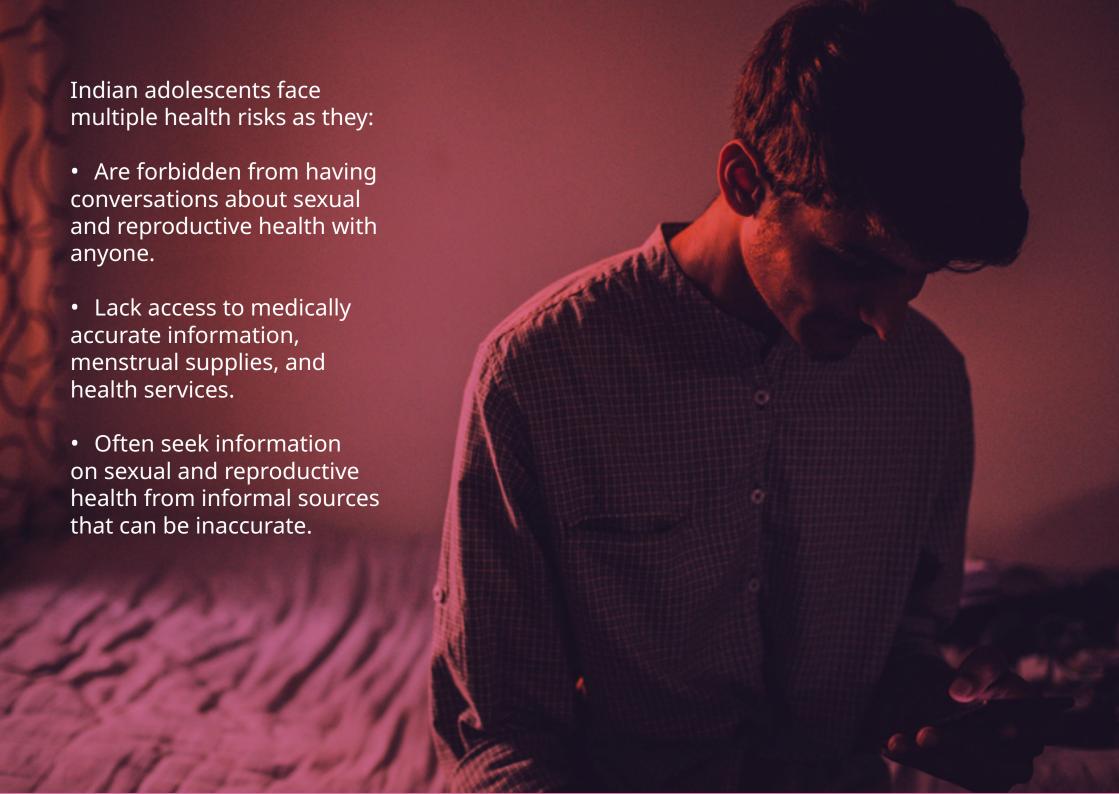


A TRANSMEDIA APPROACH TO EMPOWERING INDIAN ADOLESCENTS

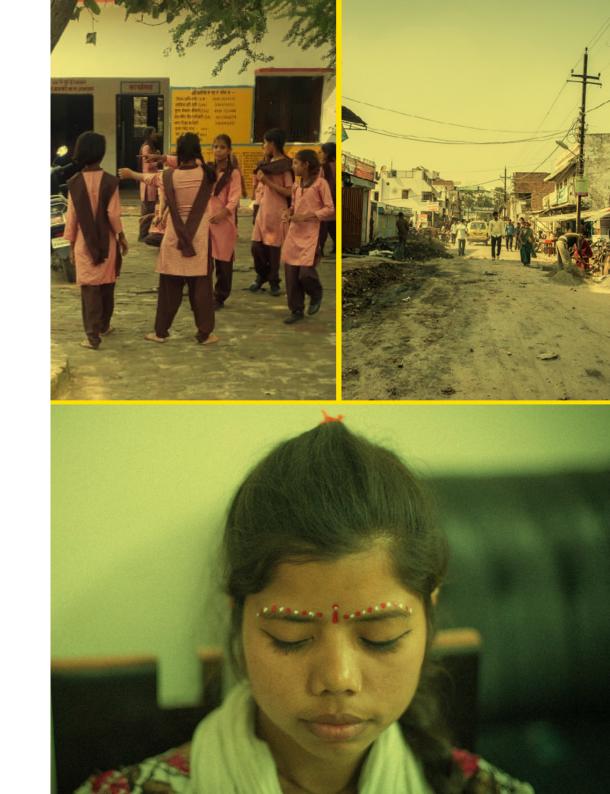






India numbers among countries with the highest rates of adolescent pregnancy

- Half of young Indian women are sexually active by age **18**, and almost one in five are sexually active by age **15**.
