# A Final Report on BCC/IEC Programs and Their Impacts on Knowledge and Behavior of People in Nepal

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Date: 2006

**Background**

According to the Nepal Family Health Survey 1996, the maternal mortality rate is 539 per 100000 live births that are higher than other countries of the world. Similarly, a very sensitive health indicator, the infant mortality rate has been 64 per 1000 live births in 2001. The diarrhea and acute respiratory infection contribute much to the larger number of deaths of infants and under five children in Nepal. Smoking and drinking are also creating problems in public health. It is assumes that the lack of knowledge and practice about healthy behavior have led to these problems. In this context, public health awareness programs can play a vital role for disseminating message addressing to these problems.

**Methods**

The study is based on empirical data and information collected from sample of 400 households from 10 village development committees of 4 districts representing hill and terai regions of Nepal. In addition, District Health/Public Health Officers, in-charge of health posts/sub-health posts, paramedics and traditional healers were also interviewed. Focused group discussion, case study and community key informant interviews were also organized and conducted in selected districts.

**Results**

Very few local publications were observed and collected in selected District Health/Public Health Offices There were no any materials found published in local language. The study found that 79.3% respondents were exposed to posters on anti-smoking. 86% of respondents reported that they have heard of anti-alcohol radio advertisement. Nearly 40% people were found defecating in toilet and nearly 50% use soap after defecation/dirt handling. More than 80% people reported that they have practiced home delivery. 65% respondents had knowledge on STD/HIV/AIDS.