

Capacity Building of Adolescent Girls

(Project Report)



Supported by:



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Rashtriya Madhyamik Shiksha Abhiyan

Implemented by



STATE RESOURCE CENTRE, INDORE, MP

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CAPACITY BUILDING OF ADOLESCENT GIRLS THROUGH LIFE SKILLS EDUCATION

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CAPACITY BUILDING OF ADOLESCENT GIRLS THROUGH LIFE SKILLS EDUCATION

1.1 INTRODUCTION

Adolescence is a critical stage in growth and development of an individual. It is a stage of transition from childhood to adulthood. Adolescence is marked by rapid physiological and psychological changes. This is also the phase of risk taking, learning to solve own problems, taking decisions on crucial issues, dealing with peer pressure and coping with stress. Thus, adolescence is a turning point in one's life and a period of increased potential. There is a need to focus on physiological, emotional and socio-cultural aspects of the adolescents. One way of addressing these special needs of adolescents is to educate them about life skills, so that they can cope with the challenges and pressures of this phase. Life skills education promotes mental well-being in young people and equips them to face the realities of life. According to WHO, life skills are 'living skills' or abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life. Life skills are used at every moment of our lives in various situations - choosing friends, career, developing or breaking habits, making and breaking relationships, following discipline, understanding one's needs, solving problems, interacting with teachers and parents. Life skills education must also include contents that provide authentic and correct information about physiological changes occurring during adolescence and related behaviour patterns. In short, life skills education during adolescence can help individuals to cope better with the challenges of this phase; and to develop into better informed and healthy adults.

Need and importance of life skills education is articulated in the following statement of Ms. Radha Rekwal, a student of class XI, living in Indore (Madhya Pradesh), who participated in life skills programme documented here.

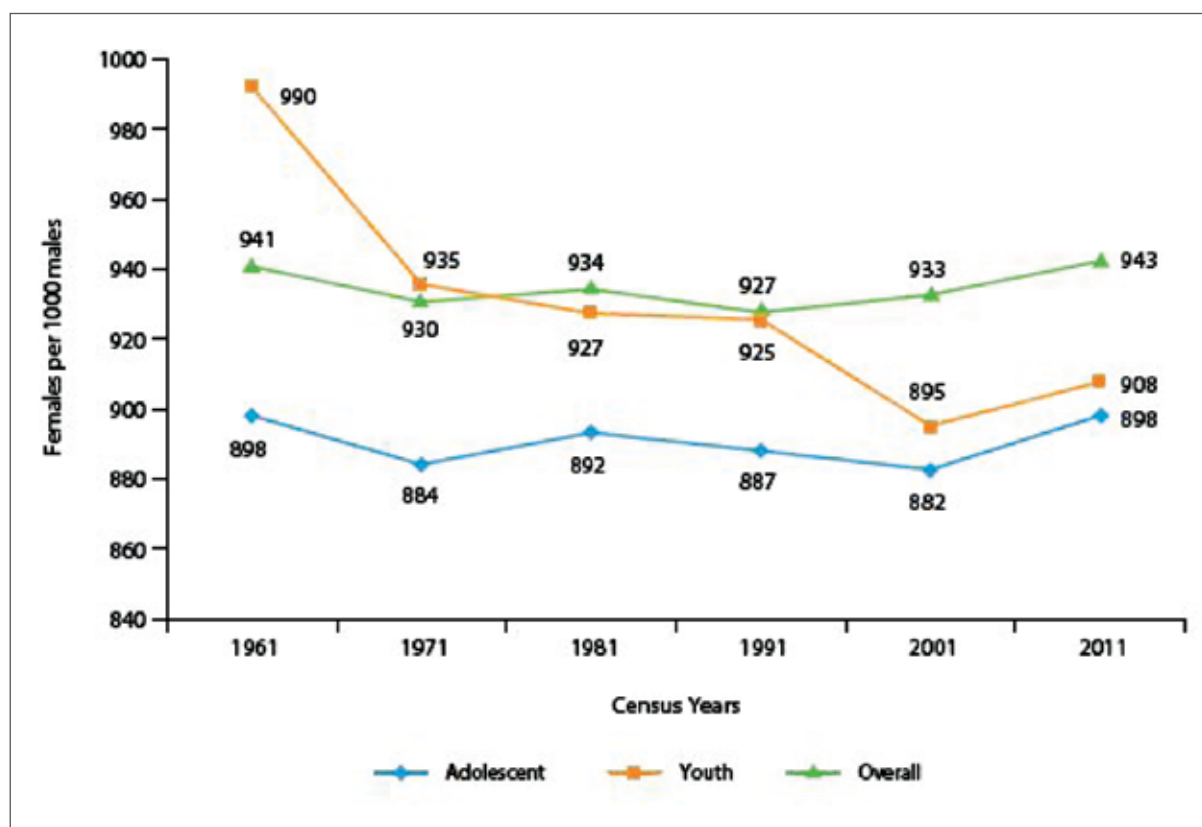
‘परियोजना से हमारी अच्छी एवं सकारात्मक सोच बनी। आत्मविश्वास एवं हिम्मत के साथ कठिन परिस्थितियों का सामना करने के बारे में सीखा। मेरे बात करने एवं बात रखने के तरीके में भी बदलाव आया। मैं चाहती हूँ कि यह जीवन कौशल शिक्षा गाँव में और ग्राम स्तर के स्कूल में भी चलाई जाए।’

“Through the project, we have developed positive thinking and at the same time learned to face difficult situations with self-confidence and courage. Change has also come about in the way I talk and put forth my views. I want that life skills education should also be provided at village and village school levels”

The significance of life skills education is much more for a country like India which has one of the largest adolescent populations in the world. According to Census 2011, adolescent population (10 – 19 years) in India is 236.5 million, forming 19.6% of total population of India. It is higher than China's adolescent population of 191.4 million. Going by the numbers, almost every fifth person in India is an adolescent. Investing in this segment of population is the best way to leverage the nation's competitive advantage – its demographic dividend. One of the areas of investment is life skills education for adolescents. It helps them make informed decisions, solve problems, think critically and creatively, communicate effectively, build healthy relationships, empathize with others and manage their lives in a healthy and productive manner.

The need to build life skills among adolescent girls is all the more pressing as they suffer from gender based discrimination and are at a disadvantage almost every sphere of life in our country. The gender inequality is also reflected in sex ratio of adolescents, youth and overall population (Chart 1.1). It is evident that sex ratio of adolescents has remained lower than the other two population groups i.e. youth and overall since 1961. Further, the sex ratio of adolescents has shown increase and decline in alternate censuses.

Chart 1.1: Trends in Sex Ratio (1961 to 2011 Census) – India



Realising that adolescents have special needs, Ministry of Human Resource Development, Government of India has also initiated Adolescence Education Programme (AEP). It aims to empower young people with accurate, age appropriate and culturally relevant information, promote healthy attitudes and develop skills to enable them to respond to real life situations in positive and responsible ways. National Council of Educational Research and Training (NCERT) co-ordinates the program and works through both curricular and co-curricular formats to contribute towards holistic development of young people in pursuance of the National Curriculum Framework, 2005. National Population Education Programme (NPEP) is being implemented in 30 States and Union Territories. It aims to develop awareness and positive attitude toward population and development issues. This will lead to responsible behaviour among students and teachers and indirectly, among parents and the community at large. Imparting authentic knowledge to learners about Adolescent Reproductive and Sexual Health (ARSH) concerns, inculcating positive attitude and developing appropriate life skills for responsible behaviour are also the objectives of NPEP.

Madhya Pradesh is the second-largest state in the country by area. With over 75 million inhabitants, it is the fifth-largest state in India by population. It has 16.01 million adolescents (10 – 19 years) forming 22.04% of its total population. Sex ratio among adolescents of Madhya Pradesh is better than the national average of this group. According to Census 2011, sex ratio of adolescents in Madhya Pradesh was 902 females per thousand males which was lower than state's overall population ratio of 931 but higher than that of youth age group (881). Notwithstanding better sex ratio of adolescents, the UNFPA document reveals that 52% adolescent girls in Madhya Pradesh suffer from mild to severe anaemia; and 74% adolescent girls are thin and moderately/severely thin (Source: Youth Info India – Madhya Pradesh, UNFPA, n.d.). These health indicators of adolescent girls are just a tip of the iceberg.

In this context, the State Resource Centre, Indore with support from UNFPA and Rashtriya Madhyamik Shiksha Abhiyan (RMSA), Madhya Pradesh initiated a pilot project to impart life skills education to adolescent girls studying in 43 hostels established under RMSA in 8 districts of Indore Division of Madhya Pradesh. The present document gives a detailed account of this partnership and evidence of its impact in forthcoming sections.

1.2 PROJECT PARTNERS

State Resource Centre, Indore established in 1985, is a resource support organisation having long standing experience in adolescent development programmes supported by UNFPA and other international donor organisations. It designed and implemented the present project of life skills education for adolescent girls of RMSA hostels in Madhya Pradesh.

Rashtriya Madhyamik Shiksha Abhiyan, Madhya Pradesh, a Government of India sponsored mission being implemented by Madhya Pradesh Government, is aimed at providing quality secondary education. RMSA, Madhya Pradesh, partnered and facilitated the project on imparting life skills education to girls studying in the hostels run by them.

United Nations Population Fund (UNFPA) provided technical assistance and financial support to the project.

1.3 PROJECT SETTING

Rashtriya Madhyamik Shiksha Abhiyan (RMSA) is a Government of India sponsored scheme, implemented in partnership with the State Governments. It aims at making quality secondary education available, accessible and affordable to all adolescents and young persons. In order to prevent drop out after elementary education level and to retain girls in secondary level education, the scheme has the provision of hostels. The scheme is mandated to set up a 100-bedded girl's hostel in each of the 3479 Educationally Backward Blocks (EBBs) of the country. Female students within the age group of 14-18 years, studying in classes IX to XII, belonging to SC, ST, OBC, minority communities and BPL families form the target group of the scheme.

Under Rashtriya Madhyamik Shiksha Abhiyan, the government of Madhya Pradesh has established 198 girls' hostels in which around 15000 high school girl students are enrolled. It was observed that the girls mostly dropped out after 8th class because of distant location of schools for next level. To address this issue and retain girls in the education system, RMSA hostels were established. The girls staying in these hostels receive education from classes 9th to 12th. Residents of these hostels are mostly from rural and tribal areas. In these areas, child marriage is still prevalent, superstitions and taboos are widely practised. Information and awareness about reproductive and sexual health and life skills issues is seldom provided in such settings. The project for life skills education was designed and implemented in 43 RMSA Hostels in eight districts of Indore division of Madhya Pradesh covering 4300 adolescent girl residents.

1.4 OBJECTIVES

The project was implemented over a period of two years beginning July 25, 2015 with the following objectives:

- To enhance opportunities for adolescent girl students enrolled in RMSA hostels to achieve their goals by providing information on reproductive and sexual health, gender issues, life skills and overall personality development so that child marriages can be averted.
- To effectively reach out to adolescent girls with reproductive health knowledge and life skills education.
- To improve the capacities of hostel wardens and selected teachers.
- To generate evidence on effective peer education approaches especially in residential settings.

1.5 PHYSICAL TARGET

The project covered 4300 adolescent girls of class IX – XII staying in 43 Hostels of RMSA (attached to 43 schools) located in Educationally Backward Blocks of Indore Division in Madhya Pradesh.

1.6 TIMELINE

The project of Capacity building of Adolescent girls was initiated on 25th July 2015 and was concluded to on 30th September 2017. In the span of around 2 years, the project key activities and deliverables were as follows –

2015

- Project Management Team recruited
- Baseline Survey for Knowledge, Attitude and Practices of girls in RMSA Hostels
- Planning and Development of resources materials with UNFPA and RMSA
- Development of Manual and Workbook called “Pehchaan” Part-1
- Development of Teaching Learning Materials like “Snake Ladder Board Game”, Broken Square etc.
- Orientation of District Officials-Education of Indore Division
- Capacity Building of Wardens & Teachers for Manual “Pehchaan” Part-1
- Selection of “Peer Educators”
- Capacity Building of “Peer Educators”
- Monitoring and Supporting in implementation of Project

2016

- Capacity Building of Peer Educators on Manual “Pehchaan” Part-1
- Development of Manual and Workbook called “Pehchaan” Part -2
- Orientation of Principals of RMSA Hostels
- Capacity Building of Warden, Teachers and Peer Educators for Manual “Pehchaan” Part -2
- Conducting Social Action Projects in 9 villages during Summer Vacation
- Initiated Extra Curricular activities like Question Box, Health Check-ups and Counselling of girls
- Monitoring and Supporting in implementation of project

2017

- Completed sessions of “Pehchaan” Part - 2 and workbook with girls of hostels
- Career counselling session conducted in hostels
- Social Action Projects conducted in 418 villages during summer vacations
- End Line Survey of Knowledge Attitude and Practices to assess changes after Life Skills Education sessions
- Organizing “Kishori Sammelan”
- Monitoring and Supporting in implementation of Project

1.7 MAIN STRATEGY

1.7.1 Designing of Need Based Life Skills Education Curriculum

The starting point of strategy was to understand the needs of beneficiaries and other stakeholders; and to design and develop appropriate curriculum, material and training programmes suiting these needs for developing life skills.

1.7.2 Developing Common Understanding among Stakeholders

Developing a common understanding among different stakeholders including officials of RMSA, line departments, UNFPA and Principals about objectives and other components of the project was another dimension of the project strategy. This was achieved through a series of meetings and orientation programmes.

1.7.3 Training and Capacity Building of Wardens and Teachers of RMSA Hostels and Selected Girls as Peer Educators

Capacity building of wardens of RMSA Hostels and teachers attached with them and of selected girls as Peer Educators, to impart life skills to target beneficiaries through training and other activities was built into the project strategy. Modular training programmes for them with the help of specially designed need based manual developed for the purpose was part of this strategy. Other specially designed material, onsite hand-holding & supervision and involvement in planning and implementation of other extracurricular activities were also envisaged as strategies for capacity building of the trainers including peer educators.

1.7.4 Education and Empowerment of Adolescent Girl Students of RMSA Hostels

Sessions on Life Skills education were conducted for RMSA hostel girls with the help of specially developed manual and material by trained peer educators, wardens and teachers. Other hostel based activities were also conducted for empowerment of these girls. Social action projects were undertaken in villages for averting child marriages, promoting health and nutrition of girls. Handholding of peer educators was also done for disseminating information and initiating actions in hostels, families and their communities.

1.7.5 Developing Linkages

Linkages were developed with other initiatives implemented by different line departments for maximisation of project outcomes through convergence.

1.7.6 Generating Evidence on Effectiveness of Project Interventions

Baseline and End-line KAP (Knowledge, Attitude and Practice) surveys were also conducted and evidence has been generated on the outcome of the project interventions.

