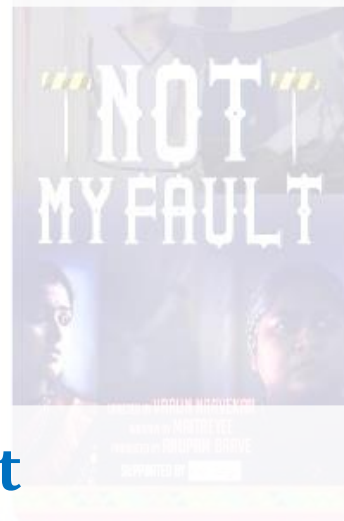




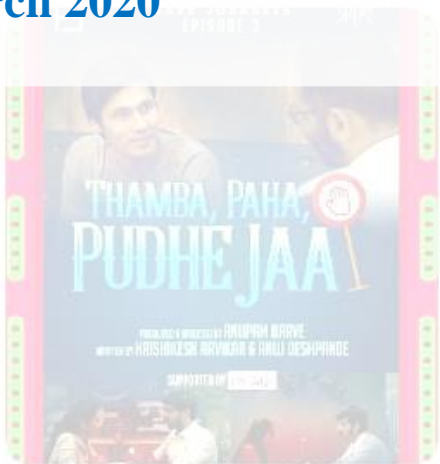
TECHNO-PEER INTERVENTION

to Improve Sexual Self-efficacy of Youth



Project Report

April 2018 to March 2020



प्रयास

आरोग्य, ऊर्जा, शिक्षण आणि पालकत्व
या विषयांतील विशेष प्रयत्न



Contents

Background.....	3
Objectives	3
Initial works of the project.....	4
Consultations with Experts:	4
Capabilities matter: a report on role of young people’s abilities	4
in promoting and protecting their sexual health.....	4
Compilation of existing visual content regarding sexual health in Indian context:	5
Developing Audio-visual material.....	5
Focused Group Discussions with young adults:	5
Workshop with youth for finalization of scripts	5
Finalization of video content and a web portal to host this content:.....	6
Release of Safe Journeys	7
Special Recognition for few films	10
Dissemination of the Safe Journeys.....	11
Mapping of community based organizations working with youth in Pune district	11
SRHR Organizations	11
Non-SRHR organization.....	11
Collaborating with organisations and institutions.....	11
Usefulness of Videos and associated discussion	13
Volunteer Peer Approach.....	15
Insights from Volunteer Peer model	16
Taking the work forward	16
Training module for sexuality educators.....	16
State level conference of sexuality educators:	16
Insights for new initiatives.....	17

Background

The project, “Techno-peer intervention for improving sexual self-efficacy among the adolescents and youth of Pune District, Maharashtra” (Techno-Peer Project) was initiated on 1st of April 2018 with the support from ViiV Healthcare through Positive Action. The proposed intervention was conceptualized to approach HIV prevention as embedded within the wider context of human sexuality. The project worked towards improving self-efficacy of adolescents and youth to make informed and healthy decisions regarding HIV and sexual risk behaviors.

Through this intervention, context specific audio-visual e-Learning resource material is created through active participation of adolescents and youth. The material is in the form of thematic videos on different domains of sexual health and resource directory for linkages to appropriate sexual health services. The e-Learning resources were disseminated to the target population through a dedicated web portal, social media platforms and by conducting screening and discussion sessions with the youth. Attempt was also made to train the volunteers who can screen the videos and conduct the discussion with a diverse group of youth.

This report highlights the important activities and learning in this project.

Objectives

- ❖ Create e-Learning, audio-visual resource material
- ❖ Campaign for inclusion of SRHR e-Learning among organization/groups working with youth
- ❖ Build capacities of peer supporter to disseminate e-learning resources among youth, and facilitate linkage of youth to appropriate SRHR services (including HIV testing)

The overall aim of this project was to improve self-efficacy of adolescent and youth (15-24) to protect and promote their sexual health. It attempted to encourage rights based, healthy discussions about sexuality among youth, facilitate appropriate care, and support seeking. Self-efficacy which is an individual’s belief in his/ her capabilities to achieve something in a given circumstance is an important concept for changing health behavior. In the Indian socio-cultural and political context, which does not encourage open discussion on sexuality, a lot of youth who are vulnerable due to their gender, sexual orientation, and sexual practices, do not openly talk about it and hence have limited opportunities to build their self-efficacy in the matters related to their sexual health. This could be an important barrier for linking youth to appropriate services. This intervention attempts to address this gap.

Initial works of the project

Consultations with Experts:



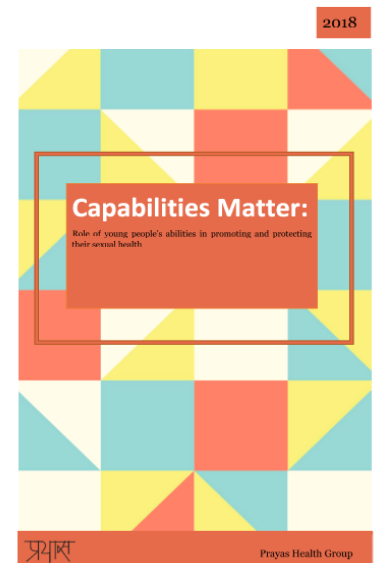
For the purpose of understanding the notion of sexual health in the light of abilities that today's adolescents and youth must possess, especially when placed in the Indian socio-economic and cultural context, a consultation workshop of experts was organized by Prayas Health Group. The consultative panel comprised health professionals, sexuality trainers, and experts who have been working on sexual and reproductive health and rights (SRHR). The group

shared their experiences and knowledge to elucidate sexual health, its stakeholders and abilities required to maintain it. Total 14 experts from diverse background and Prayas team of 6 people participated in this discussion.

Capabilities matter: a report on role of young people's abilities

in promoting and protecting their sexual health

A literature review on Self-Efficacy and Sexual Self-Efficacy was done to gain an insight to the findings of the existing research. While building some contextual understanding on these concepts, we formulated a document on the capacities of an individual which can be altering sexual health of that individual. We have made an extensive report named - *Capabilities Matter: Role of young people's abilities in promoting and protecting their sexual health*. The document is based on: 1) Our understanding of the concepts of self-efficacy and sexual health; 2) insights from our consultation with SRHR experts from diverse backgrounds and 3) qualitative insights gained from our research project "youth in transition" which is a life-course study to understand trajectories of sexual behavior among unmarried youth (20-29).

