Collaborative Filmmaking in Public Health Research: Findings from Piloting the Method to Explore Traditional Menstrual Practices in Far-West Nepal

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Background

Fig. 1: Collaborative Filmmaking was piloted with seven girls in far-west Nepal.

References: Sara Baumann

In this study, we aimed to develop and pilot a novel, qualitative participatory arts-based research method called **collaborative filmmaking**. This method engages community producers (CPs) as collaborators, from the initial generation of ideas to answer the research question, through data collection, analysis, and dissemination. Collaborative filmmaking was used in this study to collect data on menstrual practices in far-west Nepal. Throughout Nepal, women and girls face numerous restrictions during menstruation, which leave them vulnerable to poor health outcomes. One extreme menstrual restriction is called *chhaupadi*, where women and girls are banished from their homes to sleep in a hut or animal shed during menstruation (Fig. 2 on page 4). Under the century-old, culturally and religiously rooted practice, menstruating Hindu women and girls are considered impure. Evidence reveals that some menstrual practices leave women and girls vulnerable to poisonous snake bites, hypothermia, dehydration, pneumonia, asphyxiation, rape, and even death.

The use of visual methods, such as photography and film, have been widely used by ethnographers and sociologists to understand practices and beliefs by engaging multiple
senses in fieldwork. Visual methods have become an important tool for uncovering subtle differences in behaviors and social practices.

This study specifically aims to:

- Pilot and refine Collaborative Filmmaking as a research method; and
- Use the method to generate and disseminate knowledge about menstrual practices in far-west Nepal as they relate to public health outcomes
Images for this section:

Fig. 2: A woman rests in her chhaupadi goth (shed) during her menstrual cycle.

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Methods

The team conducted a feasibility pilot with seven girls aged 16-18 living in a village of Kanchanpur district of far-west Nepal, located in the country’s southern, lowland region. We recruited participants within one village for maximum diversity, with participants coming from four caste groups and two religious backgrounds. The inclusion criteria were:

1. Reached menarche; and
2. Experience monthly menstrual cycles.

Ethics approval was obtained from the University of Pittsburgh and Nepal Health Research Council. Written informed consent and assent was obtained.

The following steps were completed as a part of the Collaborative Filmmaking process:

- **Step 1 - Workshop:** Participants were trained as community producers (CPs) in a two-day, community-based filmmaking workshop. Fig. 3 on page 6
- **Step 2 - Filmmaking:** Each CP was given a small, durable camera and created a short film highlighting her menstrual practices.
- **Step 3 - Co-analysis Sessions:** Each CP collaborated with the Principal Investigator and translator to analyze her film in a co-analysis session. Fig. 4 on page 6
- **Step 4 - Group Screening and Focus Group Discussion (FGD):** The study team held a Group Screening of all the films together with all the CPs, and discussed the various menstrual practices seen in the films.
- **Step 5 - FGD of Collaborative Filmmaking Method:** A second FGD was held with the CPs focusing on their experiences throughout the collaborative filmmaking process, and recommendations for future studies.
- **Step 6 - Community Screening:** The short films were shared at a community screening in the village. Family members, neighbors, a government official, and health post staff attended. Fig. 5 on page 7

Additional details about the application of this method can be viewed in this overview video: Collaborative Filmmaking Research Method Video
Fig. 3: Community producers were trained in a practice-based two-day filmmaking workshop.

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Fig. 4: Each community producer participated in a co-analysis session with the research team to discuss her film.

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**Fig. 5:** Community producers were invited to screen their films at the end of the data collection period in their community.

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Findings

The films highlighted an array of menstrual practices such as **keeping distance, ritual cleansing, and restrictions in touching, washing, cooking, among others.** Though there are a number of commonalities among participants, the study also revealed a number of distinctions in menstrual practices. **Table 1** outlines a sample of the menstrual practices found in this study.

**Table 1. Menstrual Practices**

<table>
<thead>
<tr>
<th>Menstrual Practices</th>
<th>Images and Quotes from Films</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keeping distance</td>
<td>Fig. 6 These are my dishes that I use for breakfast and dinner. This is the shed where I sleep while I am menstruating.</td>
</tr>
</tbody>
</table>

*References*: Behavioral and Community Health Sciences, University of Pittsburgh Graduate School of Public Health - Pittsburgh/US

"This is the shed where I sleep when I am menstruating. There is a house near the shed. Since there is a house nearby we do..."
<table>
<thead>
<tr>
<th>Kinjal, 16 years old, Dalit, Hindu</th>
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<tbody>
<tr>
<td><strong>not feel afraid or in danger when we sleep here. We sleep peacefully.</strong></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Ritual cleansing</th>
</tr>
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<tbody>
<tr>
<td><strong>Fig. 7</strong></td>
</tr>
<tr>
<td><strong>References</strong>: Behavioral and Community Health Sciences, University of Pittsburgh Graduate School of Public Health - Pittsburgh/US</td>
</tr>
<tr>
<td>&quot;<strong>Today is the fifth day of my period. I took a bath and now I am going to drink the cow urine. Without drinking the cow urine we will not be free to go back to the house. We have to drink it.</strong>&quot;</td>
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</tbody>
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<th>Maya, 18 years old, Dalit, Hindu</th>
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</tr>
</tbody>
</table>
When I am menstruating I do not touch the plants. In our culture, it is said that if we touch the plants and trees that give fruit when menstruating, they will die. So we do not touch them when menstruating.”

Srijana, 18 years old, Brahmin
Today I am menstruating so I cannot touch my friends. I am sitting far from them.