1.8 ACTIVITIES

1.8.1 Designing of Need Based Life Skills Education Curriculum

Several consultation meetings were held with different stakeholders to develop an understanding of needs of the girls residing in 43 target hostels of RMSA. The stakeholders included officials of RMSA, line departments, UNFPA and experts of life skills education & training. Focus of meetings with officials was mainly on developing a sound strategy for implementation and core contents of life skills education. Selected hostels were visited and discussions were also held with target beneficiaries to assess their needs related to life skills education and understand

the profile of their families and communities. In addition to this, visits were also paid to a few target villages to gather first hand impressions about the background of target beneficiaries. Discussions were also held with hostel wardens and teachers of schools attached to them. The purpose of these meetings was mostly to assess potential and perceptions of these stakeholders about life skills education for the girls and its effective delivery in participatory mode.

- Self- Identity and Self-Awareness
- Interpersonal Relations
- Health (Physical and Mental)
- Changes during Adolescence
- Nutrition and Health
- Gender and Sexuality
- Child Marriage
- Reproductive Health
- Substance Misuse and its Ill-Effects
- Social Action
- Career Guidance / Counselling

These meetings and consultations led to the consensus that in given scenario of target beneficiaries, core life skills advocated by WHO shall be offered in conjunction with adolescent reproductive and sexual health contents emphasized by MHRD and those related to key social issues like gender & child marriage around which much sensitivity needs to be built.

In workshop mode, a group of life skills experts and representatives of stakeholders agreed on the contents to be included in the curriculum for RMSA hostel girls.

1.8.2 Development of Training and Teaching Learning Material

Experts from the fields including life skills, SRH content development and training worked around the above mentioned content areas to develop the syllabus and material for its delivery appropriate for the project setting. The following material was developed by the expert group:

- a. **Training Manual ‘Pehchaan’:** A manual for training adolescent girls on Life Skills was developed and used in the project. The ‘Pehchaan’ manual was based on curriculum mentioned in preceeding paragraphs and contents developed around it. On each theme of the curriculum, a module was developed which could be delivered independently. Thus, in all there were 11 Modules and 26 sessions (13 sessions each in Part 1 & 2 of Pehchaan) in the curriculum. Each module had inter-related sessions. The duration of various sessions of ‘Pehchaan’ manual varied from 60 to 90 minutes. The entire contents of the manual were divided in two parts named as ‘Pehchaan’ Part -1 (having 4 Modules) and ‘Pehchaan’ Part -2 (having 7 Modules). Overview of the ‘Pehchaan’ manual is as under:

PEHCHAAN PART - 1	
Module	Session
Self- Identity and Self-Awareness	<ul style="list-style-type: none"> ■ Introduction to Self ■ Me and my Identity ■ Self-Esteem and Self- Confidence
Interpersonal relations	<ul style="list-style-type: none"> ■ Leadership Development ■ Team Work ■ Communication Skills ■ Interpersonal Behaviour and Relations
Health (Physical and Mental)	<ul style="list-style-type: none"> ■ Health ■ Managing Emotions (Stress, Anger) ■ Problem Solving and Decision Making
Changes during Adolescence and Adjustments	<ul style="list-style-type: none"> ■ Physical Changes ■ Understanding Menstruation and Hygiene ■ Emotional and psycho-social changes

PEHCHAAN PART - 2	
Module	Session
Nutrition and Health	<ul style="list-style-type: none"> ■ Food and Nutrition ■ Anaemia during Adolescence – reasons and effects
Gender and Sexuality	<ul style="list-style-type: none"> ■ Gender - Stereotyping, Discrimination and Ill-Effects ■ Understanding Gender based Violence and Protection from it
Child Marriage	<ul style="list-style-type: none"> ■ Child Marriage- ill-effects and prevention
Reproductive Health	<ul style="list-style-type: none"> ■ Reproductive Process ■ Sex Determination ■ HIV – Prevention, Management and Misconceptions ■ Reproductive Tract Infections
Substance Abuse and its Ill-Effects	<ul style="list-style-type: none"> ■ Reasons for Substance Misuse during Adolescence ■ Protection from Addiction and de-Addiction
Social Action	<ul style="list-style-type: none"> ■ Social Action
Career Guidance / Counselling	<ul style="list-style-type: none"> ■ Searching for Job Opportunities

The sessions of the 'Pehchaan' manual were based on 'Experiential Learning Cycle' approach and participatory methodology. Training techniques included brainstorming, role plays, situation analysis/ case studies, group discussion/exercise, quiz, presentation, analysis of News and advertisements. The manual was extensively used for training of trainers as well as for conducting life skills education sessions for the girls of RMSA Hostels.

- b. Workbooks:** In order to facilitate reinforcement of learning, a separate workbook for each part of 'Pehchaan' manual was developed. These workbooks were meant for the girls to note down the important learning or takeaways from the sessions of the manual. Copies of the workbooks were provided to all target beneficiaries. These workbooks not only reinforced learning but also helped the girls in analysis of self.
- c. Teaching Aids:** Teaching-learning was further enriched with the help of teaching aids developed under the project which included:
- Broken square
 - Snakes & ladders board game
 - Cycle rally based game
 - Toran
 - Story cards

Apart from the teaching aids developed under the project, the following teaching aids were sourced from other agencies also:

- Apron for explaining reproductive system from CHETNA, Ahmedabad
- Menstruation cycle chart from JATAN, Udaipur
- Kawad booklet from JATAN, Udaipur



A set of all teaching aids was provided to each hostel and was used for conducting the activities of the project.

1.8.3 Orientation and Training Programmes

- a. **Orientation of District Officials:** District Project Coordinators District Educations Officers, Additional District Project Coordinators and School Principals associated with RMSA hostels were oriented about life skills and the present project. A one-day programme was organised for the purpose in which participation of Divisional Officers from Education, Health and Women and Child Development Department were ensured to seek convergence. During this programme, participants developed an activity calendar of the project and decided upon the specific sessions to be conducted by wardens, teachers and peer educators as lead facilitator. Involvement of stakeholders in project planning ensured greater ownership, participation and support in implementation of the project.
- b. **Orientation of Principals:** A one day orientation was also organised exclusively for all principals of schools associated with 43 RMSA Hostels covered under the project. The key objective of the program was to sensitize participants of the project on the concepts of Life Skills and Adolescent Health and role of different stakeholders.

The orientation programme helped in proper selection of teachers to act as facilitators, deputing selected teachers and wardens for project work and smooth implementation of the project.

- c. **Training of Teachers and Wardens as Trainers:** At the stage of project conceptualisation itself, it was decided that wardens and selected teachers attached with the RMSA hostels would be engaged to conduct life skills sessions particularly those conveying technical and culturally sensitive information (e.g. related to reproductive health). Therefore, a team of wardens and teachers associated with target RMSA Hostels was identified. The selection of wardens was predetermined by virtue of their position in the target hostels. Selection of teachers was done based on the criteria such as level of interest, communication skills, taking initiative etc.

Teams of trainers from SRC, Indore, trained a total of 123 Wardens and teachers from 43 Hostels for 3 days each in different batches. This 3 – day training was based on delivery of part – 1 of Pehchaan. At a later stage, a similar training was imparted to 110 wardens and teachers on Part – 2 of Pehchaan manual. Participatory sessions on the



following topics were conducted during the training program:

- What is adolescence & profile of adolescents
- Characteristics of adolescents
- Problems & needs of adolescents
- Life skills education
- Facilitation skills
- Experiential learning cycle
- Introduction to Pehchaan manual
- Demonstration session from manual
- Health
- Reproductive health
- Nutrition
- Gender
- Practice/mock sessions from Pehchaan manual

A variety of different training techniques were used to make the training more participatory. Practice sessions were included as hands on training for the participants so that they develop the skill to conduct sessions on life skills education. The training helped the participants in gaining knowledge on issues related to adolescents; bring about attitudinal change in dealing with adolescents, build capacity to work with adolescents and to empower them using a participatory approach.

Ms. Manju Srivastav, trained teacher of Government Higher Secondary School, Jobat village, Alirajpur district shared her feedback as-

"I always wanted to do such initiative; through my training I am now able to provide information on reproductive health and other related issues in much better way. I not only support in the sessions of hostel but conduct sessions in other schools as well. This information needs to spread throughout our village as till today there are incidences where women had to sit on ashes during their periods."

- d. Training of Selected Beneficiaries as Peer Educators:** Involvement of selected beneficiaries in implementation of the project especially the conduct of sessions on life skills based on Pehchaan manual was part of the project strategy. The selection process of peer-educators was based on various activities and games conducted in the RMSA hostels. During this selection process, active girls with qualities of leadership, communication skills, self-motivation, willingness to learn and be a change agent were selected for induction in training as Peer Educators. More than 275

adolescents were selected and trained for the purpose i.e. approximately 5 peer educators for each hostel for conducting the life skills sessions. The peer educators were trained in different batches and each batch was provided 5 days training input of Part – 1 of Pehchaan manual and 5 days on Part – 2. The following topics were included in the training:

- What is adolescence & profile of adolescents
- Characteristics of adolescents
- Problems & needs of adolescents
- Life skills education
- Facilitation skills
- Experiential learning cycle
- Introduction to Pehchaan manual
- Demonstration session from manual
- Communication skills
- Health
- Reproductive health
- Nutrition
- Gender
- Right age at marriage
- Career guidance
- Practice/mock sessions from Pehchaan manual

Focus of the training was more on practice of conducting the sessions and therefore peer educators were given the opportunity to conduct mock sessions. The training led to a change in knowledge, attitude and skills of participants. This was also reflected from the analysis of pre-test and post-test administered to the participants.

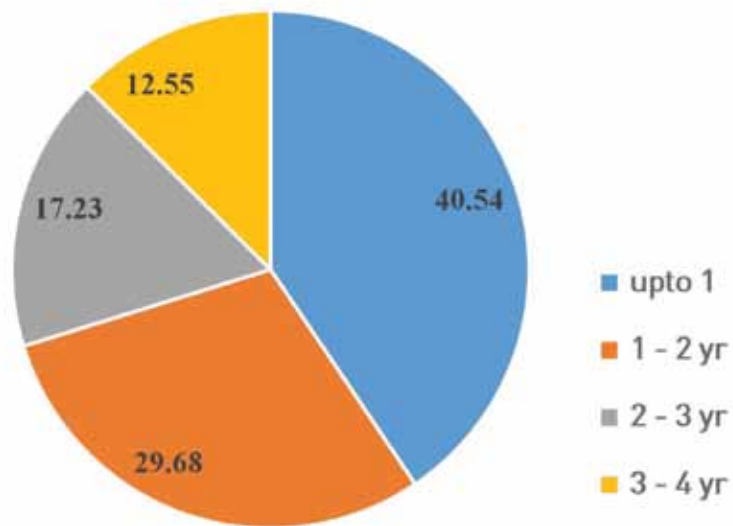
1.8.4 Education and Empowerment of Adolescent Girl Students of RMSA Hostels

Various activities were conducted with the target beneficiaries in RMSA hostels to educate and empower them with life skills. Initiated simultaneously in all hostels, these activities have been described in forthcoming parts of this document.

- a. Profile of Target Beneficiaries:** It is important to describe the profile of adolescent girls to whom life skills education was imparted.

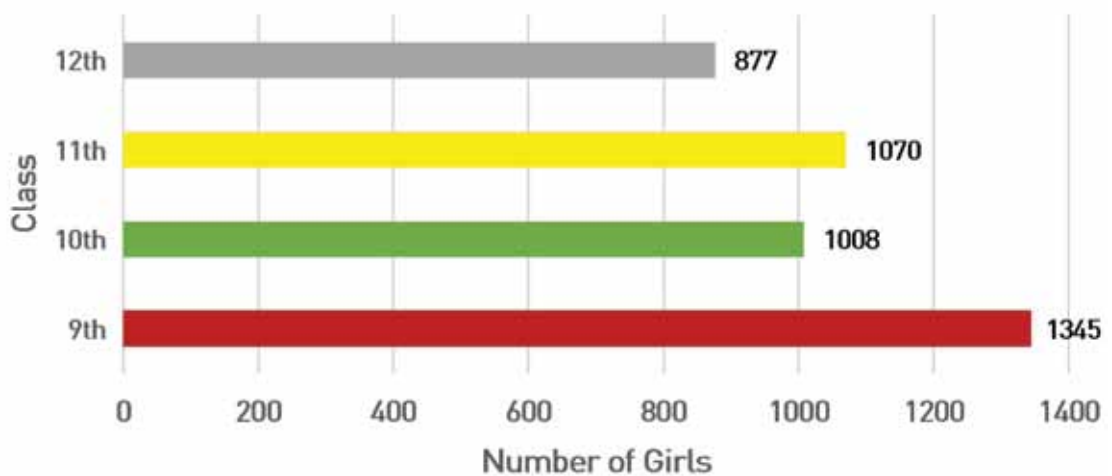
Duration of Stay in Hostel: About 41% of the girls were associated with the RMSA Hostel for last 1 year at the time of their exposure to life skills education. Another 29.68 percent of girls had a stay of 1 – 2 years in the hostel and 12.55 percent of them were staying for 3 – 4 years (Chart 1.2).

Chart 1.2 : Percentage of Girls & Years of their Association with RMSA Hostels



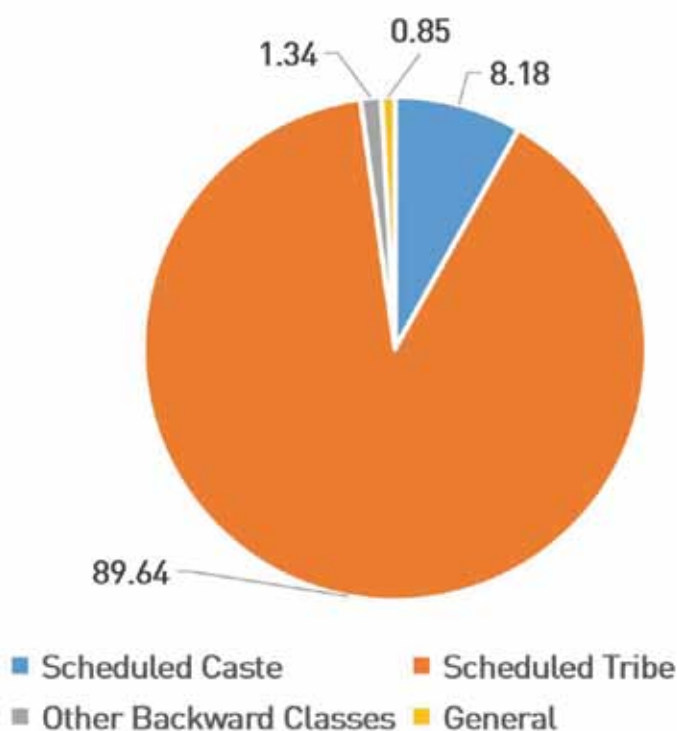
Class wise Distribution of Girls: Out of 4300 girls covered, 1345 of them were studying in class 9th, 1008 in class 10th, 1070 in class 11th and 877 in class 12th (Chart 1.3). In other words all the girls covered had a reasonable level of education to understand the contents designed for them in written form.

