**Action for Adolescent Girls initiative in one block of Udaipur**

**Background**

UNFPA through its country programme reaches out to young people to empower them with the necessary information and services that enable them to realize their aspirations, and make informed choices about their sexual and reproductive rights. UNFPA also works to address harmful practices against women and girls so that they can lead a fulfilling and meaningful life.

India has 120 million adolescent girls, accounting for nearly 10 percent of the country’s population. A large number of these girls, especially those in rural and tribal areas, live their life without being able to decide and build their future. Deep-rooted socio-cultural customs and norms leave them powerless and vulnerable. Child marriage, early and repeated motherhood, lack of education, ill-health, gender-based violence and discrimination, and even trafficking, continue to form a complex cause-and-effect web that entraps so many of these girls. The situation is especially grim in Rajasthan. Perhaps the starkest indicator of vulnerability and lack of decision-making power among adolescent girls is the prevalence of child marriage. The National Family Health Survey 4 (NFHS-4) released in 2017, confirms that 35 percent of the girls in Rajasthan get married before the legal age of 18 years.. The consequences of child marriage are adverse for both sexes, but more stark and significant in the case of girls.

Evidence from several research studies clearly indicates that not only is child marriage a gross violation of human rights, but also tends to impact all aspects of life. Early and forced marriages curtail freedom of choice, opportunities and agency, and also reinforce existing structural inequalities related to age, gender, class, caste, religion, sexuality and political economy. The health consequences due to early child bearing and greater responsibilities in the household result in harmful outcomes, both at individual and societal levels; higher infant, child and maternal mortality rates are some adverse outcomes associated with early and child marriage. Girls discontinuing education on account of getting married also has long-term consequences. Girls who are married early are also likely to be vulnerable to violence within marriage. At the macro level, it also contributes to maintaining the intergenerational cycle of poverty and further marginalising women[[1]](#footnote-1).

**Snapshot of Udaipur District, in Rajasthan**: The state of Rajasthan is the largest state in India and occupies 10.4 percent of the total geographical area of country, accounting for the 5.67 percent of the total population. Within Rajasthan, the district of Udaipur has a predominantly rural and tribal population. Also, the average literacy rate of Udaipur District is 61.82 percent, compared to the state average of 66 percent.[[2]](#footnote-2) Male and female literacy rates for the district are 74.74 percent and 48.45 percent respectively. Child marriage is quite prevalent in the Udaipur district and as per the NFHS-4, 40.4 percent women in the age group of 20-24 years were married before the age 18 years and in the rural areas the percentage was higher at 43.5 percent. Malnutrition is also quite prevalent in the district and as per the NFHS-4, in the rural areas around 75 percent women in the age group of 15-49 years were anemic. While detailed data for NFHS-4 is awaited, NHFS -3 shows that the unmet need for spacing methods of contraception among the age group 15-19 years is 26 percent and among 20-24 years is 17 percent. The district has a Total Fertility Rate of 3.8[[3]](#footnote-3) and an Adolescent Fertility Rate of Rajasthan is 14.5 among the age group of 15-19[[4]](#footnote-4), which is higher than most of the states in the country. Early marriage and high unmet need for contraception leads to early child bearing and associated complications.

Action for Adolescent girls project was implemented in Udaipur from 2015-2017 and has helped in testing UNFPA’s girl centric curriculum and environment building activities to facilitate the empowerment of adolescent girls in vulnerable settings in Udaipur district. The intervention in Udaipur enabled outreach to approximately 12,000 adolescent girls’ with asset-building initiatives in the areas of health, social and financial literacy. The project also provided a platform for out of school adolescent girls to link them to open school education and opportunities for livelihood skill-building. The learnings from the initiative have contributed to the development of strategic action plan to address the issue of Child Marriage in the State through the involvement of different stakeholders.

