# LIFE SKILLS & LITERACY:

## TOOLS FOR ADOLESCENT HEALTH AND EMPOWERMENT

TK Sundari Ravindran

# INTRODUCTION AND CONTEXT

The Rural Women's Social Education Centre (RUWSEC) is located in, and works among, the villages of Kancheepuram (formerly Chengalpattu) District<sup>1</sup> in Tamil Nadu, India. Tamil Nadu is generally considered to be among the more developed states in India. In reality, the state presents a mixed picture in terms of development and women's status.

Tamil Nadu has the second highest female literacy rate in India at 52 per cent and its female work participation rate stood at 31 per cent in 1991, the fourth highest in the country. The state has near-replacement level fertility, with a total fertility rate (TFR) of 2.2 as of 1991 and a birth rate that fell to 19.2 per 1,000 in 1991 from 27.9 in 1981. Health and family welfare services are better distributed in Tamil Nadu than in most of the other major states of India. In spite of these social developments, Tamil Nadu is not among the economically developed states. In 1991, the state per capita income ranked ninth in the country, at Rs. 4,428 (US\$ 105), and in 1987–88, about one third of the state's population lived below the poverty line, the fifth highest among 17 major Indian states.

Additionally despite relatively better investment in and accessibility of health services, several health indicators leave much to be desired in Tamil Nadu. In 1992, infant mortality

<sup>&</sup>lt;sup>1</sup> An administrative unit in a state

<sup>&</sup>lt;sup>2</sup> an administrative unit for development purposes in a state. One district has a number of blocks.

rates (IMR) were relatively high at 58 per 1,000 live births in 1992, and between 1981-1991 there was a higher decline in sex ratio (females per 1,000 males) than in the previous decade. Prior to 1981, IMR were generally lower for females than for males, however they have become consistently higher, and female infanticide has been reported from several parts of the state. Recent data indicates shows that 'social causes' accounted for 8 per cent of infant deaths in 1995. These 'causes' are generally understood by NGOs and government to mean infanticide. [MAP enclosed in Annexure]

This case study highlights RUWSEC's experiences in working with both adolescent girls and boys in this context through an integrated set of activities, such as life skills, education, literacy training, health services, recreational and social activities. It raises some important issues regarding a strategy focussed on the overall development of girls and boys to enable a change in attitudes and practices about their bodies, health and relationships, and to expand their options by building inter-personal, decision-making, educational and vocational skills.

#### **ABOUT RUWSEC**

RUWSEC is a grassroots women's organisation that operates from Chengalpattu, near Chennai. It works primarily with socially and economically lower population groups in the villages of Thirupporur and Tirukkazhukundram Blocks<sup>2</sup> of Chengalpattu sub-district of Kancheepuram District. In 1999, RUWSEC's community-based activities included 98 villages, with a total population of about 30,000. Ninety per cent of the population belongs to what the government of India terms as the "scheduled castes (SCs)", and 10 per cent to "other backward castes (OBCs)"<sup>3</sup>. Outreach through other activities extends to a population of about 50,000.

RUWSEC was founded in 1981 by a team of 13 women, 12 of whom were from area villages and had previously worked as literacy teachers with the National Adult Education Programme. The formation of the organisation was an evolutionary process, a natural development of the growing awareness of women literacy teachers that to become effective agents of change in their communities, women needed to gain greater control over their bodies and their sexual and reproductive lives. Consequently, **achieving women's well-**

<sup>&</sup>lt;sup>3</sup> The Government of India has identified certain castes as socially and economically disadvantaged and, recognising the need to protect them from social injustice and all forms of exploitation, the Constitution of India has conferred on them special protection. Scheduled castes refer to such castes, races or tribes or parts of groups within which such castes, races or tribes are declared to be scheduled castes by the President of India by public notification. The Government of India (GOI) introduced reservations based on caste as an important element of affirmative action in favour of disadvantaged communities.

**being through women's empowerment** has been the focus of the organisation's work since its inception. In pursuit of this goal, the organisation carries out a wide spectrum of activities that include:

- community-based health education and health promotion
- community-based reproductive health care for women
- gender training of women
- mobilising women to form women's groups
- · life skills education for adolescent boys and girls
- gender training and reproductive health services for men
- campaigns against violence against women
- running a reproductive health services clinic and hospital
- advocacy for the promotion of quality of care in reproductive health services
- Research in areas such as user perspectives on the diaphragm; the impact of health
  education campaigns on the health of women and newborns and the health seeking
  behaviour; and audits of primary health centres by trained community groups to
  develop indicators for monitoring progress in community-based reproductive health
  programmes.
- publication of popular education material and training manuals
- Training support for grassroots NGOS, including gender training and reproductive health workshops for male community workers and literacy teachers.

Each of these activities has evolved over time in response to needs expressed by the community or suggestions made by community workers. However, not all activities are being undertaken in all the communities, at any given time. Activities are introduced sequentially, beginning with the selection and training of women nominated by the community to be community workers. The community worker initiates health and gender education with women using health as a rallying point for discussion and action regarding their rights and entitlements. RUWSEC also provides basic health care and referral services to all members of the target population through home-visits. These services help build RUWSEC workers' credibility as community workers concerned with community well-being, further enabling them to work on other more sensitive issues.

To organise basic amenities in the community, women come together in groups or sanghams. About four to five women in each community go through a series of leadership training workshops over two to three years, after which another group of women is chosen for training. Those thus trained, along with the community workers of RUWSEC, take the lead in evolving action plans for sanghams specific to their respective communities such as:

- Campaigning on issues to be taken up with public officials or local government (credit, better amenities, housing loans, etc.);
- Promoting community education and health activities, and;
- Organising community-based cultural events, competitions, and excursions.

RUWSEC spends at least two or three years consolidating women's groups with these activities, before introducing others, such as life-skills education for adolescents.

The organisation is dedicated to developing the leadership of grassroots women, democratic functioning, bottom-up planning and transparency in management. The management of RUWSEC is vested in its co-ordinating team, consisting of co-ordinators for its 10 departments. Of these, nine deal with major programme areas and one with administration. Almost all co-ordinators are women from the villages in which RUWSEC works, who have risen from being community-level workers to running independent programmes. Each department is autonomous, designs its annual work plan and manages its own budget. The Co-ordinating Team is accountable to the workers' council that has elected representatives of workers from various departments and all levels.

