

RAPID ASSESSMENT:

CREATING ADOLESCENT FRIENDLY COMMUNITIES TO IMPROVE SEXUAL REPRODUCTIVE HEALTH OUTCOMES THROUGH STRENGTHENING RKSK PROGRAM IN ASSAM

Rationale of the Study:

The dipstick study assesses the work of the 10to19 collaborative to strengthen the implementation of the Rashtriya Kishor Swasthya Karyakram (RKSK) and contribute to the all-round development of the adolescents in the state of Assam.

Respondents were selected from intervention districts for each age group, namely: Golpara and Dhubri, where the program was run by the Child in Need Institute (CINI). CINI was selected as key state implementation partners on the basis of their long-standing success with adolescent and child-focused programming to carry-out a multi-year grassroots program. Implementation on ground began in

2019 as did the work at the state level which involved:

- On-ground implementation in 2 districts (Golpara, Dhubri) with support provided to district and block administrations on adolescent issues related to health, education, safety and empowerment
- State support to the NHM to trickle up key learnings, provide consultation and technical support as needed.

A baseline was conducted in the state prior to implementation, indicating poor knowledge and awareness of the RKSK scheme and limited health-seeking behaviour.

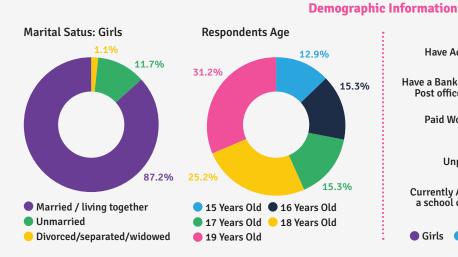
State Profile: Assam

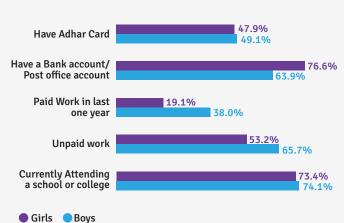
Adolescents in Assam represent 20% of the population – a ratio at par with the national proportion. Data shows that these adolescents face challenges like school drop-out, early marriage, early pregnancy, trafficking, child labour, and lack of self-esteem, limited decision-making power, malnutrition, anaemia and other vulnerabilities.

Sexual and reproductive Health (SRH)	Assam	Goalpara	Dhubri
Women aged 15-49 years married before 18*	31%	35.8%	46.2%
% of births (out of total) to women aged 15-19 ^{\$}	48.3%	44.9%	52.4%
Use of condom within age group 15-49 years*	2.7%	1.8%	3.5%
Use of oral contraceptive pills within age group 15-19 years*	22%	26.1%	21%

^{*\$} Source: HMIS 2015-16, *Source: NFHS 4, 2015-16

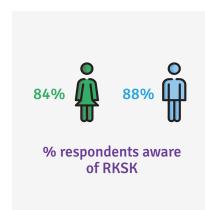
Findings from the dipstick survey

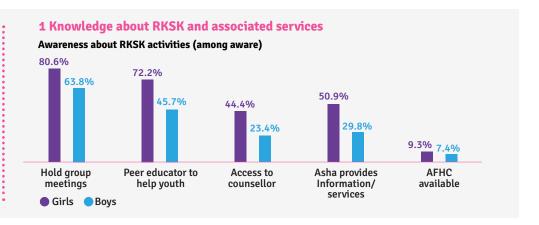




RKSK related Awareness and Practice

Responses to the endline survey indicate significant positive knowledge and awareness of the RKSK program. Respondents indicated that they were aware of and had participated in group meetings and engaged with peer educators. Knowledge of Adolescent Friendly Health Clinics (AFHCs), however, was still low. 48% of adolescents attended an Adolescent Health Day/ Kishori Swasthya Divas in the last year





Findings on access to menstrual hygiene products and indicators on sexual and reproductive health

9.3% S4.3% Sknow get provery frequency sexual

Know that woman can get pregnant on the very first time she has sexual intercourse

1.

