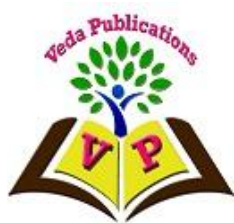


## EFFECTS OF “MAIN KUCH BHI KARSAKTIHOON”, AN ENTERTAINMENT EDUCATION SOAP OPERA ON THE PERCEPTION OF ITS VIEWERS

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### ABSTRACT



In India, frequent pregnancies are common, unmet need of contraception remain high and access to safe abortion inadequate. Compelled by social behaviours, from 2001 till 2011, there have been steady declines in fertility, maternal, infant and child mortality rate. The health and nutritional status of children and women remains poor, and India is routinely ranked among countries performing weakly on important social determinants of health. One of the prominent interventions to improve the status of sexual and reproductive health is through media programs to evoke progressive positive behaviour change. This research highlights the effects of an entertainment-education national soap opera titled “*Main Kuch Bhi KarSaktiHoon*”, broadcast on Door Darshan and All India Radio, claimed to have reached 400 million people in India. The makers of the show advocate that this soap opera has a positive impact on its viewers causing a wave of behavioural change. This study was conducted to analyse the effects of the show on the perception of its viewers and the changes they suggest could be brought at an individual level in Magharpur village in Haryana. Twenty women from the mentioned area participated in this research and data was collected through the observations made on their reactions while watching the show and in-depth interviews, post screening.


According to the results, their responses towards the show were positive and almost every woman interviewed connected with the storyline and characters depicted in the show. Viewing the characters and the consequences they faced for the wrong steps taken such as untimely abortions leading to death, frequent pregnancies causing anaemia and so on, made the women initiate a dialogue among themselves which was further observed to be taken to other women who didn't watch the show. This initiation of dialogue and discussion among women showed the possibility of them reflecting upon their own behaviours. Overall, the results indicate the efficiency of the show and also, highlights the need for more such shows to be produced for causing a positive behavioural change.

**Keywords:** *Family Planning, Health, Development, Entertainment, Education, Rural Women*

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**INTRODUCTION**

Stories are an integral part of any human's life. Since childhood till adulthood, a human is surrounded by multiple stories, the only difference occurs is in terms of the medium through which one comes across those stories. As a child, the stories come from grandmothers, mothers, teachers, and all of them had a purpose in their head which was to form the thinking of the child and cause him/her to behave in a certain manner using an entertaining way of telling story. By the time a child grows into an adult, he/she adopts multiple behaviours that are exercised in the society they live in. Some of these might be good and some leading to bad consequences. In such a situation, the childhood stories too need to transform like the child who turned into an adult and has a different perspective towards the world and is much more stubborn than the child he/she was.

Entertainment Education is a strategy that has transformed the art of storytelling into a medium for causing behaviour change at a much larger level. Based on the Social Learning Theory formulated by Albert Bandura, "Edutainment has been used across the globe as a powerful medium to educate, inform and influence social and individual behaviour change. Edutainment programmes possess the potential to supplement and complement traditional and prevalent public health interventions" (Wang & Singhal, n.d.). The theory states that when people observe a model performing a behavior and the consequences of that behavior, they remember the sequence of events and use this information to guide subsequent behaviours. Observing a model can also prompt the viewer to engage in behavior they already learned. In other words, people do not learn new behaviours solely by trying them and either succeeding or failing, but rather, the survival of humanity is dependent upon the replication of the actions of others. Depending on whether people are rewarded or punished for their behavior and the outcome of the behavior, the observer may choose to replicate behavior modelled. Media provides models for a vast array of people in many different environmental settings.

In this research paper, the effects of such the show "*Main Kuch Bhi KarSaktiHoon*" (I, A Woman Can Achieve Any thing), an Entertainment Education Soap Opera have been analysed. This show was produced to aware the masses regarding the reproductive health issues faced by women in the rural parts of India. One of the major causes of such health issues are myths and taboos related to reproduction, also, the rigid patriarchal system which does not allow women to have any power for decision making. Various issues regarding health have been discussed in the show such as untimely abortions, frequent pregnancies and anaemia, and all of these are connected to the lack of knowledge and decision making power among women. Through this research, an effort has been made to understand the psyche of women who go through all these health issues, how societal pressure becomes a reason for it and how exposing them to an Entertainment Education show like "*Main Kuch Bhi KarSaktiHoon*", can help in bringing a behavioural change and hence, improve the health scenarios.