### **RUWSEC Staff**

#### **Profile**

Almost all staff working in the eight projects<sup>4</sup>, constituting RUWSEC's adolescent programme, are women and men from the local community. Today there are 11 men and 41 women working on these projects. Nine men and 18 women work full-time in RUWSEC but spend only a part of their time in adolescents' projects while 23 women and two men work part-time - five to six days in a month. Of these, 20 are involved in the literacy project. Typically staff members are in their late 20s and early 30s. All the women and seven men are married. They belong to the scheduled caste, and have had seven to ten years of schooling. Most have worked as RUWSEC's community workers and continue to do so. Part-time recruits are drawn from those who have prior experience in the government's community development programmes or are active members of the women's *sanghams*. Many of the women have adolescent children.

RUWSEC has found that adolescents prefer to learn from adults rather than peers, because they believe that the information is more reliable and based on experience. This does not

<sup>&</sup>lt;sup>4</sup> Five are life-skills education projects catering to in- and out-of-school adolescent boys and girls and adolescent girl factory workers and three projects provide a range of services and opportunities to adolescents in the communities. For details review section on "Implementing a Programme for Adolescents."

imply a denial of the usefulness of the 'peer educator' model that has also been successfully used in many projects. RUWSEC's life-skills education workshops for out-of-school adolescent boys combines both approaches: an adult facilitator conducts the monthly night meetings for adolescent boys, while the small group of boys who attend monthly day-long workshops at RUWSEC's training centre are available as peer resource persons.

#### Structure

Staff members are drawn from two departments of RUWSEC: one responsible for all adolescent girls projects and school-based projects; and the other, for all projects involving men and adolescent boys. Responsibility for the adolescent projects is shared by the coordinators of these departments, both of whom are women with more than fifteen years' work experience of RUWSEC. The next tier consists of project officers responsible for individual projects are six women and two men. One of the men is responsible for the secondary school project and the other, for both the youth centres as well as monthly workshops for adolescent boys. The third tier consists of community workers who facilitate workshops, conduct literacy and supplementary education classes, organise medical checkups and special events, and run the youth centres.

Each department co-ordinator has considerable autonomy. She plans the year's activities and proposes as well as manages her own budget. She also plans staff training for project officers, and guides project officers in curriculum development and monitoring. Project officers and community workers are active participants in the project planning process while project officers have primary responsibility for the successful implementation of the project, and monitoring and documenting the activities. Initiative and creativity is welcomed and rewarded. Many who have risen to be project officers were community workers who proposed new projects or took responsibilities beyond what their job description demanded.

Mechanisms such as the Workers' Council allow community workers or project officers to voice and resolve any problems they may face with other staff. Inter-personnel problems and resentments arising from disagreements with supervisors are to a large extent diffused through this process. Staff is assured that their concerns and problems will get a fair hearing. Ongoing staff-welfare programmes include provident fund and bonus, loans from a revolving emergencies fund, free health care in RUWSEC's clinic, and compassionate leave in case of mishaps. Staff have the options of making representations for salary revisions before a new funding proposal is finalised, while regular salary revisions have been made over the past few years based on the escalating costs of living. Together, these contribute considerably towards high staff morale and a willingness to do their best.

#### Training

RUWSEC is a 'learning organisation'. All staff members undergo initial orientation and training. More importantly, every project team undergoes in-service training throughout the project period. Every team participates in a two-day training schedule every month, where one day is spent on further education and other on planning and preparing the month's activities. Refresher training is either organised annually or once in two years, as per project needs. Each staff member spends at least 30 days in a year on training related to the project. Topics covered in these training workshops include information and skills essential for running life-skills education workshops.

A large proportion of the organisation's time and resources are invested in staff training. Staff training is planned and conducted by the co-ordinator with the help of the Executive Director. RUWSEC's senior staff, and resource persons from other organisations, are invited to conduct specific topic sessions. Training for counselling on sexuality and reproductive health, mental health, child sexual abuse, and trainers' training on gender are examples of training topics for which resource persons are specially invited. So far refresher training has been the responsibility of the Executive Director.

In addition to in-house training, staff are also sent to training and seminars organised by other NGOs. At least one workshop a year on organisational development and management is conducted for the co-ordinators and project officers of various departments. Two optional staff development activities in which staff may choose to participate are available for all RUWSEC staff. One is a literacy course for those with limited literacy skills and the other, English language classes for those with at least eight years of schooling. Both consist of 50 training days a year including four weeks' intensive coaching, and are free of cost.

Staff training consumes a great deal of the organisation's time and resources. There is one team or another involved in its monthly training/meeting every day of the month. This is in keeping with the organisation's vision of developing the leadership of rural women and men. The creation of a cadre of 50 to 60 local women and men who are sensitive to adolescents' issues and have the skills to plan and implement projects for them is an input that will never be lost, even if the projects cease to function.

#### Box 1.

#### Profile of the adolescent population (10-19 age group)

The number of adolescents in the project area is 6,170, constituting about 22 per cent of the total population. The sex ratio is 1,010 females to 1000 males. Seven per cent of the girls (215) and 0.22 per cent of the boys (7) are married. All, but six of the girls, and all the boys who are married are above 16 years of age.

The percent of illiterate adolescent girls (23.4) is twice that of adolescent boys (11.5 per cent). Seventy two per cent of the boys are currently in school, as compared to only 55 per cent of the girls. Only a 33 per cent of the boys and 22 per cent of the girls who are in school are above 15 years of age. A third of the boys who are out of school have never been to school, and about 19 per cent dropped out before grade five. In comparison, nearly 50 per cent of out-of-school girls have had no schooling at all, while about 20 per cent dropped out before grade five.

Ninety per cent of the boys who are not in school work as agricultural labourers, most of them (75 per cent) as casual daily wage earners. Among girls, two-thirds work as agricultural wage workers, 15 per cent as workers in production units in the export promotion zone located in Thirupporur Block and on the outskirts of Chennai city, and 20 per cent are home-based. Boys have fewer employment opportunities outside agriculture as compared to girls because the export promotion zone largely employ girls rather than boys. For both boys and girls, there are few openings for vocational training or skill development that would help them secure jobs outside agriculture, after completion of high school.