- Adolescence is also a time of major social changes in India with the introduction of gender norms at home, in schools, and in the community.
- Family members can force girls to drop out of school to get married.
 Nearly 17% of Indian girls drop out of high school.

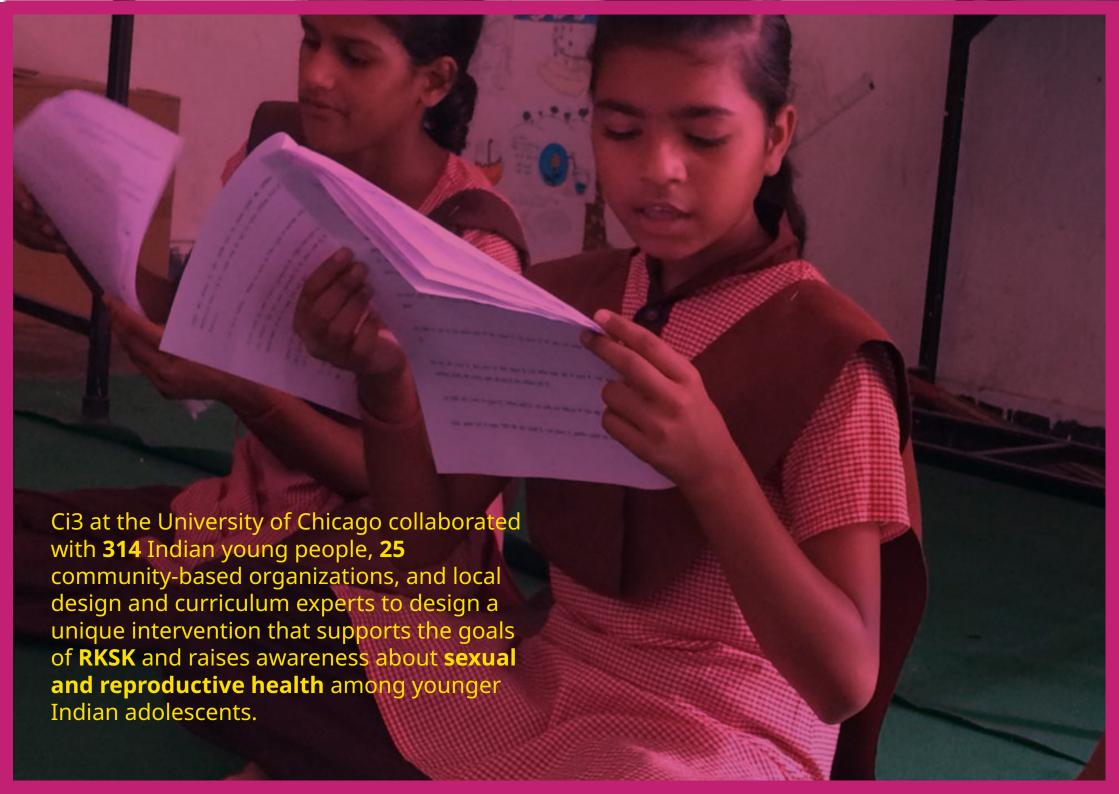




There is a lack of evidence-based sexual and reproductive health programs in India for the 10-14 age group.