For this research, two issue based films of 30 minutes each made using various episodes of the show *MKBKSH*, were screened to 20 women sitting in the groups of 4 to 5. The issues that were discussed in these films were of illegal and untimely abortions, and the need for using family planning method. An in depth interview was conducted post screening and also, their reactions were observed while they were watching the two films.

**BACKGROUND**

There are approximately 277.33 million women in India under the reproductive age bracket of 15-49 in India, as of 2015. (Our World in Data, 2015) According to most recent National Family Health Survey 4 (NFHS4) report conducted in 2016, in the rural parts of India there are only 61.5% of women who are literate and 27.3% women who have received more than 10 years of schooling. The percentage of women who get married before the age of 18 are 31.5% in rural areas and approximately 49% women have never used any family planning method. The percentage for using family planning methods such as condom and pills remains extremely low. Only 4.9% percent women uses pills as a

contraception method and only 3.9% men use condom as protection in rural regions of India. (NFHS4, 2015-16) Comparing the digits of population with literacy level, early marriage percentage and level of family planning methods used, a clear indication towards the need of measures required to provide women with basic education and especially, regarding the family planning methods to the women who are already married can be seen. There have been multiple schemes and programmes initiated by the government in order to address this issue of lack of awareness among them such as “Beti Bachao, Beti Padhao” which did not only tried to stop crimes such as female foeticides but also tried to aware the masses regarding the family planning methods and also, promoted girl child education. However, these programmes remained inefficient in bringing the desired change. “Allotting of funds and schemes alone will not work wonders alone. The connection has to be established first with the society at large. This will make the citizens more sensitive and will be able to relate themselves better to how and what the ill-treated girl child feels like” (Ankita, 2016).

#### **MEDIA AND ENTERTAINMENT EDUCATION**

In recent years, mass media campaigns for sexual health responsibility have employed storytelling to engage audiences and evoke interpersonal dialogue (Wang, Singhal & Rogers, 2013). For a long time, radio has been used as a medium for disseminating these stories based on Edutainment methodology such as “*TinkaTinkaSukh*”, “*Taru*” and “*YehKahaAa Gaye Hum*”. Among these shows, “*TinkaTinkaSukh*” has been the one that gained maximum amount of popularity. “104 episodes of “*TinkaTinkaSukh*” were broadcast over All India Radio, reaching an area where some 600 million people live. Every two weeks, an interactive broadcast was aired to provide a forum for discussion of educational issues, and a medium to address listeners’ letters.” (PCI Media Impact, 2003) Television is the most recent way used for dissemination of these stories for behaviour change considering its reach of approximately 475 million people every day across the country.

#### **ABOUT THE SHOW**

“*Main Kuch Bhi KarSaktiHoon*”(MKBKSH) is a show that claims to have a reach of more than 400 million of Indian rural population and the use of Entertainment Education strategy has helped in causing the masses to not only feel the connection with the story but also, made them change their earlier behaviours and bring a positive change. MKBKSH adopted a 360° approach across a wide range of communication platforms to reach massive and diverse audiences. MKBKSH’s flagship – the television drama serial – was broadcast on India’ national network Doordarshan (DD1)–52 episodes in Season 1 from March to October 2014 and 79 episodes in Season 2 from April 2015 to January 2016. The 131 episodes of Season 1 and 2 have been subsequently re-telecast on Doordarshan in Hindi and dubbed in 11 regional languages, making MKBKSH an unprecedented multi-lingual intervention. An adapted version of MKBKSH was broadcast as a radio drama serial on 216 All India Radio stations with Season 1 running from May to November 2015 and Season 2 from February to October 2016. In 2017, MKBKSH was made available for free viewing on Star India’s Hotstar, the premier digital app and platform for streaming entertainment programming that recorded upward of 30 million monthly visits from unique users. (Singhal & Wang, 3)

#### **ANALYSIS**

##### **OBSERVATIONS**

While the show was being screened there were multiple reaction that came from the group of women who participated in this research. These observations were made while they were sitting comfortably, watching the show while having tea. These women had various reactions to different scenes of the show. In this part of the analysis, those scenes which received maximum number of reactions and comments will be discussed.

