True Izzat: exploring taboos around sexual health and relationships within South Asian communities.

Consent, Contraception, Condoms, Conception, Genetic Conditions (The '5Cs')

Oxford Against Cutting Film Project Evaluation



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Whilst many cultural groups find it tricky to talk about sexual health, there can be additional barriers to open conversation and access to services in some South Asian communities. Many traditional families follow deeply embedded "honour" codes and expectations that often impact women more than men. For example, some South Asian women will be expected to maintain their "virginity" before marriage, agree to an arranged marriage to a cousin and conceive a first child shortly after marriage. Whilst our charity does not challenge cultural values, we do promote the sharing of open and honest information to support healthy relationships, as well as challenge harmful practices. We hope the True Izzat film series will help empower women with information on their sexual health and choices.

Kate Agha, CEO, Oxford Against Cutting

Our True Izzat film series hears the voices of survivors, community leaders, mothers, daughters, students, doctors and more. Without the bravery and willingness of our participants to speak on taboo topics related to sexual health, these films would not have been possible. It is imperative that we hear the voices of people representing the communities we support, and we are confident that these films will feel relatable and accessible to people from South Asian communities - especially women and girls.

Dot Pritchard, Oxford Against Cutting Project Manager and 5Cs Project Lead

1 Introduction

Oxford Against Cutting (OAC) is an Oxford-based charity working to end harmful practices suffered by girls and women living in the Thames Valley. These include female genital mutilation (FGM), 'honour'-based abuse (HBA) and early and forced marriage (EFM) and female cosmetic genital surgery. Our mission is to end practices that harm girls and women by providing education, supporting survivors, raising awareness of support services and empowering young people to champion initiatives against harmful practices. People from affected communities and young people are at the forefront of our activities.

The following report describes and evaluates the process and outcomes related to a set of five videos in a project known as the 5Cs – True Izzat. These are on the subjects of **consent**, **contraception**, **condoms**, **conception**, and **genetic conditions (as these relate to cousin marriage)**. The films are aimed at South Asian communities within Oxfordshire, for those older than school age and therefore without access to sexual health education. There is a theme across them which explores "izzat" meaning "honour" and shame and aims to tackle some of the beliefs underlying honour-based abuse. The films have been translated into Urdu and Punjabi in addition to English to facilitate this.

We are very grateful for the support of Oxfordshire Public Health, Oxfordshire County Council for funding the 5Cs initiative. Thanks also to all of those who took part and contributed to such a rich and positive project, which we are confident will go on to have lasting impact.

2 5Cs film development

The five short films were prepared and launched between January and December 2021, with the film content as follows:

- **Consent** looks at the notion of sexual consent in marriage.
- **Contraception** explores the issues of contraception and its availability to women, married or otherwise.
- **Conception** discusses the pressures to have children and the issues faced by those who are unable to conceive, or who find conception problematic.
- Condoms exploring the difficulties of discussing condom use, the risks of sexually transmitted infections, and the benefits of using condoms, eg reducing STI and HIV transmission
- **Genetic conditions** talks about genetic conditions in the context of cousin marriages.

Two edits of the films were made with long-version films rated as age 16+, and five 'Key Messages' films (non-audio, less than 2 minutes each) which are appropriate for all ages and can be universally viewed in any setting, eg, GP surgeries. Versions were produced in Urdu, Punjabi and English. The films were loaded up to YouTube and the OAC website, with timings as a series of planned launches and/or as they were completed, between 17th June and 2nd December 2021. All films can be accessed via <u>our home page</u>. The messages have been approved by key stakeholders with specialist expertise in sexual health and communities. For detail on each of the film versions, see Appendix A.

The film-making project team consisted of Dot Pritchard (OAC Project Manager), Tanya Vyas (Social Media Communications Coordinator) and Hauwa Suleiman (Gender Specialist). Kate Agha (CEO) supported the team. Details of the OAC team members are provided in Appendix

B. Film production was by Clark Wiseman and Barbora Benkova of Studio8, and interviewees/discussants were:

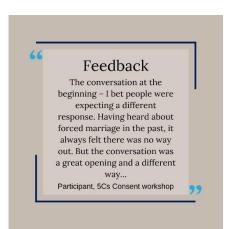
- **Consent** Sabrena Afridi, Ahd Hassan, Keisy Lin Fong, Rubie Marie, Momina Mukhtar (volunteer), and Tanya Vyas
- **Contraception** Rubie Marie and Dr Sridevi Beriwal, Nuffield Department of Women's & Reproductive Health, University of Oxford
- **Conception** Sobia Afridi and Monica Majumdar Choudhary
- Condoms Dr Priyesh and medical students Hamza and Tribz. Daniel Clerkin and Nicola Jones of Terrence Higgins Trust are also recorded in a shorter video to speak about the Safety Condom Card – known as the C-Card Scheme allowing young people between 13-24 years access to free condoms and lube packets to improve sexual health.
- **Genetic conditions and cousin marriage**: Sobia Afridi, Sabrena Afridi (Sobia's daughter who lives with thalassaemia, a genetic blood disorder).

Verbal translation of the English film versions into Punjabi and Urdu was carried out by Rashmi Sharma. The films were dubbed, rather than adding written translated sub-titles, as some local communities do not read Urdu and Punjabi script. A flowchart showing the stages of the process is provided in Appendix C.