In 2014, the Indian government launched **Rashtriya Kishor Swasthya Karyakram (RKSK)**, a health policy designed to help adolescents achieve their fullest potential.

RKSK provides sexual and reproductive health information and services to younger adolescents in schools.





In 2016, Ci3 conducted formative research with young people in India using creative, narrative-based methods:

- Digital storytelling
- Story circles
- Body mapping
- Storytelling game
- Human-centered design

Ci3 also conducted life course interviews and a baseline health survey.

Ci3 researchers triangulated data from formative research gathered over **two** years. Main insights revealed that:

- Girls struggle with having correct information about menstruation and with menstrual hygiene management at home and at school
- Girls face sexual harassment that impedes their mobility
- Girls and boys desire having medically accurate knowledge of sexual and reproductive health and family planning







Research with young people using creative, narrative-based methods

INTERVENTION

DEVELOPMENT

In 2018, Ci3 collaborated with local Indian curriculum and design experts to respond to **three themes** young people had indicated were most important, including:

- Menstruation and menstrual hygiene practices,
- · Increasing public safety of girls,
- Knowledge about sexual and reproductive health and family planning.







Curriculum team



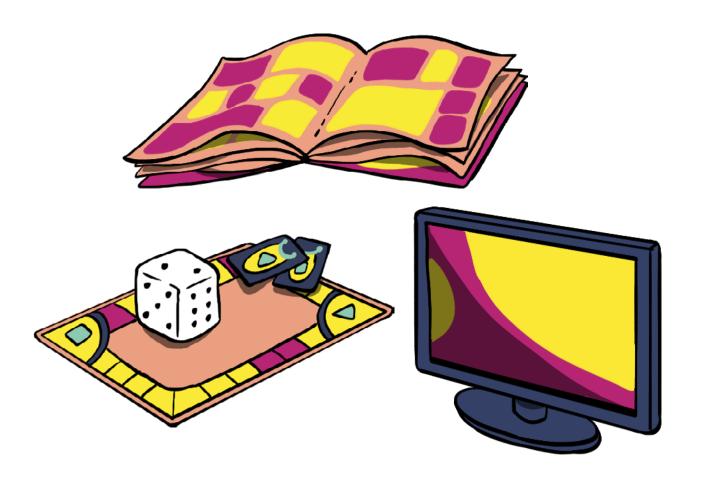
Kissa Kahani Design Principles

Combining insights from the formative research with behavior change theories, the project team determined that Kissa Kahani must:

- 1. Educate younger adolescents in new, dynamic ways;
- 2. Provide clear, relatable, age-appropriate content;
- 3. Address issues young people face as individuals, at school, in the community, and through policies affecting their lives.

The project team adopted a transmedia approach to satisfy the design principles, such that:

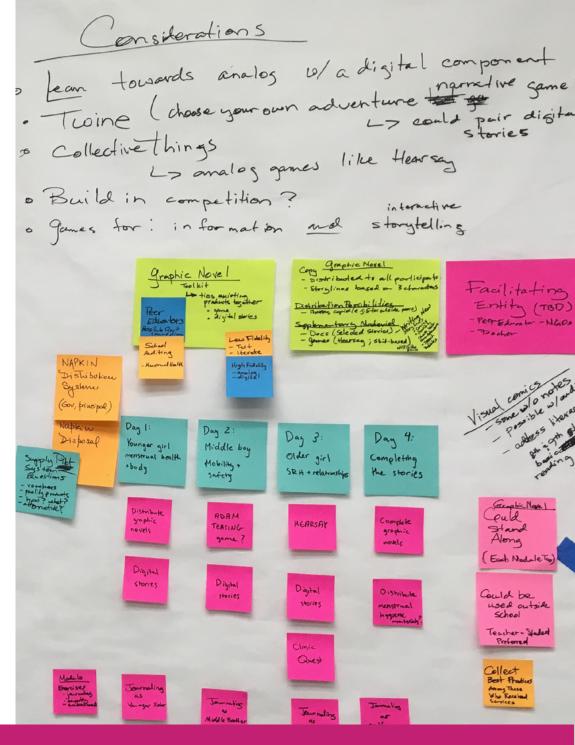
- An overarching story weaves through different media — digital animated stories, games, and graphic novels — creating an immersive world inviting young people to step in.
- Each media component plays a unique, targeted role delivering tailored messages.



