



COMMUNITY MOBILIZATION

Kishor Varta

An interactive, mobile phone-based platform using audio stories to provide boys and young men with information on gender, health and sexual and reproductive health in order to change unjust gender norms and reduce gender discrimination against girls and women in rural India.



MenEngage Alliance

working with men and boys for gender equality

CASE STUDY

SUMMARY

Kishor Varta is an education programme currently being implemented in Rajasthan State, India, by MenEngage Alliance member Centre for Health and Social Justice and a local partner organization, Manjari. It uses interactive audio stories implemented by a mobile phone-based application to provide rural youth with information on gender, health and sexual and reproductive health. The stories are aimed at leading to personal reflection and as a tool for group discussions on these issues in schools and other places in the community by designated facilitators. The primary goal is to reduce gender discrimination for girls and improve reproductive health knowledge for adolescents.

The programme has been enthusiastically received to date, according both to aggregated data on calls accessing the stories and its reception among education officials in Rajasthan, which has authorized a government order introduced Kishor Varta into all higher secondary schools in the Bundi district, as well as among parents. Students and teachers alike agree that the stories are an effective means of providing information, and adolescent girls and boys are regularly calling the programme's toll-free number to demand more information. Through its thoughtful conception, Kishor Varta combines three



strategic features which optimize its chances for success: locally-relevant messages intended to prompt changes in gender norms; a popular vehicle of communication – mobile phones – that boasts great social currency at the moment; and the empowerment of local actors (particularly youth) to ensure that messages are acted on in a variety of community-level forums.

