news programmes on television caters governmental affairs on an hour-to-hour basis, stressing conflicts in the state affairs for dramatisation (International Media Support, 2009). Therefore, considering all defined circumstances, it is valuable to determine the political factors that affect parents' mind-sets while consuming the messages telecasted on television about polio disease in Sindh province of Pakistan.

Televised Health Messages

Television plays a crucial role in the formation of public health attitudes. It has been therefore defined that television is the foundation in the provision of knowledge regarding health to the citizens (Egger, Donovan & Spark, 1993). Research on parents' views about televised health messages specifically is a relatively new topic in health communication

arena. Scant literature is found on newspaper coverage of immunisation issues, but even those that are available are reviews or content analysis about the amount of health coverage provided about health issues. For instance, a content analysis was conducted to investigate the coverage of health issues in two of the leading newspapers in Nigeria between a 24-months duration that revealed that health stories are given very less space and position (Onyeizu & Binta, 2014). Ashoorkhani, Gholami, Maleki, Nedjat, Mortazavi and Majdzadeh (2012) examined the quality of health news published in newspapers and the elements affecting its circulation in developing nations. These studies mentioned above lack the critical investigation of people's perceptions about the quality of health messages and the political components responsible for misusing their power by hijacking television health content. Therefore, this present research knowledge exhibits effective intervention of lower-middle class segmentation regarding parents' perceptions of health and polio in Pakistan.

Self-efficacy (Bandura, 1986) of social cognitive theory posits that an individual's own motivation drives him to perform a certain task. However, task or performance accomplishment cannot stand in isolation, but several socio-cultural and political elements influence self-efficacy. Bandura (1997) in his theoretical framework also stated that people's cognitive change is correlated with the observational learning and social realities of life. However, his research did not attempt social pragmatisms of life as the environment, government or the way people experienced their lives or media. Thus, individuals with self-governance in a third world country like Pakistan undergo a variety of societal and political constraints that conceives a stereotype notion about health in his cognitive perception. Hence, here in this study we will evaluate the relationship of television health messages with the collective efficacy of political backdrop like Pakistan as a contribution to the theory of social cognitive theory.

COLLECTIVE EFFICACY

This research focuses on the prevention of polio disease through collective efficacy of political power by social cognitive means. Bandura (1998) defined that "a comprehensive approach to health must provide people with the knowledge, skills and sense of collective efficacy to mount social and policy initiatives that affect human health" (p. 22). Hence, policy makers are responsible to make endeavours in a country to improve health. Strong leadership is the salient aspect in the functioning of health initiatives for changing health behaviours (Frieden, 2014). On the one hand, political leadership in Pakistan is dominant in every field, including health and media. On the other hand, media professionals are not supreme in assembling polio content over television in the country. Rule of government over media channels confine them to design and appraise programmes to mould people's health attitudes. However, the faith of the Pakistani citizens in their state is minimal. Misuse of entrusted power for private benefits is unfortunately endemic in Pakistan (Javaid, 2010). Therefore, this study extends the idea of self-efficacy towards collective efficacy of political power and television medium.

Moreover, collective efficacy is mostly used with leadership qualities in organisational positions. In the health domain, collective efficacy is verified with group performances of individuals. Chung, Jones, Jones, Corbett, Booker, Wells and Collins (2009) analysed that people with enormous collective efficacy are more prone to contribute in the community to work against prevalent depression. However, in this existing setting of

research, collective is used as a team and leadership policies, rather than collective efficacy as a group performance. In addition, it was reviewed that there was scarcity of theoretical configurations in research studies among developing nations regarding health campaigns (Sood, Shefner-Rogers & Skinner, 2014). Therefore, this research fills the gap by analysing parents' cognitive attitudes through collective efficacy means of political forces affecting their mind-sets in adoption or rejection of certain health behaviour.