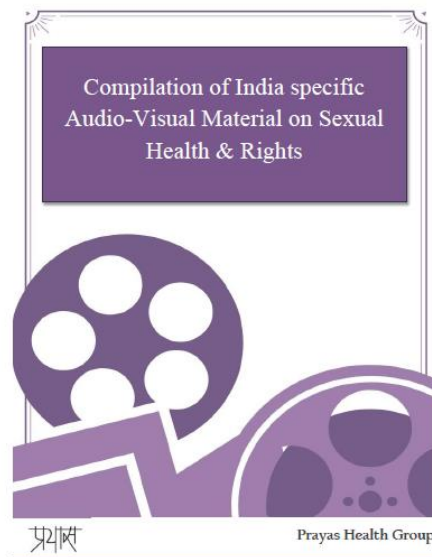


Compilation of existing visual content regarding sexual health in Indian context:

Before starting to make audio-visual material, we understood an activity to extensively review the material already available for Indian context to avoid the duplication of work. It appears that many videos have been made on sexuality. These are of varying duration and on a plethora of subjects, intended for the television, big screenings and online web tubes.

A number of governmental & non-governmental organizations and several other digital platforms have produced and made available a number of videos for the purpose of educating, sensitizing and creating awareness about issues pertaining to sexuality, sexual health and sexual rights. While looking at these videos we thought to categorize and list them so that it can be a useful resource for institutions and individuals involved in providing sexuality education. This compilation report is with the aim to create a database of audio visuals material related to sexual health

specifically designed for Indian audience and mostly available on the internet. By making such a list available, it is hoped that it will increase the uptake of material already being prepared so that duplication of work can be avoided. After reviewing the content, we were sure that there was a need to create resources which are focusing on sexual self-efficacy and which does not take a didactic tone.



Developing Audio-visual material

Focused Group Discussions with young adults:

To get a more realistic idea about the issues of sexual health which are faced by young adults belonging to different sections of society, we conducted two focused group discussions in the month of October 2018. One of the discussion was conducted in a reputed college of Pune where almost all the participants belong to higher middle class or upper class economic strata. Another discussion was conducted in a slum in Pune where the participants belonged to lower economic strata and were unaware about issues of sexual health. Both these discussions gave us interesting insights about the realities and importance of the issues we intend to address through our films.

Workshop with youth for finalization of scripts:



To ensure the effectivity and relevance of our written scripts, we had a workshop with young adults working in the social sector and in the creative fields along with the script writers (Oct 2018). Scripts of the films were read and participants were asked to make comments, give their first impressions etc about the film. This was a healthy fruitful discussion; from which we got an idea about the things which are connecting to the youngsters and also we get some suggestions about the language and delivery of the made content.

Finalization of video content and a web portal to host this content:

As a process of developing videos, we enlisted the topics related to the sexual health of young adults. Taking insights from a different project of Prayas (Youth in Transition) and also from the consultation meetings with other experts and young adults, we finalized on 8 distinct topics to make the videos. Those topics were – Child Sexual Abuse, Unintended Pregnancy, Safe Sex, Porn & Masturbation Addiction, Choice, Mental health related to sexual health/Relationship, Consent and Self-Image.

Writers wrote the scripts on the above topics keeping the improvement in self-efficacy as the central part of the narrative. All the scripts as made in such a way that young people can easily relate to these narratives and get a direction to resolve the conflict.

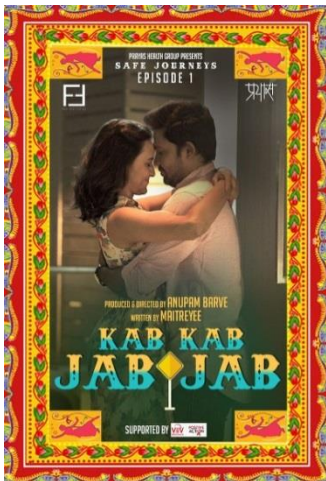
As a parallel process, in the month of November 2018, the team of professionals and actors was selected through rounds of auditions by director. Team of this project was in constant discussion with the crew, director and writers to oversee the progress.

Below is the collage of some of the snaps taken across the process of shooting of the videos:



Release of Safe Journeys

We collaborated with professionals to reach larger audience through social media marketing/management/publicity. As a part of strategy we released the videos through Prayas's social media channels like YouTube ([Prayas Health Group YouTube channel](#)), Facebook ([Prayas Health Group Facebook page](#)) and Instagram ([Prayas Health Group Instagram](#)) starting from 3rd April 2019 up to 8th May 2019. To host the developed content along with some more resources like posters, info graphics and quizzes, we developed a webpage which is hosted under official Prayas website. We are glad to present you the webpage having all the videos with other resources– [Safe Journeys webpage](#) Below is the social media outreach of each of the film till 31st March 2020:



#safeissexy #condomize #gettested

This video takes an interesting approach to appropriate perception of risks involved in unprotected sex, specifically sexually transmitted diseases including HIV and unplanned pregnancy. It also includes messages about consistent condom use, testing for sexually transmitted diseases, and seeking treatment when necessary.

Views:

 **YouTube**
YouTube - **320,462**


Facebook – **48000**


Webpage – **2362**

#goingsolo #righttoleasure #watchresponsibly

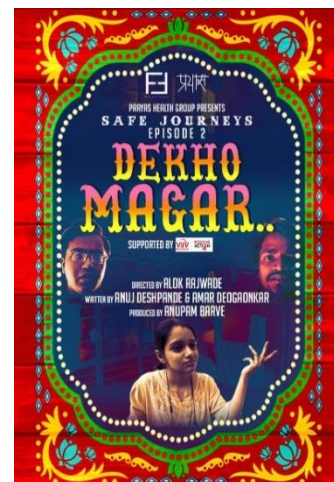
Young people often have a lot of questions and guilt about masturbation, which is also sometimes related to pornography viewing. This film brings up the common myths & misconceptions related to masturbation and discuss the correctness of the same.