## **EVOLUTION OF AN ADOLESCENT PROGRAMME**

The vision of RUWSEC's Adolescent Programme is to provide adolescents with the information and tools necessary to cope with the physical and emotional changes of adolescence; help them evolve into mature and well-adjusted adults capable of confidently and responsibly making decisions concerning various aspects of their lives; and enable them to adopt values and behaviour patterns that subscribe to egalitarian and humane gender relations and uphold social justice.

#### The specific objectives of the programme may be summarised as:

- Meeting adolescents' practical needs through non-formal education in literacy and numeracy (for in- and out-of-school adolescents); access to information on vocational training and income-earning opportunities; access to health services; recreational activities and facilities; and involvement in community activities
- Helping adolescents develop a positive self-image and become more expressive and assertive in relationships with their peers and others; and in making and implementing decisions within those relationships.

- Facilitating the acquisition of knowledge and development of attitudes and skills that will help adolescents understand the physical and emotional changes they are experiencing; feel at ease with their sexuality; and take informed and responsible decisions concerning sexual behaviour, marriage and child-bearing through adolescence and thereafter.
- Creating gender awareness to help change harmful behaviour patterns between the genders, and develop behaviour patterns and values that promote egalitarian gender relations, and discourage violence against women and sexual abuse.
- Preventing substance abuse and suicide.
- Developing critical and analytical thinking; leadership and organising skills that enable them to act creatively and bring about positive changes in their lives

# The Early Years...

RUWSEC's work with adolescents dates back to its early days, although it was several years before it evolved into a programme with well-articulated objectives. For the first eight years, 1982–1989, RUWSEC's work with adolescent girls was guided by the vision of creating a future generation of aware and assertive women who were equipped with the information and skills to exercise control over decisions related to their sexual and reproductive lives.

Two projects were developed to achieve this objective. The first entailed community-based meetings with adolescent girls once a week, (usually late evenings), to offer a forum for them to come together to sing, draw and have fun; learn about their bodies and about taking care of their health, and about issues related to inequalities of gender, caste and class. The second involved conducting inter-village workshops two to three times a year, aimed at imparting leadership skills, such as public speaking, inter-personal communication skills, assertiveness, discussing and analysing issues, problem-solving, decision-making and dealing with conflict. In addition, adolescent girls also received first-line health care and referral services as part of the community health programme.

In hindsight, while the programme did address issues and skills that adolescent girls could use, the project did not adequately take into account the specific and special needs of adolescents, but instead treated them as "little women." Many of the girls participating did have adult responsibilities, but they still had special needs related to their age and status in the community. The project is still ongoing, but now works to better address those special needs.

#### The Need for Literacy

In 1989, RUWSEC's coverage expanded from 28 to 48 villages, to include some of the most remote and marginalised populations in the *taluk*<sup>5</sup>. A survey carried out prior to this expansion revealed that adolescents, especially girls, were excluded from state-sponsored non-formal education projects due to their age and their other responsibilities. Inability to read and write prevented many girls from benefiting from employment opportunities in newly constituted export promotion zones. While RUWSEC's early adolescent program facilitated useful development of attitudes and values, and communication and relationship skills, it was soon realised that without basic literacy, many of the adolescents served by RUWSEC remained limited. Moreover, while the values and attitudes the girls imbibed would probably be retained throughout their adult lives, without literacy skills most of the information they gained would soon fade. Unlike a literate person, they could neither refer back to what they had learned nor update their knowledge, on an ongoing basis.

This led to the conceptualisation of a programme specifically for unmarried adolescent girls aged 11-18. The project *Magalir Chudar Kalvi Thittam* or "the spark of women's education" began in December 1990. From 1990-1997, the project covered 37 villages; working with inschool adolescent girls and boys; illiterate and out of-school adolescent girls; adolescent girls working in factories; and out-of-school adolescent boys. The overall project goal was to impart holistic and practical education to empower adolescents. While project activities differed according to specific group needs, they generally included literacy and numeracy classes and workshops to develop other life skills, such as knowledge about their bodies, gender awareness, assertiveness and confidence building skills. Community-based meetings and inter-village workshops continued in villages not covered by the project.

## Addressing Men and Adolescent Boys

RUWSEC's work with adolescent boys developed naturally from their gender and reproductive health project for men that began in 1994. This project was prompted by the need to diffuse conflict between the sexes that appeared to be escalating, perhaps because of women's increasing awareness of their rights. The project's goals include facilitating the evolution of humane gender relations through gender training for men, providing men with the information and skills necessary to take responsibility for their sexuality and fertility; and addressing the specific reproductive health needs of men. A team of gender-sensitive and feminist men from the local villages continues to run the men's project.

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<sup>&</sup>lt;sup>5</sup> Local term refers to a Block (that is, an administrative unit for development purposes)

Although the programme was initially aimed at married men, RUWSEC staff soon found that boys/young men between 16 and 19 years showed keen interest and participated in the monthly workshops and community meetings that were a part of the programme. After the first three months of the 'men's programme,' separate life-skills workshops and community meetings for adolescent boys were developed, with a curriculum focused on their specific needs. Health services, counselling and condom distribution, which were a part of the men's programme, were extended to adolescents as well.

## IMPLEMENTING A PROGRAMME FOR ADOLESCENTS

By the last quarter of 1995, RUWSEC had conducted three projects for adolescents -- the life-skills workshops for out-of-school girls; life-skills workshops for out-of-school boys, and the education and empowerment programme for illiterate girls. The need for a cohesive programme with a clear vision, well-articulated objectives and adequately planned interventions began to be felt by the senior workers of the organisation through 1994-95. To some extent, this was influenced by the discussion on adolescent needs in the preparatory meetings for the International Conference on Population and Development to which senior workers were exposed. The focus on young people and HIV/AIDS particularly in the media was another contributory factor. Popular Tamil magazines were writing about young people and sexual behaviour; and the government of Tamil Nadu's HIV/AIDS education programmes through the mass media also highlighted the need for sex education of adolescents.