METHOD AND STUDY LOCATION

We used lower middle class informants for collecting data in this study. It is because, firstly, lower middle class parents in Jamshoro district of Sindh province are made up of different ethnicities and hold diverse religious beliefs, faiths and opinion leaders, making the data more complex. Secondly, lower middle class is much more conservative and are enriched with rigid social values that can cause hindrances in their acceptance of polio messages. In addition, television viewing is much greater among lower middle class parents in Pakistani society. This study employed qualitative data of three public universities' colonies in Jamshoro district of Sindh province. The three public universities included Sindh University (SU), Liaquat University of Medical and Sciences (LUMHS) and Mehran University of Engineering and Technology (MEUT). The number of polio cases in Sindh province is increasing day by day as compared to other provinces of Pakistan (Ghafoor & Sheikh, 2016). In addition, there is also inequity of immunisation services among the major city of Sindh province such as Karachi that receives greater coverage than their low-income neighbourhoods (Owais, Khowaja, Ali & Zaidi, 2013) such as Jamshoro. In addition, Jamshoro is also known as the educational hub of the country. Therefore, the residents living in Jamshoro are not native of this land, but majority of people migrated from different parts of the country especially from province of Sindh.

STUDY DURATION

The study duration was from April 2015 to June 2015.

Study Design and Subjects

Semi-structured in-depth interviews were conducted among lower middle class Jamshoro parents who had children up to five years of age and were exposed to televised polio messages. Thirty-five interviews of fathers and mothers were conducted from three public universities colonies' population and size by using saturation rule of thumb.

The size of population was given by the local councilor of Jamshoro district. After provided with the list of total houses in three colonies, parents were selected on random sampling basis. The informants were assured about their confidentiality and the values and ethics related to the study were defined. The total population of three universities' colonies was 4100 consisting of 630 total housing units.

Fathers were employed in these three public universities under the grade 4-16, whereas, mothers were mostly housewives. Majority of parents were young with an age group between 20-25. The education level of mothers was lower compared to fathers comprising of 7 mothers who had intermediate degrees, 5 mothers had basic primary education and 5 mothers never went to school. Whereas, 10 fathers were graduates and 8 fathers had basic secondary school education in this study.

Interviews with fathers were conducted at evening times while interviews with mothers were conducted in morning and evening times according to their comfort level. However, the informants were facilitated by one of the principal authors who works in one of the public universities of district Jamshoro of Sindh province and was familiar with both English and Sindhi local languages. Therefore, the interview guide for in-depth interviews was first translated from English language to Sindhi language for Jamshoro parents as they were only familiar with their local language as Sindhi.

The qualitative data was first broken down into small parts involving alike or related issues. Secondly, small sections were then defined into the category of big clusters in order to represent the whole population of sample.

FINDINGS

Parents' Engagement with Television

The data investigated the amount of time Jamshoro parents engaged with television in order to get the insights of their viewing habits and the impact television has on their lives in the prevention of health diseases. Television viewing in Pakistan has tremendously increased since its launch. In this study, 90% of Jamshoro parents watched television daily while 62.8% of them consume television more than two hours on daily basis. Further, television consumption hours were found to be greater in mothers than their counterparts because mothers mostly spent their time at homes. It was also demonstrated that most of the parents engaged their time in television for more than three hours. In this regard, two informants demonstrated in the following ways:

I come home late in evening but I make sure to watch television for one or two hours to know the issues going around the world (SU Colony Father_1).

My husband is not at home so he doesn't watch much television, but he watches more shows based on politics (SU Colony Mother_1).

It was also disclosed that despite of powerful effects of television on Pakistani parents' mind-sets, they did not prefer to watch developmental and informative programmes and would rather watch entertainment programmes. In the words of two parents,

Whole day I am doing my house work, so when I get time to watch television, I prefer to watch programmes that can make my time good and enjoyable like dramas (MEUT Colony Mother_6).

In hot weather of Jamshoro, when I come home from university, I don't want to see news that gives me more tension. So I consume sports programmes as it makes me relax (LUMHS Colony Father_3).

These above findings are poles apart from another research of Ishak (2011) who reported housewives' roles of television were to inform themselves. However, few parents were concerned of their children's health issues but they termed televised health

programmes to be incomplete in terms of information and knowledge. As two informants concluded:

I want to watch issues in detail about the health of my child as we cannot go to doctor on daily basis, but there is no health issue with discussion on TV (MEUT Colony Father_5).

Television has never taken polio issue so seriously and the information in such messages is confusing (LUMHS Colony Mother_12).

