Review Article
Volume 15:2, 2025

Journal of Mass Communication & Journalism

ISSN: 2165-7912 Open Access

The Use of Social and Behavior Change Communication Strategies During the Pandemic: An Analysis Based on Kerala

Archana CA*

Department of Journalism and Mass Communication, Thunchath Ezhuthachan Malayalam University, Vakkad, Tirur, Malappuram, India

Abstract

The year 2020 was marked as a special, unfortunate and unpredictable year in the world history. The wave of pandemic, COVID-19 has badly affected the nuke and corner of the whole world. In India, the state of Kerala reported the first COVID–19 positive case on 30th January, 2020. Since then, the country faced all the difficulties of the pandemic. Being the less positive cases reported state, later, Kerala became the first in positive cases. The importance of digits or numbers has increased during those days. Some of the words like alert, vigilant, vaccination etc. Received prominence like never before. Words such as mask, sanitizer, hand wash, social distance, quarantine, community kitchen etc. were used frequently in daily communication. The Keralites were eagerly waiting for the press meet of the Chief Minister at 6 pm. The people have been adapted to and adopted the new and unfamiliar behaviors. Now the pandemic days become mere stories. Here, the researcher analyzes the role of Social and Behavior Change Communication (SBCC) in the precautionary and preventive measures against COVID-19, which were practiced in Kerala.

Keywords: Social and behavior change communication • COVID-19 • Participatory communication

Introduction

Novel Coronavirus Disease alias COVID–19 was supposed to be originated in Wuhan, China. It was first reported from Wuhan on November 2019. Slowly it began to spread and transmitted to neighboring countries and then to all continents except Antarctica. Several rumors have been associated with this pandemic because it was the first disease in this kind. Gradually, researches have been conducted in various parts of the world to cure the deadly virus. After reporting the first COVID–19 positive case in 30th January, 2020, India and Kerala became highly vigilant and alert. The Union and State governments forwarded frequent communications about the pandemic. Preventive measures were offered and provided. The use of mask and sanitizer made compulsory. Maintaining social distance and proper hand wash were carried out in public places. The Government of Kerala launched a mass hand washing campaign, named Break the Chain, on March 2020 to combat Coronavirus. It aimed to educate people about the importance of personal and public hygiene and eradicate the pandemic. As per this campaign, water taps were installed at public areas. Sanitizer has been kept in front of shops, institutions, offices etc. Following the nationwide lockdowns in different countries, the same was announced by the prime minister of India on 24th March 2020. But a state wide lockdown was declared by the chief minister of Kerala a day prior to the prime minister's announcement. Afterwards, the beginning of national lockdown, community kitchen facilities were implemented to offer food to the people who are suffering the worst of the lockdown. The state government provided free food kit including rice and groceries and it was distributed through rations shops to whole families. Many such activities were introduced in those days for the well-being of the people. This was the time, in which the human community dealt with new behaviors. They forced to follow the behaviors by the authorities. Slowly, those new and unfamiliar behaviors became a part of life. It is being continued and practiced even after the diminishing rate of the pandemic.

By the second half of May, 2020, less than 20 positive cases were reported per day in Kerala. Later, the situation has totally changed and there happened community transmission in various districts. There was a sudden hike in daily positive cases. Sometimes, the situation became out of control. Yet the state government, healthcare officials, ordinary citizens joined together to

***Address for Correspondence:** Archana CA, Department of Journalism and Mass Communication, Thunchath Ezhuthachan Malayalam University, Vakkad, Tirur, Malappuram, India, Tel: 9995935325; E-mail: archana2826@gmail.com*

***Copyright:** © 2024 Archana CA. This is an open-access article distributed under the terms of the creative commons attribution license which permits unrestricted use, distribution and reproduction in any medium, provided the original author and source are credited.*

Received: 16 May, 2024, Manuscript No. JMCJ-24-135719; **Editor assigned:** 20 May, 2024, PreQC No. JMCJ-24-135719 (PQ); **Reviewed:** 04 June, 2024, QC No. JMCJ-24-135719; **Revised:** 26 April, 2025, Manuscript No. JMCJ-24-135719 (R); **Published:** 05 April, 2025, DOI: 10.37421/2165-7912.2025.15.606

fight against the virus despite of the deaths and other casualties and the situation became under control. Thus the 'Kerala model' of combatting COVID–19 was a topic of discussion throughout the world for a few months in 2020 and 2021. The union government, national and international media, healthcare institutions, health experts, cultural activists and the normal public were appreciated the efforts that have taken by the government of Kerala to prevent the Coronavirus.

