**Impact on behaviour change messaging on COVID safety practices in rural & urban India**

Habits are hard to change, it is said. All of us have various habits from our childhood that we develop over time which cannot be changed easily. It can be as small as the way one walks, eats, sleeps, etc. Similar to our individual habits, there are societal habits as well which can be called as cultural norms or customs that regulates your behaviour. With the advent of COVID-19, one of the biggest challenges that India, and for that matter the whole world faced was behavioural change.

Initially, all of us were put in the lockdown to prevent the spread of covid. However, once the restrictions were lifted, it became imperative to bring a change in our behaviour to be safe from the virus as well as keep living the new normal lives. Today, India is grappling with another wave of COVID with thousands of daily cases because something was lacking in our behaviour. Unlike China, where the virus originated, we are still not free from the shackles of this pandemic. This is mainly because the demography of china is very different from India’s. First of all, Chinese people believe in science so the government did not need to impose stricter regulation to increase compliance. On the other hand, in India, the police had to beat people in order to just wear a mask.

The behavioural change theory is used to create an impact upon people’s behaviour for their as well as the society’s safety. Irwin Rosenstock developed Health Belief Model (HBM) which states that the behavioural change in a person general comes from her instinct to avoid illness or disease. This model lays down two constructs: perceived benefits and perceived barriers, where the former is about reducing the threat and the latter is about obstacles in reduction process. Moreover, every action under this model is generally a result of emotions and not only knowledge.

However, in rural India, the picture is largely different. Indian rural population is averse to the practices of wearing a mask or cleaning hands using chemicals (sanitizer) regularly. Further, they are also not accustomed to “not” socializing as a typical society lives together in villages. On addition to that, there are joint families and their houses are built in such a way that there is least isolation. Hence, with this kind of historical practices, it has been the most difficult for the village population to bring a behavioural change in their life.

As opposed to the HBM, lack of education also added to the problem because the people generally don’t believe in science. And with the spread of fake news on WhatsApp led to all sorts of rumour about COVID-19 and related activities. Since people did not believe in science and some did not even acknowledge the existence of the virus, it was very difficult for the rural society to bring a change in their behaviour.

However, gradually with time, people have adopted the NEW normal and they have started wearing masks, washing hands and keeping social distance. But still when it comes to social events like wedding ceremonies etc. there is blatant ignorance of the health safety which is a cause of concern and which might be one of the reasons for the current wave of infections. Therefore, it can be said that there has not been a substantial change in the behaviour of people with respect to the “societal behaviours” but there has necessarily been positive impact on “individual” behaviour of health safety.