##### **ISSUE BASED FILM ON BIRTH SPACING**

In this particular scene, the Asha worker of the village goes to meet a woman named Sangeeta, and congratulate her for the marriage of her brother in law. Both, the women happily discuss about how pretty the new bride is and the Asha worker requests

to see her in person. Sangeeta calls her brother in law's wife Pooja. When Asha Worker finally sees her and gives her a gift for marriage, in a fun manner, she asks Sangeeta if she has taught Pooja the game of "yes days" and "no days", just like she has taught her. Sangeeta requests Asha Worker to explain it to her. Further, Asha Worker, using a calendar explains about the ovulation period during which a woman cannot have an intercourse without using any contraception method. These days are called the "No days", where a woman should refuse her husband for any physical intimacy, if there are no contraception method being used. On the other hand, "Yes days" are those days where a woman can agree to have physical intimacy without the use of any contraception method, these days are four days before the menstruation occurs and four days after menstruation. After listening carefully to Asha Worker, Pooja shows concern about saying no to her husband, to which Asha Worker responds and says there are various excuses that she can make which her sister in law Sangeeta can teach her, as she has become an expert on this matter. The scene ends with laughter.

This particular scene captured the attention of all the women sitting in the groups, and also created a wave of laughter along with the three women in this particular scene. Many of them nodded their heads in agreement to what these women were discussing. Some of the women, while this scene was being screened started whispering among each other. Wherein the most audible comment made to a woman sitting in the group was that she never have her no day and they all laughed about it. This familiarization with the situation presented made the women have a sort of discussion, which could possibly further lead to intra communication.

When these same group of women gave individual interviews, out of 20, around 8 women mentioned about this scene and pointed out their lack of knowledge regarding these days and said they can further use it to keep a check on their days, to know when they possibly can get pregnant. These women belonged to the age category of 18 to 21 and

had a little or no idea about the ovulation days before watching this show.

In the same film about Birth Spacing, a scene in which a man named Manu explains another man who is highly against using any family planning methods as he thinks it is an unmanly act, to use condoms. He politely uses a metaphorical way to make him understand that using a condom will not make any difference in his sexual experience. In the end, the rigid minded man agrees and the scene ends on a happy note.

This scene too captured a lot of attention, all the women in their interviews mentioned about this scene and said that it is important to have more such shows for men to explain them the importance of usage of such family planning methods. According to them, a man only can explain another man, they will not listen to their wives or any other female. This showed the patriarchal effect on the mind sets in a society. In the scene as well, when Asha worker tries to explain the same thing, the rigid minded man does not listen to her at all and asks her to leave his house, whereas, when the same thing was explained by a man, he easily agreed. This particular biasness towards the Asha Worker in the show was noticed by the women and they commented that there is a need for a male Asha worker in their village, which can make all the men understand.

#### **ISSUE BASED FILM ON PREVENTING SEX DETERMINATION AND SEX SELECTION**

In this film, one of the major scene that captured attention was where Dr.Sneha's sister Seema undergoes a surgery after her husband forcefully tries to abort her girl child in the sixth month of her pregnancy. While watching this scene, all the women present in the room, had an expression of shock and remorse on their face. Many of them tsk-tsked over the decision made by Seema's husband when he gets her child's sex determined and shows the report to her while breaking her Karvachauth fast. This fast has a lot of importance for Indian women, for the female participants the behaviour of Seema's husband was extremely inappropriate, especially, on the day when his wife has kept a fast for his long life.

**DATA ANALYSIS ON THE BASIS OF INTERVIEWS**

Changing human behaviours takes a lot of efforts to be made in and around the environment in which humans live. It can be change in the law practices, government schemes, media and also, the behaviour of other humans around. While taking the interviews, it could be easily noticed that the women who participated in this research had all the required knowledge of what is right and wrong for a woman in a society, a larger of part of which was developed through the schemes and efforts to impart that knowledge by the government. As discussed in the observation section of the analysis, these women did react to the scenes where the behaviour towards a woman was not appropriate and when the knowledge which was being provided to them through the show was something useful and they agree to it. However, the sense of right and wrong at some points was similar and at some varied a lot from woman to woman.

The factors on the basis of which this could be analysed are perceived sexual health and family planning method preferences, perception towards the show, and decision making power among females.

**FEMALE AGENCY AND HEALTH PERCEPTION**

“Urban, educated, working and married women hold more decision-making power than rural, illiterate, non-working and unmarried women.” (Chattrala, 33)

This is indeed true that women living in urban areas hold more decision making power than rural women deprived even of the basic needs. In terms of family planning as well this power given to the women holds an important role. According to the interviews taken of women in the village of Magharpura, were asked various questions regarding their personal choices for family planning and the role of their husband in that.

As explained in the observation section, the conversation regarding the “Yes Days” and “No Days” for having a sexual intercourse received the maximum number of reactions from the women sitting for the screening of the three films. These same women during the interview were asked regarding their own Yes Days and No Days, as well.