Here, the researcher decides to examine the techniques and strategies of communication that was used in Kerala, which was recognized globally. It is going to analyze by using the social and behavior change communication.

Literature Review

What is SBCC?

Behavior plays a crucial role in communication. It can be considered as one of the elements which influence the identification and existence of a human being. There are changes in behavior according to the internal and external factors where the person belongs to and changes in behavior is must. Social and behavior change communication is a process of interactively communicating with individuals, institutions, communities and societies as part of an overall program of information dissemination, motivation, problem solving and planning [1]. Communication, social change and behavior change are the three important elements in SBCC. The first and foremost component, communication is nothing but the exchange of ideas, messages, thoughts etc. between people using different channels. It is a meaning making process. The second element, social change refers to the beliefs, customs, attitudes, policies etc. of the society. It is based on the perception and reception attitude of people. The third and final constituent, behavior change means the change in behavior of the individuals and the society. Behavior change is not an easy process. Frequent communication and different kinds of communication techniques have to be applied for behavior change. In short, SBCC is the coordination of messages and activities across a variety of channels to reach multiple levels of society, including the individual, the community, services and policy [2].

Before moving to the next part, the term behavior is needed to be analyzed. In psychological studies, behavior means communication. Behavior and communication are interrelated. Behavior is intangible and immeasurable. According to Ossorio, behavior begins by noting that all behavior is describable as an attempt on the part of an individual to bring about some state of affairs–either to effect a change from one state of affairs to another, or to maintain a currently existing one. Behavior change is complicated and complex because it requires a person to disrupt a current habit while simultaneously fostering a new, possibly unfamiliar, set of actions [3]. It is a time consuming process.

During the days of pandemic, the whole world was compelled to accept new behaviors. Wearing of mask, using of sanitizer, periodical hand wash and maintaining social distance were the new such behaviors and slowly these became a habit and a routine. Though it was a forceful one, the people easily and rapidly adapted to it. A sense of 'untouchable' behavior was emerged and it has been practiced. It arose as a part of crisis communication as well.

According to the social ecological model, by Bronfenbenner in 1979, there are four levels of influence that interact to affect behavior.

In Figure 1, the social and structural layer meant to the larger and macro level environment which can either promote or deter behaviors. It includes leadership, health systems, media, technology, resources, services, policies, protocols, guidance, religious and cultural values etc. The community refers to influences from the situational contest which the individual lives and in which social relationships are nested. Here, the individuals are more likely to practice desired behaviors if leaders promote them, the whole community believes in their importance and if proper information and support are available and accessible. Family and peer networks denote about the influence of peer groups, life partners, family members etc. Mostly, the people are influenced by the peer group. It has a special place in communication. Last but not least, the most important factor which influences the human behavior is the individual themselves. Their knowledge, skills, values, emotions, self-efficacy etc. determines their behavior [4].

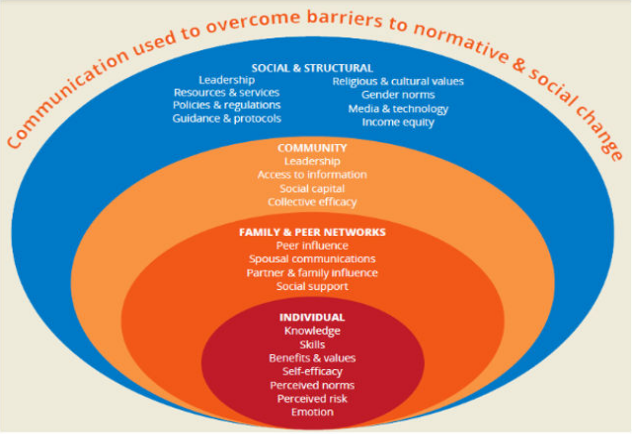

Figure 1. The figure shows communication used to overcome barrier to normative and social changes.

The above said influencers of behavior have inevitable role in communication. The people like to accept and follow the behaviors of their leaders, peer groups, family members etc. Their gestures, mannerisms, style of appearance and the way of speaking are to be followed. This practice of imitation leads to change in behavior and it becomes a part of one's communication. During the pandemic days, people forced to and used to accept and imitate the behaviors of their leaders, community and family members. Their knowledge, emotions and self-efficacy have also been influenced to follow the sudden and unforeseen behaviors like wearing of mask, using of sanitizer and maintaining social distance. These behaviors were communicated, familiarized and implemented through several

strategies and techniques. The ultimate aim of the strategies was the prevention and eradication of COVID–19.

