

# Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) SABLA

In the Indian context, adolescent girls are vulnerable to physical and educational neglect. Malnutrition is more common in India than in sub-Sahara Africa with over 90 percent of young girls reported as anemic. Academically, adolescent girls have a much higher rate of school dropout than boys. Such neglect becomes an impediment to the progress of young girls and women in society. The RGSEAG SABLA program works to combat this by focusing on nutritional needs, life skills component and nutritional and health component.

## Extent of the problem

- One in every three malnourished children in the world lives in India.
- Anemia affects 90% of adolescent girls in India
- According to the Ministry of Human Resource Development enrollment sex ratio in primary schools is almost 1 but in secondary education it drops down to 0.79
- 80% of women are engaged in informal sectors, primarily agriculture.

## Objective

SABLA aims to converge the pressing requirements of adolescent girls viz. nutritional needs and skill development. Hence this comprehensive scheme provides nutritional supplement and increasing awareness on health, nutrition, lifestyle and adolescent reproductive and sexual health to facilitate a smooth transition into womanhood. It also provides vocational training to out of school, girls to create avenues of economic empowerment.

## Program features

Integrated Child Development Services (ICDS) infrastructure would be used for the implementation of SABLA. Anganwadi Centers would be the focal point for delivery of services. The two major components of the scheme are nutritional and non-nutritional aimed at both in-school adolescent girls and out of school adolescent girls. Various schemes to be provided to the girls are mentioned as below:

| Service                                | Details   | Service Provider            | Target Girls                                  |
|--|---|-----------------------------|---|
| Nutritional provision<br>Rs. 5 per day | 600 calories and 18-20 gm of protein for 300 days a year in the form of hot cooked meal or take home ration | Anganwadi/<br>Leader        | Peer<br>11- 4 (Out of school)<br>14-18 (Both) |
| Iron Folic Acid (IFA) Supplementation  | 2 IFA tablets per week to be administered to girls at Anganwadi centres                                     | Anganwadi                   | 11-18 (Out of School)                         |
| Health Check up and Referral services  | General health check up every 3 months. Records of height, weight,  | Anganwadi / Medical Officer | 11-18 (Out of School)                         |