While 93.5% of responding girls had heard of the government's scheme for sanitary napkins, only 52.3% of girls surveyed in the dipstick stated that they had received sanitary napkins under the RKSK scheme in the last one year (among aware

2.

Health information received from an ASHA in the last year:

- General health and hygiene related information- 53%
- Nutritious food related information:
- Body change including menstruation and menstrual hygiene: 47%

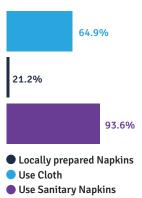
3.

51% adolescents
said they were
feeling down,
sad, depressed or
hopeless for one
week or less than
week in last 15 days.
41% adolescents
said they did not feel
down, sad, depressed
or hopeless at all in
last 15 days.

4.

A higher proportion of adolescents knew the correct legal age at marriage for girls (91%) in India than for Boys (70%).





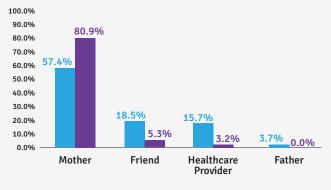
Findings on parental interactions, agency and decision-making

Data indicates that, as a result of the program, adolescents are able to have more open conversations around issues such as health and wellbeing, agency and decision-making. For example, Most adolescents said that they feel that they can talk about personal things with parents/a guardian. Most girls (90%) said that in the past one year they have discussed about menstruation with their mother or a female guardian.

However, despite the increase in open conversation and sharing, only close to half of the respondents were consulted on when and to whom they wanted married.

Similar trends exist around mobility: A lower proportion of girls are allowed to go out alone as compared to boys, especially outside the village or ward. Most of the boys (76.9%) are allowed to go to a shop or market or visit a friend/relative inside their village/ward alone, while only 27.7% girls are allowed to do so.

Most likely to talk about problems with: for problems in private parts such as itching or burning while passing urine or pain during menstruation



Boys Girls

Trends in access to mobile phones, however, are promising. While a higher proportion of boys (84.3%) as compared to girls (48.9%) have own mobile phone, almost all the adolescents have access to a mobile phone. In contrast, while daily or regular internet access was prevalent among 69.8% of respondents, 47.9% girls said that they access internet rarely or not at all.

	Total	Boys	Girls
Base: All respondents	200	108	92
Yes, have own mobile	67.8%	84.3%	48.9%
Yes, can access family member's mobile	31.2%	15.7%	48.9%
No	1.0%	0.0%	2.1%

Key Takeaways

- Overall, the dipstick survey indicates that knowledge of schemes and services particularly around RKSK – increased significantly among adolescents who had participated in CINI's programs.
- However, knowledge and uptake of services from AFHCs continues to remain a challenge with only 35% of adolescents seeking services from an AFHC
- Adolescents who participated in the program also showed high levels of awareness of SRHR across parameters and have increased access to information and resources around the same.
- They also show high rates of positive interactions with parents (with 95% able to talk to their parents about personal things), and healthcare workers (with 73% having talked with the ASHA about a key topic). This indicates that adolescents feel comfortable having open conversation and interactions around sensitive issues.
- There continue to be areas for improvement particularly around access to schemes, both for girls and boys and increased agency for girls.

About the Organisations





Dasra is catalyzing India's strategic philanthropy movement to transform a billion lives with dignity and equity since 1999. The 10to19: Dasra Adolescents Collaborative (DAC) is a high-impact platform that unites funders, technical experts, the government, and social organizations to reach 5 million adolescents, and move the needle on four outcomes key to adolescent empowerment: delaying age at marriage; delaying age of first pregnancy/birth; completing secondary education; and increasing agency.

Website: www.10to19community.in Email: 10to19community@dasra.org



Child in Need Institute (CINI) is an Indian non-government organisation founded in 1974 by Dr. Samir Chaudhuri, a paediatrician, with other professionals from different disciplines. Over nearly five decades, CINI has engaged in participatory, convergent, and preventive rights-based programming for children in the areas of health, nutrition, education, and protection. CINI reaches a population of 7 million in Indian states like West Bengal, Jharkhand, Assam and Odisha through direct interventions and in other states through technical assistance, networking and advocacy.

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