Discussion

The important strategies are discussed below:

Health communication and health promotional campaign

The government of Kerala has launched a health communication technique with a health promotional campaign, Break the Chain. This campaign was mainly focused on personal and public hygiene through hand wash. As part of this campaign, facilities to wash the hands during travel and other occasions were arranged. Water taps and water filled buckets with soap and liquid hand wash were placed in all institutions, shops, banks and other public spaces. It can be considered as an education and training to raise awareness of transmission and ways of curbing of COVID-19. Doctors, nurses and other healthcare officials provided training on how to wash the hands properly. Many doctors and other experts conducted classes through their social media accounts. So hand wash was likely to the first change in the behavior of people and it was a preventive or precautionary one. The campaign also aimed to motivate people to adopt new behaviors. The campaign has a logo with a slogan of 'Kaividathirikkam, Kaikazhuku' which means. The circulars, orders, memos and other official documents from the government carried the logo. The logo was placed in the visible areas. Some brands introduced T-shirts with the logo. Though it was a compulsory action from the authority, the people adapted and included it in their behavior very quickly. Advertisements through different media, transit advertisements, posters, flex boards, hoarding etc. were also used to communicate the objectives of the campaign. The campaign was carried through psychological factors. The thought 'Corona virus is everywhere' was highly disturbed the people and they were deliberately willing to follow the new behavior to prevent the disease.

Contact tracing

The easiest and finest, but the most challenging part of curing the deadly virus was tracing contacts with the COVID-19 patients. If someone detected positive, the person was isolated and those who were in contact with them asked to get isolated or quarantined. Some people have voluntarily isolated and quarantined while some others have deliberately denied these governmental orders or requests. There reported many such negligence. Social media was very much useful to trace the contacts. Route maps of the patients were published in the initial stages when the positive cases were in single digits, later it became impossible. To get quarantined or isolated was another kind of behavior that was taken on by the people. It was the responsibility of the public towards the society. Being without disease and be not the cause of disease was the aim of self-isolation and self-quarantine.

Public communication

The daily press meet of the chief minister in the evening was a relief for billions of people. The chief minister used a public communication strategy to inform the daily pandemic situation of the state. Along with the details of daily positive cases, he shared all the instructions to curb the pandemic. The way of his communication was itself an assurance to the people which indirectly says that there is a strong government to fight against the deadly virus. The voice modulation, body language, question answer session, punctuality and interactivity of the chief minister made him popular even among the children. He convinced and insisted many things about the pandemic without making fear in the public. It was a routine during the pandemic. 'No fear, but be vigilant', a casual piece of his speech became one of the slogans to fearlessly face the COVID-19 and it seemed to be a relief mantra. Watching and listening to the regular press meet has been considered as a new behavior of the people. Though it was public communication, everyone felt it as an interpersonal communication, so they experienced an intimacy in the press meet. The public perceived him as the eldest member of the family and valued his communication.

Regulations and restrictions

Another curbing method imposed by the Union and State governments to prevent the pandemic was maintaining social distance in public places. It was compulsory and those who have violated it, got fine and other punishments. As a part of it, a limited number of people were allowed in marriages, public functions, gatherings and cremations. It was a controlling measure. Besides it, all these gatherings were conducted under the surveillance of police, elected representatives, sectoral magistrates and protocol officers. A project, named project eagle has been executed by the Kerala police to monitor the public gatherings with the help of drones. Even the school final exams and eligibility tests were conducted with maintaining COVID-19 protocols. That means, mask, hand wash and social distance were mandatory. Slowly it became a social practice. Life became simple and bonding of people has increased. The strategy of invisible geo fencing was enabled without making a boundary between people. It has a great influence in the behavior of the society. So that it can be considered as a change in behavior. There was nothing luxury in those days. The principle of simplicity was seen without boarder. It is being followed and practiced now. These messages were continuously passed through traditional and new media. So there arose a new social and cultural norm in the normal routine and habits of every human being.