3 Dissemination and evaluation activities

The films were disseminated between 18th June 2021 and 27th January 2022 in a number of ways. A launch was held for each film, where it was shown in a group setting and used as the springboard for discussion. Initial plans were for face-to-face workshops, but this proved logistically impossible due to the ongoing Covid-19 pandemic and the reluctance of individuals to travel or gather in an enclosed space. We, were, however, able to organise four online workshops, and one in a face-to-face setting, where we were able to capitalise both on the organisation of existing groups which allowed us to involve a good range of South Asian community representation and other stakeholders. The activities were as follows:

Consent – online film screening and workshop discussion 25th June 2021, run in collaboration with the Young Women's Music Project and facilitated by their director, Zahra Tehrani. The film was described as "amazing," and in particular the different perspectives that it showed which make it more thought-provoking, eg, the WhatsApp conversation which encouraged open discussion about sexual consent. Ideas around patriarchal norms and expectations, and the role of women as caregivers resonated with the audience, and there was a discussion about learning and maintaining boundaries. There was also a screening as part of a workshop on consent, for young South Asian women on 13th January 2022.







Contraception – online film screening and workshop 30th June 2021, facilitated by Arifa Naeem¹ and attended by Susan Larner, specialist nurse and included an additional clip on the halal nature of contraception. Discussions included levels of confidence around discussing contraception, which varied greatly, and the generally support from GPs good including interpreters/translators. The film was felt to be very helpful and would lead to an increase in confidence around the use of contraception. The group acknowledged that they were mainly confident in addressing contraception needs, but that many others in the community were not and would be helped by the

content of this film. There was also a screening as part of a young women's sexual health workshop on contraception, 20th January 2022.

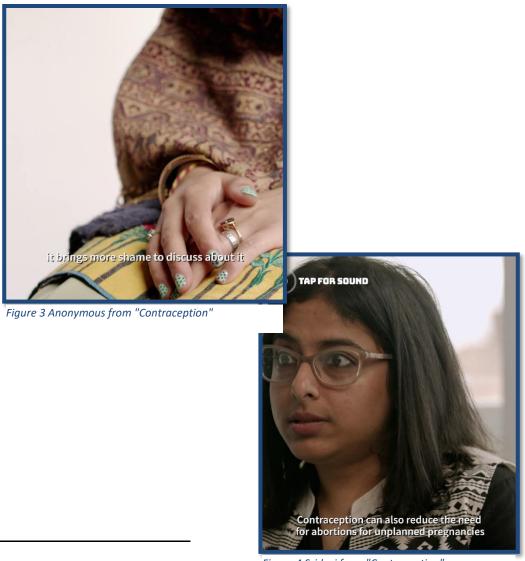


Figure 4 Sridevi from "Contraception"

¹ This group was run with participants from Maidenhead (with permission kindly granted by OCC to obtain feedback from outside Oxfordshire).

Conception – face-to-face screening and discussion group with Oxford Asian Women's Voice community group, at Rose Hill Community Centre, 28th July, facilitated by Sobia Afridi. English and Urdu versions of the film were shown. The discussion raised awareness about how it is difficult to talk about, how women should be supported by each other, as well as their own friends and family, and also the availability of further support (eg, via a GP). The film was shown additionally at a Web Café on November 10th (facilitated by Monica Majumdar-Choudhary, with guest Sunita Thind) and initiated a conversation on the need for change, particularly as these issues were not felt to have moved on with a new generation of women.





Figure 6 Rubie Marie from "Conception"



Condoms - launched as a Web Café discussion on male activism 9th July, facilitated by Sobia Afrida. The film was felt to be particularly helpful because of the difficulty in talking about sex before marriage within South Asian communities. These are conversations that many families do not have, and this is exacerbated when children are opted out of sex education, possibly because of concerns that this might encourage pre-marital sex. This type of education should be seen as protection, giving young people knowledge. The additional film on the C-Card was also shown

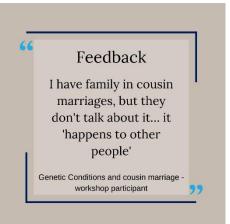




Figure 8 Nicola and Dan from "Condoms'

Genetic conditions and cousin marriage – online film screening and workshop 18th June 2021,

facilitated by Sobia Afridi and was attended by members of the Thalassaemia Society and Dr Hall, an expert on genetic conditions in the South Asian community. The film was very well received and sparked enthusiastic discussion around the fact that there is little awareness in South Asian communities of the possibility of cousin marriage leading to the passing on of genetic disorders. This is not talked about, it is something that "happens to other people" and there is denial. In countries where there is more open discussion and blood tests before marriage, thalassemia has been eradicated. It is important to destigmatise being tested and emphasise that there is no blame. There was also a screening at a young South



Asian women's sexual health workshop on genetic conditions and cousin marriage, 27th January 2022.



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Questions used to guide the discussions are shown in Appendix D.

In addition to OAC staff and health professionals, a total of 60 individuals attended across all of the workshops. All were women with the exception of five men who attended the Condoms film. In terms of ethnicity, 42 identified as 'Asian or British Asian', three as 'African or Black' and two as 'Mixed'. The remainder were white, or unknown (with some participants choosing to leave off their camera and/or not give their name in the online sessions). Eleven attendees were South Asian girls between the ages of 13-18 years. A demographic breakdown for each activity is shown in Appendix E.