The community context had also undergone rapid changes within a short span of five to six years since the mid-eighties. There were better roads and better access by buses to the towns and to Chennai. Exposure to mass media had increased with the installation of public televisions in each of the communities. When private television channels and satellite connections became the norm in the early 1990s, news and views from the world over came into Chengalpattu, as they did in other parts of Tamil Nadu.

Television and media were not the only factors influencing the adolescents' world-view. There were greater opportunities for young people to meet and get involved sexually. One explanation for this - commonly expressed by community members - was that parents and children spent their time watching television programmes late into the evenings, sitting in the village square well after it was dark. Boys and girls were then able to steal away from the crowd and spend time together, something that would never have been possible 10 years ago. Another factor was that about 10 per cent of adolescent girls were then employed in a number of new small-scale industries. For many of these girls, it was probably the first time

that they were spending extended periods of time outside the village environment, without the supervision of their elders, and in the company of men. In village after village, premarital sex – coercive or consensual, and usually unprotected – increasingly occurred. Pregnancy in unmarried adolescents emerged as a problem. Overall, the macro-social environment was supportive of working with young people, while sections of the local community expressed the need to 'do something to help adolescents not to lose their way'. This included members of the women's sanghams in the villages. One additional catalysing factor was that many of RUWSEC's programme co-ordinators who had started out as young mothers in 1981 now had adolescent children. This introduced an element of strong personal motivation to help adolescents deal with their lives more responsibly.

In response to these factors, a comprehensive programme for both adolescent girls and boys emerged during the second half of 1995, consisting of eight projects. Five of these are life-skills education projects catering to specific sub-groups of adolescents. Three are projects providing a range of services or opportunities to the adolescent population in general. These projects are complementary, and together seek to address the multiple and diverse needs of adolescents. Project activities can be listed under four broad categories (see Table 1 for details): life skills education workshops;

- 1. health and allied services;
- 2. literacy classes and support services for training and income earning; and
- 3. recreational opportunities.

Table 1

RUWSEC Programmes for Adolescent Girls and Boys

Target Group	Magalir Chudar or education and empower- ment project	Life-skills education workshop	Centre- based activities	Community-based health activities	Recreation and social activities
Illiterate adolescent girls (11- 18 yrs)	Literacy training  – 3 year course	Once a week - 3 years		Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events
Out-of-school adolescent girls		Once a week & 3 inter village once a year		Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events
Out-of-school adolescent boys		Once a month - 2 years; followed by monthly community based meetings - 2 years		Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events
Secondary school students (boys & girls)		8 workshops in schools and 2 during vacation – 1 year		Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events
Young factory workers, mostly adolescent girls		Weekly workshops – 2 years followed by quarterly contacts – 2 years		Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events
Adolescent boys		Once a month	Library and sports facilities; information on education & economic opportunity	Health check ups once a month; counselling; condom distribution; RTI & STI referral	Annual excursions; cultural events; sports meets; vocational training workshops; annual festival events

# **OPERATIONALISING THE PROGRAMME**

The adolescent programme has evolved in response to the changing needs of the target population, the changing social milieu and a better understanding and appreciation of the special needs of adolescents on the part of RUWSEC's workers.

#### Steps in project designing

A project in RUWSEC usually goes through a series of steps before it is finalised for implementation. Usually a problem or issue is identified as one not receiving adequate attention or meriting intervention by RUWSEC's workers, or by one or more members of the community. This may be in response to a specific problem in the community or motivated by the experiences of other communities or sometimes, hearing about or visiting other projects. Whether the issue is raised in a village sangham meeting, in a meeting of staff of a particular project, or in the co-ordinators' meeting, it eventually gets raised in the 'programme planning and assessment' meetings that take place twice a year with the Executive Director of RUWSEC. These 'planning and assessment' meetings are where the rough contours of new projects are designed and ongoing projects modified. The project idea - for example, lifeskills education for secondary school students - is communicated to all levels of RUWSEC's workers in the regular monthly staff meetings, who in turn communicate it to the women's groups and also key individuals in the community. Responses from staff and community are documented in the meeting reports and communicated to the Executive Director. The Executive Director modifies the project in response to these comments. The modified project is presented by the Executive Director at the subsequent planning and assessment meeting, or at a special meeting called to finalise the project design. Senior staff suggest modifications and a final proposal is written up.

Two examples of the development process of projects highlighted below are the factory workers project and the secondary school project. The workshops for factory workers were first conceived as a workplace-based project. There were many disappointments in the initial stages. No factory owner was willing to provide the time or space for the workshops. Discussion among staff gave rise to options whereby the same target group could be reached. These included organising workshops for future employees - those undergoing vocational training and/ or in communities where a significant number of adolescent girls are employed in factories. Two of RUWSEC's co-ordinators took responsibility to explore these possibilities, contacting the factory owners, the community leaders as well as the current and potential factory workers. The present project addresses both groups.

Similarly, in designing the secondary school project, the original strategy involved training school teachers as facilitators of the life skills education workshops. After two introductory meetings with school teachers to discuss and finalise project design, it was clear that the teachers would not be appropriate facilitators. They had a long way to go before they could 'facilitate' rather than preach; more unacceptable was their openly sexist remarks and observations. At this stage, it was decided that facilitators would be selected from among RUWSEC's community workers. After one year it became clear that involvement in this project was taking away a great deal of time and affecting the existing community-based activities. RUWSEC experimented with recruiting volunteers from the community who would be trained to implement the project and compensated for the days they worked on this project. It has worked well for the past two years, and appears to be a replicable and sustainable model.

Thus, each project goes through about a year of consultations and 'testing the ground' before it is actually written up as a proposal and funding is sought for it. Each of the eight projects mentioned above had different periods of gestation and trajectories of development. There is no 'final' design for a project, continuous assessment and ongoing modification takes place throughout the various stages of its implementation. Decisions about the length of a course, duration of each workshop, location, facilitators and so on are constantly experimented with and continuously evolve.