Regarding the coverage of televised health issues, some mothers considered that television only telecast health issues that are conflict-based in order to highlight the political leadership so people can be persuaded towards their channels. It was because the findings also revealed that Pakistani television channels provide a greater amount of coverage on political issues and people are also interested in knowing about the political affairs in the country (Mahsud, Chaudhry, Amin & Khan, 2013; Zia & Khan, 2012). As in the words of these parents,

Health coverage in Pakistan is more about blame game, there is no useful information about public (SU Colony Mother_3).

Polio issue is only given coverage where there is polio vaccination days after every two to three months (SU Colony Father_4).

Whatever television provides us, we believe upon them and every channel broadcast more political or conflict-based shows (LUMHS Colony Mother_13).

Some parents also uttered that polio awareness can be raised by highlighting this issue through dramas, talk shows, news and analysis based shows.

There are no follow-up stories of polio issue after the national vaccination days announced by government (MEUT Colony Mother_9).

Polio issue is only confined to advertisements, the issue should be discussed in dramas, talk shows or current affairs shows (LUMHS Colony Father_11).

Television as a Resource of Information

Here, the research study aimed to explore the views of parents about effectiveness of television channels in Pakistan for polio coverage and provision of knowledge. Political obsession and hype produced by television channels and ignoring polio activities was also found to be affecting most of parents' health attitudes.

Political pressures underrate polio messages so the information is incomplete (SU Colony Father_3).

Television does not fulfil our needs of adequate information (SU Colony Father_4).

Few parents also enclosed that their source of information concerning polio issue is from their family doctors and they do not trust television to strengthen their knowledge of health diseases because of their doubts over government entities in Pakistan. These parents said,

We complete our thirst of health news through doctors in our family (SU Colony Mother_5).

We come to be aware of other contagious diseases as measles but not polio and there is dearth of polio activities shown on television (SU Colony Mother_3).

Mothers also attributed these televised messages to be complex and difficult in comprehension. These mothers very vigorously stated that the language used in these polio messages is scientific and is not easily understood by a layman. Therefore, mothers found such messages a waste of time and money and therefore, stressed on the training of the journalists in order to construct messages as per targeted audiences' frame of minds (White & Wingenbach, 2013). They postulated that television officials should consider the socio-culture background of the targeted segment of the society in order to increase polio awareness. In the views of two parents,

Mostly polio health reports use medical words to make understand people about polio which are beyond their comprehension (MEUT Colony Mother_12).

These journalists themselves are untrained of scientific knowledge related to polio, so they sometimes exercise doctors in their television reporting piece, but these doctors also due to media shyness and over conscious of their own credibility illustrate the disease that is difficult to understand for a lay man as parent (MEUT Colony Father_17).

Jamshoro fathers also elaborated that if the journalists forbid the landscape outlined by policy makers and expose political leadership's wrong doings in the health field, ultimately, they end up losing economic benefits for their respective channels or the channels are being banned by these political authorities.

Television channels in Pakistan are not free at all because they cannot broadcast any story regarding corruption related to polio and health by government officials (LUMHS Colony Mother_13).

Another informant expressed the similar thoughts as the above,

Pakistani channels only present political shows or friction-based programmes and don't bother to cover other issues as health social, women or human rights. We just see the news of polio relating to the dates of polio rounds or attacks on health workers on private channels, otherwise polio programmes are minimal (LUMHS Colony Mother_16).

Two parents while discussing the polio messages stated that it is also the responsibility of television channels to portray positivity among parents whose children have been exposed to polio disease. These mothers expressed that polio victims' families go through emotional turmoil after their children are attacked with polio virus, therefore, polio messages should also broadcast programmes that gives hope and solutions to such families to cope with the difficult situations.

Television channels show the victims of polio again and again in a dramatised way and present them as a symbol of sympathy that decreases the self-esteem and confidence of polio victims and their families (LUMHS Colony Mother_18).

Televised messages fail to perform its proper role of social development in educating and increasing health literacy among them (SU Colony Father_9).

Political Hegemony in Televised Polio Messages

The main intention of the above titled theme was to determine the political barriers hindering effective and informative televised polio messages in representing parents' perspectives. Jamshoro parents openly expressed their views in relation to political power over televised polio messages in following ways:

Political leaders have erroneous intentions for personal wealth and prosperity, therefore, they don't utilise health funds for polio eradication campaigns (MEUT Colony Father_4).