The films were launched on social media with the hashtag #TrueIzzat, on the OAC Facebook, Instagram, Twitter and LinkedIn platforms, and included a specific campaign on the Urdu and Punjabi films.



Figure 11 Consent film in Punjabi



Figure 12 Consent film in Urdu

Finally, we shared the films in our newsletter, reached out to personal and professional contacts to share the film and, where possible elicited feedback. The films were also featured in @CherwellValleyToday (a <u>local website</u> focused on the Cherwell Valley in Oxfordshire). Moreover, they were presented as a 'Sharing Best Practice' item for the Oxfordshire Sexual Health Action Partnership meeting in October 2021, accompanied by a showing of the 'Genetic Conditions' film. In addition, 'Genetic Conditions' was entered into the <u>5th Annual</u> <u>Charity Film Awards</u>. This contributed to the film's exposure, with the organisers reporting 1.5 million views of the charity entry films over the voting period.

4 Evaluation

Outcomes evaluation

We measured the success of the project in several ways. Firstly, we used quantitative measures, primarily based on the video screenings both to obtain feedback and to initiate discussion around the key subjects. Across the workshops we shared welcome and exit polls (online) and questionnaires to measure confidence and knowledge on the subjects in hand (see Appendix F for poll/questionnaire content). Responses indicated very positively for the content of the films, with average levels of confidence in speaking about the subjects increasing from 2.9/5 to 4.2/5, and levels of feeling knowledge about the subjects covered from 3.0/5 to 4.2. Almost all who attended said that they were 'extremely likely' to recommend the film to others, and 78% of those who responded said that the workshop



had increased their understanding of ways to get support on the issues.

We shared the videos via #TrueIzzat social media campaigns, as well as with the support of others, for example, The Terence Higgins Trust on World Aids Day 2021. We were able to identify that on our own Instagram and LinkedIn, where the Urdu and Punjabi campaign of the film was launched, 'Conception' was popular and appeared to appeal to international audiences. This film was also most popular on Facebook, whereas on Twitter the 'Condoms' film was the most viewed with the differences possibly down to the different age profiles on these platforms. Website analytics also showed that our social media activity contributes to 25% of the visitors to our website, indicating the role of this type of output for informing people about our work on harmful practices generally and following up on this out of interest. The YouTube channel hosting the film has also contributed significantly to follow-up on our website, contributing to 75% of site traffic during an initial 5-day campaign.

As of 15th March 2022, the videos (as identified via YouTube) overall have been viewed 3,424 times, with the full-length film on Consent being most popular (1,332 views), followed by Condoms key messages (477 views) and then full-length Genetic Conditions (452 views).

We also take note of qualitative successes, where our work has been demonstrated as contributing more widely to education around harmful practices. For example, we received confirmation from:

- The Clinical Lead for Clinical Haematology at Oxford University Hospitals NHS Foundation Trust that the genetic condition films will be used by them as a teaching resource.
- The Lead for Learner Engagement, Oxfordshire Schools that the 'Consent' film is a reference in resources to support schools with RSHE across Oxfordshire in their <u>curriculum resource hub</u> and <u>framework for pupils with SEND and/or additional needs</u>.

We collected a significant amount of feedback on the films, via email and also shared with facilitators through their WhatsApp community groups and personal contacts. Some quotes are shared in the body of this report, with the rest collated in Appendix G.

Though the project has been successful and positively received, there were also some constraints which meant that we were unable to fulfil our original plans for dissemination and evaluation. In addition to the constraints on delivering in-person workshops discussed above, there were the impact of the Covid-19 lockdown and continued closure of GP surgeries and waiting rooms which were a key area for reaching our target audience. Evaluation of the films' impact was initially planned in two ways. Firstly, through screenings to community groups (as detailed above) and secondly in measuring any change in uptake of Genito-urinary medical (GUM) and contraceptive services within the target groups, i.e. South Asian communities. The latter was to be linked to disseminating the film series through GP surgeries and potentially other medical settings across Oxfordshire and reach 300 people from these communities. To meet this aim, we connected with local medical committees, safeguarding and GP networks to identify areas/surgeries serving high numbers of people from Pakistani and Indian communities, and explored a range of channels, including pharmacies, to screen the films. This involved initiating contact by email, attempts to make phone contact with practice managers and follow-up requests. Unfortunately, despite several attempts to disseminate the films in this way we were unsuccessful due to the limitations placed on GP surgeries and the impact of power- and efficiency-driven saving plans which meant there were no screens available to show the films in these settings. We have, however, noted the activity data for attendance at specialist health services for Asian or British Asian individuals for Q1 and Q2 2021-22, and this could serve as a baseline for measuring the impact of the dissemination of the videos.²

Process evaluation

Throughout the project, rigorous notes and coordination documents were maintained and accessed by the team on a shared drive, including a proposed timeline and recording schedule. Following an hour-long team debrief at the end of the filming process in September, a set of key learning points was developed. This was primarily related to the filmmaking process, as this is the first film project that the team had undertaken. This organisational learning will feed into future projects, and indeed has already been beneficial for a further film project. As a result of the follow-up discussions, it was agreed that some useful learning points are to:

² GUM activity: Q1 = 389 attendees (4.4% of total, i.e., all ethnic groups) and Q2 = 441 (4.7%); Contraception activity: Q1 = 155 attendees (4.1% of total, i.e., all ethnic groups) and Q2 = 164 (4.5%)