Chart 1.3: Class wise Number of Girls

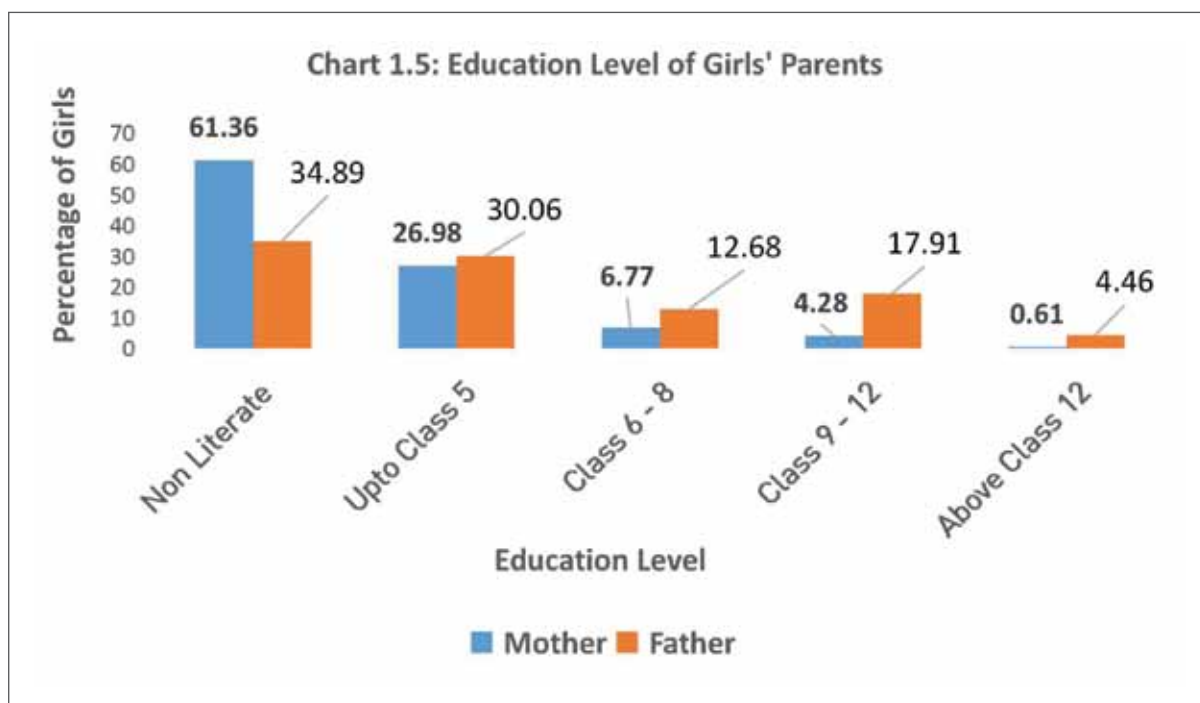


Caste Category of Girls: In Indian context, certain groups of people are considered comparatively weaker on socio-economic parameters and these groups are officially categorised as Scheduled Castes, Scheduled Tribes and Other Backward Classes or OBCs. Among the girls covered under the project, an overwhelming percentage belonged to Scheduled Tribes (89.64%) (Chart 1.4) - considered to be the weakest socio-economic group in the country. The combined percentage of other two weaker groups i.e. Scheduled Castes and OBCs was 9.25. Only a minor fraction of girls belonged to the General category. Thus, the project targeted those groups in which life skills were needed most.

Chart 1.4: Caste wise Percentage of Girls Covered



Education Levels of Girls' Parents: Mothers of majority of the girls were illiterate (61.36%) and fathers of 34.89% of girls were also illiterate. Mothers of 26.98% had education up to Class 5 and fathers of 30.06% girls had also studied up to this level. Mothers of around 12% girls and fathers of about 35% girls had studied beyond class 5. Data reveals that parents of majority of the target beneficiaries had low levels of education (Chart 1.5)



Occupation of Girls' Parents: Mothers of 74.95% and fathers of 77.56% of the girls were farmers. Parents of smaller percentages of girls were engaged in farm/wage labour (8.64% mothers & 10.26% fathers), household work (8.57% mothers & 0.39% fathers) and other occupations (Table 1.1). Thus, the majority of girls covered under the project came from families engaged in agriculture.

Table 1.1: Percentage of Girls with Parents' Occupation		
Occupation	Percentage of Girls	
	Mother	Father
Farmers	74.95	77.56
Farm/Wage Labour	8.64	10.26
Household Work	8.57	0.39
Other Occupations	7.84	11.79
Total	100.00	100.00

- b. Training Sessions with Girls in Hostel:** Training sessions on life skills conducted in hostels by the wardens, teachers and peer educators were the main platforms for educating and empowering the girls with life skills. These sessions were conducted with the help of 'Pehchaan' manual (Part 1 & 2). Girls in each hostel were divided into the batches of 30 – 35 and

sessions for all batches were conducted once a week preferably on Saturday or Sunday. Theoretically, these training sessions were supposed to be completed in 26 weeks. However, planning of life skills sessions was done in such a way that it did not disturb the academic calendar of the school (i.e. academic classes, examinations & tests, holidays, extracurricular activities etc.); hence, the duration of life skills training sessions was spread over a period of one year. Monthly plans of sessions were drawn in advance in consultation with the Cluster Coordinators of SRC and accordingly the sessions were organized in each hostel. Sessions involving more technical information and knowledge base were conducted with teacher or warden in the lead facilitator role whereas as peer educators conducted the lighter sessions under the supervision of teachers or wardens. The cluster coordinators of SRC visited hostels in supportive role and also provided expertise in conducting these sessions. The immediate qualitative impact of a few sessions was shared by a participant as follows:

“The session on child marriage was conducted, which helped in preventing 5 child marriages, as girls assertively refused to get married at early age with their mother’s support or ASHA worker’s support in Utavad village.”- says Bura Mandloi, 10th grade, RMSA Hostel Sanwer, Indore

Significantly, during the implementation of the project, peer educators in all the 43 hostels helped other girls to develop themselves as Assistant Peer Educators. The girls who were vocal and have learnt through sessions on life skills came out in the role of Assistant Peer Educators. Emergence of Assistant Peer Educators was an evidence of effectiveness of project strategy and one of the biggest achievements of the program. It can be viewed as skill transfer from a peer educator to other girls. It was assessed that in each hostel, around 6 to 7 girls were groomed as Assistant Peer Educators. The assistant peer educators assisted their peer educator, warden and teachers in conducting sessions and other activities.

- c. **Learning for Reinforcement & Reference:** Each beneficiary girl was provided a workbook which they used to capture learning from the session and other activities organized for them. An orientation on how to use the workbook was also provided for better understanding. The workbooks were used by the girls for reinforcement and reference.
- d. **Opportunities for Peer Group Learning:** The peer educator approach was strategically included in the project considering the potential of higher learning in peer groups. Therefore, post session and late evening discussions were organised for peer group learning. These discussions helped in bringing out the curiosity of even the most introvert girls and build their confidence. Peer group learning activities also helped them

to discuss the topics like body changes, menstrual problems and other day to day issues, without hesitation.

- e. **Addressing Individual Questions and Problems:** In order to address individual questions and problems, an interesting activity was introduced. In each hostel, a question box was kept and girls were encouraged to drop their written queries in it and anonymity of question was assured. The question box was opened once a month and queries received were addressed by the wardens. For some of the queries experts like doctors were invited to address. These sessions helped girls in understanding personalised questions which they hesitated to ask during the sessions. These interactive sessions were used by the girls to raise on spot questions and get their doubts cleared. In certain cases, individual counselling was also provided.



Career Counselling and Other Initiatives

As one of the very important needs expressed by the girls was that of career guidance, career counselling sessions were organized in all the 43 hostels and reading and reference materials were also provided to them.

To further empower the girls, a library was established in the hostel by giving them a book shelf and books. In addition to this, the set of CDs given by UNFPA titled “Main kuch bhi kar sakti hun” was distributed in all 43 hostels. They were also screened in some hostels and were well appreciated.



Various activities including health camps were conducted in coordination with the Health Department, Department of Women and Child Development etc. from time to time. Workshops on legal rights were also conducted in coordination with police department in some hostels.



f. **Social Action Projects:** With a view of creating awareness in communities about critical social issues covered by the project, 'Social Action Projects' were undertaken in villages of the target beneficiaries. From each of the 43 RMSA hostels 10 associated villages were selected for organising activities under 'Social Action Project' during summer vacation. Subsequently, against 430 selected villages, SAP activities were organised in 418 villages. The Social Action project was a one day activity at village level. The following initial work was done in all the 43 hostels before the SAP activities -

- **Briefing in hostels about Social Action Project to Adolescent Girls**
- **Identify key issues / topics and activities for SAP by Adolescent Girls**
- **Final Orientation at Hostel Level for SAP implementation**
- **Compilation of Hostel Wise Details of SAP**
- **Preparation and distribution of the Kits for Social Action Project by SRC, which included-**

- 1) Printed Material - Banner, Flex, Slogans
- 2) Stationary – Chart Paper, Sketch pen, Crayons, Pencil, Rubber, Sharpener, Scissor, Tape (Brown, White Small), Rope, Permanent Markers (Two Colors), Fevi-Stick
- 3) IEC – Resource Material Books from SRC, Poster, Pamphlet, Brochure.

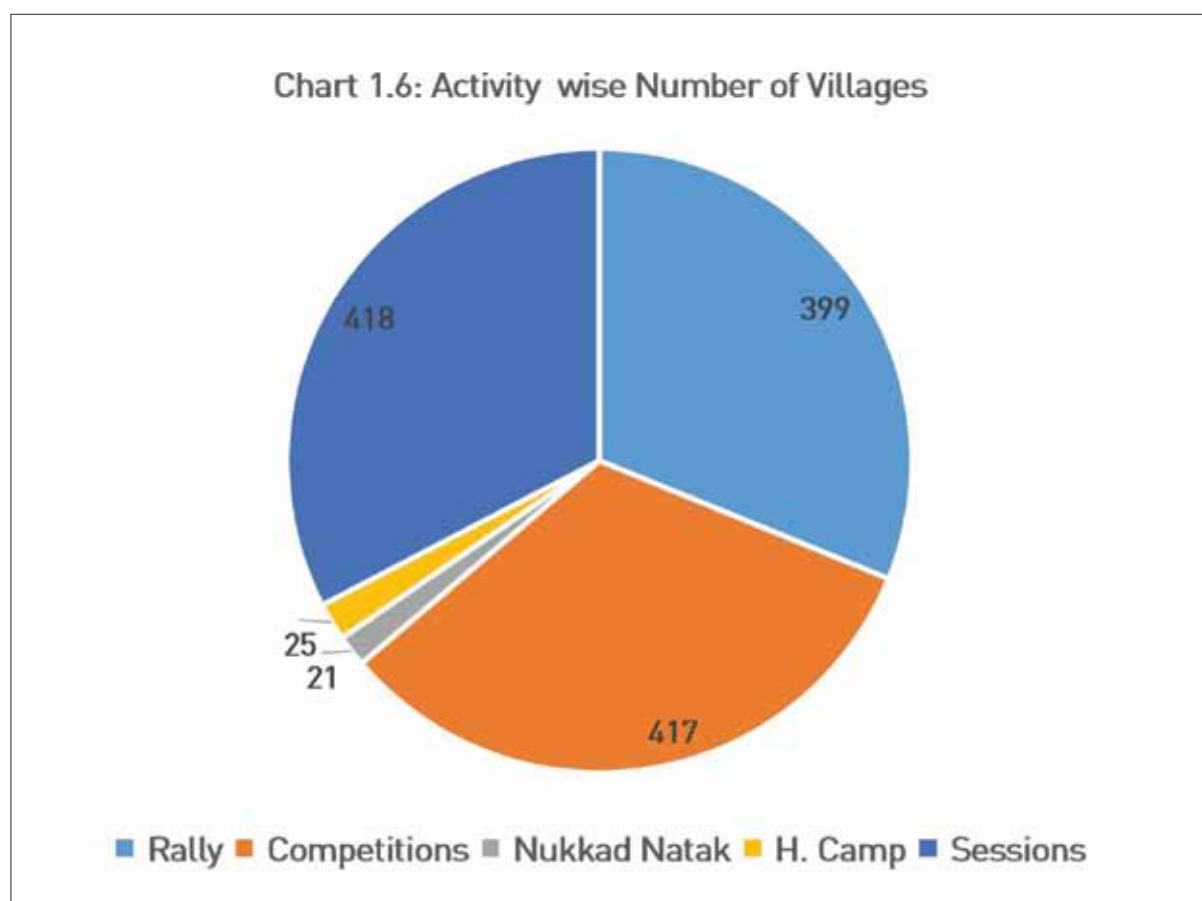
- **Contribution towards Logistics for SAP:**

An amount of Rs. 500 per SAP was distributed to be spent by Adolescent Girls for Snacks and Local expenses at village level, if any.

The social action project initiative involved community members and stakeholders in their implementation - both to educate and motivate others to take action and to focus on solutions to generate awareness and address the root causes of a social issue. For this purpose, the girls also approached other department functionaries such as ASHA, Aanganwadi workers, Block medical officer etc, to organise the activities and were fully supported by them. In some of the villages, the cluster coordinators also supported the girls in organising the activities. SAP activities organised during summer vacations included issues such as:

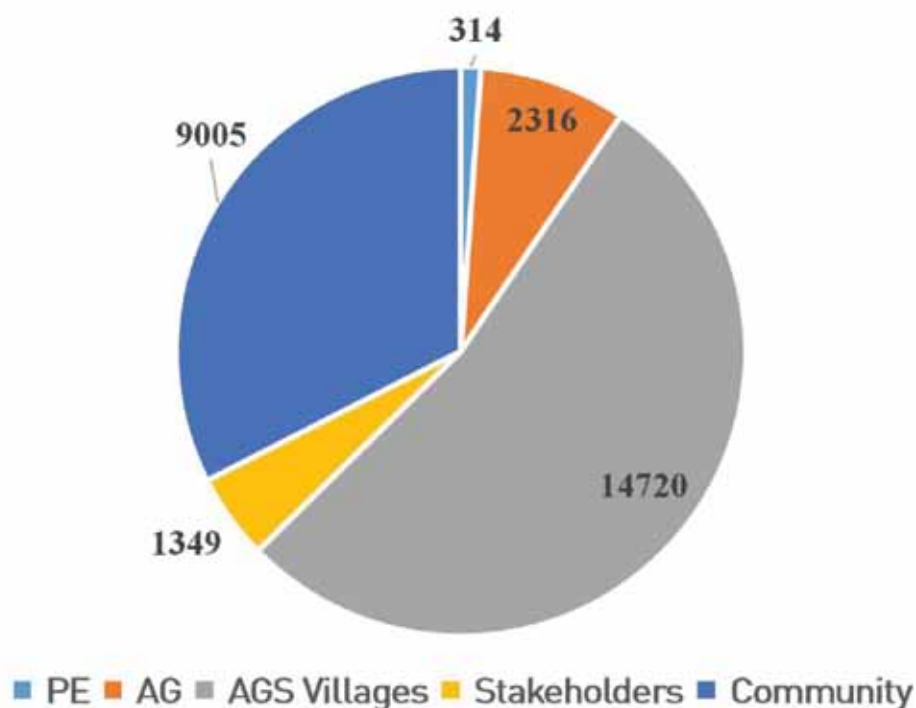
- Child Marriage
- Health
- Nutrition
- Girls' Education

Varied activities were organised in different villages for creating awareness on selected issues. Training Sessions were organised in almost all villages covered under SAP (n = 418). Competitions and Rallies were organised in 417 and 399 villages respectively. Health Camps and 'Nukkad Nataks' were also organised in a few villages based on the decision of the peer educators belonging to these villages (Chart - 1.6)



Different stakeholders including PE (314), AGs (2316), AG Villages (14720), Stakeholders (1349) and Community (9005) participated in SAP activities (Chart – 1.7). Total count of all participants was 27,704 persons.