### Involvement of adolescents in project designing

The adolescents' programme designed in 1995 and implemented since 1996 sought inputs from adolescents through the following means:

- a) Workshops organised for out-of-school boys and girls: discussions, role plays and written responses identified the most important problems they faced in their daily lives.
- b) Meetings with adolescents groups from the community were held to solicit feedback on draft curriculum and for suggestions on any additions or deletions.
- c) Special demonstration classes for adolescents groups to check the appropriateness of the methods RUWSEC planned to use.

RUWSEC's programme design explicitly recognises that adolescents are not a homogenous group. It also offers several project options to each group: an adolescent may choose to

attend only the life-skills education workshops, health services, participate in annual festivals or visit the youth centre. Together, the programmes cover practically every adolescent in the project area and reinforce messages at every point.

# 1. Life-skills education workshops

In designing its adolescents' programme, RUWSEC have been guided by the 'life skills' education approach, which takes into account the multi-dimensional needs of the adolescents. Life skills has been defined as 'abilities for adaptive and positive behaviour that enable us to deal effectively with the demands and challenges of everyday life.' (WHO, 1993). The life skills approach stems from the belief that socially, the adolescent is redefining roles and relationships with the adult world; becoming more of a social being, who has strong bonds with the peer group; and is searching for role models. Awareness of wider social issues, identification with the larger community and empathy with fellow human beings are getting established during the adolescent years. Within this changing context, the approach recongises the need for conceptual and critical thinking as well as concrete and useful skills.

#### BOX 2

#### **Dimensions of Life skills**

- Self awareness and empathy
- Communication and interpersonal relationships
  - Decision-making and problem solving
    - Creative thinking/ critical thinking
  - Coping with emotions and stresses

RUWSEC has integrated into the life skills approach an explicit gender analysis and training component which, it believes, provides essential skills for adolescents in the negotiation and development of relationships between the genders. This comphrehensive life skills and gender-aware approach extends from the belief, and indeed evidence from projects worldwide, that programmes focusing exclusively on sex, reproduction, family planning and HIV/AIDS, without addressing the adolescent in his/her totality, may not succeed in promoting healthy and responsible sexuality and reproduction. For example, without good decision-making skills, an individual cannot consciously make and implement decisions related to sexuality, such as using condoms or contraception, going for a medical check-up, or deciding to delay sexual activity until after marriage.

#### The Curriculum

Prior to 1996, the topics covered in each year's workshop would be planned annually by the concerned team and finalised after a prolonged consultative process similar to that described in the section on project design. New topics and methods would be added and existing ones modified on the basis of ongoing assessments of how useful they were. When

RUWSEC decided to implement a comprehensive programme in 1996, it was felt that there ought to be a core-curriculum of essential topics and issues to be covered. The staff also decided to identify and put together a wide range of activities, exercises and teaching/learning aids that could be used according to the specific needs of different groups. This was to be followed by drawing up a course plan for each project, listing the topics, methods and activities, because the duration and number of workshops varied across projects. No matter what the method used, the underlying principle is not to treat participants as empty vessels who have to be filled with information, but as intelligent persons with knowledge and wisdom, who through the facilitation process, build on these. Facilitators elicit opinions from participants and candidly admit when they do not know something. They welcome challenges and disagreements, and channel these into interesting debates. Each project team puts together a working manual containing the workshop format, activity description and details of how to run it, including resource material on the topic to enable them to answer questions. Posters, flash cards and materials for conducting games and exercises are prepared in monthly project team meetings. Whenever necessary, these meetings include practice-teaching sessions.

The process of gathering material from many projects across the globe, drawing up a core curriculum and identifying activities and exercises took about a year. While the major responsibility for this was given to RUWSEC's Executive Director, a draft of the core curriculum and list of activities was drawn up with the combined effort of senior staff, in consultation with other members. After the draft core curriculum was drawn up, consultations were held with groups of adolescents and pilot workshops conducted to test the appropriateness of various methods. School teachers and a sample of students from non-participating schools were consulted for the secondary school project. Case studies and examples suitable to the local context came principally from senior staff and reports of earlier workshops with adolescents. The finalised core curriculum is presented in Box 3.

# LIFE SKILLS EDUCATION PROGRAMME: CORE-CURRICULUM

#### 1. PERSONAL DEVELOPMENT (learn through doing)

- Expressing one's thoughts and opinions
- Gaining insights into one's strengths and weakness
- Developing self-confidence and assertiveness
- Learning to respect differences and diversity
- Developing mature social relationships
- Dealing with conflict
- Taking social responsibility

#### 2. GENDER ISSUES

- Sex and gender; sexual division of labour; practical and strategic gender needs
- Women's position in Indian society: discussion based on macro and local data
- · Laws affecting gender roles, women's access to power and resources
- Relationships with the opposite sex: what an egalitarian relationship would look like
- Expectations from marriage and from life partner & common causes of marital conflict
- · Combating violence against women

### 3. TAKING CARE OF OURSELVES

- Learning about our bodies
- Nutritious meals at affordable prices
- Iron-deficiency anaemia: causes, prevention and home remedies/self-help.
- Night blindness (this is a commonly encountered problem in this area)
- Common infections and health problems and self-care and first aid
- Prevention of substance abuse
- Mental health problems/ Prevention of suicide

### 4. REPRODUCTIVE HEALTH AND RIGHTS

- Women's right over their bodies: sexual and reproductive rights
- The links between reproductive rights and women's well-being
- Major reproductive and sexual health concerns for boys and girls
- Dealing with sexual harassment and sexual abuse

## 5. LEADERSHIP SKILLS

- Functioning effectively as a group and consensus decision-making
- Public speaking
- Negotiation and conflict-resolution
- · Learning about leadership and decision-making styles

#### **6. SOCIAL AWARENESS -** Some examples:

- India's political system, the role of elections, an introduction to the major political parties and their policies.
- The power and functioning of village *panchayats* (local governing councils) including funds available and how these can be utilised
- · Government schemes for the rural poor, whom to approach and what to do to gain access
- · Learning to critique the print and electronic media

• Keeping in touch with (and learning about) news of the week/ month

Box 4 (below) contains one example of how the core curriculum has been adapted to suit the needs of a project - the secondary school project which posed the challenge of covering essentials in only 10 workshops. For out-of-school adolescents, most of whom have very limited literacy skills and limited attention spans, the challenge is to design activities that do not take literacy for granted and do not require passive attentiveness. In practice, facilitators are encouraged to respond to participants' needs and not to blindly follow the curriculum. There is much scope for innovation and creative inputs for both participants and the facilitator. In some instances, these innovations are integrated into the project's overall design. For example, because issues such as domestic violence and sexual abuse came up during discussions in a number of workshops, they were included into the core curriculum. Yet another example is the inclusion of creative handwork and training in income-earning skills as an option available to any given community - there are some communities where these are in great demand and others where they are considered a waste of time.