- Invite services, community groups and experts from as early as possible in the process and if possible the initial discussions rather than formulate ideas first and engage with them later. This will allow us to remain open to suggestions from the experts who will have additional experience.
- Continue use of a coordination document and Google shared drive, which meant that everyone was working from the same to-do list and worked very well.
- The condom films were well received, and the relaxed manner may have contributed to this, and this format would work well for future films.
- Size of location will contribute to this, eg, a bigger room will allow for group discussion and freer movement of the crew.
- Weekly planning meetings early in the week (Mon/Tues) worked really well to ensure that everyone knew what they were doing for a week, given the frenetic pace of some parts of the project.
- Prepping for filming days: coordinating interviewees, location, organising Studio8 filmmakers, writing questions (scripting, allowing for the interviewees to review beforehand) and the day's schedule. This was a significant amount of work but worth the time invested.
- The schedule might be streamlined for the film makers who need to know the structure (eg, the number of questions and timings) but not necessarily the detail (what the questions are) this would make it easier for them to follow proceedings.
- Transcribing the filmed interviews so that there is a word document is extremely helpful as a tool to move parts of the interview around and plan edits and moves prior to making those cuts, etc in the actual film. Transcripts are also needed for the translator.

Some key learning around design and making of the films themselves was:

- The original vision was to avoid simply 'talking heads', and more cutaways or other filming would have helped with this this needs to be reiterated in discussion with the filmmakers (though some constraints were placed on filming due to Covid restrictions on location), and any cutaways filmed could be used more generally.
- There was some movement of the footage for the condoms film, due to use of a handheld camera which will be replaced by a tripod for future projects.
- The condoms film structure enabled an open conversation in a group setting and ensuring that we didn't have reams of film to filter for editing. This structure involved giving the group some questions to discuss on paper and giving the filmmaker a 'nod' when it appeared there was footage of "the nugget" for the film.

It was agreed that the translation process constitutes a sub-project in itself, and in future should be managed as such as a mini project. Simultaneous voiceover is a very specific skill, to be able to interpret and communicate in another language in the same time frame. What finally worked was to produce a transcription of all the films in English, then commission a voiceover artist with a studio in India to prepare the voiceovers. Other key learning points identified were:

- A specific meeting is needed for the translation early on to agree on what is needed where there is a wide range of dialects it is difficult to get consensus as to what is 'right'.
- To recognise the complexity of translation from the earliest stages of planning the filming, for example, in terms of the timing for each frame, encourage the filmmaker to have more space in the frame so it can be spread to allow time for translation if needed (i.e. where the translation takes longer that the English filmed in the original shot).

- Translations can be quite formal remember that the audience in the UK might have a mix of English words; more informal and friendly translation is easier for more people to understand.
- The translator was able to work across both Punjabi and Urdu and had knowledge of sound production. For future projects, also look for someone who has that knowledge of sound quality, file size and their own equipment, etc, to make a good quality recording.

Some learning points relating to dissemination were also identified for future projects. The first of these was to maintain more frequent contact and check-in points with the community groups involved, recognising that they are often quite informal and fluid by nature and this might not support a more formal dissemination (though it was noted that this work took place at a time where Covid restrictions ran interference through many social gatherings). We would produce some promotional material, a small flyer for community workshops, to make the arrangement feel a little more formal and give the groups a structure to adhere to.

Secondly, film launches were originally planned to be one per week, to coincide with the discussion workshops. It was subsequently agreed to put all of the English language versions online at once so these could be accessible for the media to watch. This could be rethought, as once the videos are available online any subsequent attempt to 'launch' them has less impact. A different strategy may be to release all the videos to the media on embargo, and a weekly or fortnightly launch that would ensure individuals are seeing the film for the first time and are fully engaged. A separate launch of English versions then further languages is preferable.

All of these learning points were felt to be of value, and all involved in managing the 5Cs project expressed how much they had taken on board from this diverse and interesting project. All felt that it had been challenging at times, but they had enriched their skills set and discussed and documented key learning to take through into future OAC projects.

5 Conclusions and summing up

The 5Cs film project has given our charity a new and innovative way to stay connected with affected communities and their allies, through both the face-to-face interaction during filmmaking and workshops, and the online dissemination activities. We hope that the films we have created continue raising awareness amongst these groups, enhancing networks and information-sharing, and prompting thought-provoking discussions. These can break down some of the barriers in South Asian communities around sexual health and reproduction. We were also delighted to connect with other allies, such as the Young Women's Music Project, who have helped us develop our creative work (the music for our animated logo) as well as supporting with facilitation.

Research in Oxfordshire has emphasised cultural barriers when accessing GP practices, including different attitudes to sexual relationships and marriages, to male doctors with women patients and feeling embarrassed by talking to a male doctor. Displaying the films in medical settings will hopefully help to break down some of these barriers, introducing the subjects and providing information in a more accessible way. Other work has shown that, for young people of minority ethnic backgrounds, key barriers to sexual health services include language barriers (especially for those who have only recently moved to the UK), a lack of promotion of what is available, and cultural and religious barriers which make sex a taboo subject.

Despite best efforts, the situation due to the Covid pandemic and associated lockdown meant that we were unable to distribute the films through all of our planned channels. We were, though encouraged by the feedback from the dissemination workshops and other channels which led to the films being viewed many times. They are available for when the situation changes and (except for possible changes in service information) deliberately designed not to be time-limited in their content. We are also delighted that the full versions will be available for workshops in community groups, continuing to help South Asian communities explores "izzat"/shame, tackle some of the beliefs underlying honour-based abuse and help develop better understanding of ways to access sexual health services.