The focus in the last few years of the AAG implementation was to reach out to larger number of out of school adolescent girls in two blocks of Udaipur. During the implementation , apart from the learnings that was highlighted , the challenges included how to address the issue of migration which hindered some of the girls from attending the clubs’ meetings, turnover among the peer educators who were facilitating the curriculum at the adolescent clubs and the quality of transaction of curriculum in the adolescent clubs

It is planned that the AAG initiative will be implemented in another block in Udaipur District which will reach 5250 adolescent girls through 175 adolescent clubs in a span of 12 months from April 2018 to February 2019. The initiative would focus on both out of school unmarried and married girls in the identified new block, where the vulnerabilities are very high for the adolescent girls to realize their aspirations.

As part of the Request for Proposal, the Implementing partner has to suggest a block for the AAG initiative implementation. The block should be different from the blocks of Kherwara and Salumber, where the first cohort of adolescent girl’s initiative was implemented. In the new blocks, as part of the AAG initiative adolescent clubs will be formed in 175 anganwadi centers. In 2018, the initiative would focus on 1) Reaching out to Adolescent Girls 2) Developing Sustainable Mechanisms and 3) Policy Engagement and systems strengthening. The initiative also would look at strengthening the transaction of the curriculum in the adolescent clubs so that the knowledge that is imparted will leads to improvement in positive attitudes and practices that would help the girls realize their aspirations. The Initiative would also establish structures and framework at the end of the project period, which would sustain the critical interventions, especially the meeting of the adolescent girls at the Anganwadi centers, at the end of the project period. During the period of project interventions, the interventions will also contribute to the strengthening of the Government systems to strongly implement large scale adolescent girl’s programmes.

**Objectives:**

The Specific objectives of this initiative are:

1. Enhance the adolescent girls’ understanding of social skills, access to health information and services, enhance opportunities for continuation of education and increase the possibilities for participation and leadership opportunities in their communities.
2. Create an effective network of adolescent peer educators/grassroots functionaries for empowering the adolescent girls to realize their aspirations through acquiring of social, health and economic assets.
3. Facilitate the development of an enabling environment in support of girls’ human rights through adolescent girls, Peer Educators, Opinion Leaders and Key Functionaries.
4. Engage with Policy makers on the issue of child marriage and provide technical support to implement interventions addressing child marriage by integrating the learnings from the Action for Adolescent Girls Initiative
5. Contribute to systems strengthening by working closely with the Department of Women and Child Development to reach out to larger number of out of school adolescent girls apart from the intensive project interventions in 175 adolescent clubs
6. Facilitate Knowledge Sharing and Developing models of process interventions that can be further used for engaging discussions with potential stakeholders for scale up.

**Strategies**

Strategy 1 - Create an enabling environment for the development of adolescent girls in the community

Strategy 2 – Mobilize adolescent girls (married and unmarried) through adolescent clubs in the Anganwadi centers, in the intervention villages and transaction of curriculum through fortnightly meetings

Strategy 3 – Identification of the Peer educators and capacity building of the peer educators on the basis of the girl centered curriculum

Strategy 4 – Capacity Building of frontline workers including Anganwadi workers, ASHAs and the Sathins in the intervention villages to provide supportive environment for the curriculum to be transacted

Strategy 5 – Partnership building and Linkages with the different Government departments in terms of large scale adolescent programmes (like SABLA) and Institutions that provide skills training for the adolescent girls to access educational and livelihood opportunities

Strategy 6 - Development of Resource center in the intervention block to facilitate the out of school adolescent girls to access resources

Strategy 7- Developing Knowledge briefs, process documentation on the programme

In order to strengthen the strategies to reach out to the out of school adolescent girls, UNFPA through its technical support will also undertake certain identified interventions in co-ordination with the Government and the Implementing Partner. UNFPA would advocate with the Department in strengthening the Monitoring information management system of SABLA and other large scale adolescent programmes, in collecting the data related to the adolescent girls programs that are implemented in the field. This MIS would be different from the MIS system of the second cohort of the AAG initiative. Apart from that in Udaipur, UNFPA would in co-ordination with implementing partner would identify best practices in the area of Action for adolescent girl’s project implementation and share the same for further scale up.