**Box 4. WORKSHOP PLAN FOR SECONDARY SCHOOL STUDENTS** 

Workshop 1	Introduction to RUWSEC, and the "Life Skills Education Programme".
	Self-introduction by facilitators and student
	Speaking before a group (exercise)
	Collective/democratic functioning in groups (simulation game: "FLOODS", about a household deciding what to take when escaping from their homes during floods)
	Base-line assessment of students' views and knowledge about themselves and their bodies
Workshop 2	Self-awareness (exercise on what I like about myself and in what ways I would
-	like to change)
	Learning to be assertive/self confident (exercise/role plays/ discussion)
Workshop 3	My appearance, myself: Reflective exercises to appreciate one's strengths
	Becoming aware of and coming to terms with one's weaknesses/limitations
	Learning about our bodies: discussion in small groups, based on the book "Our
	body and its functioning", published by RUWSEC. This is followed by a question-
	answer session
Workshop 4	Friendships, and other relationships that matter to us (exercise)

	Dealing with/resolving conflict with parents and significant adults
	Gender roles (opinion poll, and discussion based on it)
Workshop 5	Relationships with the opposite sex: romantic and platonic
	• Exercises in evolving one's own norms on appropriate behaviour; deciding how far
	to go in a romantic relationship; learning to say no
Workshop 6	Marriage, and expectations from the life partner (girls)
	Responsible sexuality (girls)
	Dealing with bullying and peer pressure (boys)
Workshop 7	Sexual abuse and Rape: high risk situations and self-help strategies (girls)
	Preventing substance abuse (boys)
Workshop 8	Thinking and planning positively for one's future
	<ul> <li>Evaluation of the course (students' self-evaluation and questionnaire; interview-based assessment by facilitators)</li> </ul>

#### **Vacation**

More about our bodies, contraception and abortion (girls)		
Gender relations (boys)		
Violence against women; Suicide Prevention (boys and girls)		
•		

As Box 4 shows, each workshop is divided into a number of sessions. A variety of methods are used to elicit maximum participation. There are very few 'lecture' or 'input' sessions, topics are covered mostly through case studies, group discussions, role-plays, brainstorming and other participatory exercises which require each student to express her/his views and ideas. Examples of exercises used in workshops are:

- 1. Participants were asked to close their eyes and think about one of their favourite persons, and then think through why they like this person. After about three minutes, each participant shared with the group the reasons why someone is her/his favourite person. These qualities/attributes were then listed on the board, and tally marks were added when the same quality/attribute was mentioned. The most common reasons why a person was liked were usually affection and/or friendship, being considerate, having a sense of humour or being 'fun' to be with, and for loyalty/reliability. Good looks were rarely mentioned as the reason why a person made a lasting impression or was liked. Participants concluded that good looks are not the most important attribute to have in order to win friends and be socially well-accepted.
- 2. A problem situation in the form of a picture story was presented to adolescent boys. They worked in groups to devise ways of dealing with the situation assertively and were asked to enact it. This exercise is often used to help boys discuss ways of dealing with peer pressure to smoke/drink and to confront bullying, etc.

3. Participants were asked to write a letter to the 'Agony Aunt' column of a popular daily expressing a problem faced either by them or by another. The letters were 'posted' by them in a closed box. The box was then opened and letters were picked at random by the facilitator and read out to the group. The group discussed and debated ways of dealing with the issue. An example of a letter is as follows:

'Dear A--, I am the youngest of three daughters in a family. My sister got married last year. Her husband is a kind and charming person, and I enjoyed his attention to me whenever they visited us. Three month ago, I went to stay with my sister and her husband, to be of help to my sister who was experiencing a problem pregnancy. One thing led to another, and I found myself involved sexually with my brother-in-law. I returned home a few weeks ago with my sister who is here for her delivery. The last time my brother-in-law visited us, he forced himself on me despite my active resistance. When I told him I did not want to continue with the relationship because it was too risky, he threatened to go public with it, holding me responsible for 'luring him at a vulnerable moment'. I cannot stop thinking about it, I want to end my life.'

The workshop format also allows space for an introductory 'touching base' with each other and short breakout exercises to help revive participants between sessions.

One of the reasons for the effectiveness and popularity of life skills workshops, is that each workshop is carefully designed, both in terms of logistics and in terms of content, to address the needs of each participating group. Table 2 summarises the range of life-skills education workshops conducted by RUWSEC.

Table 2

Life skills education Workshops conducted by RUWSEC

Target group	Location	Frequency	Coverage	Workshop duration	Course duration	Year initiated
Out-of-school (including illiterate)	a) Community	a) fortnightly	60 villages	a) 2 hrs	2 years#	1982
girls, unmarried, 11-18 years	b) RUWSEC's training centre	b) three times/yr		b) One day		
Out-of-school boys, unmarried, 15-19 years	a) Community b) RUWSEC's training centre c) Youth centres	Monthly	a & b) 60 villages	a) 2 hrs b& c) One day	2 years#	a)1994 b)1996
Secondary school students (boys & girls)	a) School b) RUWSEC's training centre	a) 8 /year b) 2 /year during vacation	10 schools	a) 3 hrs b) One day	1 year	1996
Young women working in factories	a) Community     b) Vocational training centre	Once a week	a) 3 cohorts b) one cohort	2 hrs	a) 2 years b) 1 year	1996

# The duration of 2 years for each cohort was fixed only in 1998

Community-based weekly workshops for out-of-school girls usually take place on a Saturday, in the evening after the day's work is over. The facilitators are all women. The venue varies across villages. In some villages, the workshops are held in public buildings such as the day-care centre or the local government office; in others, they take place in the space outside the facilitator's or a community member's house or in open, well-lit places usually used for community gatherings. Both the timing of the workshop and the venue is left to the discretion of the facilitator and the participants. Inter-village workshops for adolescent girls, once in three months were suggested by facilitators and participants from some villages in the very early years, because they felt that sensitive issues such as sexual relations and contraception could be better discussed outside the community setting.