Chart 1.7: Category wise Number of Persons Participated in SAP



The SAP activities helped in educating parents of the girls as well as communities about social issues and motivated them to take affirmative action. It also helped in reaching out to other girls in the communities. In addition to benefits just mentioned, SAP activities helped target beneficiaries, gain managerial experience and develop confidence. They also got a platform to demonstrate their talents and changes which they were experiencing as a result of participation in project activities. In some villages, they faced resistance from parents or community but also learned to face challenges and overcome problems towards fulfilment of an objective.

The success stories shared by a few participants of the social action project are as follows:

<p>Facilitator</p> <p><i>"It was the moment of pride when I went to the KGBV hostels, from where I have passed out, and said that we are here to educate girls, on which my ex-teacher asked so where is the teacher. I said we will take session. She felt so proud of me looking at me conducting sessions."</i></p> <p>-Nirmala Alwa, Govt. Girls Higher Secondary School, Kukshi, Dhar</p>	<p>Facilitator</p> <p><i>"Initially we were afraid of conducting session on Child marriage in our village. But when we stood on stage and took the session we felt so confident. Our parents were also present, they felt very proud of us."</i></p> <p>-Divya and Deepika, Govt. Girls Higher Secondary School, Sanwer, Indore</p>	<p>Participant</p> <p><i>"I was married at very early age due to which I am suffering, but I pledge to educate my daughters and brighten their future."</i></p> <p>-A village lady who Participated in SAP</p>
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- g. Kishori Sammelan:** The CBAG Project came to its logical conclusion with Kishori Sammelan or Adolescent Girls Conclave held at Jeevan Jyoti, Centre, Rau at Indore on 27th September 2017. The Sammelan was attended by around 180 Peer Educators wherein they shared their experiences with prominent officials from RMSA, UNFPA, Police department and media persons who were also present on the occasion. The program helped in providing platform to girls in sharing the change experienced by them as a result of the project activities and as a change agent how they have brought in the difference in the society. Wardens and teachers of 43 hostels also shared their experiences of change happening in the hostels and advocated to have such projects for other girls in schools and hostels.



1.9 SUPERVISION AND MONITORING

Supportive supervision was provided by the Coordinators of SRC. The 43 hostels were divided in 4 clusters and one coordinator cum trainer was designated for each cluster of hostels. Each coordinator provided supervision to around 10 to 11 hostels during their field visits and visited each hostel on monthly basis. They were able to provide supportive supervision to each hostel at least once in a month. They demonstrated conduct of sample sessions for the benefit of trainers and peer educators. Coordinators also helped in developing monthly plans of sessions of 'Pehchaan' manual and supervised its implementation. 'Question Box' activity and use of workbook were also guided by them. In selected cases, counselling sessions were also supported.

The team of SRC helped to monitor the project by providing feedback and learning of the program in the form of reports. The quantitative information was gathered and compiled to capture the spread of the program. Data was entered in an online portal prepared by UNFPA. This also helped in monitoring the progress of the program.

KNOWLEDGE MANAGEMENT

To capture the gains made in the LSE project implemented in RMSA Hostels, certain initiatives were taken as per action plan in order to document the experiences, inputs and outputs so as to facilitate experience sharing. These initiatives include:

1. **Film titled Pehchaan** - A 10 minute film titled Pehchaan has been produced based on the LSE program implemented in RMSA hostels over the period of last 2 years. It captures all the activities conducted in the project and contains interviews of girls and wardens which bring out the kind of impact that it has made on their lives.
2. **Success Story Booklet titled 'Houslon Ki Udaan'** - Success stories were collected from all the RMSA hostels which give an insight into the changes that have come about in the lives of the girls as a result of LSE program and how these girls have impacted the lives of other adolescent girls in their villages. The stories were compiled, edited and a booklet containing 32 stories was printed as part of documentation.

A sample success story is as shared below:

"I will decide my future..."

"I will decide my future" – says Rajeshwari, 11th standard girl of RMSA hostel, in Badnawar Block of Dhar district. Belonging to the interior village Balod, Rajeshwari was victim of the custom of child marriage. At the very early age of just 3 months, her parents got her engaged and since then time and again, she was told that she has to go to her marital home. When she asked "Why you got me engaged at such an early age?" her father would respond that "This is your destiny".

Rajeshwari's parents are poor and work as daily wage labourer to earn their living, due to which her parents wanted to discontinue her education after 5th grade. However, with her determination she pursued her education as she believed that education will lead her to right path. She convinced her parents to let her continue her education. But her biggest task was to convince them to let her decide about her marriage when she grows up to be an adult.

To overcome with this problem she got the courage from Life skills education she received in her hostel. Rajeshwari says - “In the session it was told that we should share our feelings and plans of future with our parents, this will help us. I tried to share my feelings with my parents that I don’t want to continue my engagement as I don’t believe in this relationship and would decide for my marriage when I will grow up to be an adult”. Initially Rajeshwari was scolded by her parents, however after continuous interaction and looking at her interest in education they agreed to break the engagement. Now her parents say that their daughter will get married when she is ready to do so.

This is how with self-confidence imbibed from the Life skills education Rajeshwari was able to fight against the social evil of child marriage.

3. **KAP Study** - Changes in Knowledge, Attitudes and Practices (behaviour) of girls in RMSA hostels were recorded by doing a base line at the beginning of the project and end line towards completion of the project. Data analysis was done and a detailed report of the KAP was compiled, the details of which are given in the Part 2 of this document.



ASSESSMENT OF CHANGE AFTER EXPOSURE TO LIFE SKILLS EDUCATION

2.1 BASELINE & END-LINE STUDIES

A baseline study was conducted at the start of the project in 2015 to ascertain the initial level of Knowledge, Attitude and Practices of the adolescent girls staying in RMSA hostels on selected issues related to reproductive health and life skills education. Towards conclusion of the project, an end-line data on same parameters was also collected in 2017 to gauge the transition which took place in KAP of the target groups as a result of exposure to project interventions.

2.2 STUDY OBJECTIVES

- To assess the change in the level of knowledge, attitude and practices of adolescent girls regarding adolescent health; life skills and social issues/rights after the exposure to the project activities.
- To identify the factors directly or indirectly influencing KAP status of adolescent girls.
- To suggest evidence based strategies / activities for enhancing the learning of adolescent girls in similar settings

2.3 STUDY METHODOLOGY

The study had a quantitative evaluation design. It included structured questions to assess the project interventions influencing the changes in knowledge, attitudes and practices of target group using a cohort design. With this design, the same cohort of beneficiary respondents (adolescent girls, in 9th to 12th classes in 43 RMSA hostels) is followed at baseline and end-line.

- a. **Study Tool:** A questionnaire with multiple choice questions was used in the study. Items of the questionnaire were designed to collect information on students' knowledge, attitude and skills and application of learning in real life situations. There were 60 questions that were built around different subjects covered under the CBAG project. The questionnaire was divided into various sub headings including the following:
- Personal and Family data
 - Knowledge
 - Attitude

- Practice in Life Domains
- Social Skills
- Self-Care
- Health and Reproductive Health

The questionnaire was pre-tested on a sub sample of 30 respondents and modified in light of findings of the pre-test.

- b. **Sample Size:** The girls studying in class 9th to 12th in 43 RMSA Hostels of Indore Division were included in sample of the study. Sample size of baseline was 3603 girls and for the end-line it was 4110.
- c. **Data Collection:** Questionnaire was self – administered by the respondents under the observation and supervision of data collection team. Consent was obtained from every participant on a consent form which was a part of the questionnaire. The data collection team ensured that every participant had read the form and expressed their consent before responding to the questionnaire. Research ethic of confidentiality was observed, and to ensure this, the questionnaire did not include the name or personal identity of the respondents.

In order to adhere to the quality control protocols, respondents were observed by data collection team during the self-administration of questionnaire and helped in understanding the questions and instructions. Questionnaires were collected after ensuring that the identification particulars and consent sheet / form were duly filled. Attendance of the respondents was cross-matched with the number of schedules. At the end of each day, the team cleaned the filled-in responses in the hostel itself by checking and correcting over-writing and re-confirming whether index and identification particulars have been duly filled.

- d. **Data Processing:** All questionnaires were returned to the project office and were given to a third party - Bhopal School of Social Sciences for data processing. The processing was done by allotting unique ID to each questionnaire and creating categories and codes for open ended questions. The data was entered on MS-Excel sheets. A random sample data entered was periodically checked for errors and inconsistencies. Data was analyzed in terms of frequency count and percentages and along with interpretation it has been given in findings mentioned in forthcoming parts.

2.4 STUDY LIMITATIONS

- The findings of the study were only in context of the resident adolescent girls of RMSA Hostels.
- The baseline study was conducted before the finalization of the manual

“Pehchaan” which was to be used for imparting Life Skills to the target group. Therefore some of the questions in the questionnaire have not been dealt with in the study since they were not a part of the curriculum.

- The data collected was purely quantitative; the qualitative observations on the field were not recorded.
- Out of the two years of the project, the first year was mostly spent in finalization of the manual and trainings, therefore the girls from class 12th involved in the baseline were not the respondents at end-line and similarly the girls of 9th class were not the respondents during baseline.

2.5 STUDY FINDINGS

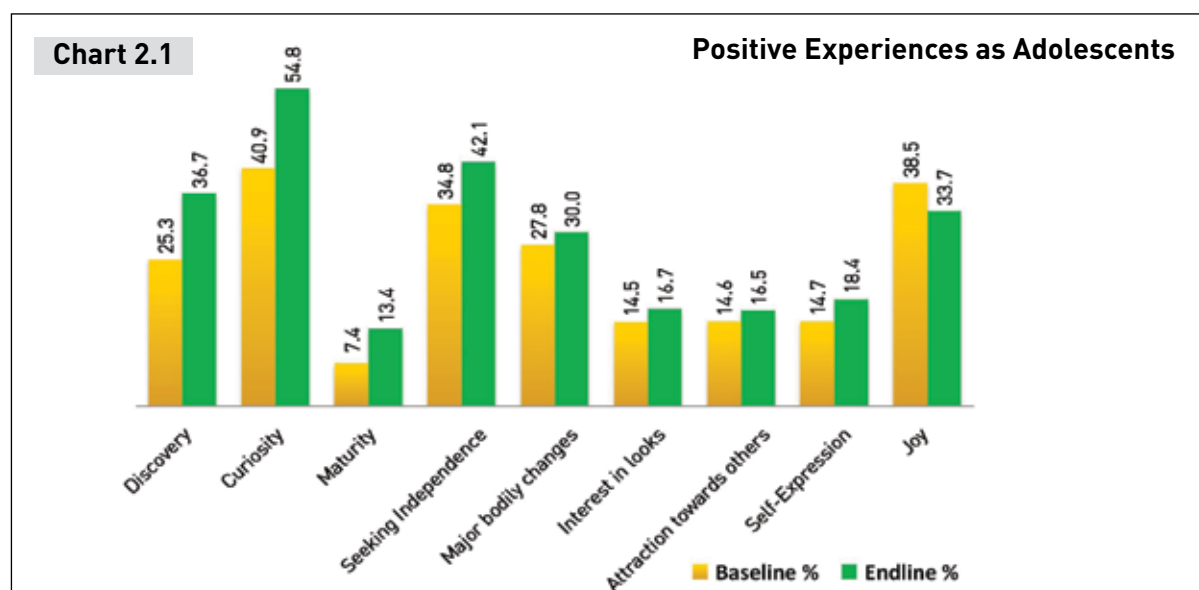
The findings of the study have been presented in 4 sub-heads for better comprehension and these sub heads are:

- Understanding ‘Self’
- Adolescence and Health
- Interpersonal Relations and Behaviors
- Gender, Sexual Harassment and Violence

2.5.1 Understanding ‘Self’

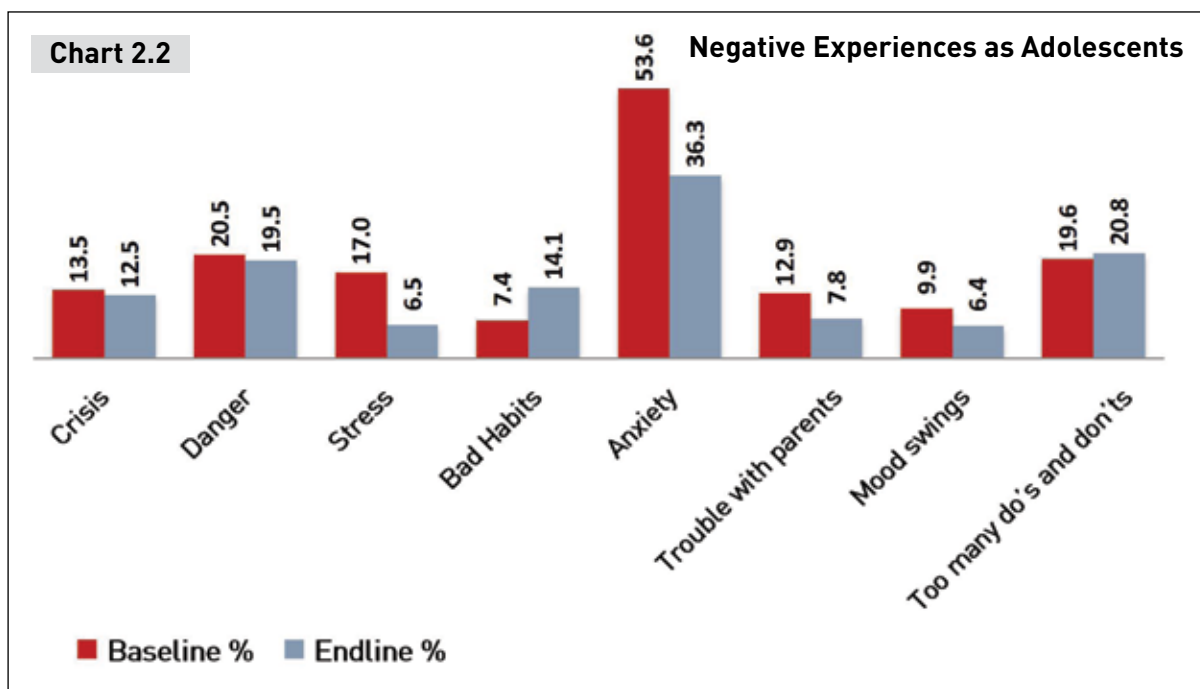
The issues discussed in this chapter include how the respondents perceive themselves. The sub-sections deal with their experiences during adolescence, changes during adolescence and their aspirations. While the sub-section 4.1 deals with the attitude of respondents towards adolescence, the sub-section 4.2 tries to understand their knowledge of changes during adolescence.

a. Experiences as Adolescents



The respondents were asked to respond to what best described their experiences as adolescents. Out of the seventeen responses they were asked to select any four responses which they best think describes their experiences. The responses were categorized as positive or negative and had mixed up sequence.