Out of 20 women, who were interviewed, not even a single women agreed to having ever gone to their husband for their own sexual desires. A common statement that have been made by these women regarding their sexual life was “What can we say to him, he can come whenever he wants and have sex, and we cannot refuse him”. The wish of having a sexual intercourse was thought as something that belongs only to a man, a woman thinking about it, let alone having such desires is considered to have loose morals. These same women were asked the question regarding their husband’s responsibility to use protection during sex when they don’t want procreate further. Only 5 women said that their husband use condom, while rest of them said that their husband either uses the pull out method, or they take a pill as a resort to prevent themselves from unwanted pregnancies. For them pills are the easiest way that they have, as compared to asking the husband to use any other family planning method.

Ankita: Which family planning method do you prefer out of all the ones suggested in the show?

Soniya: Pills. They are Fine.

Ankita: Why Pills?

Soniya: Pills, because I am the one responsible for it, I can easily keep in mind when I had the Pills. Either, I will take the weekly Pills for contraception or the emergency pills. I can never use Copper T, as there is a chance of getting infection, also, I am scared of using it.

Ankita: What about Condoms, they are easy to use as well?

Soniya: I don’t like asking my husband for this.

Ankita: Why?

Soniya: It doesn’t seem nice.

The above scratch of conversation reveals the perception of a woman towards her own health. For them it does not matter as long as it involves asking the husband to take any precautions. This clearly indicates the strong mental hold of the patriarchal system. Similarly, women who were asked the question of how they would ask their husband for

using a condom, in case, they are not on any pills, not even using any other family method, all of them responded with a refusal, it is highly impractical for them to ask their husband to use condom. The decision making power that these women have was already limited. Pills became an easy way out, and the harmful side effects being completely ignored by the women or the possibility is that they are not fully aware of it.

On one hand, there were women who raised their hands when asked about a way for convincing a husband for using condoms or any other method, on the other, there were women like Shweta, Pooja, and three other who came out with a possible solution to convince their husbands.

Read the following statements made by Pooja:

“One time they warn us, second time we warn them by saying that if they won't agree we'll go to our mother's place. They will get persuaded by this because they need us. You know why a husband needs a wife, right? First and foremost is the sexual need. They'll come to take us the next day. They will not ask us to stay but will come and take us back the very next day. A husband should understand his wife's feeling, my husband does. Husbands who do not understand, their lives are ruined.”

Pooja understands the male psychology and she realises her worth as a woman of the house. According to her, a husband needs his wife more than anybody else and it is important to use this as a weapon to persuade men to make sure they make their wife's health a priority.

#### **BEHAVIOURAL IDENTIFICATION WITH CHARACTERS**

Media has the power to transform individual behaviour only when it has the element of universality in it. If a shown behaviour or a character is not what a person can identify with, then the purpose of a produced show or any another form of media fails right there. It is thereby important to know if the women participants could connect with the content and characters of the show *MKBKSH*.

In this part of analysis, the responses from all the female participants varied extremely. Each one of them had a different character or an incident

they could relate to from the show. The instances where they showed a connection were either from their past experiences or what they see in their day to day life. The data collected for the behavioural identification is based on the health issues represented in the show, and the behaviour of one character towards the other such as Seema's husband and her mother-in-law towards her, a character of a husband who takes care of his wife during the pregnancy, which is in complete contrast with the bad and unethical behaviour of Seema's husband. Read the following scratch of conversation between Ankita and Shivani.

Ankita: Which character could you relate to the most in the show?

Shivani: Something similar happened to my sister-in-law. She has two daughters by operation. After having one daughter, she had two abortions. This happened when her uterus wall fell, the child couldn't grow. For us it's nothing but the society thinks it was done because it was a daughter.

Ankita: What do you think was the reason behind this?

Shivani: It happened because of inadequate food and stress of having another girl child, scarcity of protein, iron, iodine and she didn't rest or have green vegetables and milk.

Here, Shivani identified with the character of Seema and Rachna from the show. Even though there was no pressure being put on Shivani's sister-in-law by the family, the stress of having another girl child and the pressure of the society became the reason for a woman to go through such difficult times. Besides, her inability to take proper care of herself during her pregnancy can be seen as another reason. This could be possible due to the pressure on a woman for handling the household duties. The general notion that a woman should take care of the household, no matter what her health condition is, becomes one other reason for increase in the number of miscarriages and deterioration of health. Another example that can be drawn from the interviews where the social environment comes off

clearly as a reason for such problems is from the conversation with Renu.