These inter-village workshops have now been incorporated in the project design with added advantages. They are often the first opportunity ever for girls to meet in a non-family setting, as persons who share common concerns. The exposure to realities other than their own, and the possibility of forging friendships across villages, make these workshops a much-awaited event for adolescent girls. Although generically termed 'inter-village workshops', these events take various forms, including exhibitions and festivals, to break the monotony of the workshop [Box 5]. Between April 1996 and March 1999, 2,336 community-based and 9 centre-based life-skills education workshops were held for out-of-school adolescent girls. A cohort of 1,376 girls completed a two-year course during 1996-98, and a second cohort of 960 is currently in its second year.

## BOX 5

The June workshops for out-of-school adolescent girls in 1996 were organised in the government child-care centres of two large villages, on the same day. There were a manageable numbers of participants attending a given event. A number of 'stalls' or 'booths' with posters and models were set up, and each had two or more resource persons drawn from among RUWSEC community health workers. Some examples of themes covered included: preparing an iron-rich; low-cost cereal-mix (demonstration, with free cereal porridge for all participants); menstruation and related disorders; iron-deficiency anaemia; night blindness; white discharge. Girls moved from stall to stall in small groups of ten each, and spent between half-an-hour and one hour in each stall, learning about a specific topic, asking questions and clarifying doubts. Some stalls also included demonstrations (for example, the one on nutritious meals). There were also game stalls and quiz stalls that offered scope for active participation.

Workshops for factory workers take place on Sunday before noon, while the vocational training programme for women, on a mutually convenient day of the week. The venue for the

former is a rented room in the community itself and for the latter, the vocational training school itself. Over the past three years, the factory workers' programme has conducted 250 workshops where 326 women have participated, 160 in the first course (1996-98) and 166 in the second course (1998-2000).

Out-of-school adolescent boys attend workshops once a month at RUWSEC's training centre, which are facilitated by male members of RUWSEC's Men's Programme. During the period April 1996 – March 1999, 880 community meetings and 30 centre-based workshops were held for adolescent boys. About 165 boys completed a two-year course in 1998, and 150 are now in their second year. The number of boys covered by community meetings is roughly 250. The venue limits the number of adolescent boys to a maximum of 4 or 5 from each village. In order to reach out to a larger number, 'night meetings' are held once a month. However, these do not function as effectively as the girls' workshops. Attendance is erratic, different boys attend different meetings, so it is difficult to take for granted the knowledge of a topic covered in an earlier meeting. Further, adult men also join in (even though there are separate meetings organised for them), unlike adult women, perhaps they have more leisure time in the evenings. On the contrary, training-centre based workshops are not a suitable format for adolescent girls, because parents are reluctant to spare them for a whole day and also because they do not think it right to send them away from the village, frequently.

The secondary school project consists of eight workshops run, roughly, once a month, with two vacation workshops. In each school, workshops are held separately for boys and girls. School staff does not attend or observe these workshops, so facilitators have a free hand with the students. Attendance is not compulsory and there is no threat of punishment for those who stay away. Vacation workshops usually held at the RUWSEC training centre serve the same purpose as inter-village workshops for out-of-school adolescents which address sensitive issues. The secondary school project has covered about 1,800 boys and girls from 10 schools. Six hundred workshops – 300 each for boys and girls - have been conducted during 1996-99.

# Participants' experiences

### Girls:

" (...I have learnt from the workshops that)..girls should pursue their studies and not think of marriage as their ultimate goal. We should acquire skills for earning our own livelihood and not be dependent on men all our lives."

" I am eighteen. I am dark complexioned and have buck teeth. Everyone ridicules my appearance. I find it very hurting that my mother constantly worries that she will not be able to get me married. I have often thought of suicide as better than living like this. (After attending the workshop on suicide prevention) I now see that everyone has her own problems, and that one does not have to be beautiful to live a happy life."

"I found the workshops related to health particularly useful. I was suffering from white discharge, and did not know that it could be a symptom of an infection. After the workshop, I participated in the medical check-up and underwent treatment"

"At first I felt very embarrassed when topics such as women's reproductive system were discussed. Now I am more comfortable with such topics."

"For me the best part is the annual special event. I have had only two years of schooling, and our school did not have any celebrations or public functions. I enjoy participating in competitions and in skits, and even more, winning prizes."

"When I joined the literacy project of RUWSEC in 1991, I was illiterate and taking care of farm animals. Over the next seven years, I learnt to read and write fluently. In 1998, I appeared for the grade VIII public examination and passed. I now work as a supervisor in RUWSEC's literacy project. For me, this project has meant more than my parents, it has changed my life in ways I never imagined."

# Boys:

"In this workshop, I was asked to introduce myself, and then mention my mother's name, and the name of my best friend's mother. If I had been asked about my best friend's father's name, I would have answered immediately. But this, I did not know. It made me think.."

"At home, when I offer to help, my mother usually refuses. My father says, "Is your sister not at home? Why are <u>you</u> doing this. And friends tease me when they see me fetching water or washing my own clothes. It is not enough to just hold workshops. Something more has to be done to change prevalent attitudes."

"My father used to send me to the arrack (country liquor) shop to buy arrack for him. I started tasting arrack before giving it to him, and before I was even 16, I was drinking regularly. I really do want to get rid of this habit, but have had no one to talk to about it. I am condemned as a 'bad influence' by many parents and have taken to hanging around with older men. I came to this

workshop just by chance - I heard that both bus fare and lunch would be provided. But it was as though destiny brought me here (this was after a workshop on substance abuse and deaddiction)."

"The workshops (secondary-school) were very different from the classes we attend. The 'sirs' (facilitators) asked our opinions about everything, they never got angry even when we challenged them. We also had so many interesting things to do in each workshop"

"I will never forget this annan (older brother- the community worker) in all my life. I had had sex (with a comercial sex worker), and after some months, there were some problems that I could not talk about (he had itching around his genitalia). I saw this annan carry around a pamphlet on STDs, and gathered up courage to ask for a copy. He was very kind, and not only did not treat me like an outcaste, he explained everything to me, and took me for a check-up. It turned out that I had a fungal infection."