• The Kissa Kahani world features characters familiar to younger audiences.

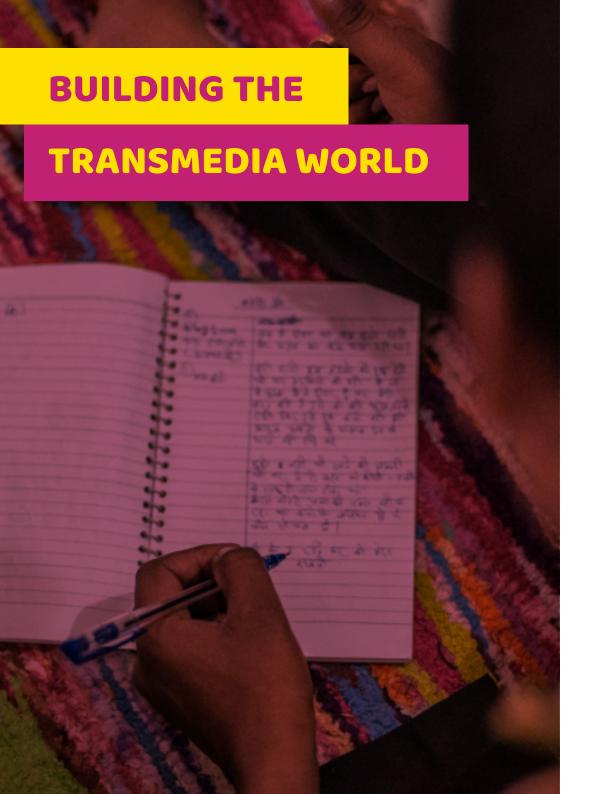
The Kissa Kahani curriculum contains **age-appropriate** sexual and reproductive health information that is delivered using a facilitator-led approach to support comprehension.

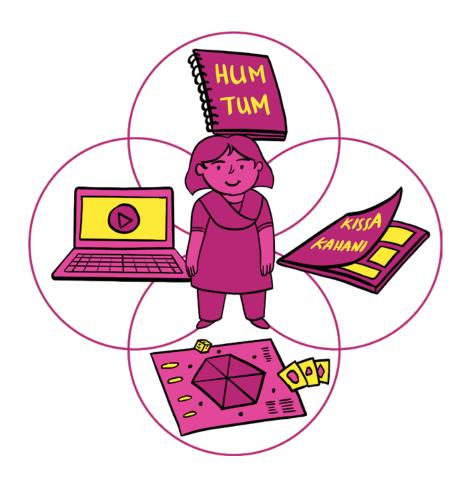
Each intervention thememenstruation, public safety, and sexual and reproductive health and family planning, has a separate module with its own digital animated story, games, and a graphic novel.





Ci3 and Indian curriculum and design experts collaborate on intervention development at the University of Chicago Center in Delhi