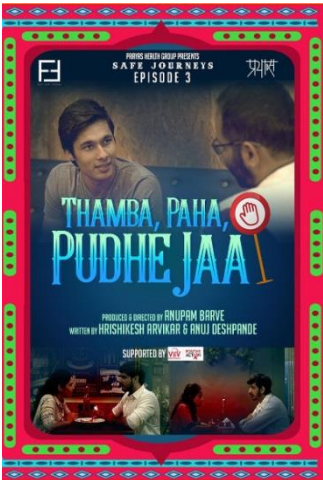
Views:

 **YouTube**
YouTube – **81,602**


Facebook – **4700**


Webpage - **2321**





#itsyourchoice #communicationiskey #love&letlove

Intimate relationships involve making several complicated decisions or choices. It is common for the young people to have questions about them. This film talks about three such issues and focuses on the role of constructive communication in exploring individual choices and preferences.

Views:

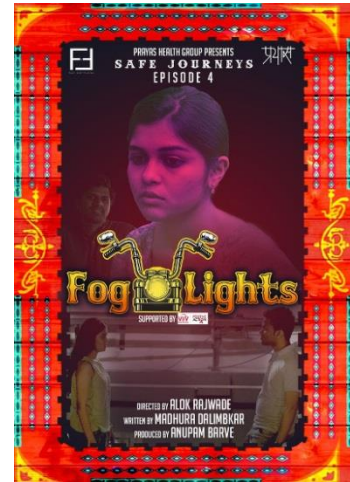
 **YouTube**
 YouTube – **66,927**
 **Facebook** – **5100**
 **Webpage** - **1688**

#seekcare #reachout #mentalhealth

Mental health is still stigmatized in our society. Many times young population struggles to identify and deal with their mental health difficulties. This film looks at mental health in light of intimate relationships, and promotes support and healthcare seeking in the same context.

Views:

 **YouTube**
 YouTube – **55,860**
 **Facebook** – **6900**
 **Webpage** - **1652**

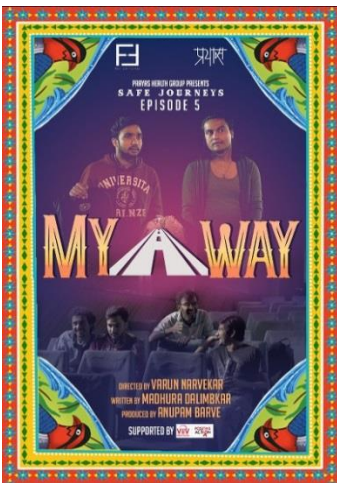


#UforUnique #positiveselfimage #stopshaming

This film encourages acceptance of diversity. The narrative brings out the social stigma, peer pressures and the conflicts faced by youth to make choices free of such pressures. The aim of this film is to initiate discussions around self-image, self-acceptance, gender roles, social norms, etc.

Views:

 **YouTube**
 YouTube – **36,761**
 **Facebook** – **5900**
 **Webpage** - **774**



#safeabortion #ItsYourRight #abortthestigma

This film is about unwanted pregnancy and the questions associated with it, especially for the unmarried population. Certain methods of contraception, such as withdrawal method and safe period, although widely used, are ineffective to prevent pregnancy with no condom use.

Views:



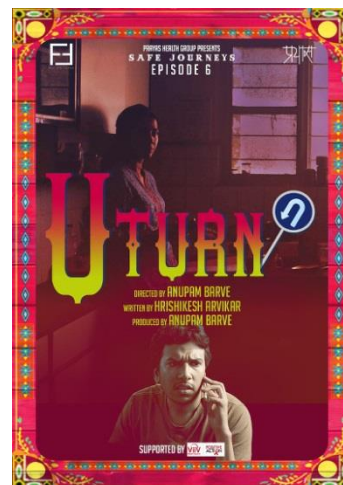
YouTube – 41,977



Facebook – 6300



Webpage - 1285



#notyourfault #breakthesilence #pocso

This film depicts an instance of the long term impacts of child sexual abuse. It focuses on unconditional support and instilling the fact that survivors of abuse are never at fault.

Views:



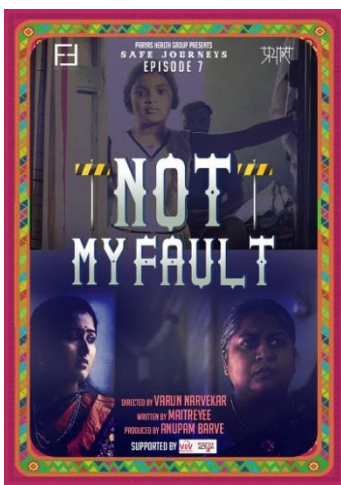
YouTube – 36,241



Facebook – 7200



Webpage - 477



#askfirst #dontassume #consentDilSe

This film brings up the nuances of consent in intimate relationships, including, but not restricting to, sexual consent. It emphasizes the need to ask for permission, every time, before engaging in acts which involve more than one person.

Views:



YouTube – 40,024



Facebook – 8300



Webpage - 1172



Special Recognition for few films

Film - **Kab Kab Jab Jab** got the 1st prize in the category of short film by Public health department, state of Maharashtra in 1st Maha-Arogya Film Festival



In the same Film Festival other 4 films- Fog Lights, Dekho Magar, My Way and U Turn got selected for the official screening.

Film – **Fog Lights** got 2nd prize in the 9th International Aarogya Film Festival which hosts films made in the domain of public health



In the same film festival another film **Dekho Magar** also got selected for official screening.

Film - **Not My Fault** was selected by Maharashtra State Women Commission as one of the influential short-films on women empowerment.

Dissemination of the Safe Journeys

Mapping of community based organizations working with youth in Pune district

In the first phase of the project that is in the months of April 2018 to October 2018; we identified and visited some organizations in Pune district who are working with youth/young adults in various geographical locations. We categorized the identified organizations as 1) those who are already working in the area of Sexual health, 2) others who are not explicitly working on sexual health.

SRHR Organizations

With organizations already working on sexual and reproductive health and rights (SRHR) we discussed and shared our theoretical and practical framework of sexual self-efficacy. These organizations shared the resources and services that they are offering, which later we also listed on our web portal. We visited about 11 organizations working on SRHR from which 3 are working in rural areas within Pune district and others working mainly in the urban setting.

Non-SRHR organization

At the same time we also visited 12 organizations who are working in the fields of education, skill development, employment creation, mental health etc; 5 of these organizations also work in rural area within Pune district. We discussed the project with those organizations so that they can participate in the project through 'Peer' nominations from them.

