**Report**

This Report is focused on the analysis of the Permanent Methods of Family Planning video, which is one of the videos produced under the Digital Public Health (DPH) project. In here, we have articulated the information that we have gathered based upon the analysis of this video in terms of its content and may have delivery to its intended audience, and our own hypothesis on the audience’s general comprehension and possible acceptance of the message portrayed through the video, as well as the blocks/ inhibitions and their own set of beliefs and assumptions that they may have regarding the topic and the content covered under it.

We have put heavy emphasis on analyzing the questions that were asked after the video showing by the ASHAs, and have compared (and analyzed) these questions in conjunction with the content covered in the video.

We started our analysis for this video by tagging each question with respect to the content addressed in them. While doing this we found it useful to include tags which indicated the content of the questions, and hence made a distinction between the content and the intent of the question. Following this, we grouped the questions which were essentially the same, and computed the union of all the tags of a particular set, which we then assigned to each question of the group. This helped in bringing consistency in our data set and enabled us in grasping the actual numbers pertaining to the type of questions.

We assigned #tags to each question based on their meaning, which allowed us to group them efficiently, their size ranging from 10 questions per group to singleton groups (1 question per group), many of which allowed us to gain interesting insights . Based on all the aforementioned processing of the data, we made the following observations, and hypothesis:

1. The most asked question in the question set was pertaining to the advantages of getting ligated (11%).

In the video, this question has been taken up at 4:04 minutes, and later has been mentioned as one of the questions for discussion at 7:00 minutes, wherein we assume that this question might have been answered and clarified in some depth. Moreover, a superset of this question, which is advantages of family planning, has been covered at 7:28 minutes as the concluding/ summarizing message of the video.

Even though there are so many instances where this question has been covered in the video, we believe that there could be 2 main reasons this question was included by the ASHAs as part of the question set:

* 1. It was one of the questions that was specifically mentioned in the video, and the ASHAs were instructed to ‘*gather questions from the video*’ (the original intent being to gather questions asked by the audience after watching the video). Moreover, there is another question (What are the different permanent methods of family planning?) which has also been included as the discussion question in the video, and has come up 6 times (8%) in the questions set (#la, #pa), making us more inclined to believe this scenario.
  2. The second reason could be that the method of delivery of the information, or the way it is explained isn’t very clear or cogent. For instance, the video has answered ‘advantages of family planning’ and ‘advantages of permanent methods of family planning’ separately, and in different amount of detail.

1. The next most asked question was regarding concerns (18%), particularly about getting fat after getting ligated, which we found gave us an insight about the audience’s held assumptions and beliefs regarding the Permanent Methods.

Similar to this, though with lesser frequency, there were other assumption based questions concerning swelling, lactation, impotency/ eunuch-ness, gas problem, and diseases – all caused due to getting ligated. Also, there were a couple of singleton sets pertaining to vasectomy, dealing with eunuch-ness/ impotency and deficiency/ reduction in masculinity among men.

These topics haven’t been brought up in the video in any way, yet these were asked by the audience. The major chunk of these are basically side effects that the audience think that one may get if they undergo ligation. Based on the analysis of the video, we found that though it briefly states some of the side effects that may crop up because of undergoing ligation, it doesn’t entirely address the concerns that people may have from their own experience or understanding, which we believe will keep the audience hesitant from adopting these methods, even if to us employing these methods sound cogent because of our own domain thinking.  (However, towards the end, the video gives a blanket statement stating that if any problems crop up, they can visit the medical centers for advice regarding the solutions.)

1. In addition to these, there are many unique singleton sets of questions (or sets with 2-3 questions), which have given us interesting insights into the audience’s perspective of things, as well as helpful information about the ‘incompleteness’ of information in the video.
   1. A good 43.8% of the questions have already been answered in the video. These questions are mainly dealing with the advantages (4:04, 7:00, 7:28), side effects (5:10), specifics pertaining to when to get operated and a few operational ones (2:55, 5:10 (incompletely)), postoperative behavior (6:20), and general ones like where is the video from (0:00), what is family planning (3:00), etc.
   2. Further, there are topics that were brought up in the video but no explanation was given as to why a particular thing must be done, i.e., it’s reasoning and importance wasn’t mentioned in the video. We believe that this caused the majority of fact (26%), reason (12%) and ‘necessary’ (e.g. is it necessary to get ligated?) based questions.
   3. As a subcategory of the above 2 points, the audience were also inquisitive about the operational questions pertaining to duration of operation, period of recovery and best time and conditions to get operated. Some of these (duration of operation, best time to be operated)(2:55, 5:10) were answered in the video, while questions regarding the hospital that needed to be approached and the cost of the operation (which is one of the major deciding factors in rural arenas) weren’t answered in the video.