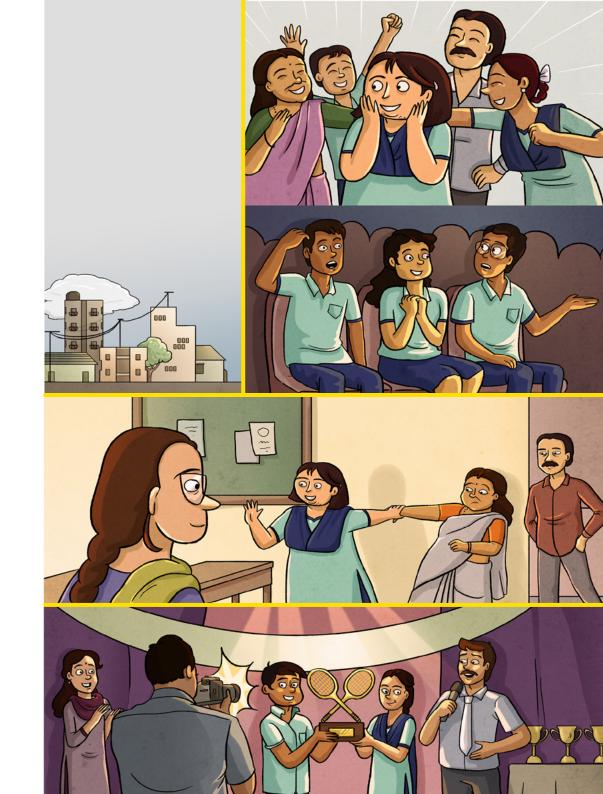
Creating an immersive transmedia experience relied on developing a compelling visual atmosphere for characters and contexts within the stories.

Creating the Kissa Kahani characters

Drawing on the interviews conducted with young people, we created characters who are **relatable** to younger adolescents.

Young Kissa Kahani characters attend a familiar school, wear recognizable uniforms, and face similar challenges in their homes and communities.

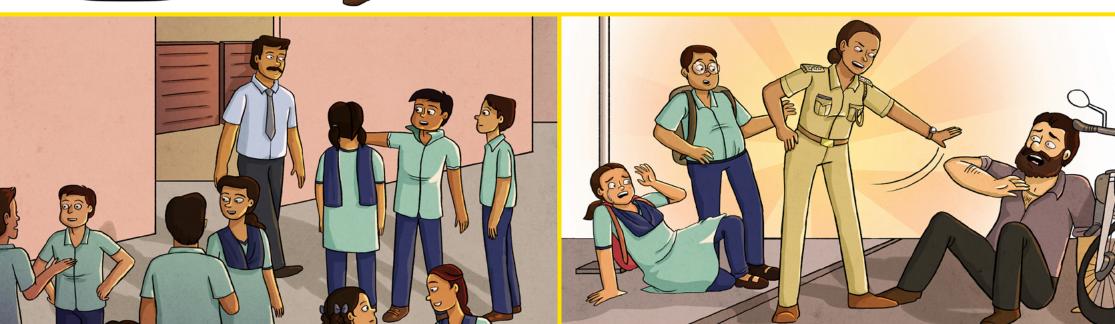
They face issues of gender discrimination, societal pressures, and lack of parental support, but they move with confidence, seeking out help and information, advocating for themselves, and identifying solutions to problems.







Kissa Kahani characters appear in different roles, connecting to core intervention themes — menstruation; menstrual hygiene practices; increasing public safety of girls; and knowledge about sexual and reproductive health and family planning.



ANIMATED DIGITAL

STORIES

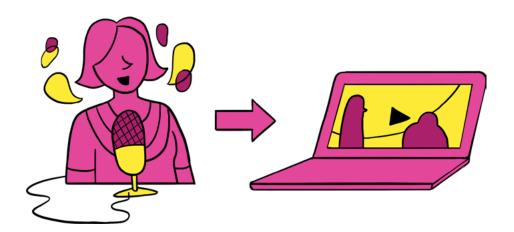








Designed using real-life stories, the animated digital stories invoke empathy that accentuate willingness to adopt healthy behaviors.





GAMES



Kissa Kahani games give young people a break from textbooks, allowing them to apply and practice what they learn from traditional educational methods in a playful, relaxed setting.





The graphic novels follow a cast of characters who face everyday problems and navigate solving them.

After gathering information from trusted adults, characters display positive attitudes and aspirational behaviors, inspiring young adolescents to do the same.