Collaborating with organisations and institutions

In the proposed plan we intended to identify employees/volunteers/interns from these organisations to function as peers. The primary function of the peers was to screen each film and facilitate discussions among different groups of young people. Therefore, community workers who have ongoing interaction with young groups in Pune would be ideal to function as peers.

Our interactions with the identified organisations were met with enthusiasm and interest. However some barriers and technical difficulties cropped up in the execution phase. One major barrier was the dearth of employees available for functioning as peers. Secondly, several organisations had little space to incorporate this system in the purview of their existing agenda. Thirdly, some willing organisations were working with adolescents below the age of 15 years and were mostly focusing on education and skill development. In such organisations screening of our films were not possible due to the sensitivity of the subject. In the presence of these barriers most organisations requested that we (Project coordinators from Prayas) act as peers. Thus we started implementation, with a few resource persons from Prayas acting as facilitators.

Hence, resource persons from Prayas including either or both project coordinators screened Safe Journeys videos for specific groups of young people associated with these organisations. Discussion sessions were conducted post screening of films and the questions of the young participants were answered. The films to be screened were mutually decided by the host organisation and Prayas keeping in mind the particular target populations. To understand relatability of the videos & the effect of the sessions, we also conducted pre-post tests for some sessions.

Table: Partner organizations and details of sessions conducted

No.	Partner organization	No. of sessions	Reach	Films screened
1	<u>Anand Sankul</u> - works to uplift underprivileged children through skill building and personal development activities.	9	A cohort of 25 participants for each film	Kab Kab Jab Jab, Dekho magari, Thamba Paha Pudhe Jaa, U turn Not My Fault, Fog Lights, My Way
2	<u>Bharti Vidyapeeth Law College</u> – Educational institute offering undergraduate courses in Law and Management	8	300	Green Signal, Kab Kab Jab Jab, Dekho Magar
3	<u>Centre for Youth Development & Activities (CYDA)</u> - focusing on the issues of young people in India. The strength of the organisation is to mobilize volunteers who can contribute to larger social change processes in the country.	4	A cohort of 35 participants for each film	Fog Lights, My Way, Kab Kab Jab Jab
4	<u>Mahila Sarvangeen Utkarsh Mandal (MASUM)</u> - works on empowerment of rural women & youth	3	75	Dekho Magar, Kab Kab Jab Jab, Green Signal, U Turn, Not My Fault
5	<u>Hope Foundation</u> - works with construction labourers and their families	2	40	U Turn, Not My Fault
6	<u>Family Planning Association of India</u> - works on sexual and reproductive health and rights	1	45	Kab Kab Jab Jab
7	<u>Aditi Learning Centre</u> - works to empower girls and women in rural India through skill building	1	10	Not My Fault, U Turn
8	<u>Bapu Trust</u> - has inclusion programs to empower people living with psychosocial disadvantage	1	15	Fog Lights
9	<u>Modern College of Arts, Science, Commerce</u>	3	40	Kab Kab Jab Jab, U Turn
10	<u>Nari Samata Manch & educational institutes in rural area</u> - works towards gender equality in rural areas of Pune	3	175	Not My Fault
11	<u>Rotary Club</u> - Young volunteers who come together for different social causes	1	25	My Way, Fog Lights

12	<u>Kach Kagad Patra Kashtakari Sanghatana-</u> works for the members of waste pickers community and for their families in urban slums	4	90	My Way, Fog Lights, Thamba paha pudhe jaa
13	<u>Symbiosis institute of liberal art</u> (Educational Institute)	1	20	Green Signal, Dekho Magar
14	<u>Mumbai District AIDS control Society (MDACS)</u> - Government body working for HIV prevention, treatment and awareness in Mumbai district.	1	100	Kab Kab Jab Jab, Dekho Magar
15	<u>MIT</u> – Educational institute having different course like liberal arts, engineering etc	1	25 (Full Day Workshop)	Kab Kab Jab Jab, Dekho magar, Thamba Paha Pudhe Jaa, U turn Not My Fault, Fog Lights, My Way
16	<u>Prayas Youth Forum-</u> voluntary organization working in the sector of rural development through bridging urban youth with rural systems	1	40	Thamba paha pudhe jaa, Kab Kab Jab Jab
Total		40+	1300+	All films have been screened at least once