Although, unfortunately, we were unable to carry out an assessment of the impact the films have on the numbers of South Asian individuals who access sexual health support, there will hopefully be opportunities for this to be done in the future. GP surgeries will eventually open and be able to screen the films, and there may also be a possibility for sexual health services premises to show our films in their waiting rooms. The release of the 2021 census data, which will commence early in the summer 2022 may give updated information on the population of the target audience for the films and support further dissemination activities.

The film content has already had a beneficial overlap with our existing work, through its inclusion in a webinar on male activism and sexual health centred on the Condoms video. This is contributing to our longer-term work exploring the role of masculinities. Moving forward, we are integrating the Consent, Conception, Contraception, Condoms and Genetic Conditions films into our workshops and webinars and we will seek to build on this to reach a wider audience and increase our impact. This has already been done successfully with the young South Asian women's group workshops, and can only support and expand our work and encourage others to join in our mission to end harmful practices.

References and resources

Terrence Higgins Trust, the UK's leading HIV and Sexual Health Charity, https://www.tht.org.uk/

Thalassaemia Society UK, aims to improve the lives of people living with thalassaemia, a genetic blood disorder, <u>https://ukts.org/</u>

The Asian Women's Group/Healthwatch (2014). The Asian Women's well-being project Report prepared By Aziza Shafique,

https://mycouncil.oxfordshire.gov.uk/documents/s27414/Asian%20Womens%20Group%20 -%20Health%20Watch%20final%20report.pdf

Young Healthwatch Brighton and Hove and YMCA (2020). Exploring the views and experiences of young people from BAME (black, Asian and minority ethnic groups) backgrounds around local sexual health services,

https://www.healthwatchbrightonandhove.co.uk/sites/healthwatchbrightonandhove.co.uk/ files/Young-Healthwatch-BAME-Sexual-Health-report-April-2020.pdf

Young Women's Music Project, based in Oxford, provides an inclusive, supportive space for young women and non-binary people to get together to make music, learn new skills, express themselves, and grow in confidence, <u>https://www.ywmp.org.uk/</u>

Appendix A – '5C's' film versions available

| Film name | Version | Language | Duration | Age recommendation | | | |
|------------------------|--------------|----------|----------|--------------------|--|--|--|
| Consent | Full length | English | 7:47 | 16+ | | | |
| Consent | Full length | Punjabi | 7:47 | 16+ | | | |
| Consent | Full length | Urdu | 7:47 | 16+ | | | |
| Consent | Key Messages | English | 1:35 | All ages | | | |
| Consent | Key Messages | Punjabi | 1:35 | All ages | | | |
| Consent | Key Messages | Urdu | 1:35 | All ages | | | |
| Contraception | Full length | English | 7:04 | 16+ | | | |
| Contraception | Full length | Punjabi | 7:04 | 16+ | | | |
| Contraception | Full length | Urdu | 7:04 | 16+ | | | |
| Contraception | Key Messages | English | 1:30 | All ages | | | |
| Contraception | Key Messages | Punjabi | 1:30 | All ages | | | |
| Contraception | Key Messages | Urdu | 1:30 | All ages | | | |
| Condoms | Full length | English | 8:40 | 16+ | | | |
| Condoms | Full length | Punjabi | 9:56 | 16+ | | | |
| Condoms | Full length | Urdu | 9:51 | 16+ | | | |
| Condoms | Key Messages | English | 1:32 | All ages | | | |
| Condoms | Key Messages | Punjabi | 1:32 | All ages | | | |
| Condoms | Key Messages | Urdu | 1:32 | All ages | | | |
| Conception | Full length | English | 10:11 | 16+ | | | |
| Conception | Full length | Punjabi | 11:23 | 16+ | | | |
| Conception | Full length | Urdu | 11:01 | 16+ | | | |
| Condoms and the C-Card | Full length | English | 3:46 | 16+ | | | |
| Conception | Key Messages | English | 1:43 | All ages | | | |
| Conception | Key Messages | Punjabi | 1:43 | All ages | | | |
| Conception | Key Messages | Urdu | 1:43 | All ages | | | |
| Genetic Conditions | Full length | English | 7:24 | 16+ | | | |
| Genetic Conditions | Full length | Punjabi | 7:24 | 16+ | | | |
| Genetic Conditions | Full length | Urdu | 7:53 | 16+ | | | |
| Genetic Conditions | Key Messages | English | 1:39 | All ages | | | |
| Genetic Conditions | Key Messages | Punjabi | 1:39 | All ages | | | |
| Genetic Conditions | Key Messages | Urdu | 1:39 | All ages | | | |

Appendix B – Meet the team

Filmmaking team

Dot Pritchard – Project Manager



Dot is Project Manager at Oxford Against Cutting, working to raise awareness of female genital mutilation (FGM), forced marriage and issues around body image through education and conversation. Alongside her role at Oxford Against Cutting, Dot is a mentor with Refugee Resource and a trustee for The Young Women's Music Project. Dot holds a BA in Philosophy.