These leading and dominant sections of the society always unofficially control the television media for political purpose and are not concern of private television channels in supporting a polio awareness campaign (LUMHS Colony Mother_14).

However, it was also noticed that polio messages had negative perceptions and rumours in parents' minds that also resulted in rejection of polio vaccination among them. For instance, parents narrated as,

We have heard from media that political leaders get so much money from the west for polio but these leaders are corrupt (SU Colony Father_1).

Political leaders just for the sake, to show international health organisations broadcast polio issue but no one is honest (SU Colony Mother_4).

Some parents underlined the mutual monopoly between television authorities and government in power for damaging polio awareness messages meant for the change in parents' mind-sets about acceptance of polio vaccination. These parents pointed that,

These leaders for their good image use television channels by making them economically sound to support their party by being biased and not highlighting the monopoly and hijacking of political leaders of being dishonest (LUMHS Colony Father_19).

The opposition leaders present indefinite facts of polio for the negative image of the ruling party and provide their own solutions to handle the issue, so this sort of political leadership decreases our trust on these leaders (MEUT Colony Mother_34).

DISCUSSION

Summary of Findings

This study has established a frame of reference regarding parents' perceptions in Jamshoro district of Sindh province and the political hegemony of government in power over television institution in Pakistan that put serious questions on the credibility of polio televised messages. It is important to pinpoint that government of Pakistan in national plan of polio eradication 2015-2016 designed mass media campaigns to inform parents about polio disease, the vaccine and its safety. However, the role of Pakistani media is inadequate under health and developmental issues (Yousaf, 2012). The constraints can be social, cultural and political (Eijaz, 2012), depending upon the ideologies of organisation and government.

Pakistani electronic media particularly private television channels operate under private ownership. But due to economic purposes, government's heteronomy over media content and television messages has halted media impartiality for its survival (Mezzera & Sial, 2010). The state and policy makers in Pakistan have an effective control over media institutions through circuitous means of advertising grants. Therefore, several media house in Pakistan make efficient efforts to oblige government requests of favouring them by providing positive coverage (Yusuf, 2013). It is because private television in Pakistan depends on advertising for their revenues and economic survival. Hence, from parents' views it was also declared that political shows on these television channels attain greater number of advertisements due to their popularity among the viewers.

Over all, parents' perceptions about televised polio messages provide some idea about the political barriers that the television institution is facing for independent and free health messages with impartiality to fulfil its basic role of information. These findings contrast with other studies conducted in low-income regions in India and Nigeria that has accounted successful journalists' and mass media campaigns in battling the fight against polio (Mahr, 2013; Ghinai, Willott, Dadari & Larson, 2013).

Upon analysis of the responses, it was observed that political and television leadership of group performance for a common goal was deficient and this political machinery never made efforts for motivational learning among Jamshoro parents by providing a free hand to television channels for the dissemination of informative polio messages. Three main areas were identified that hinder the process of effective televised health messages in the eradication plan of polio in Pakistan. These three main elements evacuate the idea of self-efficacy to collective efficacy of political factors and fulfils the gap that earlier have not identified by Bandura (1997) in his collective efficacy concept of social cognitive theory. Further, these three main findings have an important connection with the refusal of televised health messages in Sindh province among lower middle class parents in Jamshoro district. These three areas are as follows:

- Low level of Awareness
- Less Credibility of Television Channels
- Political Hegemony

Overall, low level of awareness was observed among parents regarding polio disease because parents did not rely upon polio messages for their knowledge of polio disease. It can be assumed that the countries abolishing polio from the region must be successful in managing effective and useful polio information through mass media channels without political monopoly of personal motives (Joseph Subba, Nelliyanil, Kotian & Haridath, 2011). The main motivator in polio eradication is the positive attitude among community (Khan, Bari & Mehmood, 2016). However, this positive attitude can only be achieved through group performance of political leadership and television medium commitment towards polio disease for public benefit with mutual framework of change. This research observed parents' low reliability upon Pakistani television channels because they pointed television's ineffective and minimal role towards the coverage of educational and health issues. Mostly, parents living in Jamshoro district were migrated from rural areas and other districts of Sindh province to Jamshoro district, therefore literacy level among them was found to be low as discussed above while defining the background of informants.