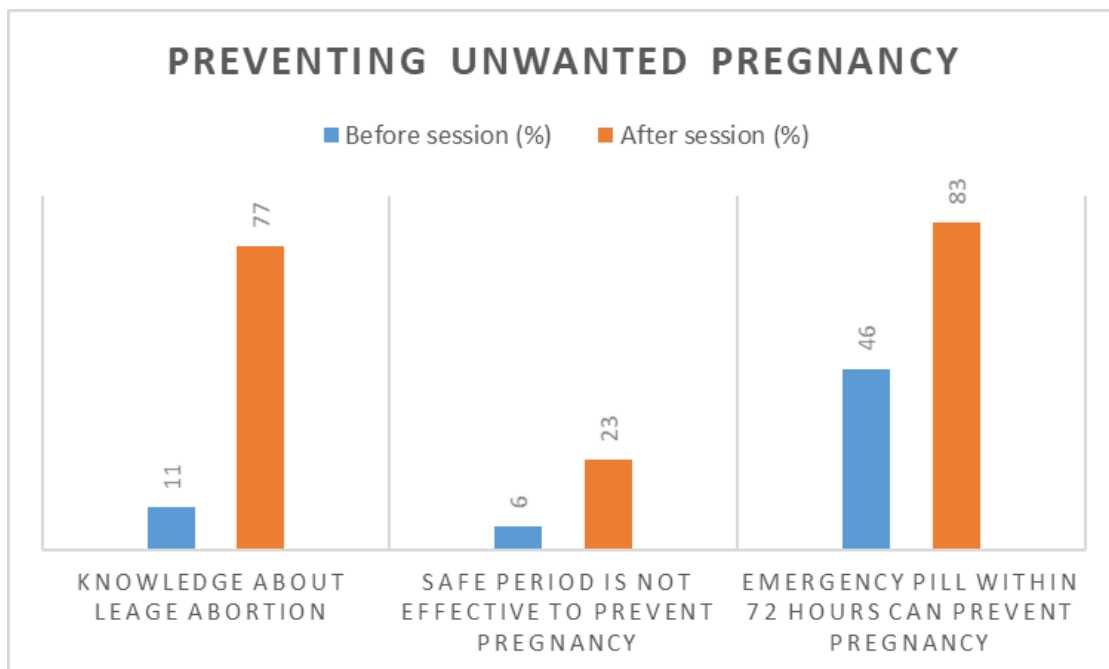
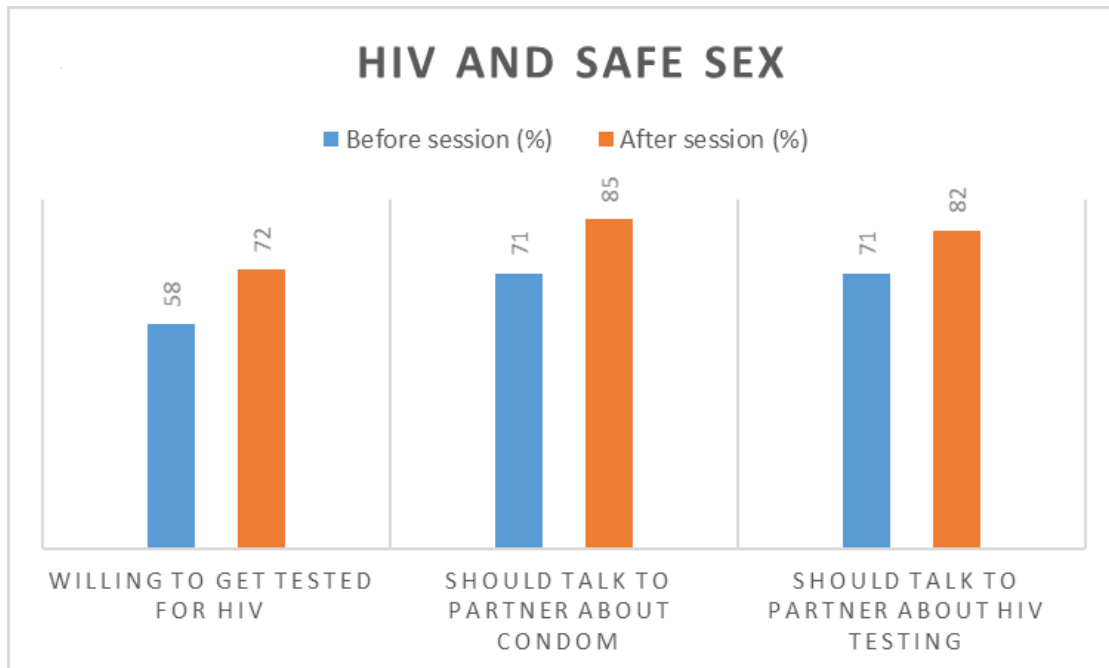
We have conducted sessions with a wide range of people including young people from rural and urban areas, belonging to different socio-economic backgrounds; with approximately even male-female distribution.

Usefulness of Videos and associated discussion

From our observations of these more than 40 different sessions, we understand that the videos work well as a tool to initiate discussions on matters of sexuality. The visual representation and the narratives are found attractive & relatable by most young people; the language used is found easy to understand. Verbal feedbacks have emphasized the lack of space for talking about the concerns related to sexual health and the need to having this resource. From the discussions conducted we also came to know that there still exist a large number of misconceptions around risks of HIV/STI, masturbation, methods of contraception etc. Many young people are still unclear about consent, abuse, and importance of communication in any kind of relationship and there are still some stigma around people with different gender identities & sexual preferences.

Sessions also showed that the rural youth had different questions, concerns and some additional barriers when compared to the urban groups. The taboos about talking openly on issues related sexuality are even more prevalent in the rural India compared to the urban part. However, lack of formal comprehensive sexuality education and lack of communication with parents about sexuality gives rise to a situation where youth from rural as well as urban area experience difficulties in making decisions related to sexuality and sexual health.

In order to get a quantitative feedback from the participants, we designed short questionnaires that were completed before screening of video and discussion session as well as after the session. These questions provide some indication of immediate impression and impact that the films and discussion are having on the youth. The findings of selected questions are given below while the table of percentages for each question before and after is provided in the annexures.



These numbers as indicative as the assessment was done immediately after the session was conducted. However, they do indicate that screening of the film and short discussion sessions are helpful in improving knowledge and understand of young people.

Volunteer Peer Approach

As an alternative approach to peers from community organizations, we decided to appeal to young people from the general population with willingness to volunteer as peers. An appeal was made for on the social media platforms- Facebook, Instagram and WhatsApp, for volunteers within the age group of 19-25 years. We circulated a Google form with essential details for the willing participants to fill. We received 84 Google form responses from which we did a primary screening to see their- willingness to volunteer, understanding of the subject matter, existing attitudes regarding some aspects of sexuality, availability for the given time, etc. We selected a group of 25 young individuals based on these above factors and arranged for a three day, residential, training & sensitization workshop. A total of 15 participants gave their confirmation for the residential workshop, which took place from the 18th of October to the 20th of October 2019. Various methods like expert sessions, group discussions, role plays, card games etc. were used in this residential workshop. Demo sessions were conducted where peers facilitated sessions using films of their choice for different characteristics of target population.



Insights from Volunteer Peer model

After this residential camp project coordinators were in constant touch with these peer volunteers. These peer volunteers were supposed to organize 2 discussion sessions per month through their own contacts. Some of these peer volunteers were students in different educational institutions and some are working professionals in different fields. After the residential camp, there were 2 contact meetings conducted with these peer volunteers in which they discussed the difficulties they were having while arranging the sessions with project coordinators.

After the 5 months; unfortunately; only 3 peer volunteers were able to organize the sessions through their contacts. The insights from reflecting on the process as well discussions with the peers volunteers points out towards the probable reasons for lack of coordinating and conducting sessions from the volunteers were, 1) they felt awkward to talk to their fellow students and co-workers of the same age by taking the position that they 'know' more than their peers 2) The remuneration offered to the volunteers to cover their local travel for the session was probably not enough for them to motivate to conduct the sessions and 3) many of them felt that they were not confident enough to take discussions around the topics of sexuality because they themselves are not clear about all the concepts. This also pointed out that one training was not sufficient to train peers on such sensitive topics. Practical difficulties like their own educational or professional commitments were also part of the constraints.

