



For Women Young people Children

Moving Ahead: Making health and nutrition information and services accessible to adolescents in the state of Gujarat, India

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Background

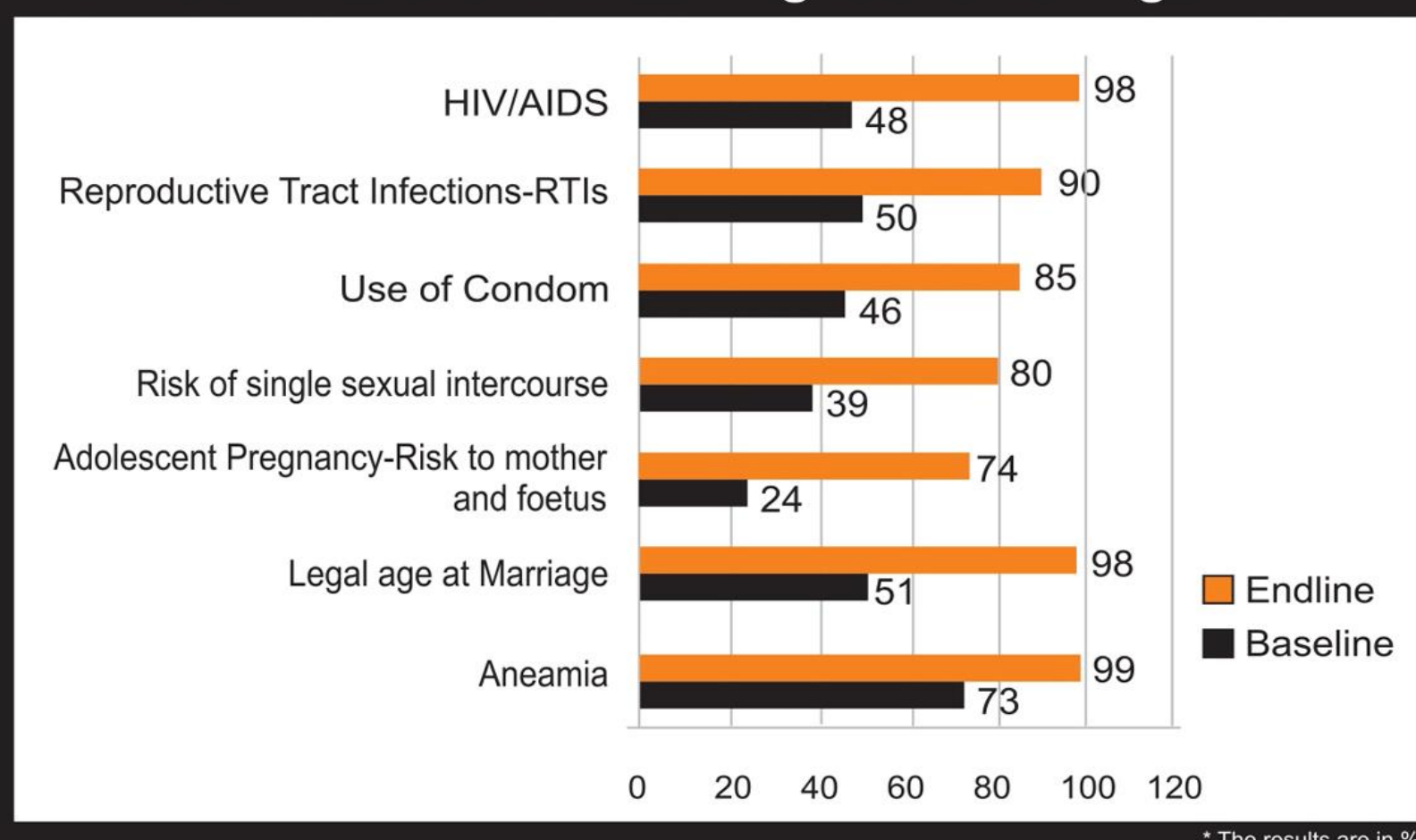
The challenges and risks faced by adolescents impact their physical, emotional and mental well-being. Early marriage, early pregnancy, incomplete and/or lack of education, poor access to information about health and nutrition poor life skills, poor access to nutrition and reproductive and sexual health services are some challenges faced by the adolescents. These challenges are interconnected and needs to be addressed in comprehensive way.

Keeping this reality in view CHETNA partnered with Department of Health and Family Welfare Government of Gujarat to reach out to adolescent girls through their existing Mamta Taruni Project. This project provides both nutrition and health services to adolescent girls.