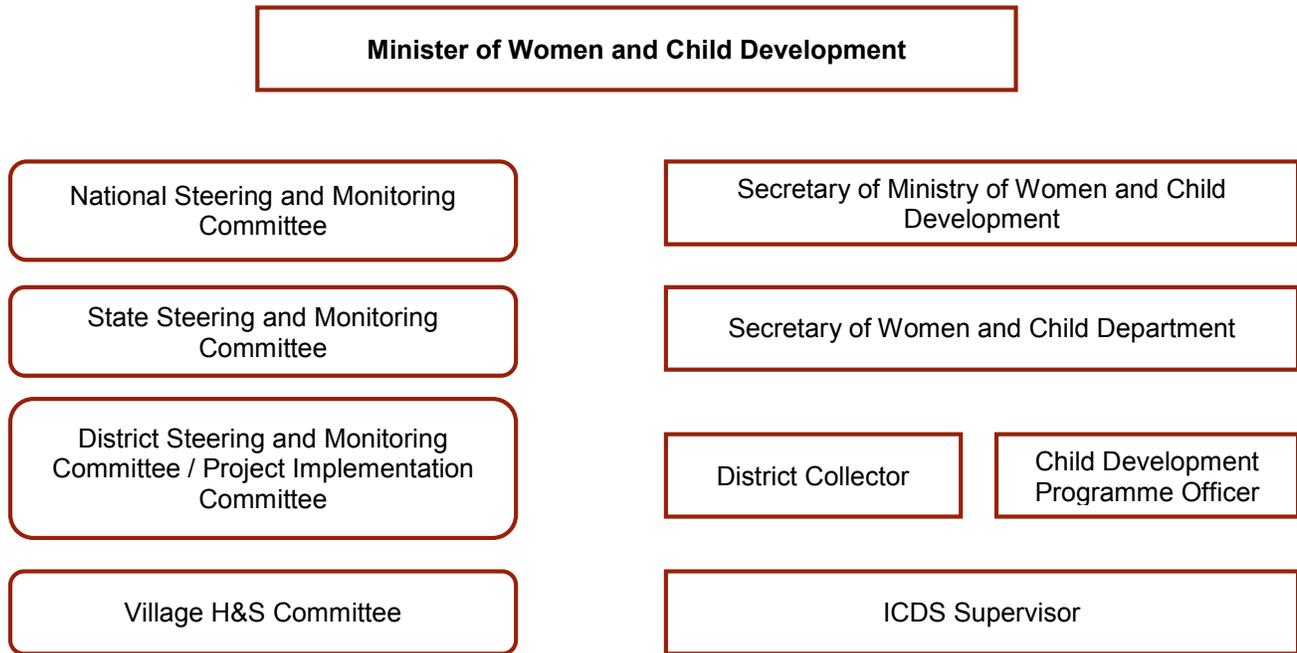
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|   | and any specific medical problem to be recorded in KishoriCards   |  |                       |
| Nutritional and Health Education        | Spreading awareness on nutritional deficiency, balanced diet, personal hygiene, first aid and home remedies in Anganwadis                                       | Anganwadi / Medical Officer / Asha             | 11-18 (Both)          |
| Counselling on Family welfare practices | Age appropriate awareness sessions on reproductive and sexual health, child care practices and home management to be carried out in Primary Health care centers | Anganwadi / Medical Officer / NHRM Setup       | 11-18 (Both)          |
| Life Skill education                    | Imparting skills focused on personality development, functional literacy and accessing public services in Anganwadi centres                                     | Anganwadi/ MNGO/ Youth Affairs/Education Setup | 11-18 (Both)          |
| Vocational Training using NSDP          | Vocational Training provided for a maximum period of 3 years with desired level of flexibility in location to ensure maximum benefit                            | Through NSDP of Ministry of Labour             | 16-18 (Out of School) |

## Funding Mechanism

The financial assistance to the State Governments would be given in four installments for Nutritional component and in 2 installments for the non-nutritional component by the Ministry of Women and Child Development. The Ministry of Women and Child Development would transfer the funds to the consolidated account of the concerned State Government. States may have a special bank account for SABLA operated by the State ICDS Cell. The State ICDS Cell shall in turn provide grant-in-aid to the District ICDS Cell and the ICDS Projects implementing the scheme at the grassroots level depending on the case. The first installment would be released in the month of April. The other three installments would be released on upon the receipt of the Statement of expenditure of one earlier quarter

## Governance and Monitoring

The Ministry of Women and Child is responsible for the budgetary control and administration of the scheme. At the state level, the secretary of the department of women and child would be responsible for the overall direction of the program. At the district level, the District Project Officer (DPO) would be responsible for implementing the scheme and the City Development project officer (CDPO) would be responsible within the ICDS project area. At the grassroots, Anganwadi centres and NGO's would be instrumental in providing the services. The service delivery structure would function as below:



### **ISHRAQ- Program for adolescent girl child in Egypt**

In Egypt, as in India, the out-of-school girls are the most disadvantaged and invisible section of the population. With little say in deciding their own futures, they were married and bore children at an early age. In 2001, the Population Council, in partnership with volunteer agencies (ex. Save the Children, Caritas) designed a 30-month program to provide girls with places they could learn freely. The advantage of socializing with girls of their own was targeted to provide them access to education and information about reproductive health. The girls were trained in skills like math, basic English, and sports so that they would have another chance to join formal schooling. The outcomes of the program were exceptionally heartening with a 92% pass rate from the girls who attempted the government literacy exam, and 68.5% enrolled for further education. In various surveys they expressed a desire to be married late, gained awareness about the female genital mutilation and were volunteering in community activities.