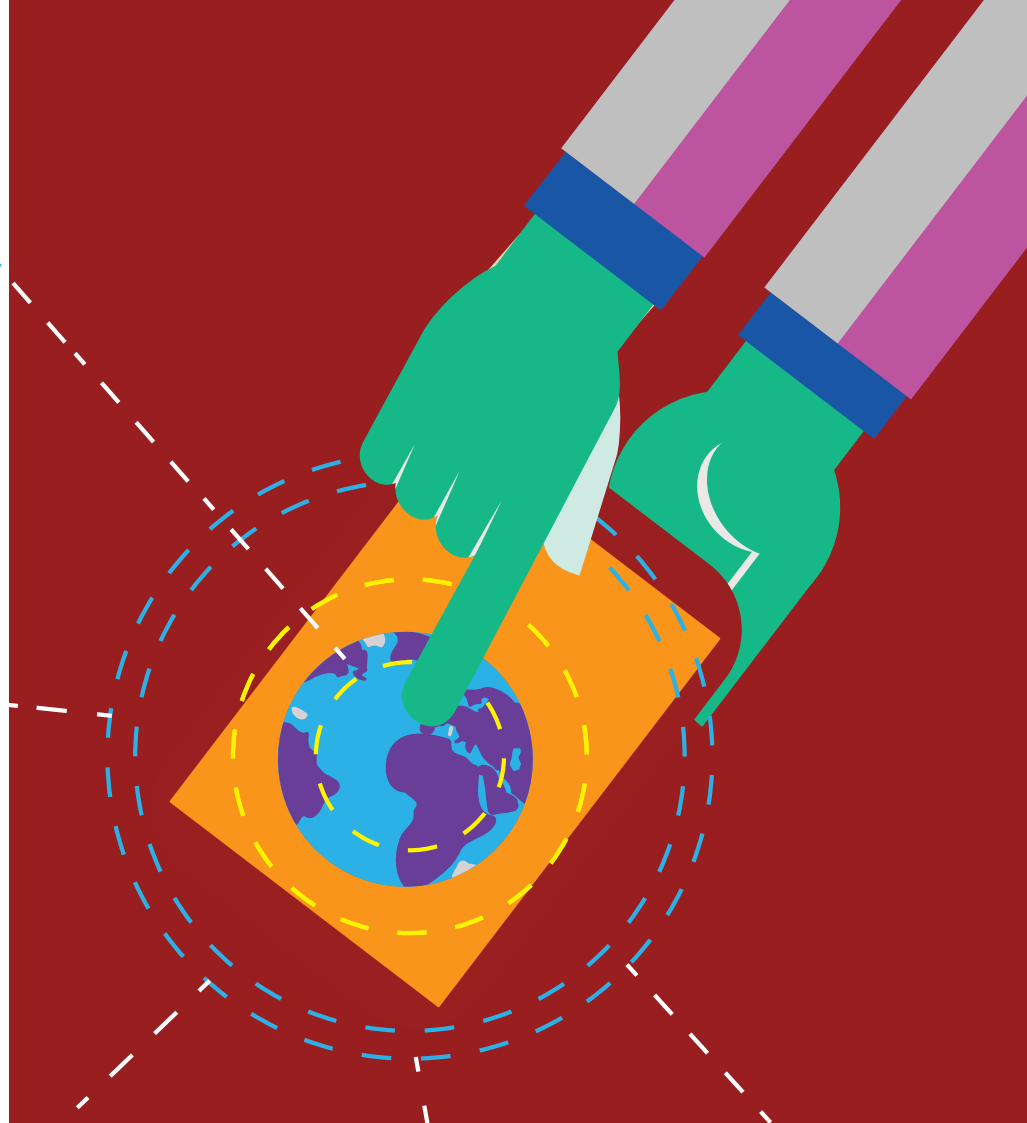
DESCRIPTION

In July 2015 the Centre for Health and Social Justice (CHSJ), a New Delhi-based civil society organization focused on health and social justice, launched Kishor Vartra, a set of four interactive audio stories in Hindi implemented by a mobile phone-based application for adolescents in rural Rajasthan State to dial in and listen to. The stories were developed by CHSJ to provide information on gender, health and sexual and reproductive health to young people. Callers engage in each 10-12 minute story through a set of fictional characters and a plot that progresses from one level to the next based on callers' responses to multiple-choice questions. The audio stories are aimed at leading to personal reflection and as a tool for group discussions on these issues in schools and other places in the community by designated facilitators. The primary aim is to reduce gender discrimination for girls and improve reproductive health knowledge for adolescents.

The digital platform used for the programme is an interactive voice response system (IVRS) developed by DevKalpana Technologies, a New York-based ICT company.

Kishor Varta builds on existing community-level work: it is being implemented by CHSJ with a local partner organization, Manjari, in the Nainwa block of Bundi district, Rajasthan. The district faces socio-cultural problems, such as child marriage, which make it a logical target area for implementing adolescent and reproductive sexual health interventions.

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” secondary schools at the direction of district authorities. Widespread dissemination of the toll-free number has also meant the audio stories reach out-of-school adolescents. Promotional materials such as posters also popularize Kishor Varta and its toll-free number; a Kishor Varta Factbook with original illustrations has been developed for facilitators and teachers to utilise with the stories; a mobile phone app is being developed; and a series of interest-evoking SMSs crafted to encourage adolescents to call in.

Kishor Varta IVRS communication platform

- Kishor Varta- allows a person to call a toll-free number and listen to information on issues of gender equality, body literacy, health, delaying age at marriage, etc.

- This information is provided to them in the form of audio stories. Four main characters have been created, who through their life stories and the various incidents in their life, make the callers solve their key problems and help move the story forward.



- The characters and stories are- Lakhanpur ka Raiu, Dada ka Gussa, Haldi ki Jaldi and Dulhan ki Baatein.

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In advance of Kishor Varta's launch, a baseline evaluation undertaken in September 2014 identified issues of gender discrimination to be addressed, such as rigidly-defined gender roles and misconceptions related to SRHR issues. Story modules were developed by incorporating feedback on draft content from adolescents and youth groups from other CHSJ and Manjari projects in Bundi. Community feedback ensured that the audio dramatizations dealt appropriately with behavioural prejudices and practices, an optimal sequence of issues, and a proper demarcation of phases of understanding as the stories develop. A feedback loop has been ensured by providing an option at the end of each story for callers to ask questions, respond to the stories and share their own experiences.

The field intervention of the programme is being implemented by Manjari through a set of facilitators who were identified from within the community and then trained to be responsible for promoting the Kishor Varta stories and conducting periodic group discussions with girls and boys separately and with parents and educators. The facilitators will also be organising meetings with service providers in order to provide support for health services for boys and girls.

The project is being implemented in two clusters of 15 villages in the Bundi and Udaipur districts in Rajasthan. At the village level the intervention is



implemented through adolescent/youth groups or clubs bringing together boys and young men in the age group 15 – 25. Each of these clubs is supported by a trained community 'animator' drawn from among the older youth in the village, who serves as a role model, mentor and counsellor for other youths, as well as a bridge to adults.