In addition, the question concerning best time to be ligated (2:55) has been answered in an ambiguous manner; i.e. the video hasn’t explicitly stated a particular time or the duration for which the parents should wait after having their final child before getting ligated. The video just mentions that the lady’s (Rakhi’s) youngest child is 1 year old, and she can get ligated, which doesn’t precisely state the waiting time, nor gives the reason for the same.

* 1. There were a few questions regarding Alternatives (8%) to the method of ligation, which hasn’t been explicitly answered in the video. We believe that aside from male and female ligation, the audience is interested in knowing about other procedures, if available, that may yield them the same results, which along with the aforementioned operational questions shows that some of them have been intrigued enough by the importance/ advantage of permanent methods to consider alternatives for the same.
  2. Another interesting question belonging to a singleton set was pertaining to the advantages of having less kids. In the beginning of the video (1:25), different views of the village women are depicted through conversation, in which one of the women mentions the advantages of having more kids (namely, more means to earn income as each kid will earn and bring the money home), without stating the inherent caveats. After this, the video doesn’t throw any light on this viewpoint, and hence not only it doesn’t answer the advantages of having less kids, but also somewhat reinforces a positive image of having more kids, which we think will be more appealing to poverty stricken people, and therefore, in conjunction with the aforementioned assumed (unanswered) risks of getting ligated, may prove counterproductive.

1. Lastly, we found that Intent based questions were asked in huge numbers (fact, reason, concern, etc.) as mentioned above, which allows us to hypothesize that the audience is interested in understanding the video with relatively more depth than currently present. Though the video states the ‘to dos’, the audience seems to be very keen in knowing the reasoning beyond just high level advantages. Moreover, audience is also interested in understanding specifically about the **cause** of side effects and the general concerns, both from the video and from their own knowledge.

**Appendix**

1. **Transcript of Video:**

PERMANENT METHODS OF FAMILY PLANNING

Village: Todarpur

Block: Bachranva

District: Raibraeli

Uttar Pradesh

**0:12**

Characters:

Anjali Singh ANM (Green) Community Health Center, Bacharanva

Seema Asha, Tondapur (Copper)

**0:21**

**S:** Population growth (explosion) is a great problem in society today. And the technique to control this is Family Planning. There are two types of methods of Family Planning:Temporary Family Planning methods, and Permanent Family Planning methods. We are trying to find out the awareness of the women regarding Family Planning.

Come, let's talk to a few women of the village regarding Family Planning.

**1:00**

**S:** Alright Simpy, tell me this: do you know anything about family planning?

**Sim:** I do not have any knowledge about family planning, Sister.

**S:** That's okay.

.

**S:** Namaste, aunty! Where are you headed?

**->:** I am headed home.

**S:** Aunty, you have been blessed with so many kids, why don't you get ligated?

**->:** Yeah I have many, but why should I get ligated?! I am not going to do it.

God has given them to me, and therefore I'll nurture them.

.

**S:** Namaste Aunty!

**I:** Namaste!

**S:** Aunty, you have borne so many kids/ boys, why don't you undergo ligation?

**I:** Oh, why should I get ligated?!...If I have more boys, they will all earn money and be additional sources of income to the family. That is why I do not wish to get ligated.

.

All greet each other: Namaste!

**S:** This is Rakhi Verma, and this is her mother in law. Sister, do you know anything about Family Planning?

**MIL:** I do not know anything about what Family Panning is?

**S:** Rakhi, do you know what permanent method of family planning is?

**Rakhi :** Yes sister, I know bits about Permanent Family Planning methods like Ligation. I wanted to get that done as well, but was really afraid about the entire thing.

**S:** Rakhi, there's no reason to be scared. Come, ANM sister has come, I'll let her complete your knowledge about family Planning.

.

**S:** Sister, Namaste!

**=>:** Namaste!

**S:** Sister, I had been to Rakhi's house, and please give me some knowledge about family planning method as Rakhi wants to know…she says she is afraid of meeting or doctors.

**=>:** Alright Seema, I'll let you know right away.

**2:50**

**Rakhi:** Namaste, Sister

**=>:** So Rakhi, do you now want to adopt permanent method of family planning.

**Rakhi:** Yes sister.

**=>:** Alright, how many kids do you have?

**Rakhi:** 2 kids.

**=>:** 2 kids? Okay, how old is the younger kid?

**Rakhi:**1 year old, sister.

**=>:** 1 year old? All right, you can then adopt permanent family planning method.

**Rakhi:** Sister, tell me what is family planning?

**=>:** Rakhi, in permanent methods of family planning, some techniques, medical procedures, and various other means are adopted by a couple to plan their family. This helps you in controlling the number of kids you will have, when you will have them, and the age difference between each of them. By this, a couple can give birth to a baby when they wish, and can prevent unwanted pregnancies. This is called as Family Planning.