During the baseline study the experience most chosen by the respondents was “Anxiety” (53.57%) and during the end-line it was “Curiosity” (54.77%). Subsequent to the project activities which helped the respondents to understand themselves and adjust to their needs, the positive experiences were chosen by more number of girls at the end-line as compared to the baseline. Notably, the number of respondents feeling “Anxiety” dropped to 36.3% from 53.57% (baseline) at the end-line. And the number of respondents experiencing stress dipped from 17.04% to 6.52%. At the same time the girls felt at both the baseline and end-line surveys that there are too many do’s and don’ts. This was probably felt due to the rules and regulations they had to follow during their stay in the hostels (Chart 2.1 & 2.2).



b. **Characteristics Best Describing Present Generation Adolescents**

From the given list, respondents were asked to choose four characteristics they think best describe the present generation of adolescents. The responses were again positive as well as negative; the positive being ‘independent’, ‘responsible towards society’, ‘good understanding of oneself and others’, ‘assertive’, ‘well-informed’, ‘thoughtful’, and ‘full of potential’. The negative views were: ‘confused’, ‘unhappy’, ‘restless’, and ‘aggressive’.

The four top responses chosen during end-line were: 'independent' (69.78%), 'responsible towards society' (48%), 'assertive' (38.35%) and 'good understanding of oneself and others' (37.13%). Among the negative responses chosen, 'confused' was at the top during end-line and 'unhappy' during the baseline. Overall the positive views on the present generation of adolescents far exceeded the negative views especially at the end-line data collection (Table – 2.1).

TABLE – 2.1: Characteristics of Adolescents

Characteristics	Baseline	End-line
Independent	31.83%	69.78%
Responsible towards society	42.99%	48.00%
Full of potential	14.02%	15.86%
Good understanding of oneself and others	38.47%	37.13%
Assertive	53.32%	38.35%
Well-informed	24.81%	6.50%
Thoughtful	37.50%	3.16%
Confused	31.72%	29.83%
Unhappy	34.97%	15.26%
Restless	31.14%	17.93%
Aggressive	25.28%	18.49%
<i>Percentages may not add up to 100 due to multiple responses</i>		

c. Changes during Adolescence

Out of the total, 93.41% of the respondents at end-line as against 56.70% at baseline recognize that increase in height and weight occurs during adolescence.

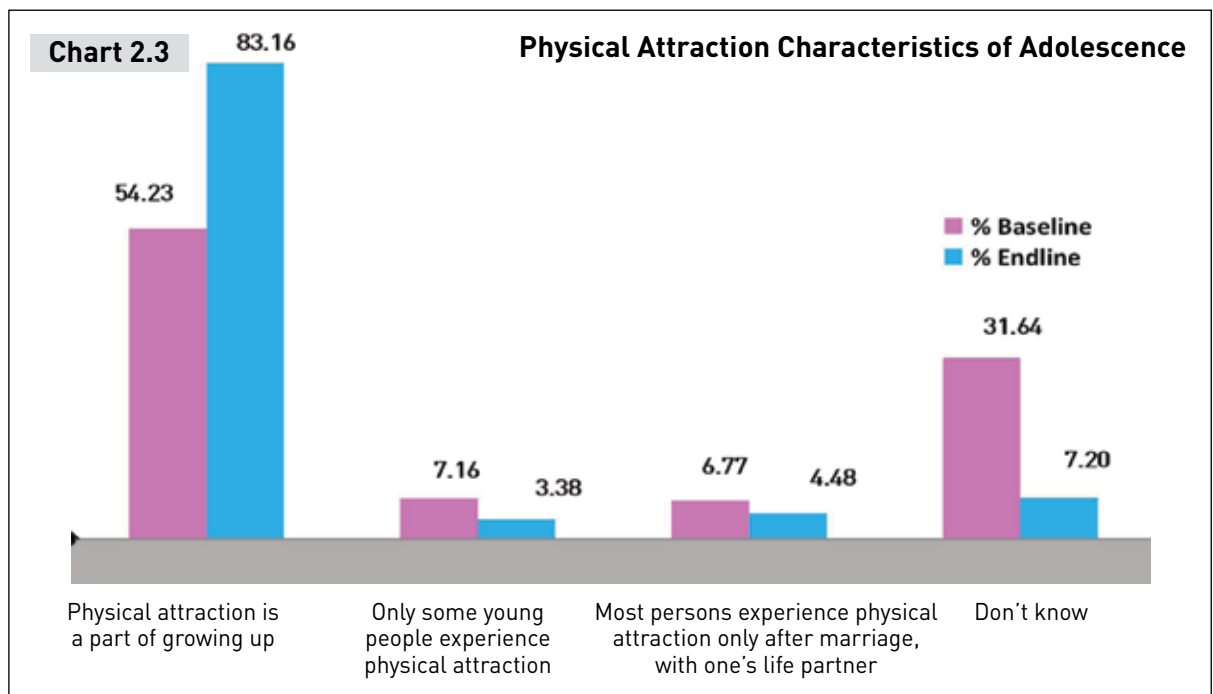
99.37% of the girls at the end-line realize that menstruation is a normal part of bodily changes during adolescence. 96.35% are informed about growth of hair on private parts and development of breasts and 95.16% are aware of the fact that broadening of hips is a natural development which takes place during adolescence in girls (Table -2.2). It is evident that the girls have developed a better understanding (knowledge), as compared to baseline, about the physiological changes which happen during adolescence in girls.

TABLE – 2.2: Physiological Changes During Adolescence

Changes	% Baseline	% End-line
Increase in height and weight	56.70%	93.41%
Menstruation	67.91%	99.37%
Change in voice	54.17%	73.38%
Growth of hair on private parts	63.36%	96.35%
Widening of shoulders	41.02%	27.54%
Broadening of hips	54.01%	95.16%
Development of breasts	62.78%	96.35%
<i>Percentages may not add up to 100 due to multiple responses</i>		

d. Physical Attraction

During the baseline almost half of the respondents did not think that physical attraction is a natural part of growing up. Many girls were also hesitant to express their views on attraction or said that they did not know (31.64%) at the time of baseline. In the end-line data, a decisive 83.16% said that experiencing physical attraction is a part of growing up (Chart – 2.3).



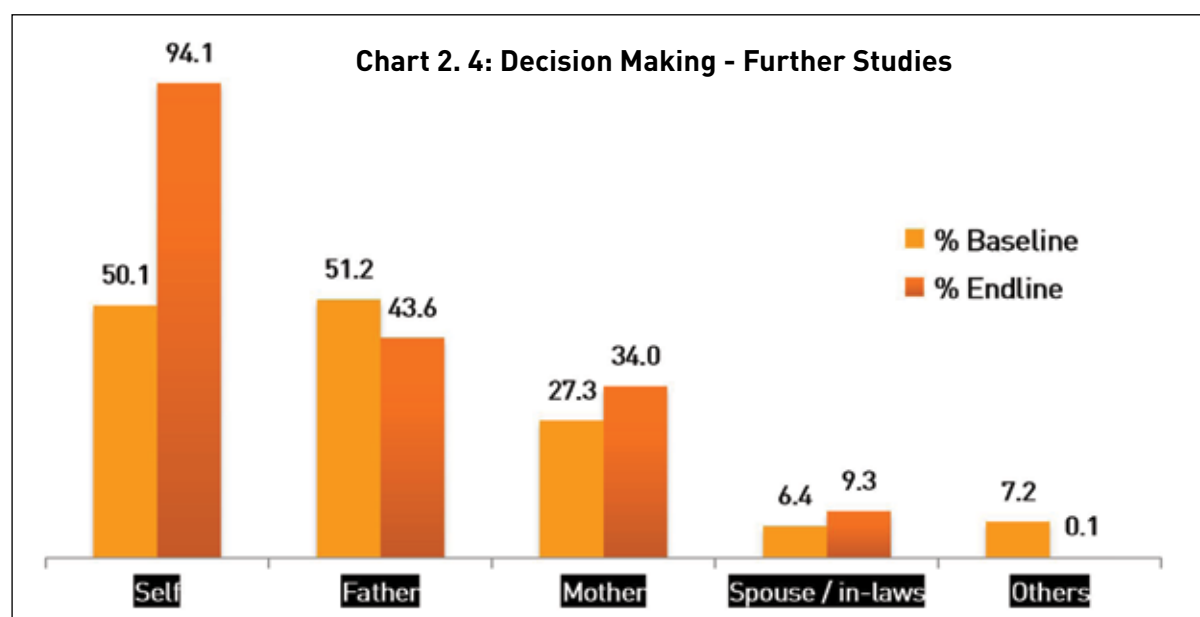
e. Aspirations

When enquired about their aspirations regarding further education, not much difference was seen between the percent of baseline and the end-line responses till 'post-graduation' level, but 55.5% of adolescent girls were sure that they wanted to acquire a professional degree/diploma, at the end-line against 38.1% during the baseline (Table –2.3).

TABLE –2. 3 : Educational Aspiration

Level	% Baseline	% End-line
Up to class 12	8.8	7.9
Up to graduation	8.3	6.5
Up to post-graduation	5.7	5.7
More than post-graduation	15.5	15.5
Professional degree / Diploma	38.1	55.5
Don't know	22.3	8.3
No response	1.2	0.6

The girls were also asked as to who should take the decision about their further studies. An overwhelming 94.1% of the adolescent girls at the end-line were confident that the decision to study further rests in their hands (against 50.1% during baseline). 43.6% respondents included their father in decision making and 34% also included their mothers (up from 27.3% during baseline) (Chart –2.4).



2.5.2 Adolescence and Health

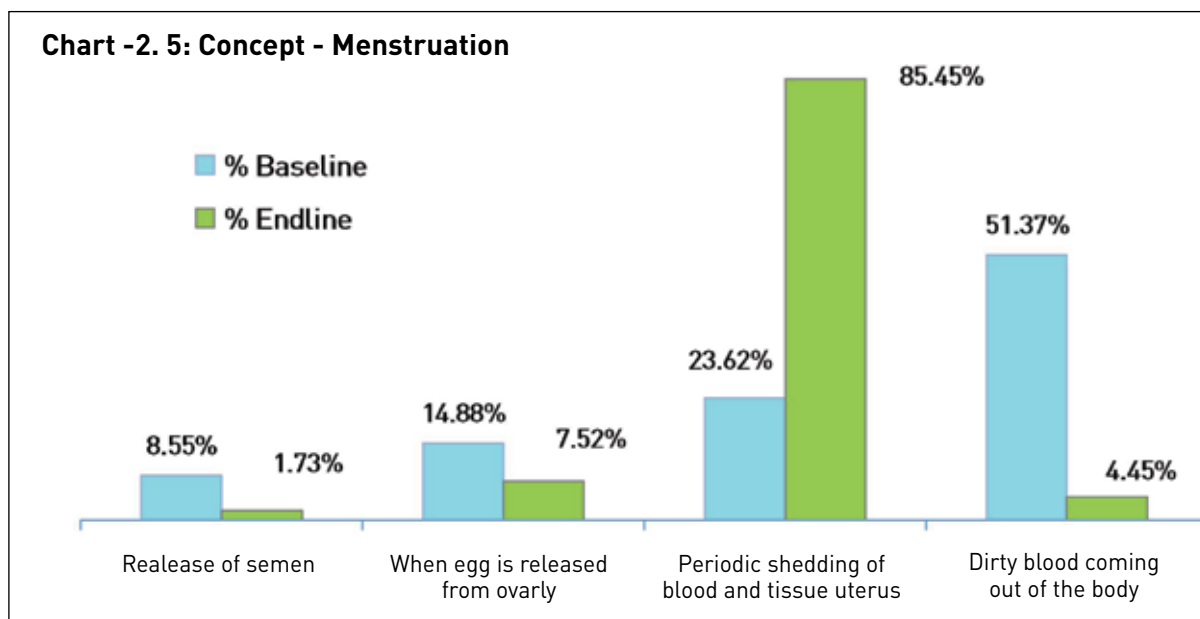
This section deals with findings related to adolescent health, more specifically – menstruation, anaemia, RTI, HIV as well as substance misuse.

a. Menstruation

The target group of the project was in 14 to 19 age group years and as such 90.5% of them had already started with their menses.

During the baseline the most common understanding among girls was that

menstruation is 'dirty blood coming out of the body' (51.37% responses). The end-line showed a marked improvement in the understanding of menstruation cycle by the adolescent girls with 85.45% responding that it is a 'periodic shedding of blood and tissue from uterus' (Chart – 2.5).



Attitude of the respondents towards menstruation was also probed. The end-line data showed a significant change in the attitude of the adolescent girls towards menstruation with 82.38% saying that it is a normal/natural process and girls can continue with sports activities. A significant 79.61% were of the opinion that they should be free to visit sacred places (Table – 2.4).

TABLE – 2.4: Attitude towards Menstruation		
Statements	% Baseline	% End-line
It is a normal process for adolescent girls and women of childbearing age	50.62%	82.38%
During menstrual periods a girl/ woman can continue with sports activities	49.24%	85.43%
During menstruation a girl/woman should be free to visit sacred places	35.89%	79.61%
During menstruation a girl/woman should not touch pickles	38.58%	26.06%
During menstruation a girl/woman should not be isolated	32.47%	20.56%
Don't know	9.13%	0.19%
No response	0.72%	0.39%
<i>Percentages may not add up to 100 due to multiple responses</i>		

b. Anaemia

Adolescence is a period of rapid physical and physiological changes. Due to the expansion of the lean body mass, total blood volume and the onset of menstruation, the iron requirement of adolescent girls' increases sharply and makes them more susceptible to anaemia.