These community interactions serve as a platform for learning, sharing and peer support as well as for community action

to establish new social norms – utilizing the IVRS programme to encourage boys and young men to develop gender-sensitive attitudes, as well as knowledge about relationships, sex and sexuality. CHSJ's earlier work in Uttar Pradesh, Maharashtra and Madhya Pradesh states indicates that these interventions are able to help them to adopt new behaviours including supporting women at the family level. A core training curriculum on these topics already exists at CHSJ and is being adapted to serve the specific needs of young men in this project.

Groups are also encouraged to react in cases of violence against women like sexual harassment, domestic violence and similar events. These anticipated actions among young men and boys, supported by their peers and mentors, their community- level actions, and a supportive environment in schools, are expected to start the process of establishing new social norms in the community.

After the first set of stories were written and disseminated, feedback was taken from the school students in particular which was incorporated into the next set of stories. Also, there is a feedback recording mechanism in the IVRS: system, so as long as the stories were being heard through the toll free number, there was a system of listeners recording their responses at the end.

The six-month pilot phase of Kishor Varta came to an end in December 2015 and it was extended by another three months, until March 2016.

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THEORY OF CHANGE

Mobile phones have reached nearly every village and home in India, and there is massive interest in mobile telephony particularly among youth. Given that the project's objectives align with the Government of India's strategic approach to reproductive, maternal, newborn, child and adolescent health, as well as the National Health Mission, its adaptable IVRS technology was deemed to have significant potential as a unique agent of change.

The project focuses on improving knowledge, attitudes and behaviors of adolescents on issues related to gender equality and violence against women. In the process, it aims to reduce gender discrimination at individual, family, and community levels in order to promote autonomy, choice and mobility of women and girls. The project endeavors to build the capacity of young men and boys and address sexual harassment in the community, speak up and intervene in cases of violence against women, explore non-violent expressions and thereby recognise the power and privileges that are available to them in a patriarchal society, and use it to create a supportive environment for growth and development of young girls and women.

Anticipated short-term results include the following:

- The knowledge of youth members of the community-level groups is increased around issues such as reproductive health, gender, sex and sexuality;
- Members of community-level group will start adopting new gender roles at home and challenging gender discriminatory social norms in their own household;
- There will be changes in the relations young men's relations with their mothers, sisters or partners.
- The community-level group will emerge as a platform for discussion of gender issues and for planning and implementing community-level campaigns which address social norms;
- Community-level service providers, including teachers and health workers, will interact with young men and boys around SRHR and gender-related issues.

MONITORING

Kishor Varta is monitored and evaluated for its outputs. The following changes will be periodically measured:

- At the level of adolescent girls, there will be improvement in their educational status through increased mobility, retention, re-enrolment and reduced drop-outs of girls in schools.
- There will impact encouraging delayed age at marriage and improvement of health status in terms of anaemia and weight of young girls.
- There will be increased autonomy leading to greater economic decision-making and increased mobility.
- There will be improvement in young boy's knowledge about their bodies.
- There will be changes in attitudes towards masculinity and their behaviors in the family and in relationships. This may include participation in housework, supporting sisters in decision making, taking public action on gender and SRH issues etc.
- At community level, there will be greater participation of adolescents in public issues and fathers will be willing to listen to the children and be open to their participation.



COMMUNITY MOBILIZATION

Community-level groups are the focus of interaction and change among the young boys taking part in Kishor Varta. They function as platforms for learning, reflection, mentoring, peer support and community action.

Regular meetings facilitate learning and reflection, through such approaches as games and activities, and youth are trained in the use of creative communication methods like singing, theatre, and puppetry. The youth groups are also directed to conduct community-level campaigns at least

once a year, featuring methods such as quizzes on myths and misconceptions, rallies, painting competitions and debates within the groups as well as in academic institutions. The groups are also encouraged to conduct campaigns in response to incidents of domestic violence or child marriage that take place in individual villages.

Youth are also encouraged to undertake community action to foster a sense of autonomy and self-reliance among women and children within participating villages. This may include 'safety audits' of public places in villages and taking action, including voluntary labor, to make spaces safer.