Simple but comprehend communication

Various communication channels were used to exchange and communicate the importance of taking precaution and prevention against the pandemic. One of the simple but comprehends communications tool was the voice message. A voice message was delivered just after dialing the numbers to make a phone call through mobile phones in regional languages and in English as a warning and

an alarm. Text messages and e-mails were also used to reminding about the precautionary measures. This helped to learn and try out the unused behaviors.

Modeling strategy

Apart from these behavior change strategies, a modeling strategy was also implemented to deal with new behaviors. Government officials, film stars, media persons, religious leaders, sports persons and other celebrities served as role models of preventive behavior in the break the chain campaign. Government officials were seen wearing masks, mikes were covered with plastic wrappers, sanitizer bottles were seen near the laptop of news presenters, demonstrations of hand washing and sanitizing, join together of palms instead of shaking hands could be considered as modeling strategies. This has also influenced in adopting such behaviors by most citizens [5-9]. The people were engaged with imitated behaviors.

Vaccination and written documents

Another important precautionary measure to prevent the pandemic was the requirement of written documents related with vaccination. The sate distributed the vaccine according to the directions of the Union government. The vaccination campaign and process were successful mainly because of primary health center workers, ASHA (Accredited Social Healthcare Activists) workers and Anganwadi workers. Complacency (a delay in acceptance or refusal of vaccines despite availability) and convenience (unwillingness to go to a distant health center to get vaccinated) were the major complications faced by health workers to get others vaccinated. Documents like COVID-19 negative certificate or COVID–19 vaccination certificate were made compulsory in up and down foreign country journeys, to enter into tourism destinations, to prayer places, shopping malls etc. Those who have failed to produce these documents were not allowed to enter such places. This type of compulsion has smoothened the vaccination process and COVID–19 diagnoses. So the people had to either get vaccinated or get diagnosed before moving to somewhere else. Thus, vaccination became a social behavior from an individual behavior.

Participatory communication

During the days of pandemic, a participatory approach was highly visible in the society. Frequent communication, exchange of healthcare related messages, COVID-19 vaccination campaigns and other preventive measures were discussed in several real and virtual groups. The service of ASHA workers, Anganwadi workers and Auxiliary Midwives were highly praised. They had an integral part in the pandemic treatment and distribution of vaccination. The whole world appreciated their effort in combatting the deadly virus. Here, a grass root level and horizontal communication has taken place among the people. A continuous community dialogue and conversation approach has been applied. Local self-government institutions, non-governmental organizations, volunteers, RRT (Rapid Response Team) members, and the common people have joined together to form a new participative culture. They share experiences, understand the things to do and identify the challenges from these groups. The co-operation, co-ordination, dedication, sincerity, hard work and unity have played a vital role in curbing the pandemic. Most times, the public was closely associated with each other. 'Be a part of a group' is another key behavior that has been appeared form the pandemic. A community dialogue platform has to be embedded to strengthen the bonding of individuals and groups.

Individual–society relationship

In every society, there always exist a relationship between the society and individual and it is a top to bottom relationship; that is from the society to the individual. In this relationship, there must be an obey and order system. This has totally changed during COVID–19 days. A new relationship has been made between the individual and society. Every individual stood for the well-being and a common good of the society. The thought of 'we are one' came out. Knowingly or unknowingly, a sociality and public action have been created among the people.

First line COVID treatment centers alias public houses

Many FLCTCs have been built during the pandemic. It provided accommodation and food to those who are not able to get isolated and quarantined in their homes. Auditoriums, schools, prayer halls, empty buildings were set up as FLCTCs. It was organized and monitored by Local Self Government institutions and RRT members. It can be considered as public houses. A social representation was existed in this endeavor. Social representations theory is a "theory of social knowledge" specifically concerned with how individuals, groups, and communities collectively make sense of socially relevant or problematic issues, ideas, and practices. Social representations are socio-cognitive constructs that reformulate the environment of individuals so that they appropriate it. It is a form of knowledge, socially elaborated and shared, having a practical aim and contributing to the construction of a common reality common for a social group. It allows individuals to interpret the world around them through a relatively common filter that will also guide their actions. According to their representations, individuals will, on the one hand, have an attitude, take a position towards an object, and on the other hand, carry out behaviors in coherence with these representations. For this reason, representation is the basis of most of our behavior. But it also determines our communications, as well as the form and content of our interactions. Thus the concept of FLCTCs or public houses has become a matter of concern in the behavior of the people. A public action was also intertwined here.