Almost 50% of the girls during the baseline data collection had not heard about 'anaemia'. After the project interventions, at the end-line of the project 95.09% of the adolescent girls were aware about anaemia.

The respondents were asked whether they know about the causes of anaemia. At the baseline 'less intake of green leafy vegetables' was considered by majority of girls as the reason for anaemia but at the end-line they knew that there were other reasons also for anaemia (Table – 2.5).

TABLE 2.5: Causes of Anaemia		
Reasons	% Baseline	% End-line
Intake of less food	41.44	82.46
Less intake of Green Leafy Vegetables	75.60	88.44
Less intake of fruits	55.62	75.74
Less intake of iron rich food	37.91	81.27
<i>Percentages may not add up to 100 due to multiple responses</i>		

Knowledge of the adolescent girls about anaemia was further probed by posing a few statements to indicate their agreement with the same. 86.45% (against 49.55% at baseline) of the respondents agreed at end-line that 'It is important to include green leafy vegetables and other iron-rich vegetable in the diet of anaemia patients' and 80.51% (against 44.85% at baseline) knew that 'Anaemia patients have low hemoglobin count in their blood'. Only 4.48% of the respondents felt that 'Anaemia is not a serious health concern'.

TABLE –2.6: Understanding Anaemia

Statement	% Baseline	% End-line
Anaemia patients have low hemoglobin count in their blood	44.85	80.51
Anaemia is not a serious health concern	9.22	4.48
Majority of Indian adolescents suffer from anaemia	39.36	58.32
It is important to include green leafy vegetables and other iron-rich vegetable in the diet of anaemia patients	49.55	86.45
Anaemia patients should take iron tablets and not bother about nutritious diet	45.10	72.99
<i>Percentages may not add up to 100 due to multiple responses</i>		

Most of them understood the immediate and far-reaching consequences of anaemia. Surprisingly 72.99% of the respondents felt that 'Anaemia patients should take iron tablets, and not bother about nutritious diet'. It seems that the message that iron tablets are supplements and not the replacement of nutritious food did not get communicated properly (Table – 2.6).

c. Reproductive System and Infections

Knowledge and attitude of girls towards Reproductive System, Contraceptives and Family Planning were also probed.

Seven statements were posed to the respondents out of which three had negative and four had positive connotations. Highest responses were received in end-line to the positive statements: 'Build their self-confidence to deal with difficult situations' scoring 71.39%, 'Be responsible in their behaviour' scoring 58.83% and 'Become alert about their bodies' scoring 51.65% (Table – 2.7).

Statement	% Baseline	% End-line
Get distracted and lose focus on their studies	46.36	22.70
Get encouraged to experiment	22.40	9.56
Become too aware of the opposite sex	31.67	33.53
Be responsible in their behaviour	48.71	58.83
Build their self-confidence to deal with difficult situations	47.89	71.39
Become alert about their bodies	29.34	51.65
Have fewer fears and confusions about their body	27.10	31.95
No response	1.27	0.46
<i>Percentages may not add up to 100 due to multiple responses</i>		

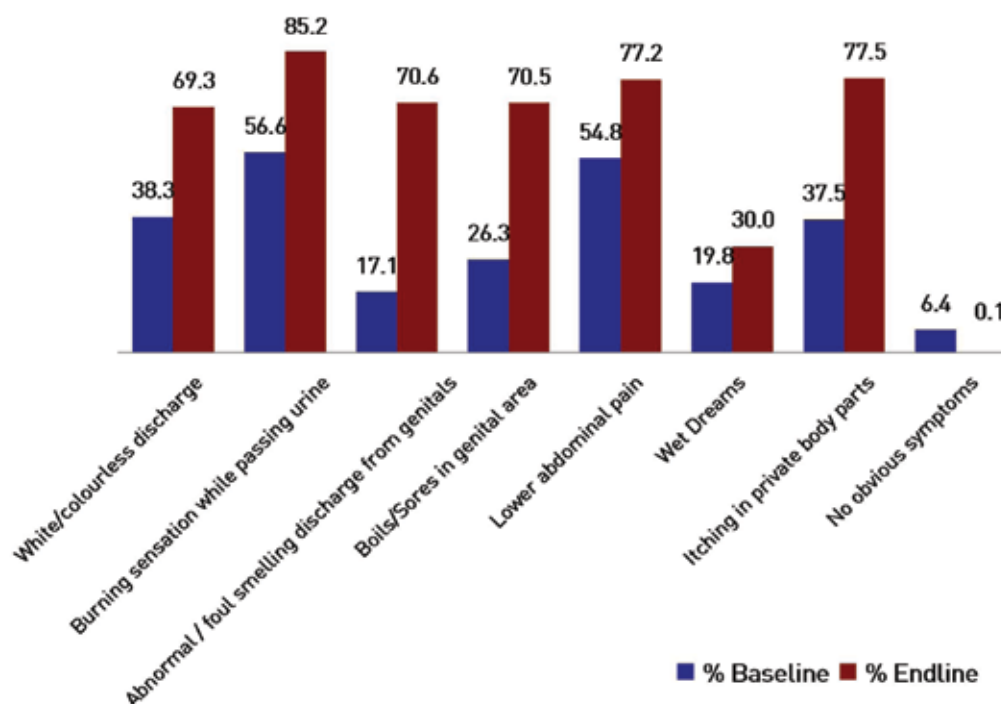
The statement 'Get distracted and lose focus on their studies' got less than half the responses at the end-line against that of baseline and 'Get encouraged to experiment' went down from 22.4% at baseline to 9.56% at end-line. 33.53% felt that their awareness towards opposite sex increased by knowing about these issues. Only 31.95% felt that information on Reproductive System, Contraceptives and Family Planning lessens their fears and confusions about their body.

d. Reproductive Tract Infections, HIV

The topics of RTI and HIV are usually not freely discussed with the adolescents. As such there are many myths, misconceptions and confusion regarding these issues.

Respondents were enquired about the symptoms of RTI infection. The end-line responses displayed in the chart below, show that the knowledge among adolescent girls regarding symptoms of RTI has improved significantly and they were able to identify the symptoms correctly (Chart –2.6).

Chart – 2.6: Symptoms RTI



Regarding transmission of HIV/AIDS, at the end-line, the adolescent girls were more aware that HIV spreads by 'Having sex with HIV infected person without a condom' (89.64%), 'From HIV infected mother to her baby' (90.95%), 'Transfusion of infected blood' (87.54%) and 'Sharing HIV infected syringes and needles' (90.22%) and not by the myths represented by the rest of the statements (Table – 2.8).

TABLE 2.8: Spread of HIV

Reasons	% Baseline	% End-line
Having sex with HIV infected person without a condom	28.12	89.64
From mosquito bites	52.80	7.15
From HIV infected mother to her baby	46.39	90.95
Sharing food with a person infected with HIV	42.98	8.08
Sharing toilet with person infected with HIV	29.78	5.67
Transfusion of infected blood	36.73	87.54
Sharing HIV infected syringes and needles	45.38	90.22
Hugging people infected with HIV	16.39	5.77
Kissing persons living with HIV	22.74	4.48
No response	0.43	0.12

Percentages may not add up to 100 due to multiple responses

e. Substance Misuse

The girls were asked to choose some of the major influences which motivate adolescents to misuse substances (like tobacco, alcohol, 'gutka', 'pouch' etc.) for the first time. Most of the girls at the baseline as well as the end-line agreed that 'Friends' were the major influencers (89.66% end-line) followed by 'Acquaintances' (74.96% end-line) and 'Family Members' (68.27%). About 55% of the girls also said that 'Electronic Media' was also one of the main influencers for the adolescents to try intoxicants/substance misuse for the first time (Table – 2.9).

TABLE 2. 9: Consequences Substance of Misuse		
Symptoms	% Baseline	% End-line
Smokers' cough	51.40	84.77
Breathlessness	54.96	85.23
Chronic bronchitis	22.84	57.42
Premature and abundant face wrinkles	37.11	64.99
Heart disease	43.19	66.47
Sleeplessness	14.49	49.81
Cancer of mouth, lung	49.20	89.25
Tuberculosis	36.20	64.40
Don't Know		0.22
<i>Percentages may not add up to 100 due to multiple responses</i>		

When asked to identify the ill-effects associated with substance misuse, 'Cancer' got the most responses followed by 'Breathlessness' and 'Smoker's Cough'. The respondents were allowed to select more than one response.

2.5.3 Interpersonal Relations and Behaviors

The changes during adolescence include changes in behavioral as well as communication patterns. This part discusses adolescents' relationships and communication with their peers, parents/siblings and teachers.

a. Communication Pattern

In order to understand communication patterns, adolescents were asked as to whom they talk to about topics. Unsurprisingly most of the girls felt free in talking to their mothers regarding 'physical changes in the body'. They also felt more comfortable discussing 'harassment and bullying' as well as 'dreams and aspirations' with their mothers.

They talked to their friends more regarding topics like 'films, music, TV programs, books', 'romance and love' and 'friendship and relationships'. Teach-

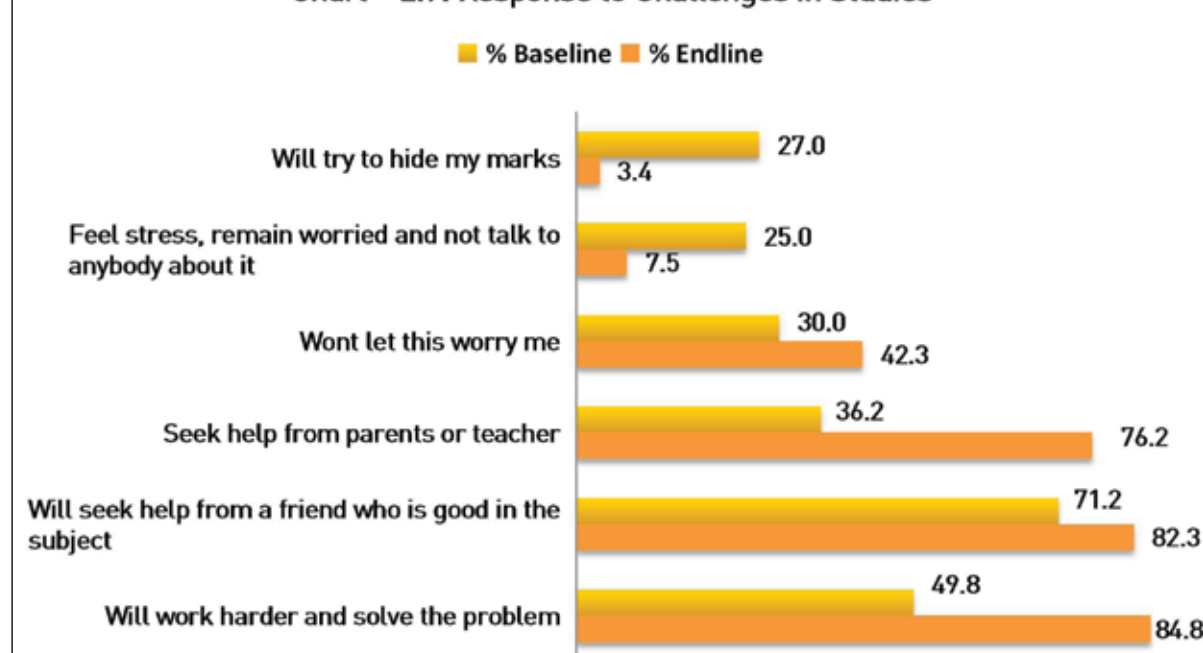
ers were sought with regards to discussions on 'studies and school work' and 'news'. Fathers were engaged in talks mostly about 'consumer items' probably seeking money or permission to buy them and came in close second on talks on 'news' and 'dreams and aspirations' (Table – 2.10).

TABLE 2. 10: Comfort level in Discussion of Issues

Topics	Mother	Father	Friend/Siblings	Teacher
Physical changes in your body	94.72	8.93	25.04	24.67
Interests like films, music, TV programs, books	31.85	35.26	87.18	29.03
Romance and love	30.36	17.76	82.17	9.29
Friendship and relationships	34.53	26.37	88.61	28.61
Studies and school work	32.09	32.73	42.04	82.75
Harassment and bullying	69.73	42.82	46.37	32.02
Consumer items advertised on TV	40.78	61.87	52.19	36.42
National and international news	37.23	60.00	44.36	61.75
Dreams and aspirations about your life	73.21	61.58	49.32	39.29
<i>Percentages may not add up to 100 due to multiple responses</i>				

The adolescent girls were asked about their studies and what they would do if they are weak in some subject. The end-line data showed that the girls were now better equipped to face the challenges of their studies with 84.8% saying they would work harder along with seeking help from a friend who is

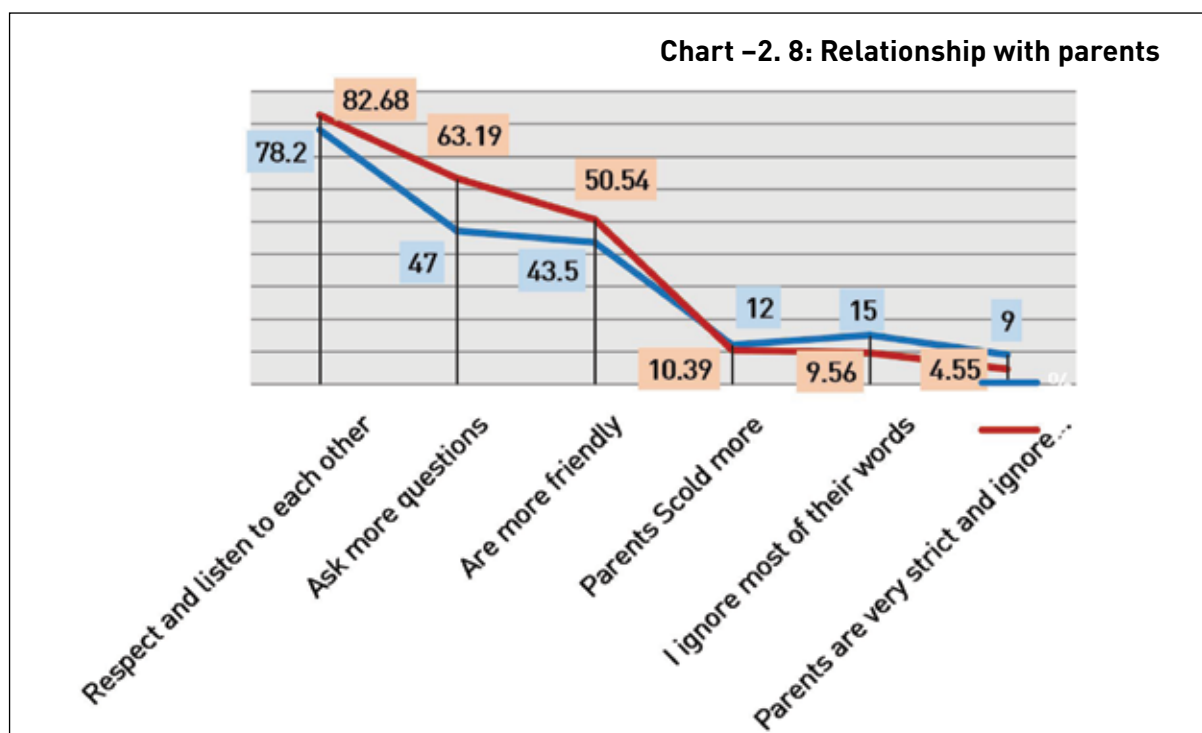
Chart – 2.7: Response to Challenges in Studies



good in the subject or seeking help from parents or teachers. The negative behaviors like 'Feel stress, remain worried and not talk to anybody about it' and 'will try to hide my marks' attracted almost negligible responses during end-line (Chart – 2.7).