After this effort we definitely feel that this approach surely has some potential in it; but we need to rethink the overall process. We will need more extensive training of these peer volunteers and there should be a concrete roadmap for the further sessions with all the peer volunteers. We need to think of different remuneration strategies for the peer volunteers; not just in terms of monetary remuneration but there also can be token of appreciation through certification etc.

Taking the work forward

Training module for sexuality educators

With the experience of all these sessions and consultation with the organizations, we also have developed a training manual for trainers (sexuality educators) which can be used by peer from organizations to facilitate the discussions. We have included all the main points of each film which must be discussed in the sessions, how to facilitate the discussion on any particular film, what kind of questions people might ask on any topic and answers for these questions and the technical details to have an effective discussion session. We have created this manual in Marathi as our films are in Marathi. We plan to deliver this manual along with all the videos to various community organizations across Maharashtra state to reach wider audience.



State level conference of sexuality educators:

As a part of this project, we tried to connect with many community organizations. In India, there still exists a taboo about different topics of sexuality and sexual health. When we were approaching and discussing the different possibilities to reach more and younger adults

with all these organizations, the one thing which came up prominently was standardising and collaborating all the efforts about sexuality education happening in and around India, primarily Maharashtra. Hence we planned a state level one day conference to collate the different efforts made by various community organizations and experience sharing of many experts working in this field for more than 20 years through panel discussions and their presentations. This conference was planned on 14th March 2020. However, due to the Covid-19 pandemic, we had postponed the conference. The invitations of this conference were for the various community organizations who are already working in the field of Sexual and Reproductive rights and also to the individuals who work in the domain. We are glad to share that the response for participating in this conference was very encouraging to us; and it also underlines the need to provide a platform where volunteers/educators to learn, discuss and share their insights to take comprehensive sexuality education forward. There were total 120 participants who registered for this conference and there were many more, to whom because of constraints of hall we couldn't accommodate. We intend to organize this conference once the pandemic gets over.

Insights for new initiatives

Implementation of this project provided significant insights for our work which we are hoping to pursue to continue the momentum that we could gather during this work. Some of these are highlighted below

1. A more comprehensive approach of sexual health is useful for addressing the issues of HIV for youth in India
2. The potential of technology and social media should be explored for reach out to at risk youth and link them to care and support services
3. There is a need to taking such as approach to educational institution which currently lack any discussion on SRHR and HIV
4. Parents are also in need to appropriate tools such as AV material to understand and address the issues of communicating and supporting youth in addressing issues related to SRHR and HIV
5. In order to generate a rights based discourse on sexual health and to equip people to address emerging issues related SRHR, there is a need to create platforms of mutual learning for educators



Few snaps from Techno-peer Sessions



Annexure I

Film-wise Pre and Post Tests results

Film : Kab Kab Jab Jab	Total number = 380	Pre Test		Post Test	
		Options	count	Percentage	count
Do you think you should talk to your partner about condoms?	Yes Should Talk	269	70.79%	323	85.00%
	Yes But create Misunderstanding	34	8.95%	29	7.63%
	No Need	17	4.47%	11	2.89%
	Can't Say	56	14.74%	15	3.95%
	(Invalid data)	4	1.05%	2	0.53%
Do you think you should talk to your partner about HIV testing?	Yes Should	269	70.79%	313	82.37%
	Yes Misunderstanding	52	13.68%	36	9.47%
	No	10	2.63%	5	1.32%
	Can't Say	44	11.58%	17	4.47%
	(Invalid data)	5	1.32%	9	2.37%
A healthy looking person cannot have HIV/STI.	TRUE	66	17.37%	67	17.63%
	FALSE	245	64.47%	274	72.11%
	Don't Know	61	16.05%	36	9.47%
	4	1	0.26%		
	(Invalid data)	7	1.84%	3	0.79%
What are the possible risks of unprotected (without condom) vaginal sex? (You may tick multiple options)					
Risk OF HIV	No	134	35.26%	59	15.53%
	Yes	230	60.53%	312	82.11%
	(Invalid data)	16	4.21%	9	2.37%
Risk OF STI	No	177	46.58%	118	31.05%
	Yes	187	49.21%	253	66.58%
	(Invalid data)	16	4.21%	9	2.37%
Risk of Pregnancy	No	62	16.32%	59	15.53%
	Yes	302	79.47%	311	81.84%
	(Invalid data)	16	4.21%	10	2.63%
No Risk	No	350	92.11%	365	96.05%
	Yes	14	3.68%	6	1.58%
	(Invalid data)	16	4.21%	9	2.37%
What are the potential risks of unprotected oral sex? (You may tick multiple options)					
Risk OF HIV	No	154	40.53%	177	46.58%
	Yes	195	51.32%	192	50.53%
	(Invalid data)	31	8.16%	11	2.89%
Risk OF STI	No	178	46.84%	141	37.11%

	Yes	172	45.26%	228	60.00%
	(Invalid data)	30	7.89%	11	2.89%
Risk of Pregnancy	No	240	63.16%	242	63.68%
	Yes	109	28.68%	127	33.42%
	(Invalid data)	30	7.89%	11	2.89%
No Risk	No	281	73.95%	319	83.95%
	Yes	69	18.16%	49	12.89%
	(Invalid data)	30	7.89%	11	2.89%
In which of the following ways you can get infected with HIV? (You may tick multiple options)					
Unprotected (without condom) sex with HIV infected person	No	58	15.26%	32	8.42%
	Yes	316	83.16%	336	88.42%
	(Invalid data)	6	1.58%	12	3.16%
Sharing needles with HIV infected person	No	82	21.58%	81	21.32%
	Yes	292	76.84%	287	75.53%
	(Invalid data)	6	1.58%	12	3.16%
Sharing food with HIV infected person	No	328	86.32%	347	91.32%
	Yes	46	12.11%	21	5.53%
	(Invalid data)	6	1.58%	12	3.16%
From mosquito bites (post previously biting HIV infected person)	No	146	38.42%	149	39.21%
	Yes	30	7.89%	25	6.58%
	(Invalid data)	204	53.68%	206	54.21%
Hugging HIV infected person	No	359	94.47%	361	95.00%
	Yes	15	3.95%	7	1.84%
	(Invalid data)	6	1.58%	12	3.16%
Sharing toilet seats with HIV infected person	No	313	82.37%	352	92.63%
	Yes	61	16.05%	16	4.21%
	(Invalid data)	6	1.58%	12	3.16%
None of the above	No	369	97.11%	363	95.53%
	Yes	5	1.32%	5	1.32%
	(Invalid data)	6	1.58%	12	3.16%
Would you be willing to get tested for HIV?					
	Yes	220	57.89%	274	72.00%
	No	76	20.00%	42	11.05%
	Can't say	78	20.53%	55	14.47%
	(Invalid data)	6	1.58%	9	2.37%