OUTCOMES/ IMPACTS

Kishor Varta evoked tremendous interest among its target populations from its inception: the number of callers attempting to access the stories has grown rapidly, reaching a daily rate of approximately 1000 calls received. In its initial three months, 50,000 calls were registered with the programme's toll-free number. Of these, 6000 callers have had a deeper engagement by giving their feedback and responses to the programme.

Breakdown:

- Total number of calls received in five months (including all dropped calls): **55,622**
- Of these, **35,278** were blank calls, many from the same numbers repeatedly. This indicates a desire to get through to the number and hear the stories but problems with the connection.

Since suspending the toll free number in March 2016, the stories have been directly disseminated by facilitators among the existing 30 schools in Rajasthan and the surrounding 15-20 villages. At least one Kishor Varta interaction per month is held by the facilitators per school, and in the communities 30-35 meetings have been held since the programme went offline, reaching about 3000 people.

To continue the project subsequently, Kishor Varta stories have been either copied onto memory cards of students by facilitators or they are made to listen to them on facilitators' laptops. For example, 247 memory card transfers were made of Kishor Varta stories in January-March 2016 among community-level youth; and in schools 1116 students during the same time period heard the stories through the facilitators during various interactions; 821 girls and women at the village level heard the stories; 52 older



Local newspaper coverage of Kishor Varta

community men heard the stories during interactions organized by facilitators; and 69 teachers heard them.

District education authorities, when approached with the Kishor Varta stories, expressed enthusiasm for having been provided a ready-made package of stories and supporting fact book and also a team willing to conduct sessions in schools. As it imposes no additional cost to the schools and officials acknowledge the need for addressing adolescents with life skills and SRHR education, a government order has been passed authorizing the programme to be introduced in all higher secondary schools in the district.

Target groups have described instances of resulting efforts to improve mobility for girls. For example, youths have shared that after listening to the stories boys have intervened at home on behalf of sisters to continue their education; to challenge child marriage; to share domestic work; and to address doubts and misconceptions about adolescent health issues. Others reported collective decision-making and action being taken to end gender discrimination, and adolescent girls and boys regularly called to demand more information, especially on issues of body literacy and health and also for similar stories to be developed for parents.

Additional feedback:

- Students as well as the teachers agree that the stories are very popular and are an effective means of providing social information. Adolescent girls and boys are regularly calling the number and demanding more information, especially on issues related to gender, health, reproductive and sexual health.
- Adolescent boys and girls are discussing these stories among themselves and informing their friends about the stories and prompting them to listen to various episodes by dialling the number.
- Science teachers have appreciated the method of delivery of the stories on body literacy, stating that these were topics that they felt uncomfortable teaching in class. The audio stories have provided an entry point, based on which further discussions can be held.
- One City Judicial Magistrate has expressed appreciation for the stories and stated that the IVR system can be used for legal awareness programs in the community.
- There is an urgent need to set up closer interactions with local health service providers.
- There is need to work closely with school teachers who can act as role models for the adolescent boys.
- There is need to work closely with the group of parents who will support the adolescents as well as provide them greater opportunities for further learning.
- A peer group of listeners would enable the adolescents to share their stories, concerns and feelings with each other on such issues, which they generally cannot share with anyone.





Nitesh Verma

Age 33

Village: Sisola

Profession: Tailor

The family consists of a wife, a 7 years old daughter and a 2 years old son. My wife and I have been married I have been married for 9 years. My life is going the way I want it to be. Every morning I get up and my wife gives me tea. Then as usual she gets busy with household work. The first time I heard the story Dulhan ki Baatein through IVRS was at night before sleeping. After I heard it a couple of times I realized that I should also help my wife with her work around the house. But out of embarrassment I did not do any work. Later I heard the story some 8-10 times and thought I had to do something. I started by making tea first. One day I made tea and served it to

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everyone. My wife was surprised and wondered what had happened to me. I didn't say anything. I just said that from now on I'll only make the morning tea. One day my wife asked me what I keep listen to on my mobile phone. So I told her about the story and then made her hear the story as well. She also liked it. But she asked me that if I start helping her with her work then what will people say. I told her I was only fulfilling my responsibility. Since I have heard this story there has been a change in my thought process. Now decisions related to the house are taken by both of us. After seeing my changing behavior my wife is really happy. Earlier, I never listened to my wife, but now I have started paying attention to her. When I finish my work at the shop and go home, I help her with small things around the house. Like kneading the dough and filling water, etc.