b. Relationship with Parents

The initial question in this regard probed whether the adolescent girls have noticed a change in their behavior towards their parents recently as compared to the way they interacted with them three to four years back. The end-line data showed that there has been an improvement in the positive behavior patterns of the adolescent girls towards their parents after participation in project activities. The responses like 'parents scold more', 'I ignore most of their words' and 'parents are very strict and ignore what I say' have decreased during end-line as compared to baseline (Chart – 2.8).



c. Relationship with Peers

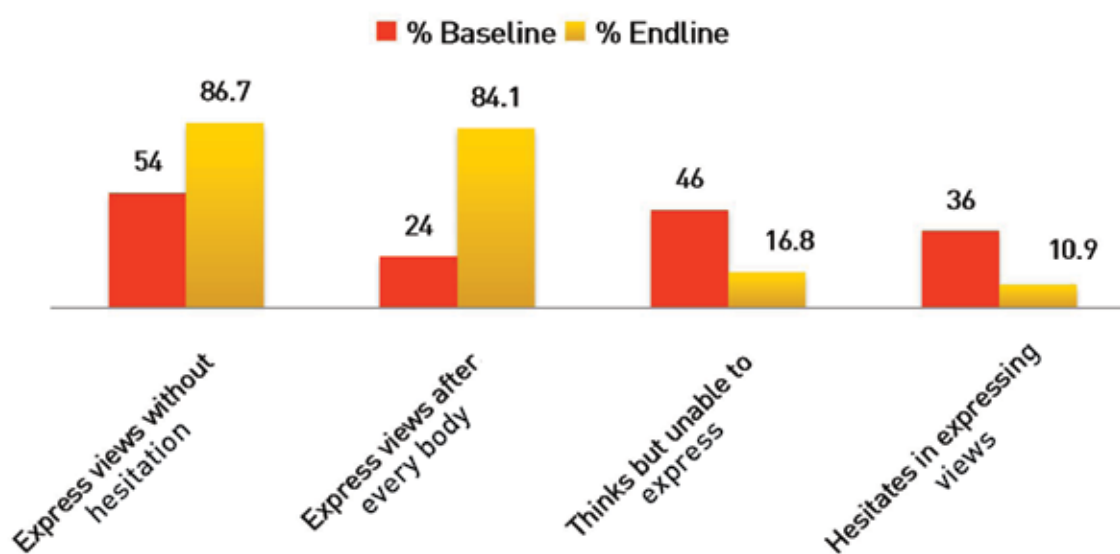
In order to understand the change in behavior of adolescent girls, they were asked to respond to the question that how they would put across their opinions during discussions amongst their peers. The impact of the project can be seen with 86.7% of the respondents at the end-line saying that they 'Express views without hesitation' as against 54% at baseline who could do the same. 84.1% of the respondents were confident enough to let everyone else express their views before they put forward theirs as against 24% during baseline. The hesitation or inability of the adolescent girls to express their views reduced at the end-line by less than half (Table – 2.11)

TABLE 2.11: Interaction with Friends

Behaviour	% Baseline	% End-line
Will first try to make up	25.00	78.69
Sulk for a long time and then make up	48.74	66.96
I reflect on my own behaviour	49.00	60.34
Try to talk about it	15.25	54.77
I don't talk about the disagreement but start talking about other things	15.00	44.38
Will wait for my friend to make up	23.00	29.05
No Response		0.17
<i>Percentages may not add up to 100 due to multiple responses</i>		

The girls were given a situation in which one of their classmates has made a false complaint about them to their class teacher. They were asked how they would respond to the same. An overwhelming majority, 85.11% at the end-line said that they would not react negatively and 'Will explain their side and situation to the teacher' as compared to 62.2% giving the same response during baseline. The other passive or negative responses like 'Will remain quiet and let teacher scold you', 'Would complaint against the classmate for some other matter to the teacher' drew 6.81% (baseline 25.17%) and 6.62% responses respectively. The statements 'Will stop talking to the classmate', 'Will fight with the classmate' drew negligible votes (Chart -2.9).

Chart 2.9: Behaviour with Peer Group



d. Relationship with Friends

A situation was given to the respondents:

“Kusum and Vishal are childhood friends who grew up playing together. They used spend a lot of time talking with each other. One day Vishal sent a letter to Kusum expressing his attraction towards her. Kusum considers Vishal as her childhood friend and nothing more. What should Kusum do?”

The girls were asked to choose from a set of responses and could select more than one response. The end-line data shows an increase in the percentage of rational responses which included ‘Suggesting that they remain friends’ and ‘Talk to Vishal and explain that she is not interested in becoming his girlfriend’ getting the highest percent of the responses (Table – 2.12).

TABLE 2.12: Responding to Attraction		
Suggested action	% Baseline	% End-line
Suggest that they should remain friends	72.2	90.7
Talk to Vishal and explain that she is not interested in becoming his girlfriend	62.1	84.3
Complain about the letter to his parents	37.5	13.9
Stop talking to Vishal and ignore him	24.0	7.3
Agree due to fear that Vishal might spread rumours about her	21.0	5.8
No Response		0.17
<i>Percentages may not add up to 100 due to multiple responses</i>		

2.5.4 Gender, Sexual Harassment and Violence

Findings on issues related to gender, sexual harassment and violence have been discussed in this part.

a. Understanding Gender

The understanding of the differentiation between biological dissimilarity and gender roles/stereotyping assigned to the two sexes was also probed. The respondents were asked to choose which statements they thought are based on biological differences and those that are based on people’s mind-set.

As opposed to 69.55% during baseline, an overwhelming 92.04% of the adolescent girls discerned that the statement ‘Girls find mathematics difficult. They are better suited for home science’ is based on the mind-set of the people. They also challenged the statements ‘All girls at an early age are

interested in cooking, decorating and managing the home.’ (88.49% at end-line as opposed to 64.95% at baseline); ‘Boys can handle technical things much better than girls’ (87.40% end-line); ‘Men are better than women at controlling their emotions and therefore do not cry’ (78.03% end-line) and ‘Women are more emotional than men’ (76.06% at end-line). The respondents also knew that the statement ‘women are better care givers than men’ is also based on the mind-set of the people (82.73% end-line) (Table 2.13).

TABLE 2.13 : Distinguishing Gender Issues

Statement	Baseline		End-line	
	% Based on people's mindset	% Based on biological differences	% Based on people's mindset	% Based on biological differences
Girls find mathematics difficult. They are better suited for Home Science	69.55	25.78	92.04	7.52
The voice cracks in a majority of boys in growing up years	46.57	43.44	28.42	70.02
Boys can handle technical things much better than girls	60.75	26.53	87.40	11.39
Women are better care givers than men.	57.15	31.14	82.73	16.01
Boys are stronger and more muscular than girls	42.99	43.74	59.51	38.91
Women give birth to babies, men do not	41.52	48.57	11.73	87.01
Women are more emotional than men	47.57	36.86	76.06	21.61
Men are better than women at controlling their emotions and therefore do not cry	50.85	34.89	78.03	21.41
Girls' bodies mature earlier than boys of their own age	40.36	45.16	14.57	84.79
Generally girls begin to menstruate during adolescence	36.66	49.57	11.27	87.86
All girls at an early age are interested in cooking, decorating and managing the home.	64.95	25.84	88.49	11.05

The respondents could also identify the statements based more on biological differences rather than those created by society. The statements ‘The voice cracks in a majority of boys in growing up years’; ‘Girls’ bodies mature earlier than boys of their own age’ and ‘Generally, girls begin to menstruate during adolescence’ got 70.02%, 84.79% and 87.86% respectively, thereby clearly identifying them as biological differences (Table 2.13).

A case-study was also given and respondents were asked to choose the given statements as their response to the situation. The case study was:

“Kavita has been good in sports. Suddenly, when she turned 14 she became shy and embarrassed to wear sports clothes or to run, play or cycle. What in your view should Kavita do?”

The choices made by the respondents to given statements in response to case studies have been given in Table – 2.14. The responses show that majority of the adolescents, 89.64%, feel that Kavita should ‘Wear whatever she

feels comfortable in and continue to play, run, cycle etc.’ and 79.15% feel that she should ‘Discuss with her teacher or anyone she trusts’ about the issue. 63.31% feel that Kavita should not feel self-conscious and should ‘Wear what all other sportsmen / sportswomen wear’.

TABLE 2.14: Response to Growing-up

Statement	% Baseline	% End-line
Wear whatever she feels comfortable in and continue to play, run, cycle etc.	69.00	89.64
Stop playing as there is no future in sports for girls	16.50	6.13
Discuss with her teacher or anyone she trusts	58.25	79.15
Wear what all other sportsmen / sportswomen wear	54.45	63.31
No response		0.66
<i>Percentages may not add up to 100 due to multiple responses</i>		

b. Legal Age of Marriage

Regarding ‘legal age of marriage’ in India, only 0.68% of the respondents at the end-line as compared to 13.57% during the baseline felt there is no legal age of marriage. Further, as compared to 59.15% during baseline, a vast majority 97.71% could correctly say that for girls the legal age of marriage is 18 years and for boys it is 21 years (Table – 2.15).

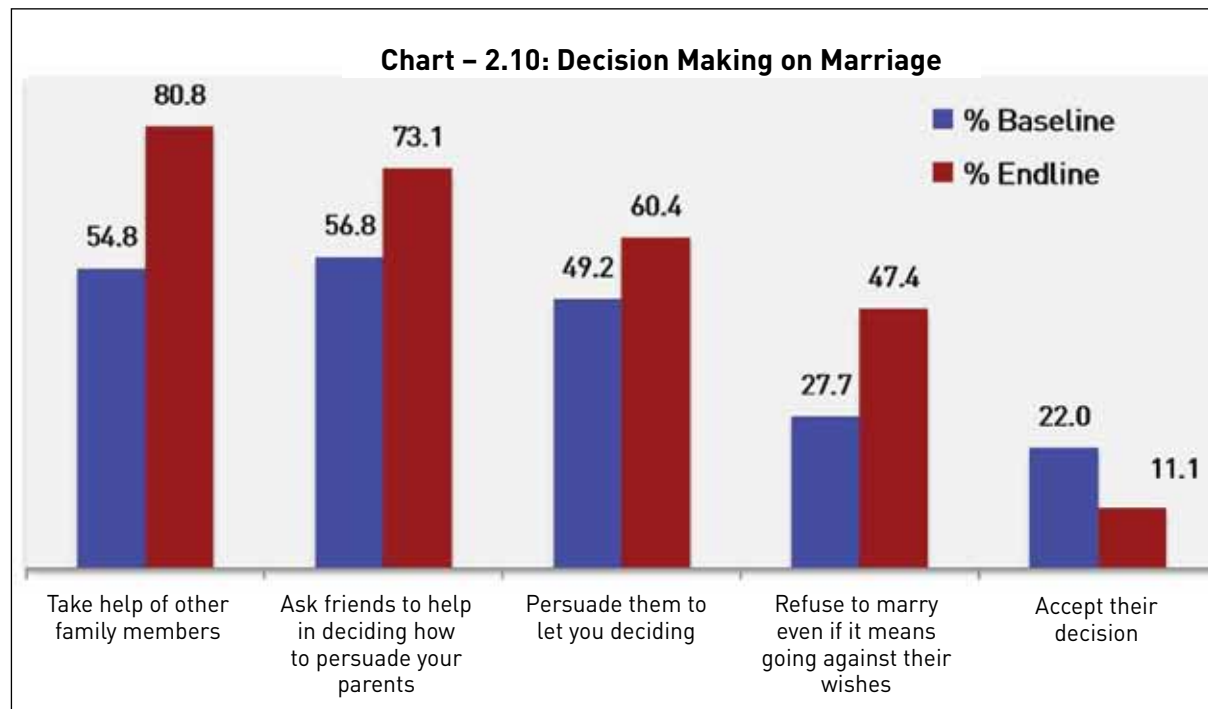
TABLE 2.15: Knowledge of Legal Age of Marriage