Sunita, 18 years old, Chhetri, Hindu
<table>
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<th>Kinjal, 16 years old, Dalit, Hindu</th>
</tr>
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<tbody>
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<td>&quot;When we are menstruating we bathe here (in the river). Our family does not let us bathe in the house. In our religion, my family members follow so many discriminatory practices. The water is so dirty so we come here only when we are menstruating to bathe. When we are not menstruating we bathe and wash our clothes at home.&quot;</td>
</tr>
</tbody>
</table>

**Fig. 10**

**References:** Behavioral and Community Health Sciences, University of Pittsburgh Graduate School of Public Health - Pittsburgh/US

"When we are menstruating we bathe here (in the river). Our family does not let us bathe in the house. In our religion, my family members follow so many discriminatory practices. The water is so dirty so we come here only when we are menstruating to bathe. When we are not menstruating we bathe and wash our clothes at home."

Kinjal, 16 years old, Dalit, Hindu
"I feel bad but in Christian culture, we do not follow any restrictions. I also cook the food when I am menstruating. This is my kitchen. I go in the kitchen when I am menstruating."

Mala, 18 years old, Chhetri, Christian

**Fig. 11**

**References:** Behavioral and Community Health Sciences, University of Pittsburgh Graduate School of Public Health - Pittsburgh/US

"I feel bad but in Christian culture, we do not follow any restrictions. I also cook the food when I am menstruating. This is my kitchen. I go in the kitchen when I am menstruating."

Mala, 18 years old, Chhetri, Christian
The reasons for practicing these menstrual traditions included religious and spiritual beliefs, family tradition, negative consequences if they are not practiced, social pressure, and guilt.

**Religious/Spiritual Beliefs:** "This is practiced from the past and we should not go inside [the house because] God is there, and if we go inside and touch [things] it is a sin. So that is why we sit separately while menstruating." Onsari, 17 years old, Janajati, Hindu

**Family Tradition:** "It’s from our grandparents, mom and my mom’s sister. We have to follow what they say, we have to obey." Srijana, 18 years old, Brahmin, Hindu
**Negative Consequences:** "I cannot touch my mother. If I touch her then she will be sick." Sunita, 18 years old, Chhetri, Hindu

**Social Pressure:** "Everyone in the society follows these practices. They go to the river, and dry their clothes near the roadside." Maya, 18 years old, Dalit, Hindu

**Guilt:** "Now I am menstruating, but I still come to church. We do not have restrictions so we can go inside the church when menstruating. We feel awkward but we have to come. People say, 'You are menstruating and you are going here and there?' [so] we sometimes feel afraid to come here when we are menstruating but still we have to come to church. We come because our [Christian] culture is like this and we do not have any restrictions. We feel afraid because people talk about us if we are menstruating and going to church. What to do? We have to come." Asha, 18 years old, Dalit, Christian
Interpretation

Results from the pilot illustrate that collaborative filmmaking is a valuable method for generating scientific knowledge in public health research because it

- Effectively engaged community members as partners and provided them with a set of skills to generate and share their knowledge and beliefs;
- Facilitated the generation of sensory knowledge, which assisted in developing a nuanced understanding of different menstrual practices and beliefs, and how those differed between caste and religious backgrounds;
- Encouraged community producers to reflect upon their personal beliefs about menstrual practices; and
- Created an end product in the form of a documentary film that was used by the community producers and researchers to raise awareness about different menstrual practices in far-west Nepal at the community and national levels, and provided a unique opportunity for social change and consciousness raising.

Participants from four different castes and two religious backgrounds practiced a range of menstrual traditions. Hindus from all four castes in this study practiced menstrual restrictions, whereas Christians from two different castes did not have any restrictions when menstruating. Among the Hindus, those from different castes practiced a range of menstrual restrictions, with Janajatis practicing the fewest restrictions (e.g. can touch the kitchen, but cannot enter) (Fig. 13 on page 18), Chhetris and Brahmins having more restrictions (e.g. sleeping outside the home when menstruating, keeping distance from all people) (Fig. 14 on page 18), and Dalits having the most restrictions (e.g. sleeping away from their home in the goth (shed), and bathing far from home in the river) (Fig. 15 on page 19). This study revealed that in one village alone, menstrual practices and restrictions vary widely, and are perpetuated by religious/spiritual beliefs, family traditions, social pressure, and the belief that negative consequences will arise if these menstrual practices are not sustained.

In designing menstrual health interventions and policies, a range of menstrual practices and beliefs must be considered in order to ensure that programs for improving menstrual health are context-specific in the ethnically and religiously diverse Nepal, and use data about fundamental causes of harmful practices in order to address the root causes of traditional harmful menstrual practices.
Images for this section:

Fig. 13

In our culture we cannot go inside the kitchen (when we are menstruating) but we can touch the kitchen.

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Fig. 14

Today I am menstruating and I cannot go inside to sleep so I have a separate place. I sleep here when I am menstruating.
We sit here when we are menstruating and we eat our food here.

Fig. 15
References


Sara Baumann is a PhD student in the Department of Behavioral and Community Health Sciences in the Graduate School of Public Health at the University of Pittsburgh. Her research is at the intersection of visual methods and public health, with a focus on participatory filmmaking methods and community-based participatory research. Her current research explores traditional menstrual practices in Nepal, where she uses mixed methods to explore beliefs and practices, behavior change, and national policy around menstrual health. She is also the creator of the short film series, Cycle Series, that investigates lesser-known experiences of menstruation in Pittsburgh, and uses film as a dissemination and advocacy tool in public health. She has worked on issues related to homelessness and transmasculine experiences of menstruation. For more information about her work please visit www.saralizabaumann.com or email her at sarabaumann@pitt.edu.