Film : Dekho Magar Questions	Total number = 20 Options	Pre Test		Post Test	
		count	Percentage	count	Percentage
Masturbation is unhealthy as it causes hair fall, memory loss, loss of stamina etc.	Yes, it can cause these issues	4	21.05%	2	10.53%
	In some cases	9	47.37%	5	26.32%
	No it does not	1	5.26%	6	31.58%
	Don't know	5	26.32%	4	21.05%
	(Invalid data)			2	10.53%
A young boy is worried because his erection does not last as long as it is usually shown in porn videos. This is making him anxious. He wants to increase his stamina to match that of the people in porn videos. What do you think he should do?	He should stop watching porn videos	12	63.16%	3	15.79%
	He should seek doctor's help to increase his stamina	4	21.05%	8	42.11%
	He should stop comparing himself with actors in porn videos	2	10.53%	6	31.58%
	(Invalid data)	1	5.26%	2	10.53%
Making pornographic videos and sharing pornographic videos with friends/partner is legally acceptable in India.	Yes, it is			3	15.79%
	No, both are illegal	11	57.89%	10	52.63%
	Making porn videos is illegal but sharing with friends is okay	1	5.26%		
	Don't know	7	36.84%	3	15.79%
	(Invalid data)			3	15.79%
Girls should not masturbate.	No, they must	1	5.26%	1	5.26%
	It's their choice/ decision	16	84.21%	12	63.16%
	Yes, they shouldn't	1	5.26%	3	15.79%
	(Invalid data)	1	5.26%	3	15.79%
If someone feels like masturbating, then how many times is it okay for them to masturbate?	Once a day			1	5.26%
	Once a week	13	68.42%	4	21.05%
	There are no such rules	2	10.53%	8	42.11%
	They should not masturbate at all	3	15.79%	3	15.79%
	(Invalid data)	1	5.26%	3	15.79%

Film: Thamba paha pudhe jaa	Total number = 63	Pre Test		Post Test	
		Count	Percentage	Count	Percentage
In a serious relationship it is necessary to have control over each other's behavior, such as, who to talk to or not, where to go or not, what clothes to wear or not etc.	Of course yes	20	31.75%	11	17.46%
	Can't Say	7	11.11%	13	20.63%
	Definitely No	32	50.79%	35	55.56%
	(Invalid data)	4	6.35%	4	6.35%
If both are adults, is it okay to have sex before marriage?	Okay if consent is taken	16	25.40%	24	38.10%
	Sex before marriage is wrong	25	39.68%	22	34.92%
	Can't say	19	30.16%	14	22.22%
	(Invalid data)	3	4.76%	3	4.76%
Vinita broke up with Manoj after being engaged for marriage. Manoj was heartbroken, angry and didn't know what to do about it. He started calling her friends and family to ask for their help in patching up. When that did not help, he tried telling Vinita that he would commit suicide if she doesn't get back together with him. This did scare Vinita, but she was very firm about her decision. Since Vinita completely refused to meet Manoj, he would wait outside her college, and then would force her to talk to him. Do you think what he did was right?	No. He should respect Vinita's decision and cope with it	50	79.37%	46	73.02%
	Yes. Since they were engaged he should try and save their relationship	8	12.70%	12	19.05%
	(Invalid data)	5	7.94%	5	7.94%
Anish and Gauri had decided to be in a 'friends with benefits' relationship. After a while Gauri wanted to make the relationship exclusive but Anish did not feel the same way. Gauri felt betrayed and blamed Anish for taking advantage of her. Do you agree with Gauri?	No. They had mutually decided to be in a friends with benefit relationship	40	63.49%	43	68.25%
	Yes. It is wrong to refuse to commit after having physical relationship	12	19.05%	15	23.81%
	(Invalid data)	11	17.46%	5	7.94%
Preeti & Dipak were best friends before they started being in a relationship. However 6 months into the relationship, Preeti starts constantly texting and checking on Dipak. She insists on meeting every single day, and gets annoyed if Dipak wants to spend some evening with his friends. Dipak finds this very annoying but does not know what to do about it. What do you think he should do?	Dipak should talk to Preeti about it	53	84.13%	49	77.78%
	Dipak should ignore her texts and calls	2	3.17%	4	6.35%
	Deepak should break up with Preeti without telling her.	2	3.17%	6	9.52%
	(Invalid data)	6	9.52%	4	6.35%

Film : Fog Lights	Total number = 75	Pre Test		Post Test	
Questions	Options	Count	Percentage	Count	Percentage
There is no such thing as depression. This is a western concept & it is not needed in India.	True	5	6.67%	7	9.33%
	False	60	80.00%	60	80.00%
	Don't Know	10	13.33%	7	9.33%
	(Invalid data)			1	1.33%
Those who say they are suffering from mental illnesses are just asking for attention	Absolutely True	11	14.67%	5	6.67%
	No	55	73.33%	59	78.67%
	Don't Know	8	10.67%	8	10.67%
	(Invalid data)	1	1.33%	3	4.00%
People who look happy, confident and successful cannot be suffering from mental difficulties/depression/ mental illness	Yes, they cannot	6	8.00%	1	1.33%
	No, they may be	63	84.00%	67	89.33%
	Unsure	6	8.00%	4	5.33%
	(Invalid data)			3	4.00%
Only weak people suffer from emotional problems or mental health issues	True	4	5.33%	4	5.33%
	False	63	84.00%	64	85.33%
	Don't Know	8	10.67%	4	5.33%
	(Invalid data)			3	4.00%

