A TRANSMEDIA APPROACH TO
EMPOWERING INDIAN ADOLESCENTS
More than 125 million Indian adolescents are between ages 10-14, representing nearly 13% of the country’s population.
Indian adolescents face multiple health risks as they:

- Are forbidden from having conversations about sexual and reproductive health with anyone.

- Lack access to medically accurate information, menstrual supplies, and health services.

- Often seek information on sexual and reproductive health from informal sources that can be inaccurate.
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 (RKS)**, a health policy designed to help adolescents achieve their fullest potential.

**RKS** provides sexual and reproductive health information and services to younger adolescents in schools.
Ci3 at the University of Chicago collaborated with 314 Indian young people, 25 community-based organizations, and local design and curriculum experts to design a unique intervention that supports the goals of RKSK and raises awareness about sexual and reproductive health among younger Indian adolescents.
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
Participants experiences shared during formative research:

“My mother told me that during periods you are not clean and you cannot offer prayer and cannot sit in the area where prayers are offered.”
Young woman, age 17, life course interview participant

“When we go out then boys stare at us and they molest us and they speak rubbish things. It happens with all the girls.”
Young woman, age 16, body mapping workshop participant
Research with young people using creative, narrative-based methods
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.
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 theme—menstruation, 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 teams workshop ideas for intervention development based on formative research insights**
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.
Developing characters for the transmedia Kissa Kahani world
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.
Designed using real-life stories, the animated digital stories invoke empathy that accentuate willingness to adopt healthy behaviors.
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.
ITERATIVE

PROTOTYPE TESTING
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.
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.
Entire Kissa Kahani intervention is complete. SRH and Menstruation games Low Fidelity testing in Lucknow.

Low Fidelity testing of entire intervention (Graphic Novels, Animations, Games & Curriculum) has been completed.

Story testing for Graphic Novels has been completed.

Menstruation and Public safety games Low Fidelity testing has been completed.

Review of secondary literature and exploring Indian community partners has been completed.

Formative research in Lucknow, India for two years, with young men and women has been completed.

Identification of key needs as public safety, menstruation, sexual and reproductive health and family planning has been completed.

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

Low Fidelity testing of entire intervention (Graphic Novels, Animations, Games & Curriculum) has been completed.

Story testing for Graphic Novels has been completed.

Menstruation and Public safety games Low Fidelity testing has been completed.

Graphic Novels, Animated Digital stories & Curriculum completed.

SRH and Menstruation games completely revised.

SRH and Menstruation games Low Fidelity testing in Lucknow.

Entire Kissa Kahani intervention is complete.

School level implementation and testing work begins.