Statements	% Baseline	% End-line
The legal age at marriage is 18 years for girls and 21 years for boys in India	59.15	97.71
There is no legal age at marriage for girls in India but the legal age at marriage for boys is 25 yrs	19.59	1.05
No legal age at marriage for boys and girls in India	13.57	0.68
Don't know	7.69	0.22
No Response		0.34

c. Decision Making on Marriage

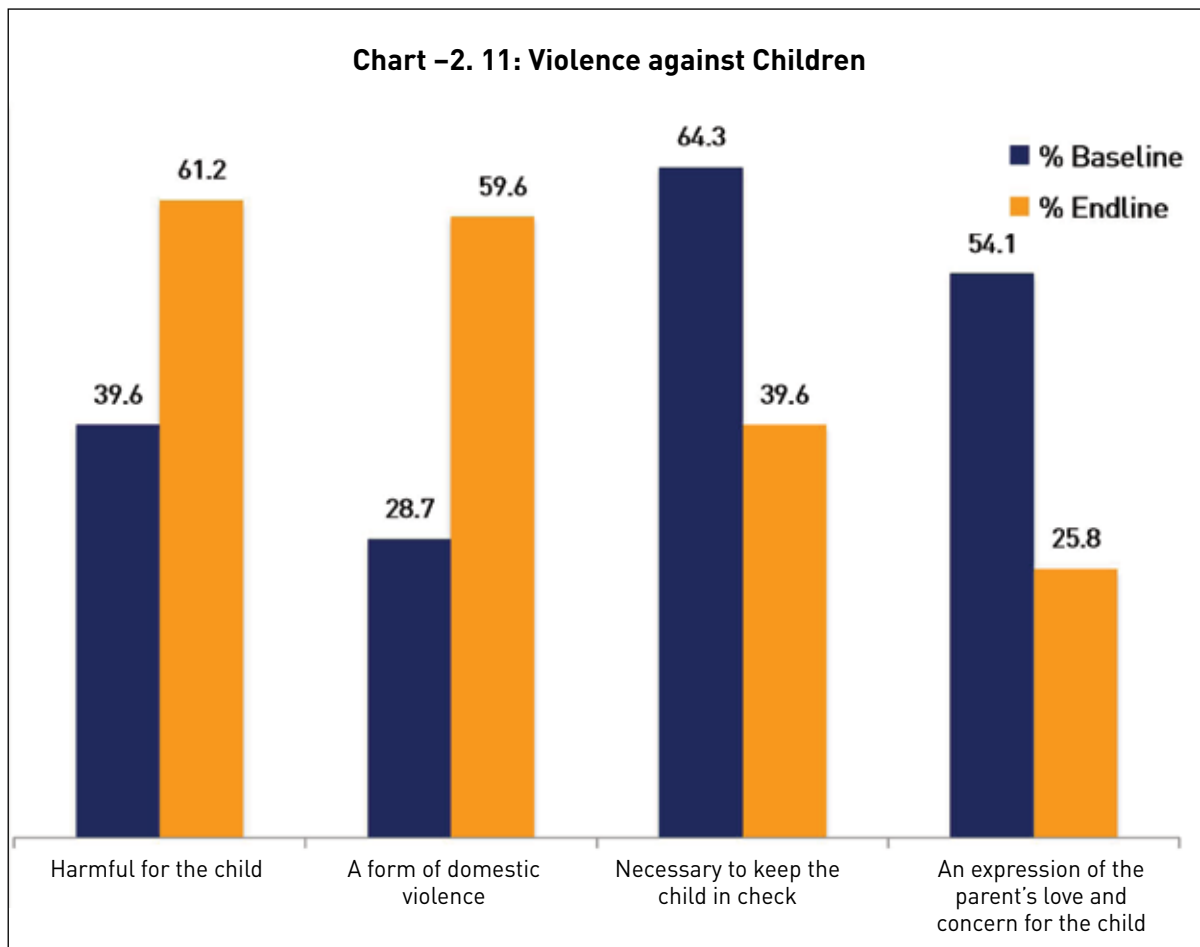
The adolescent girls were asked to respond to a situation wherein their parents had decided to get them married without their consent. They could choose more than one answer out of the five statements given. Most of the girls responded that they would take help of their family members, their friends and even try to persuade their parents themselves to let it be their

decision. 47.4% even said that they would outrightly refuse to marry and only 11.1% at end-line said they would accept their decision without any discussion (Chart –2. 10).



d. Violence

Whether parents' beating their children are a normal part of bringing them up or is a form of abuse against children; was explored in the questionnaire. The statement posed was "Some parents slap or beat their children. Do you think this is....." and the respondents could choose more than one options from the answers given. While during baseline most of the adolescent girls thought parents beating their children was either 'Necessary to keep the child in check' – 64.3% or 'An expression of the parent's love and concern for the child' 54.1%. This perception changed during endline with 61.2% respondents saying that it is 'harmful for the child' and 59.6% saying that this is also 'a form of domestic violence' (Chart -2.11).



The respondents were also probed about the situations they thought warranted a man beating his wife or sister. While during the baseline 59% of the respondents felt 'No circumstance justifies the use of violence', this response got a major 85.8% during end-line. While 41% respondents during the baseline felt that some reasons justified violence against women, only 14.2% during endline felt either of these reasons is acceptable (Table – 2.16).

Statement	% Baseline	% End-line
No circumstance justifies the use of violence	59.0	85.8
If she argues with him or with family	18.3	5.3
If she spends money without permission	3.0	2.2
If she cheats on her husband	5.5	2.1
If she gives birth to only girls	2.0	1.5
Wears clothes which attracts attention	6.1	1.5
If she neglects her children	3.0	0.9
If she doesn't cook good food	3.0	0.8

e. Sexual Harassment

The respondents were queried on whether they could recognize sexual harassment happening through case studies. The first case study was about a 10 year old girl Mohita. The adolescent girls were asked to choose from statements given and could select more than one response.

Case Study - 1

“Mohita is 10 years old. Her uncle often comes over to stay. He brings lots of toffees and biscuits for her. At times he tries to touch her in ways Mohita does not like. Mohita’s parents notice that she has become very quiet and withdrawn. Which of the following statements in your opinion are correct?”

The responses chosen by the adolescent girls showed that 71.8% of the girls at the endline as compared to 41.1% at baseline could identify that Mohita was being sexually abused. 81.9% thought that the parents should actively respond by not allowing the uncle to be alone with her and 78.3% also thought parents should try and understand Mohita’s change in behaviour (Table 2.17).

TABLE 2.17: Response to Sexual Harassment

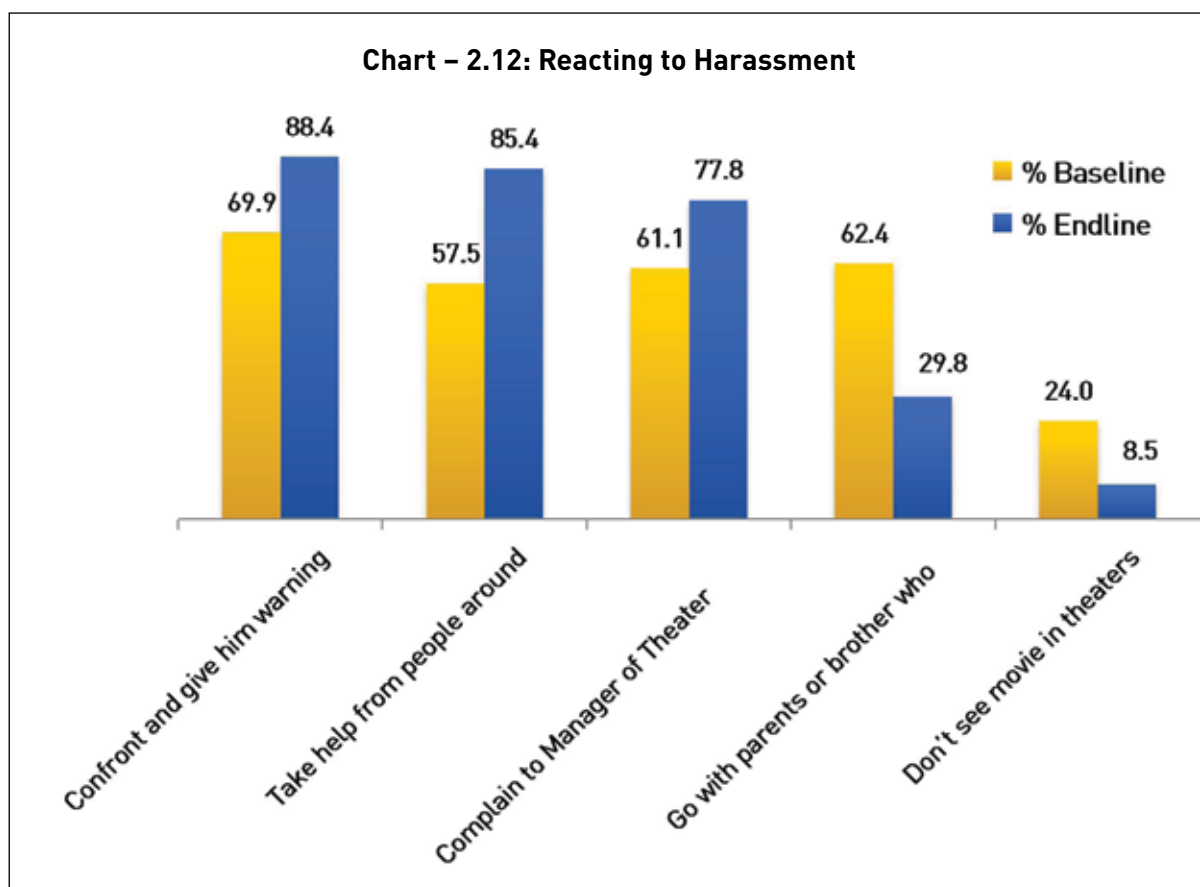
Statements	% Baseline	% End-line
Uncle wants to sexually abuse her	41.1	71.8
She misunderstood uncle’s affectionate behaviour	30.1	13.6
Parents should not let the uncle be alone with her	78.0	81.9
Parents should try to understand why she had become so quiet and withdrawn	68.0	78.3
Parents should keep quiet and not ask any questions as this could upset the uncle.	20.1	8.1
<i>Percentages may not add up to 100 due to multiple responses</i>		

In order to further explore what they thought was the appropriate response towards a situation involving harassment, the adolescent girls were given a case-study as follows:

Case Study - 2

Monica and Sabina go to see a film. On the way out of the hall, they are teased and harassed by a man who passes obscene comments. What would be your advice to Monica and Sabina?

A significant proportion of the respondents advised that the girls should 'Confront and give him warning' – 88.4% along with 'taking help from people around them' – 85.4% and 'Complain to manager of theatre and stress that he take steps to make the hall safe for women' -77.8%. Only 29.8% during end-line as compared to 62.4% at baseline thought that they should 'Go with parents or brother who would protect them'. They 'should stop seeing movies in theatres' was chosen by 8.5% at endline against 24% at baseline (Chart – 2.12).



2.5.5 Conclusions and Suggestions

The CBAG project, as viewed at the endline study, has given significant input in improving the quality of life of the target adolescent girls. There were some issues on which the girls got confused like some aspects of anaemia, RTI, etc. and could be kept in mind during the next attempts. Although the responses show marked improvement, one year of actual input “sessions” is too short a duration to bring about changes in attitude and practices. The messages should be reiterated periodically.

Based on the findings and review of the project, the suggestions are as follows-

- The knowledge component of the issues covered like RTI and STI and especially the difference between them needed to be made clear so

that the girls could share their problems and seek treatment without any hesitation.

- The girls seem to be confused regarding some aspects of “anaemia” namely “there is excess blood flow during menses due to anaemia” and that IFA tablets are not supplements to iron rich food but its replacement.
- The information on identification and treatment centres for HIV/AIDS should have been added to the curriculum.
- The processes like ‘question box’ activities which were found to be very helpful for the students can be made use of to address the queries of the girls.
- Since the resource materials in the form of manual, videos, teaching-learning aid, supplementary books etc. are available in the hostels, the project activities can be continued for the girls taking new admission to the hostels in class 9th.
- The parents of the adolescent girls could also have been oriented on the life skills education being given, in order to have made the practice of these life skills by the girls more understandable to them.
- About time duration of the project dedicated to bring about a change in the KAP of the Life Skills seems to be very less. The messages need to be reiterated and discussed on a regular basis to bring about a greater impact of Life skills education; especially in the “attitude” and “practice” part.
- An additional tool like FGD could have improved the comprehensiveness of the impact assessment.
- The questionnaire developed contained some questions which were not relevant to the curriculum covered under the project and at the same time left out some of the aspects covered like career counselling.

CONCLUSION

It can be inferred from the end-line data that there has been a marked improvement in the knowledge and attitude of the adolescent girls of the RMSA hostels after exposure to various activities under the CBAG project. The project will have far reaching consequences not only in the lives of the adolescent girls covered under the project but also their friends, families and community as a whole. Increasing the coverage of the project activities to inculcate Life Skills in both, adolescent boy and girls will make this period of transition from childhood to adults much better for them which in turn will help them grow into well-adjusted responsible adults capable of contributing towards the growth of the nation.

Appendix – 1

List of Tables and Charts

Number	Description
	TABLES
1.1	Percentage of Girls with Parents' Occupation
2.1	Characteristics of Adolescents
2.2	Physiological Changes During Adolescence
2.3	Education Aspiration – Respondents
2.4	Attitude towards Menstruation
2.5	Causes of Anaemia
2.6	Understanding Anaemia
2.7	Response towards knowledge of Reproductive Health
2.8	Spread of HIV
2.9	Consequences of Substance Misuse
2.10	Comfort level in Discussion of Issues
2.11	Interaction with Friends
2.12	Responding to Attraction
2.13	Distinguishing Gender Issues
2.14	Response to Growing-up
2.15	Knowledge of Legal Age of Marriage
2.16	Views - Violence against Women
2.17	Response to Sexual Harassment

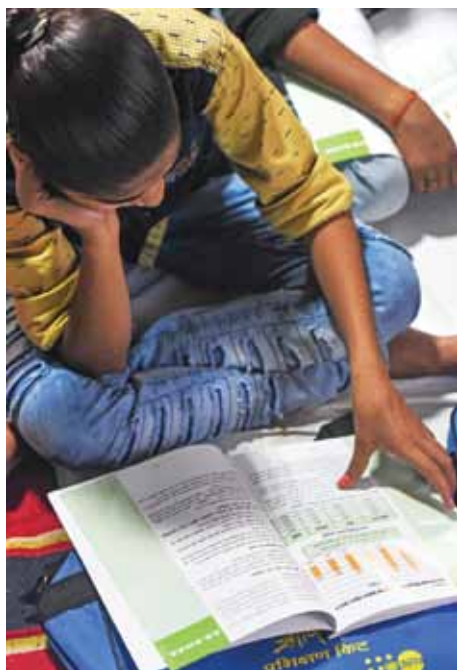
Number	Description
	CHARTS
1.1	Trends in Sex Ratio (1961 to 2011 Census) – India
1.2	Percentage of Girls & Years of their Association with RMSA Hostels
1.3	Class wise Number of Girls
1.4	Caste wise Percentage of Girls Covered
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2.11	Violence against Children
2.12	Reacting to Harassment

Annexure -2

List of Abbreviations

UNFPA	United Nations Population Fund
WHO	World Health Organization
SRC	State Resource Centre, Indore
DPI	Directorate of Public Instruction
RMSA	Rashtriya Madhyamik Shiksha Abiyan
CBAG Project	Capacity Building of Adolescent Girls Project
KAP	Knowledge Attitude and Practice
WCD	Women and Child Development
KGBV	Kasturba Gandhi Balika Vidyalaya
EBB	Educationally Backward Blocks
SC	Scheduled Caste
ST	Scheduled Tribe
OBC	Other Backward Classes
ARSH	Adolescent Reproductive Sexual Health
SRH	Sexual and Reproductive Health
HIV	Human Immunodeficiency Virus
RTI	Reproductive Tract Infection
STI	Sexually Transmitted Infections
PE	Peer Educators
AG	Adolescent Girls
SAP	Social Action Project









प्रश्नोत्तरी के साथ स्लोगन लेखन में बालिकाओं ने लिया भाग

प्रश्नोत्तरी के साथ स्लोगन लेखन में बालिकाओं ने लिया भाग। यह कार्यक्रम बालिकाओं के लिए आयोजित किया गया था।

बाल विवाह के दुष्परिणाम बताए

बाल विवाह के दुष्परिणाम बताए। यह कार्यक्रम बालिकाओं के लिए आयोजित किया गया था।

बाल विवाह, पोषण व स्वास्थ्य पर कार्यशाला 30 और 31 को

बाल विवाह, पोषण व स्वास्थ्य पर कार्यशाला 30 और 31 को। यह कार्यक्रम बालिकाओं के लिए आयोजित किया गया था।

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