Also Rakhi, there are many methods inside family planning, which can be adopted as required by the couple. Some of these are used to keep a gap between the kids. And others help the couples in family planning.

There are 2 types of family planning: Permanent and Temporary.

**S:** Sister, please tell Rakhi about the advantages of permanent methods of family planning.

**=>:** Alright, I'll tell. Adopting permanent methods of family planning helps in planning the family well. These methods are required to be used only once. This is a very safe and useful way of family planning, and takes care of all family planning issues for ever.

**4:30**

**Rakhi:** Alright sister, let me know what are the different methods of family planning?

**=>:** Alright, I shall tell you about the different permanent methods of family planning.

**Rakhi**: Alright, sister.

**=>:** So Rakhi, the 1st method is called female ligation (tubectomy). Tubectomy is a rather easy, and useful permanent family planning method for females. The woman who does not need any more kids can opt for this method at will. And if a woman undergoes tubectomy, then she does not need to adopt any other method for family planning.

**5:10**

**Rakhi:** All right sister.

Sister, tell me this: how many days does it take to undergo this procedure of ligation? Does one need to be admitted to the hospital?

**=>:** No, nothing like that. Tubectomy takes only 30 minutes and the woman can come home the same day.

Also Rakhi, after undergoing Tubectomy, there could be few minor problems or side effects, like stomach ache, weakness and some pertaining to the anesthetic injection that is given prior to operation.

But, there are nothing to be bothered about!

Alright Rakhi, this was tubectomy. Now, I will let you know about male ligation (vasectomy). Male ligation is even simpler.

Vasectomy is a very useful and easy permanent method of family planning. The house masters who do not want any more kids in the future can opt for this method at will.

There are no stitches or *wounds* involved in vasectomy. The entire procedure can be done in 10-20 minutes.

**Rakhi:** Can the man also come back the same day after getting operated?

**=>:** Yes, the man can come back home the same day.

Also, there is a caveat in vasectomy.

Vasectomy takes 3 months to become effective. During this time, if the couple wish to have sex, the male should use a condom.

**Rakhi:** All right sister.

**=>:** So, these were the permanent methods of family planning.

TEXT:

Discussion pertaining to the topic:

1. What are the advantages of permanent methods of family planning?
2. What are the different permanent methods of family planning?

**7:04**

**Rakhi:** Ssiter, tell me another thing: if any problem crops up after undergoing the permanent family planning methods, then how do we solve them?

**=>:** Rakhi, if any trouble or problem crops up after adopting this method, then you can go to your nearest health centers for advice/ suggestions regarding the solution.

**7:28**

**Rakhi**: Sister, what are the advantages of family planning?

**=>:** This prevents unwanted pregnancy and other complications related to pregnancies that usually threaten the life of the woman, and both the mother and child are healthy by this. If the kids and the rest are healthy, it reduces poverty. Both the family and the society prosper, and our lives are spent in happiness.

**Rakhi:** Sister, I like your advices. Now my fear has gone and I shall get ligation done.  Thanks a lot for providing me with this information.

*Saying:*

*Less kids implies happy person,*

*Permanent family planning is the solution.*

**S:** So this was the information regarding permanent methods of family planning, provided by the ANM sister.

I have full confidence that these family planning methods will be opted by the men and women. By this, home, hearth and society will remain happy.

Thank you.