Film: My way	Total Cases = 38	Pre Test		Post Test	
Questions	Options	Count	Percentage	Count	Percentage
Is it okay to make fun of your friend's appearance (like weight, height, skin colour etc)?	Yes	9	23.68%	4	10.53%
	No	23	60.53%	31	81.58%
	Don't Know	6	15.79%	1	2.63%
	(Invalid data)			2	5.26%
If a man is attracted to a man/a woman is attracted to a woman, then that is not normal and should be treated.	Agree	10	26.32%	5	13.16%
	Disagree	8	21.05%	22	57.89%
	Don't Know	14	36.84%	9	23.68%
	(Invalid data)	6	15.79%	2	5.26%
If a man behaves like a woman it makes me feels weird (it makes me uncomfortable).	Yes, very much	19	50.00%	5	13.16%
	Not at all	3	7.89%	19	50.00%
	Maybe	10	26.32%	12	31.58%
	(Invalid data)	6	15.79%	2	5.26%
I am uncomfortable with the way I am/ the way I look.	Yes All the time	1	2.63%		
	Yes Sometime	11	28.95%	13	34.21%
	No	20	52.63%	23	60.53%
	(Invalid data)	6	15.79%	2	5.26%
Would you change some things in you to get a partner?	Yes Absolutely	14	36.84%	4	10.53%
	Don't Know	2	5.26%	2	5.26%
	Not at all	16	42.11%	30	78.95%
	(Invalid data)	6	15.79%	2	5.26%

Film : U- Turn	Total number = 98	Pre Test		Post Test	
		Options	Count	Percentage	Count
Withdrawal is an effective method to prevent pregnancy.	True	23	23.47%	17	17.35%
	False	11	11.22%	36	36.73%
	Maybe	50	51.02%	41	41.84%
	(Invalid data)	14	14.29%	4	4.08%
Safe period is an effective method to prevent pregnancy.	True	26	26.53%	29	29.59%
	False	6	6.12%	23	23.47%
	Haven't heard	41	41.84%	21	21.43%
	Maybe	21	21.43%	21	21.43%
	(Invalid data)	4	4.08%	4	4.08%
Abortion is legal in India up to 20 weeks of pregnancy irrespective of marital status.	True	11	11.22%	75	76.53%
	False	19	19.39%	3	3.06%
	Only for married women	5	5.10%	1	1.02%
	Don't know	59	60.20%	16	16.33%
	(Invalid data)	4	4.08%	3	3.06%
A girl above the legal age of consent decides to opt for the abortion. Is accompanying by her parents is essential?					
1. Parent's accompanying her	No	43	43.88%	65	66.33%
	Yes	40	40.82%	20	20.41%
	(Invalid data)	15	15.31%	13	13.27%
2. Parent's consent	No	42	42.86%	55	56.12%
	Yes	41	41.84%	30	30.61%
	(Invalid data)	15	15.31%	13	13.27%
3. Only her choice	No	31	31.63%	16	16.33%
	Yes	52	53.06%	69	70.41%
	(Invalid data)	15	15.31%	13	13.27%
4. Opting for abortion is not right	No	58	59.18%	72	73.47%
	Yes	25	25.51%	13	13.27%
	(Invalid data)	15	15.31%	13	13.27%
What should one do to prevent pregnancy after unprotected sex?					
1. Emergency pill within 72 hours	No	22	22.45%	4	4.08%
	Yes	45	45.92%	81	82.65%
	(Invalid data)	31	31.63%	13	13.27%
2. Washing genitals	No	48	48.98%	67	68.37%
	Yes	18	18.37%	18	18.37%

	(Invalid data)	32	32.65%	13	13.27%
3. Excessive consumption of certain fruits	No	46	46.94%	75	76.53%
	Yes	21	21.43%	10	10.20%
	(Invalid data)	31	31.63%	13	13.27%
4. Excessive exercise	No	59	60.20%	81	82.65%
	Yes	8	8.16%	4	4.08%
	(Invalid data)	31	31.63%	13	13.27%

Film : Not my Fault	Total number = 71	Pre Test		Post Test	
		Count	Percentage	Count	Percentage
Questions	Options				
Child sexual abuse is not that common in India	Agree	14	19.72%	12	16.90%
	Disagree	7	9.86%	11	15.49%
	Don't Know	49	69.01%	46	64.79%
	(Invalid data)	1	1.41%	2	2.82%
Child sexual abuse happens only in lower economic classes	True	2	2.82%	2	2.82%
	False	63	88.73%	61	85.92%
	Don't Know	6	8.45%	6	8.45%
	(Invalid data)			2	2.82%
Children don't have any fault in the cases of child sexual abuse	Agree	15	21.13%	28	39.44%
	Disagree	27	38.03%	24	33.80%
	In some cases	29	40.85%	16	22.54%
	(Invalid data)			3	4.23%
Children are sexually abused by strangers only	True	7	9.86%	3	4.23%
	False	49	69.01%	54	76.06%
	Not sure	15	21.13%	12	16.90%
	(Invalid data)			2	2.82%
Only girls are at risk of being sexually abused	True	9	12.68%	4	5.63%
	False	47	66.20%	52	73.24%
	May be	15	21.13%	12	16.90%
	(Invalid data)			3	4.23%

Film : Green signal	Total Cases = 143	Pre Test		Post Test	
Questions	Options	Count	Percentage	Count	Percentage
Asking before holding hands or kissing your partner is necessary.	Yes	81	56.64%	113	79.02%
	No	33	23.08%	18	12.59%
	Don't Know	27	18.88%	11	7.69%
	(Invalid data)	2	1.40%	1	0.70%
In a committed relationship, consent for sex can be taken for granted.	Yes	18	12.59%	35	24.48%
	No	106	74.13%	98	68.53%
	Haven't Thought about it	17	11.89%	7	4.90%
	(Invalid data)	2	1.40%	3	2.10%
If your partner has given consent to have sex once, then there is no need to ask again next time.	Asking once is enough	11	7.69%	8	5.59%
	Consent is required every time	114	79.72%	123	86.01%
	Maybe	18	12.59%	9	6.29%
	(Invalid data)			3	2.10%
If a girl proposes to another person, it is a sign of bad character.	Yes	1	0.70%	1	0.70%
	Nothing Wrong	131	91.61%	130	90.91%
	Can't Say	11	7.69%	9	6.29%
	(Invalid data)			3	2.10%