Recognizing the lack of Indian adolescents' familiarity with graphic novels, the stories were created to layer information and be not too simple, or too complex, ensuring a level of understanding for every reader.



The project team conducted five rounds of prototype testing with adolescents and educators in Indian government schools to evaluate:

- curriculum flow and structure;
- adolescents' comprehension of content;
- youth's overall comfort with using new media.

Testing results showed that adolescents related to all intervention components, especially the games and graphic novels.

"Playing the menstruation game was fun. I am so happy to learn new information about my body. No one has ever told us about this."

Participant, 14 years old



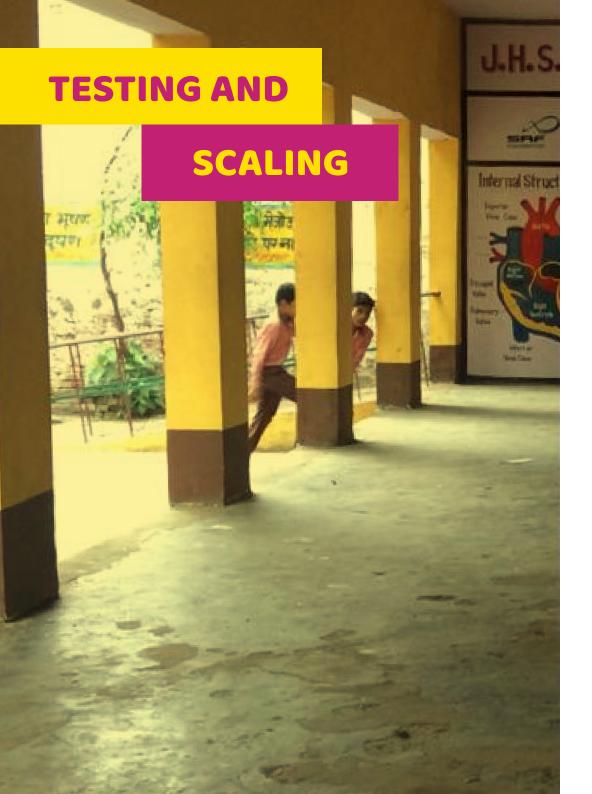


Building on testing results, the project team redesigned two games with simpler gameplay and content and developed a module to educate teachers about gender norms.

Final results showed that young people were fully engaged in the intervention and understood all parts of it.



Training educators on Kissa Kahani games



Over the next **12** months, Kissa Kahani will be implemented in nearly **100** government schools in India, educating more than **3,000** adolescents.

Using a randomized control trial method, Ci3 researchers will evaluate the intervention's effects on young people's knowledge, attitudes, and behaviors pertaining to sexual and reproductive health topics and gender norms.

Future plans include disseminating Kissa Kahani to all young people enrolled in government schools with support from the Indian government.



LATE **2015**

Review of secondary literature and exploring Indian community partners



2016

Formative research in Lucknow, India for two years, with young men and women



2018

Identification of key needs as public safety, menstruation, sexual and reproductive health and family planning



2018

Exploring solutions



Experts assemble to design an intervention-Research team meets local experts in Design and Curriculum



2018 DECEMBER

Low Fidelity testing of entire intervention (Graphic Novels, Animations, Games & Curriculum)



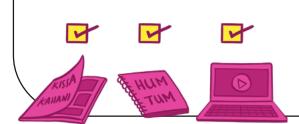
2018 SEPTEMBER

Story testing for Graphic Novels



2018 MAY

Menstruation and Public safety games Low Fidelity testing



2019 MARCH

Graphic Novels, Animated Digital stories & Curriculum completed



2019 SEPTEMBER

SRH and Menstruation games completely revised



2020 MARCH

SRH and Menstruation games Low Fidelity testing in Lucknow



2020 APRIL

Entire Kissa Kahani intervention is complete.



2020 MAY

School level implementation and testing work begins



was created by