1. **English Translation and Tagging:**

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| --- | --- | --- |
| **Sr. No.** | **english** | **Union of Tags** |
| 1 | What are the advantages to the family with less kids? | #a advantage,:reason |
| 2 | What are the advantages of getting operated? | #ao advantage,:reason,operation |
| 3 | What are the advantages of getting operated? | #ao advantage,:reason,operation |
| 4 | What are the advantages of getting operated? | #ao advantage,:reason,operation |
| 5 | What are the advantages that women get from family planning? | #awf advantage,:reason |
| 6 | What are the advantages that women get from family planning? | #awf advantage,:reason |
| 7 | What are the advantages that women get from ligation? | #awl advantage,women |
| 8 | What are the advantages to women concerning ligation? | #awl advantage,women |
| 9 | What are the advantages to women who undergo ligation? | #awl advantage,women |
| 10 | What are the advantages to women who undergo ligation? | #awl advantage,women |
| 11 | What are the advantages to women who undergo ligation? | #awl advantage,women |
| 12 | What are the advantages to women concerning ligation? | #awl advantage,women |
| 13 | What are the advantages to women who undergo ligation? | #awl advantage,women |
| 14 | Can one come home the same day after getting ligated? | #d operation,:fact |
| 15 | After how many days from the birth of the baby can ligation be done? | #db child,time duration,:fact,women |
| 16 | After how much time from the delivery should one get ligated? | #db child,time duration,:fact,women |
| 17 | Till how many days from the operation day does one need to be careful? | #dcare time duration,concern,operation,:fact |
| 18 | After how much time can one opt for permanent methods of family planning? | #dfp time duration,:fact |
| 19 | After how many days can one return to work after ligation? | #dw time duration,operation,:fact |
| 20 | What is family planning? | #f family planning,r1,general |
| 21 | What is family planning? | #f family planning,r1,general |
| 22 | Does one get fat after undergoing ligation? | #fata side effects,concern,fat,operation |
| 23 | Does ligation cause the body to grow fat? | #fata side effects,concern,fat,operation |
| 24 | Does one get fat after undergoing ligation? | #fata side effects,concern,fat,operation |
| 25 | Does one get fat after undergoing operation? | #fata side effects,concern,fat,operation |
| 26 | Does one get fat after undergoing ligation? | #fata side effects,concern,fat,operation |
| 27 | Does ligation cause the body to grow fat? | #fata side effects,concern,fat,operation |
| 28 | Does family planning cause the body to grow fat? | #fata1 family planning,fat |
| 29 | Why does ligation cause obesity? | #fata2 concern,assumption |
| 30 | When should one opt for family planning? | #fp general,time duration,family planning,:fact |
| 31 | Why is family planning necessary? | #fpr advantage,:reason |
| 32 | Where is this movie clip from? | #g off topic,:fact |
| 33 | Why is this movie clip being shown? | #gr off topic,r1 |
| 34 | Isn't there any other alternative to ligation? | #la :alternatives |
| 35 | Is there any other means other than ligation? | #la :alternatives |
| 36 | What are the alternative procedures to ligation? | #la :alternatives |
| 37 | Isn't there any alternative to ligation? | #la :alternatives |
| 38 | Is ligation the only thing that can be done? | #la1 family planning,:must |
| 39 | Is there any age limit for undergoing the procedure of ligation? | #lage operation,:fact |
| 40 | How much does ligation cost? | #lcost concern,cost,:fact |
| 41 | Why does ligation cause gas problem in the stomach after it's done? | #lga operation,assumption |
| 42 | Is ligation necessary? | #lm operation,:must,family planning |
| 43 | Is it necessary to get operated? | #lm operation,:must,family planning |
| 44 | Is it necessary to get ligated? | #lm operation,:must,family planning |
| 45 | Is it necessary to get operated? | #lm operation,:must,family planning |
| 46 | Is it necessary to get ligated? | #lm operation,:must,family planning |
| 47 | Is ligation necessary? | #lm operation,:must,family planning |
| 48 | In which hospital should ligation be done? | #lplace place of administering,:fact |
| 49 | Does ligation involve getting sedated/ unconcious? | #lsed side effects,concern,pain,operation,implicit,:fact |
| 50 | How much time does it take to undergo ligation? | #ltime operation,:fact |
| 51 | Can even men get ligated? | #ml man |
| 52 | Does male ligation cause Enunch-ness? | #mlmis man,misconception,assumption |
| 53 | Why don't men get ligated? | #mlr :reason,assumption |
| 54 | Would there be any negative effects if a male undergoes ligation? | #mn side effects,concern,man,:fact |
| 55 | Would there be any negative effects if a male undergoes ligation? | #mn side effects,concern,man,:fact |
| 56 | Does male ligation cause a deficiency in the husband? | #mn1 concern,misconception |
| 57 | Are there any problems associated with male ligation? | #mn2 side effects,concern,man,:fact |
| 58 | Why is sex restricted for a period of 3 months after ligation in men? | #mr man,:reason |
| 59 | Why is there weakness after undergoing ligation? | #n1 weakness,:reason |
| 60 | Can getting ligated cause a disease? | #n2 operation,assumption |
| 61 | Is ligation painful (procedure)? | #n4 side effects,:fact |
| 62 | Why could there be a stomach ache after undergoing ligation? | #n4s stomach ache,:reason |
| 63 | Does ligation cause a (perpetual) ache in the stomach? | #n4ss side effects,concern,operation,stomach ache,:fact |
| 64 | What should be done if the ligation fails? | #n5 concern,operation,:fact |
| 65 | Are there any problems that may crop up after ligation? | #np side effects,concern,:fact,operation |
| 66 | Does getting operated cause any problems? | #np side effects,concern,:fact,operation |
| 67 | Why does the body swell up after ligation? | #ns concern,swelling |
| 68 | Why does the stomach swell up when woman undergo ligation? | #ns concern,swelling |
| 69 | Isn't there any other alternative technique of permanent nature, to ligation? | #pa :alternatives |
| 70 | Isn't there any other alternative technique of permanent nature, to ligation? | #pa :alternatives |
| 71 | What are the effects of permanent methods? | #pmeffects advantage,side effects,:reason |
| 72 | Is it necessary for women to get ligated? | #wl women,:must |
| 73 | When should a lactating women get operated? | #wlact lactation,assumption |