Hauwa Suleiman – Gender Specialist and BAED WORLDS Coordinator



Hauwa is a specialist in gender issues affecting women and girls and has been involved in peacebuilding since the age of 13. She has experience volunteering in Nigeria with programmes targeting vulnerabilities in internally displaced persons camps, orphanages and impoverished communities. She has recently completed an MA in Development & Emergency Practice, specialising in Disasters, Risks and Shelter.

Tanya Vyas – Social Media Communications Coordinator



As a Sikh woman born in Kenya who has lived in the UK, Tanya has three cultures which she intertwines in her daily life. She has a passion for raising awareness of inequality issues affecting women and the LGBTQ community. Tanya has a BA. Hons in International Marketing and Business and achieved a 'First' for her Masters in PR Management.

OAC Staff Interviewees

Sobia Afridi – Anti-HBA Facilitator



Sobia has been working in education for 25 years, at Oxford Brookes University, supporting under-represented groups to access higher education. She is passionate about tackling issues that some South Asian families consider "taboo" subjects, including forced marriage, first-cousin marriage, fertility, disability and adoption, and has a degree in International Relations.

Sabrena Afridi – Youth Volunteer



Sabrena is an A level student and hopes to go to university in 2022 to study Psychology. She loves horses and wishes she could ride more. Sabrena is proud to be a Young Champion and Volunteer for OAC and loved being involved in the 5Cs film about genetic conditions. Sabrena has thalassemia and will be raising awareness about this illness and the risks of cousin marriage as part of her work with the charity.

Ahd Hassan - Trustee



Ahd is a young person and representative of the Oxford Sudanese community. She has participated in OAC projects since the charity started, won a Volunteer's Award and most recently helped deliver lessons for her peers at Cherwell School. Ahd is now studying for a law degree at The London School of Economics and Political Science.

Keisy Lin Fong –youth volunteer



Keisy is passionate about the power of consent, female sexual liberty, and bringing about equality for the BAME and LGBTQIA+ community in all sectors of society. She was introduced to Oxford Against Cutting through volunteering to join an open conversation on the sex education system in the UK. Since then, she has helped share messages against harmful practices.

Rubie Marie – Ambassador and Anti-HBA Facilitator



Rubie Marie is a survivor of sexual abuse, domestic violence and psychological abuse, as well as a victim of forced marriage and honourbased abuse (HBA). She was married at the age of 15, and subsequently endured family disownment and poverty as a young single parent. Having returned to education, she has contributed to specialised education material for HBA, and is in the process of completing her autobiography.

Monica Majumdar-Choudhary – Anti-HBA Facilitator



Monica Majumdar-Choudhary is a Facilitator for Oxford Against Cutting, with expertise in body image and social media. She is the Marketing Manager for Retail Market Group and is currently pursuing a PhD at Queen Mary University of London, specialising in the psychological impact of skin lightening products for South Asian women. Monica is passionate about fighting stigmas in South Asian communities and empowering women and girls.

Invited experts, community group leaders and services to brainstorms Ł Members of OAC do pre brainstorm research coming up with 10 key points to be included in key messaging section Ł Brainstorm meetings (one for each film) where experts, community members and services discuss the key points of the subject matter to be included in the film, plus any important considerations Ł OAC finalize the 10 points which are then shared with all brainstorm participants, plus experts who couldn't make the brainstorm, to check that messaging is spot on. Hire translators to translate the key messaging into Urdu and Punjabi for the part 1, non-audio, versions of the films OAC meets with filmmakers to start planning the films and filming days OAC books interviewees for the filming days (a mixture of community members and services) OAC prepares questions for the interviewees and shares them with interviewees before the day Ψ OAC runs risk assessments on the filming day and collects media consent forms from interviewees Ψ Filming days Ł After filming days OAC goes through footage and marks timestamps for the filmmakers Ł Edit rounds Transcripts of each film made Ł OAC hires interpreters to record voiceovers of films in Urdu and Punjabi Ł Filmmakers put together all 3 versions of all 5 films (Eng, Urdu and Punjabi). Part 1 - key messaging Part 2 - interviewees being filmed Workshops and Web Cafes to show the film, discuss the subject matter and collect feedback on the film

Appendix C – Film-making process: flowchart

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Filmmaking team debrief

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Evaluation Report

Appendix D - Workshop questions

Genetic Conditions

- We are really lucky to have Dr Hall with us today who has expertise on genetic conditions in the South Asian community as a result of 1st cousin marriage. Dr Hall, please can you explain some of the conditions and health implications from a medical perspective?
- 2. Is cousin marriage important?
- 3. Should we rethink cousin marriages?
- 4. How do we start conversations with family and friends who are arranging cousin marriages?
- 5. Where can people under pressure to marry their cousin get support?

Contraception

- 1. How comfortable do you feel accessing sexual health services?
- 2. Why might you feel uncomfortable or hesitant accessing a sexual health service?
- 3. In what ways can contraception be helpful? (Please use the film as a guide)
- 4. Where can you access contraception / confidential support if you are considering using contraception?

Conception

- 1. Is there a pressure on women to have children soon after marriage?
- 2. Why might a woman feel ashamed if she can't conceive?
- 3. Do you think it's fair to blame a woman if she can't conceive?
- 4. How would you support a friend or family member if she was struggling with feelings of shame and pressure from the family to conceive?

Consent

- 1. Do you think there is an expectation on women to have sex with a man when he wants? If so, where do you think this expectation comes from?
- 2. What does consent mean to you? Do you agree with Momina, Keisy, Ahd and Sabrena?
- 3. How can we challenge the belief that sex is a 'wives' duty'?
- 4. How would you support a friend if she was being forced to have sex, whether that was by her husband, partner or someone else?