The implementing partner is encouraged to suggest strategies for retention of 90 percent of the adolescent girls in the 175 clubs throughout the different sessions undertaken at the Anganwadi centers. Strategies also needs to be suggested by the Implementing Partner in engaging married young girls, and for making the transaction joyful and help the girls to understand the key messages of each of the session.

**Scope of Work**

1. **Udaipur**
   1. Mapping of the 175 Anganwadi centers in a tribal block of Udaipur on the basis of the vulnerability of the out of adolescent girls
   2. Mapping of the different programmes and the stakeholders in the district related to the out of school adolescent programmes
   3. Establishing monitoring and evaluation mechanisms for the project to enable measurement of progress on a regular basis throughout the project duration
   4. Formation of adolescent clubs ( 25 girls in each group )in 175 Anganwadi centers and identification of peer educators ( 2 each from each Anganwadi centers)
   5. Capacity Building of the Peer educators on the girl centered curriculum in three phases
   6. Capacity Building of the AWWs, ASHAs of the 175 Anganwadi centers and Sathins of the respective Gram Panchayats
   7. Develop a system of mentoring mechanisms to provide handholding to the peer educators in terms of transaction of the curriculum and continuous capacity building.
   8. Creating an enabling environment by organizing Adolescent health day in each of the 175 Anganwadi centers
   9. Create and Provide linkages for the adolescent girls to access non formal education and opportunities for livelihood trainings
   10. Develop a convergent plan with the Government Departments at the District level to maximize the benefit of the various girls centered schemes for the out of the adolescent girls.
   11. Undertake mentoring visits by the District and Block level team for strengthening the programme
   12. Development of Resource center in the intervention block to facilitate the out of school adolescent girls to access resources.
2. **State level support and facilitation**
   1. Develop Master trainers for the training of the functionaries in 9 other SABLA Districts
   2. Develop knowledge briefs and undertake process documentation on the basis of the intervention in Udaipur.
3. **Expected outputs of this proposal**
   1. 5250 adolescent girls at the end of the 12 months will be equipped with health, social and economic assets for realizing their aspirations
   2. 10,000 adolescent girls indirectly reached through systems strengthening of the large sector programmes of Government
   3. Models developed in terms of various processes related events in reaching out to the out of school adolescent girls – Curriculum Model of supportive systems of monitoring adolescent programmes, an integrated model with linkages to education & Skills/livelihoods and sustained model of a resource center driven by adolescents.
   4. Knowledge Management facilitated for experience sharing and engaging with Government for advocacy and influencing policies related to adolescent girls empowerment and child marriage

**Project time line**

The initiative is envisaged for a year from April 2018 to February 2019.

**Expected Results**

* 350 Peer educators trained in all the three phases of the Girl Centered Curriculum
* 175 Adolescent clubs constituted reaching out to approximately 25-30 adolescent girls in each club at the Anganwadi centers
* Master trainers trained for the SABLA programme across the 10 districts of the State
* 10,000 adolescent girls reached through SABLA in Udaipur district in the blocks other than the AAG intervention block
* Adolescent health days celebrated in all the 175 Anganwadi centers
* Girl Centered curriculum transacted in 175 Anganwadi centers fortnightly
* Robust MIS system established to capture the progress of the AAG intervention at the Adolescent clubs
* At least 1/3rd of the girls reached through this initiative will be linked to the education /livelihood opportunities
* One Block resource Center established in the intervention block and sustained

**Budget may be proposed along the following lines**- Budget breakup is to be provided for the period April-December 2018, and for January-February 2019.

1. Human Resources
2. Capacity Building
3. Monitoring and Evaluation
4. Programme implementation /delivery

1. Rajasthan State Strategic Action and Plan for Ending Child Marriage, 2017 [↑](#footnote-ref-1)
2. Census 2011 [↑](#footnote-ref-2)
3. Annual Health Survey 2011-12 [↑](#footnote-ref-3)
4. SRS 2016 [↑](#footnote-ref-4)