Moreover, Thaker (2012) noted that collective efficacy and self-efficacy in a community supplement through mass media can bring positive influence on targeted communities to adopt intervention (i.e., drinking water issue in the susceptibility Indian communities). Whilst, the current research lies on the impact of health and polio messages with a significant collective efficacy and socio-cultural leadership to increase parents' self-efficacy with the means of television.

Moreover, sensationalism was claimed to be carried away in health television programming which has distorted the credibility of Pakistani television channels among parents. Kowalik-Kaletka (2012) also critically articulated that television news channels in order to gain audiences' approval and commercial profits use the tactics of sensationalism, attractive visuals and rhetoric elements of language. Jamshoro fathers claimed that nowadays people are more attracted towards melodramatic angles to health stories because the television channels have set the trend of exaggerating the news for their ratings. This finding is unparallel with the studies conducted in Australia and India (Imison & Chapman, 2010; Joseph et al., 2011) where necessary actions were to shape parents' attitudes towards' acceptance of polio vaccination by revising health televised messages for the promotion of polio awareness campaigns. This study also revealed that television

journalists and media houses apply filters without any authenticity of the news and illustrate trivial public concerns. Jamshoro parents recognised that media professionals take funds, bribes and donations from government to favour their respective channels and in turn conceal governmental misuse of polio funds for their personal wealth and properties.

Thus, in this scenario, parents cannot be blamed alone for unawareness and negative attitude towards televised polio messages. However, the federal government of Pakistan should adopt effective measures to make television institution of Pakistan independent and powerful for a change in health attitude. Fair reporting and impartiality is also required to avoid misconceptions and this can be achieved in the case when television channels and journalists enjoy handsome amount of salary packages so they are not deluded through political machinery and bribe culture. Further, there is a dire need of understanding the socio-cultural background of lower middle class Jamshoro parents so that they can be connected and motivated by polio messages.

STUDY IMPLICATIONS

The present study found that there is a communication gap between parents and television channels for designing polio messages. This leads to improper and unappealing polio programmes that ultimately leave no greater impact on parents' perceptions to adopt polio vaccination programmes. Therefore, this study proposes that if television officials perform some surveys, door-to-door research or follow such guidelines in the form of this research, efforts can be made in the eradication of polio from Pakistan. This study also concluded that television polio messages are just confined to polio advertisements. Therefore, if dramas, talk shows and other discussion programmes also take polio issue on first priority, this will definitely benefit parents to change their health decision-making attitudes.

FUTURE RESEARCH

Studies in future can examine health practitioners', health officials' and television authorities' perceptions regarding televised polio messages and the challenges polio disease is facing in Pakistan. In this way, an insight can be documented from government, health and media forces' perspective that can be contradicted with parents' opinions expressed in this study.

CONCLUSION

Thus, this study reflected the political hegemony over television institution that has diminished parents' trust over televised polio messages despite of the popularity and powerful effects of television in Pakistan. Parents identified political hijacking over television channels that do not motivate them to adopt new health habits regarding their children's polio vaccination. However, parents' engagement with television was found to be greater and strong and had profound effects on their mind-sets. Parents also use television to reduce their anxiety and to be in touch with the current happenings around the globe. But it was noticed that fathers, on the one side, mainly consume television for different categories of programmes such as current affairs, sports and political shows, whereas, mothers on the other side were mostly confined to dramas and cooking shows.

Moreover, this study observed that parents' confidence and acceptance of polio vaccinations was raised if televised messages contained stories and programmes that showcased homely fathers and mothers. This study also pointed that in certain

circumstances where parents accounted that the polio issue was telecasted with impartiality and exposing corruption involved in health budget, particularly, parents seemed satisfied with the polio coverage on television channels in Pakistan. Therefore, this study contends that it is the job of policy makers and television officials to take into account the challenges and concerns of parents regarding their participation in televised polio immunisation awareness programmes. This collective efficacy of political forces and television authorities can lead to raise parents' awareness, resulting greater coverage of polio vaccination ratio in Pakistan. It is due to the fact that television in Pakistan is consumed by a larger audience that has the power to mould parents' perceptions towards immunisation if it is utilised in a useful manner and for the propagation of ideas beneficial for the child polio vaccination programme in the country. In addition, the role of television in spreading health awareness messages is not only to provide the basic knowledge to the public but also to influence them in order to elevate collective efficacy concerning parents' health behaviours.

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