Condoms

- 1. There can be risks for young people if they are found to be having intimate relations. There can also be risks to young people if they are not using protection when having intimate relations. Discuss.
- 2. What challenges might someone, like Tribz, face when trying to get condoms?
- 3. Why is it important for someone to use a condom if they are sexually active?
- 4. If your friend told you that he was dating a girl and he wanted to get condoms, just in case they were intimate, what would you say?

Appendix E – Dissemination and evaluation activities – demographics

| | | | | Gender | | | | Ethnicity | | | | |
|---|-----------------|--------------------|-------------------------|--------|-------|-----|---------|-----------|------------------|-------|-------|---------|
| Workshop name | Total number | OAC/other staff | Health professionals | Others | Women | Men | Unknown | Asian | African or Black | Mixed | White | Unknown |
| Genetic conditions | 15 | 8 | 3 | 4 | 15 | 0 | 0 | 4 | 2 | 1 | 3 | 5 |
| Consent | 10 | 4 | 1 | 5 | 10 | 0 | 0 | 3 | 1 | 1 | 1 | 4 |
| Contraception | 12 | 2 | 1 | 9 | 12 | 0 | 2 | 7 | | | 1 | 4 |
| Condoms | 18 | 2 | 1 | 15 | 13 | 5 | 0 | | | | | 18 |
| Conception | 18 | 2 | 0 | 16 | 18 | 0 | 0 | 17 | | | 1 | |
| Young South Asian Women's group - consent | 8 | 3 | 0 | 5 | 8 | 0 | 0 | 5 | | | | |
| Young South Asian Women's group - contraception | 5 | 3 | 1 | 1 | 5 | 0 | 0 | 1 | | | | |
| Young South Asian Women's group - genetic | | | | | | | | | | | | |
| conditions | 5 | 3 | 0 | 5 | 5 | 0 | 0 | 5 | | | | |
| | 91 | 27 | 7 | 60 | 86 | 5 | 2 | 42 | 3 | 2 | 6 | 31 |

Appendix F – Welcome and Exit poll questions

Consent – welcome poll

- How knowledgeable do you feel about the subject of consent (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about the subject of consent (where 0=not at all confident and 5=extremely confident)?
- How did you hear about this workshop?

Consent – exit poll

- How knowledgeable do you feel about the subject of consent (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about the subject of consent (where 0=not at all confident and 5=extremely confident)?
- Has the workshop increased your understanding of ways to get support on these issues?
- How likely are you to recommend the film to others?

Contraception – welcome poll

- How knowledgeable do you feel about the subject of contraception (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about discussing contraception (where 0=not at all confident and 5=extremely confident)?
- How did you hear about this workshop?

Contraception – exit poll

- How knowledgeable do you feel about the subject of contraception (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about discussing contraception (where 0=not at all confident and 5=extremely confident)?
- How likely are you to recommend the film to others (where 0=not likely and 5=extremely likely)?
- Has the workshop increased your understanding of ways to get support on these issues? Y/N

Condoms – welcome poll

- How knowledgeable do you feel about the use of condoms (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about the use of condoms (where 0=not at all confident and 5=extremely confident)?
- How did you hear about this workshop?

Condoms – exit poll

• How knowledgeable do you feel about the use of condoms (where 0=not at all knowledgeable and 5=extremely knowledgeable)?

- How confident do you feel about the use of condoms (where 0=not at all confident and 5=extremely confident)?
- Has the workshop increased your understanding of ways to get support on these issues?
- How likely are you to recommend the film to others?

Conception – welcome poll

- How knowledgeable do you feel about the subject of conception?
- How confident do you feel about discussing conception?
- How did you hear about this workshop?

Conception – exit poll

- How knowledgeable do you feel about the subject of conception?
- How confident do you feel about discussing conception?
- Has the workshop increased your understanding of ways to get support on these issues?
- How likely are you to recommend the film to others?

Genetic conditions – welcome poll

- How knowledgeable do you feel about the subject of cousin marriage and issues such as genetic conditions (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about discussing cousin marriage and issues such as genetic conditions (where 0=not at all confident and 5=extremely confident)?
- How did you hear about this workshop?

Genetic conditions – exit poll

- How knowledgeable do you feel about the subject of cousin marriage and issues such as genetic conditions (where 0=not at all knowledgeable and 5=extremely knowledgeable)?
- How confident do you feel about discussing cousin marriage and issues such as genetic conditions (where 0=not at all confident and 5=extremely confident)?
- Has the workshop increased your understanding of ways to get support on these issues?
- How likely are you to recommend the film to others?

Appendix G – Film viewings and workshop feedback

Feedback on films overall:

I have watched a number of the films and think the format is excellent.

I am really looking forward to seeing the 5 Ms.

Anne Lankester, Named Nurse Safeguarding for Adults and Children, Oxfordshire Clinical Commissioning Group

Feedback on Condoms film:

"The workshop was done really well, especially with a topic like that, which can sometimes come down heavy (like a lecture or being told off). It was not rushed; it was a relaxed format, and the film content was good. I would have benefited from a film like that when he was younger - maybe not directly a film, but the awareness is key. Other forms of delivery of the content too, such as role-play, or voice-only or literature would be appreciated."