Ankita: Have you ever seen people killing their girl child in the want of a boy?

Renu: I have heard of them, never encountered any. We get to hear this from others around.

Sometimes when we sit together and share information, we do hear such things in the nearby villages"

Ankita: How do you get to know about them?

Renu: Our Chachi knows everything, she tells us about all these happenings.

For example she will come and say, "Haye!! She again delivered a girl" referring to some woman who has recently given birth.

She did the same when I gave birth to a girl, she spread the news in the entire village with a sad tone and if it's a second girl, then she will say it as if she is distraught, "She again bore a girl". She might even start crying.

Women in the group also identified the condition of anaemia in themselves or the women around them. They talked about them having irregular periods, situations when they were about to deliver a child and the blood level in their body was way less than the ideal rate. One of the participant, Asha, talked about a woman in her relation who does not use any family planning method and she had to undergo multiple abortions. She even identified her own behaviour of not being able to convince her husband for using any family planning method and she was seven months pregnant with a barely a year old girl child. Further, she explained that it is difficult for her to convince her husband, as he has the habit of drinking and coming back, so she does whatever he asks her to do without showing any dissent.

#### WISHFUL IDENTIFICATION WITH CHARACTERS

The two major roles in the show that the women participants desired to be like and wants their children to be like was of Dr.Sneha and Asha Worker. The positive character of Sneha and Asha Worker, wherein they both help, advice and educate

people around them regarding the health issues and possible ways they can have a better life intrigued the viewers and they wish to be as wise as they are portrayed in the show. Women, even though immersed themselves in the narrative, they were well aware of their realities. Read the following snatch of conversations with Simran, Shivani and Soniya:

Ankita: Any character in the show you'd like to become like?

Simran: I'd like to see myself as Asha worker, giving advice. Or like her sister, who fought for the sister's justice. A bit like Asha and a bit like the sister, do both; give advice and fight for justice.

Ankita: Would you like to be any like any character from the show?

Shivani: Asha worker. She was educating everyone about health and nutrition, telling people about child birth and women's health and how there should be a gap of at least 3 years between every pregnancy, all that stuff. So if given a chance, I would like to do that same. Help others out so they live a better life.

Ankita: Any character you want to be like?

Soniya: We can't be like any one now but for my daughter I would wish her to be like Dr.Sneha.

Above given three examples from the conversations during the interview, suggests the idealization of the fictional characters presented in the show by the women viewers. Simran wants to adopt characteristics of both the characters cherished mostly by all the women. Shivani wants to be like the Asha worker as she thinks it is now possible for her to become like, if given a chance and Soniya, who is a mother of two kids thinks that it is not possible for her to be like anyone but would want her daughter to be like the character of Dr. Sneha.

#### CONCLUSIONS

The show "*Main KuchBhiKarSaktiHoon*" did have an impact over the women participant. However, the level of impact may vary from woman to woman. The results of the interview shows that there were multiple situations that were impacting

the reproductive health of these women. All those situations were directly or indirectly related to the patriarchal norms of the society they lived in. Some women had the pressure from their in laws to behave in a certain manner and were expected to never question back or talk about their own needs. This was ingrained in them so deeply that even though they knew that the things that they are expected to do are harming their health in certain way, they will not bother the male in the house. The use of family planning method could have saved them from multiple pregnancies or abortions, and the serious health issues that come along with it, still they prefer to keep the norms above anything. Those who wanted to save themselves from the unwanted pregnancy took pills as their ultimate resort and were unaware of the harmful effects. Viewing the show did make them identify with the characters and there was an arousal of desire to be like the ones who lead a healthy life and had enough knowledge to guide others. On the other hand, they despised the characters who were doing wrong with the women and also, identified similar real life people who behave in the manner shown in the show towards the birth of a girl child. They identified the some of the health issues such as anaemia in their own body as well, of which they were earlier unaware. Those who were involved in the narrative completely and could relate to the show's characters were seen having a discussion even after the interview got over with those women who did not view the show. Overall, it can be said the show did make them have a dialogue among themselves and encouraged them to be like the positive characters of the show. However, one cannot be sure of the depth of the effect, but it does reveal the strength of such shows to have an impact over people and make them reflect over their own lifestyle. Therefore, it can be said by making the audiences view an Entertainment Education show such *MKBKSH* brings a possibility of connecting with the society and making them understand the current relevant issues and work towards them.

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