These are the major behavior change strategies adopted in Kerala to strengthen the people to fight against COVID–19. It doesn't matter whether these measures were highly successful or not. The public accustomed to the new behaviors. Though there were enormous risk factors like the consequences of repeated use of sanitizer, the people were able to engage with these strategies.

While combatting with the pandemic, an increasing number of misinformation and fake news were disseminated through social media. According to Derakhshan and Wardle, misinformation is false information and that is shared without the intention of causing harm. But later it transforms as disinformation, that is, false information is knowingly shared to cause harm. The popularity of social media, even among the illiterate, became a tool to exchange misinformation. There was an outbreak of 'infodemic' (Note 1) with the undermining of public health messages. At times, the source was unknown and forwarded the messages many times. When a 'forwarded many times' message received, the receiver think that nothing wrong with the message. It demands and reminds a digital hygiene (Note 2), which is the necessity of contemporary society. It is a psychological factor of communication. Later, fake messages and fake message identifying system have been launched in many media organizations. Now it becomes an academic area.

Living with COVID-19 is also a part of new behavior. It is a habit and routine. It is believed that the threat of social crisis of pandemic is about to an end, for sure, there would be another crisis. This is a clear evident of public communication. This is how the public communication worked in Kerala. These strategies helped to curb the transmission of the disease at an extent.

Notes

- Infodemic: Infodemic is a word that blends "information" and "epidemic," and refers to the rapid spread of information both accurate and inaccurate in the age of the internet and social media. The term was coined in 2003. The word was coined in a 2003 Washington Post column by David Rothkopf.
- Digital hygiene: Digital hygiene as a term was first used by Dr. Eduardo Gelbstein in 2006 when he published the book, Good Digital Hygiene.

Conclusion

The COVID-19 pandemic brought about unprecedented challenges that reshaped societal norms, behaviors, and communication practices globally. In Kerala, the integration of Social and Behavior Change Communication (SBCC) played a pivotal role in the state's efforts to combat the virus. The strategies employed by the government and public health officials ranging from health campaigns like "Break the Chain," to public communication through daily press briefings, and the implementation of participatory communication-were crucial in educating, motivating, and guiding the public toward adopting new health behaviors.

These SBCC strategies were not only effective in curbing the spread of COVID-19 but also in fostering a collective sense of responsibility among the people. The pandemic compelled individuals to adapt to unfamiliar behaviors such as wearing masks, using hand sanitizers, and maintaining social distance, which soon became ingrained in daily routines. The success of these measures highlighted the importance of clear, consistent, and culturally relevant communication in influencing public behavior during a crisis.

Moreover, the role of community participation and the influence of peer networks, family, and societal leaders were instrumental in promoting these new behaviors. The widespread acceptance and practice of these behaviors demonstrated the power of SBCC in achieving significant public health outcomes.

In conclusion, Kerala's experience with COVID-19 underscores the critical role of effective communication in managing public health crises. The strategies implemented not only helped to control the pandemic but also set a precedent for future health communication efforts. As the world continues to face new challenges, the lessons learned from Kerala's SBCC approach provide valuable insights into how communication can drive social and behavioral change on a large scale.

References

1. Bronfenbrenner, Urie. "The ecology of human development: Experiments by nature and design." Harvard University Press, 1979.
2. Wardle, Claire, and Hossein Derakhshan. "Information disorder: Toward an interdisciplinary framework for research and policymaking." Vol. 27. Strasbourg: Council of Europe, 2017.
3. Marková, Ivana. "The epistemological significance of the theory of social representations." *J Theory Soc Behav* 38 (2008): 461-487.
4. Moscovici, Serge. "Psychoanalysis: Its image and its public." Polity, 2008.
5. Ossorio, Peter G. "The behavior of persons." Descriptive Psychology Press, 2006.
6. Center for Social and Behaviour Change Communication. "What is sbcc."
7. Health Communication Capacity Collaborative. "What Is Social and Behavior Change Communication?" SBCC for emergency preparedness implamentation kit. 2016–2020.
8. Health university of UTAH. "Why is Behavior Change So Hard?" Resilience, 2024.
9. Mushi, Vivian, and Lilian Mushi. "Harnessing Social and Behavioural Change Strategies for the Prevention and Control of COVID-19: A Perspective from Tanzania." *Malays J Med Sci* 28 (2021): 153.

How to cite this article: Archana CA. "The Use of Social and Behavior Change Communication strategies during the Pandemic: An analysis based on Kerala." J Mass Communicat Journalism 15 (2025) : 606