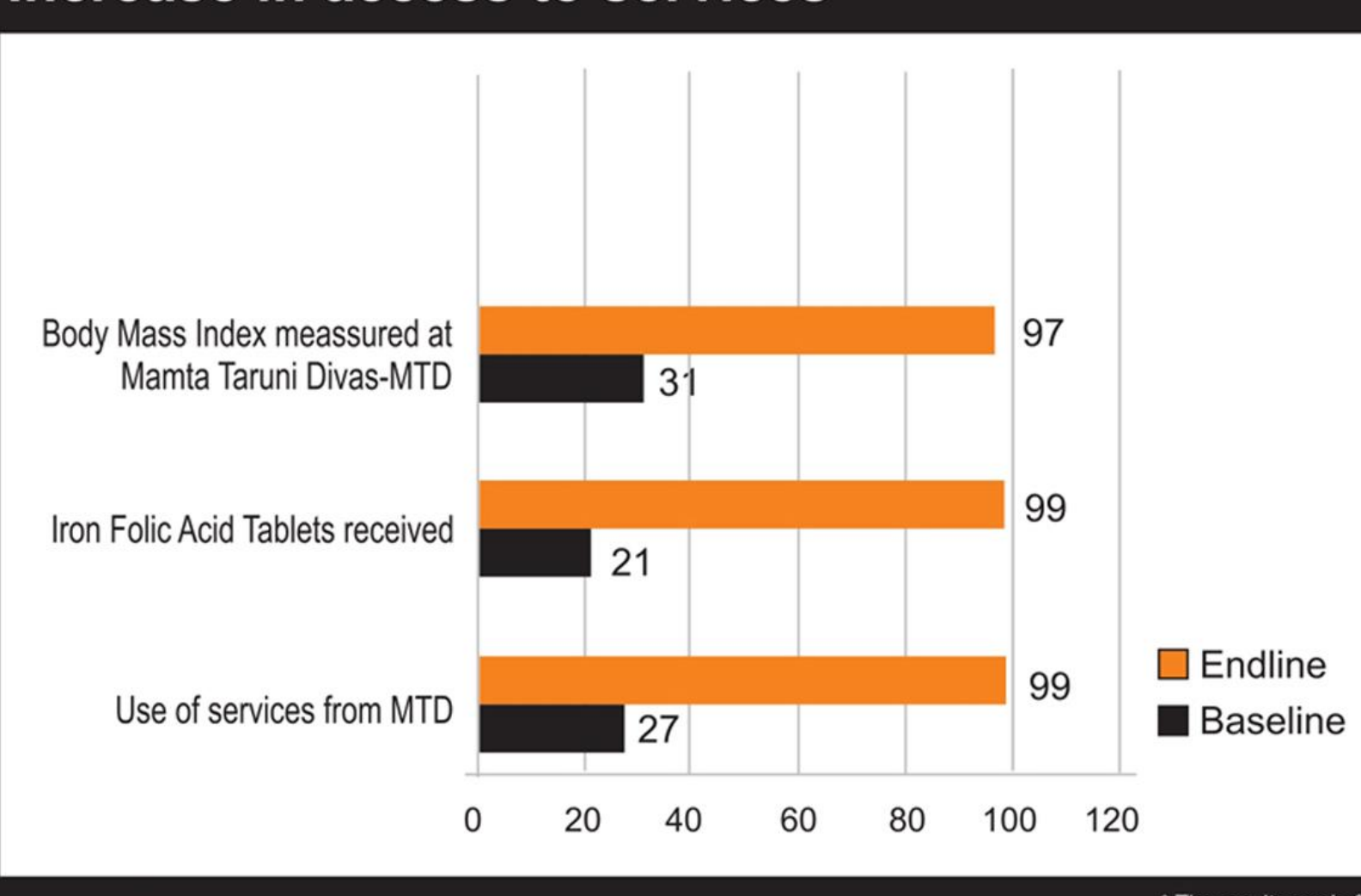


Figure

Increase in awareness among adolescent girls



Increase in access to services



Intervention

To make nutrition, reproductive and sexual health information and services accessible to out of school adolescent girls of the state of Gujarat through the MAMTA Taruni Abhiyan (MTA) CHETNA adopted approach to train peer educators and frontline workers. The MTA was implemented by Government of Gujarat, CHETNA join hands to demonstrate different approaches and methodology to successfully make the envisaged services accessible to adolescent girls.

A training module was developed to train peer educators and front line workers and material were developed to impart information on health and nutrition to adolescent girls.

Keeping the learning needs of adolescents in view peer educators were trained each month on one topic. Training on Nutrition-Anaemia, Menstruation and conception, Maternal New born care, Contraceptives, RTI/STI and HIV and Life Skills education were facilitated by CHETNA. Total 55 peer educators were trained.

ASHA and Anganwadi Worker (150) who are the two key village level functionaries to make the nutrition and reproductive and sexual health information accessible to the adolescents were jointly trained on Communication.

Regular dialogue between panchayati Raj members, parents, nutrition and health service providers and adolescent girls were ensure to share the challenges to access the services and take necessary actions.



Findings

- The percentage of girls who were aware of anaemia increased from 73% to almost a 100%.
- The percentage of girls who received IFA tablets and supplementary food increased from 21% to 99 %
- In the endline survey, 97% of girls reported having their height and weight measured (BMI) at MAMTA Taruni Divas (MTD). This represented, an 83 percentage increase from the baseline survey.
- 99% of girls accessed nutrition and health services entitled in MAMTA Taruni programme by the end of the intervention, compared to 27% at the beginning of project.
- The data related to health are not mentioned here

Lessons Learned/ Conclusion

- One window approach for nutrition and health services is non negotiable.
- To make this convergence effective joint training of frontline workers is must. The training on technical information and communication skill need to be planned for front line workers. After training mentoring support to front line worker needs to be given. Human resource and financial resources need to be allocated for the same.
- The peer educator approach is successful only with the support of front line workers, ASHA, Anganwadi Workers and Female Health Workers. Lifeskill education is must.
- Involvement of village level stakeholders in decision making and ensuring quality of services is must.

Resources to Learn More

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<http://chetnaindia.org/wp-content/uploads/2011/12/Moving-Ahead1.pdf>

Acknowledgements

All the peer educators and adolescent girls of 53 villages of Prantij and Khedbrahma block of Sabankantha District, Gujarat

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