"It was really honest ... it's really going to be helpful"

"It's real and authentic"

"Giving young people knowledge and education is better – young people need to be aware of this. All secondary schools should give out tampons and condoms; my school has done an assembly on this..."

"I can understand exactly where the guys are coming from ... the way it's been put together and the guys spoke well and clearly, and help to understand what it's like" (Web Café participant)

Feedback on Genetic Conditions film:

"Thank you for sharing your film and your strong, beautiful daughter Sabrina with me. You are both powerful and gentle speakers at the same time - and it pitches the messages very, very well. Well done for having the courage to speak about your experiences. I was moved by the film and the issues it raises."

"Thanks for sharing this, I think it has gone onto the CAN website and it is a resource I will use for teaching" Clinical Lead for Clinical Haematology and Senior Specialist Nurse for people with sickle cell disease and thalassemia

Feedback via WhatsApp to facilitator:

Ah! You were both amazing. It was very moving, I found it very emotional watching. Sabrena is so beautiful and very articulate. you must be very proud. It was really interesting as I'd never realised thalassemia was linked to marrying 1st cousins. You are so good, doing so much awareness raising and your councillor work etc etc



"This is such a useful and powerful film. You and your daughter talk so calmly and reassuringly, even though the message is a BIG one! How wonderful to see your daughter growing up - she was a very young child when I met her at an event you held many years ago in aid of the charity. You must be so proud of her - and you should be proud of yourself for sharing your thoughts on this sensitive topic, which is vitally important to talk about within the community and beyond."

"Just finished watching the videos. (I really like the pa ra pum pum pummmm theme tune) :)"

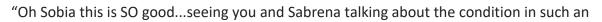
"Sobia, you and Sabrena have done a great job. The awareness will help so many people. It will make people think twice. You are a brave family. Sabrena is your flag carrier who faces it first hand. Mashallah, she is a true soldier. I'm so impressed and proud of her. It's people like her who I see as our role models."

"That is true most cousin marriages work well no problems what so ever however there are cases where I know the children are born disabled or a women can have internal problems too. So it is important that people are aware of all health issues that can be caused because of cousin marriage"

"Film is really good. It is so important to talk about these issues. More work needs to done to talk genetic conditions."

"Thought it was really interesting and obviously sparked conversations. The video is great, well done to both of you. Will have a think how we can use this."

"Really impressed with Sabrena"



with the amazing Afridi warmth and spirit \checkmark ...truly humbling! I waited till I had a proper quiet moment for it and am so glad I gave it my full concentration. Do tell Sabrena what a

superstar she is She is amazing. You have raised one strong young woman there - she will go far, I'm sure."

"I thought both of you came over really well with clear messages and where to get advice and support. Thank you for raising this as an issue."

"I have family in cousin marriages, but they don't talk about it... it 'happens to other people'"

"You're doing absolutely the right thing to raise awareness"

"Congratulations on running such an amazing workshop. You touched on loads of stuff I didn't know about before... honestly, I think it's important work that you're doing and to keep persisting with the community and the mosque.!

Feedback on Consent film:

| Forwarded message |
|--|
| From: Rachel Payne <rpre>crpayne@brookes.ac.uk></rpre> |
| Date: Tue, 6 Jul 2021 at 15:49 |
| Subject: Re: Consent film |
| To: Kate Clayton-Hathway < <u>kclayton-hathway@brookes.ac.uk</u> > |
| |
| Hi Kate, |
| Thank you so much for indicating interest in the consent education programme. I am aware of the work you are doing with Anne and Charoula, a brilliant project that hopefully our programme will be able to contribute to in some small way. |
| I watched the video with interest, thank you for sending me the link. this is exactly the kind of work that we want to develop, where we're addressing concerns and issues prevalent to particular groups so that we are unpicking the complexities of consent and how these can differ for different people. Ideally we want this to be student-led, with student voice amplified loud and clear. |
| It would be really useful to meet with the film makers; please do pass my email on. We are planning to develop the programme further next year and so if you'd like to participate, or have a chat about our project, let me know. |
| Best wishes. |
| Dachal |

The group of young South Asian women who watched the film as part of a workshop said that they liked the way it started with a WhatsApp conversation (they did ask if this was a real conversation). They found the film informative, and particularly liked that there were young people in the film.

"The conversation at the beginning – I bet people were expecting a different response. Having heard about forced marriage in the past, it always felt there was no way out. But the conversation was a great opening and a different way..."

"I really like the video for its hopeful messaging. That conversations need to be had ... We need to think about the accessibility of language... what does consent mean?"

"It's worth remembering that consent is not just about sex ... Tanya's bit at the end was good about other things also need consent..."

"... the bit on patriarchal norms and women as caregivers stood out"

Feedback on Contraception film:

"It was very helpful and increased my confidence – I felt it would help other people"

"It will be good for sharing on WhatsApp groups as al link and passed on by word of mouth ... would be better for the Urdu and Punjabi versions ..."

"It will be helpful. This group is generally confident about contraception – but others aren't."

Feedback on Conception film:

"...there is nothing else like this film".

"The topics discussed were very informative and the group members participated and were engaged. It was great to see the women feeling comfortable to discuss their own issues too. We also received great feedback and hope to arrange more sessions in the future."

"...it was empowering to hear other South Asian women discussing their fertility journey"

"the film was eye-opening, inspiring ... I could identify with the video"



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