CHALLENGES

CHSJ reports that Kishor Varta is expensive to operate due to the high cost of maintaining a toll-free IVRS number – a fact which is likely to inhibit its growth absent additional financial support. Human resources costs also pose a challenge: the current ratio of one facilitator per 15 schools and their surrounding villages/communities is less than optimal.

In some instances, education and school authorities allowed the programme to be introduced but imposed several restrictions, including a demand that the regular curriculum school not be disturbed.

CONCLUSION

Long-term effects of Kishor Varta, a programme less than a year old, cannot yet be measured. However, the enthusiastic response it has received at all levels in Rajasthan State – among educators, community stakeholders, parents, and most especially youth – indicates that as a vehicle of community mobilization, it offers significant promise.

On the strength of a well-researched strategy based on ongoing project work in the state, Kishor Varta thoughtfully weaves together three elements that optimize its chances for success: locally-relevant messages intended to prompt changes in gender norms; a popular vehicle of communication – mobile phones – that boasts great social currency at the moment; and

the empowerment of local actors (particularly youth) to ensure that messages are acted on in a variety of community-level forums – and thereby increase the likelihood that change is sanctioned by families and communities.

Other features of the programme are equally impressive: its capacity to enable youth to broach subjects that have traditionally been taboo, using a popular mode of communication, thereby circumventing stigma and shame; its welcome reception by education and school officials, as well as parents, who were themselves inhibited by the same stigmas and an accompanying lack of fluency in addressing SRHR issues with youth; and the development of facilitators who have established themselves in community as vessels to help parent address important issues with their children. Such local ownership and agency are likely to enhance Kishor Varta's chances of success.

CONTEXT: GENDER RELATIONS IN RAJASTHAN STATE AND INDIA GENERALLY

Gender discrimination is common and widespread in Rajasthan, India's largest state, comprising 33 districts and a population of 69 million. Traditional patriarchal norms are very strong and have relegated women to secondary status within the household and work place. This drastically affects women's health, financial status, education, and political involvement. Child marriage is still commonly practiced in Rajasthan. Often girls become mothers and are then burdened by stringent domestic and financial responsibilities. They are frequently malnourished since women typically are the last member of a household to eat and also the last to receive medical attention. A recent area of concern has been a declining child sex ratio in the state, despite efforts to address it in the last ten years.

Rajasthan is therefore a pivotal site in which to start an intervention designed to change gender norms. Rajasthan has the largest gender gap in literacy rates among youth among all states with 71.3 percent of female youth literate compared to 91 percent of male youth. The median age of marriage is very low for girls (15) and higher for boys (19). Rajasthan also reported very high levels of spousal violence. The percentage of ever-married women who have

experienced spousal physical or sexual violence is higher in Rajasthan than in any other state except Bihar. Rajasthan also has the seventh largest number of youth among all states.

Historians and sociologists have made reference to particular socio-historical characteristics which affect gender relations in the state. These include the Rajput code of ethics (dharma) and solidarity of brotherhood, which makes women necessarily subordinate and dependent on men. The idealized role model of a typical woman is one who is married and has sons.

A lack of adequate public programming to support the development of the full potential of youth, along with social norms which do not allow them full opportunity for growth and expression, have led to growing frustration among youth. The situation of adolescent girls remains precarious in many parts of the country, with attendant social compulsions like early withdrawal from school, early and forced marriage, and pregnancy. In many cases parents are worried about the safety and security of their daughters and marry them off early. However these girls continue to face the risk of domestic violence in their marital homes. Physical violence, forced sex

and dowry related violence are common occurrences in a young brides' life.

The need for providing safety and security to women and to young girls has been part of the social reform movement in India since the nineteenth century. Laws against female infanticide and burning of a young widow on the funeral pyre of her husband were among the first 'modern' laws enacted by the British. Subsequently there were laws permitting widow remarriage and the first law against child marriage was enacted more than 80 years ago. However in India progressive laws relating to women's safety, such as the dowry prohibition act and the child marriage restraint act have remained largely unimplemented because they lack social support even from those quarters that are officially charged with implementing them.

The development and empowerment of adolescent girls and young women is essential for furthering their autonomy. Their empowerment is essential for them to take charge of their destiny and their rights. However, these adolescent women and young girls have very few allies in their families and communities.

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