"It's makes such a difference to have a space where we can talk and ask question about all these matters (related to sex). I like the matter-of-fact way in which our 'sir' (workshop facilitator) presents the topic and answers questions"

Experience over the past three years shows that the curriculum and methods are well received and evoke active participation. All the same, each year RUWSEC attempts to introduce some new exercises or case studies; vary the ways in which a topic is introduced, and update the information provided.

#### 2. Health services

The health services component of RUWSEC's Adolescent Programme includes services provided within villages; services at RUWSEC's clinic and hospital (which are located between 10 to 15 kms from participating villages); and referrals to other services. Specifically, the project component includes the following:

- Subsidised health services, including laboratory investigations, through RUWSEC's clinic and hospital which started in 1995.
- Periodic health check-ups organised either alongside inter-village life-skills education workshops, or independently, at RUWSEC's clinic.

Community-based medical check-ups in each of RUWSEC's target villages once a year
to investigate general as well as reproductive health problems, and referrals to
RUWSEC's hospital or to the district hospital when necessary.

Adolescents constitute 5 per cent of RUWSEC's clinic clientele. Initially, use of the clinic by adolescent girls was very low, with more boys using the services during 1996. However, once RUWSEC decided to be more pro-active with adolescents, and organise general medical check-ups as well as specific screenings, equal proportions of girls and boys began to use the clinic. These services are sometimes incorporated into inter-village workshops, and are sometimes independent activities. Between 1996–99, 18 medical check-ups were held at the clinic or at RUWSEC's training center. These include two STD screening camps and one de-addiction counselling and treatment camp for boys; two screening camps each for iron deficiency (anaemia) and reproductive tract infection for girls; and general health check-ups organised separately for boys and girls and adolescent girl factory workers.

RUWSEC's collaboration with other agencies and organisations provides important resources to the Health Service component of the Adolescent Programme. The Sexually Transmitted Infections (STIs) screening camps were organised with support from the district hospital and de-addiction counselling was held with resource persons from a de-addiction centre. Services, including laboratory investigations for anaemia, Reproductive Tract Infections (RTIs) and sexually transmitted infections (STIs), are provided free of cost to adolescents and the drugs dispensed are heavily subsidised. Information about the checkups is conveyed to the villages or target groups through community workers who speak to parents as well as to the adolescents concerned.

Additionally, staff believe that by addressing gender and life-skills plays an important role in making adolescents feel confident about approaching RUWSEC's health services. Issues such as reproductive health and rights, personal development and taking care of oneself are discussed in various workshops. The staff interact with adolescents are sensitive to their special needs and their age, and the health information and services address their immediate health complaints. In addition, the results of the screening of a STI are given directly to the client tested, drugs and condoms are supplied at a subsidised rate, and when necessary, there is follow up to ensure that the client has been cured.

The community workers also accompany girls and boys to these camps and check-ups. Attendance at these camps/check-ups has ranged from about 75 adolescents to as high as 150. Community workers provide follow-up care to participants in the camp, including collecting laboratory reports and drugs for continued treatment from RUWSEC's clinic.

Community based medical check-ups for adolescent girls started in February 1997 and till recently, took place in a different village each week. Four to five villages are covered every month. Initially, response was poor in three villages when check-ups were held early in the morning before the girls went to work, during a time when they were busy with chores. Check-ups were re-scheduled to late evening, after the girls returned home from work and have finished their household chores. The subsequent response was overwhelming. RUWSEC's records show that 60 to 70 per cent of the girls have been volunteering for the medical check-up.

Since centrally organised medical check-ups can accommodate only a few clients, RUWSEC has been following a logical two-step process since 1998: community-based check-ups followed by specialised screening camps, for clients who need further attention at a health centre or by a specialist. Eighty-three community-based medical check-ups and 18 centre-based camps and check-ups were held between 1996–99. Over a thousand girls (1,126) and nearly 500 boys (468) participated in these. Exact figures are not available for those receiving condoms and benefiting from counselling and referral services. The medical check-ups have led to a steady (albeit modest) increase in the number of adolescents among clinic-users.

To date, no community-based medical check-ups for boys have been organised, nor has there been any specific request for it. Community-based services for boys include condom distribution and counselling on sexual and reproductive health issues, as well as deaddiction counselling and follow-up. These are conducted by male volunteers, each of whom covers about 6-8 villages. The male volunteers also refer boys to RUWSEC's clinic or to the district hospital and when requested, accompany them to these facilities.

This project has focussed attention on the specific health needs of adolescents and brought health services closer to them. It has also served to highlight the most common health problems among them. For example, iron deficiency (anaemia) and nutritional deficiencies appear to be a problem of much greater importance for girls than was earlier known. The most common reproductive health problems reported by girls are menstrual disorders, especially irregular periods and amenorrhea. Reproductive tract infections (RTIs), while earlier perceived to be a problem, are much less prevalent — over the three, laboratory investigations detected 25 cases, all but two of candidiasis. Among boys, a range of skin infections in the genitalia was far more common than sexually transmitted infections (STIs) which the boys wrongly believed was their problem. Two boys who tested VDRL positive for syphilis were almost 20 years of age, and two others, suffering from trichomoniasis, who were over the age of 18.

## 3. Literacy and support services

These activities form part of two specific projects: education and empowerment project for illiterate girls and youth centres in two villages.

## a) Education and empowerment project for adolescent girls

The education and empowerment project for adolescents has been in operation for about nine years. Demystification of literacy and numeracy, and making these skills easily accessible through innovative teaching and training methods are guiding principals of this project. Learning informally, outside the traditional school setting is seen as valuable and the experiences and skills that learners bring to class are seen as important and incorporated into the learning process. Classes function democratically, and learners are treated with respect. In addition to literacy and numeracy skills, learners gain confidence about their ability to learn. In these ways, the process seeks to be empowering.

This project was developed exclusively for poor rural girls, taking into account the hardships and barriers that prevent poor women from availing of formal education and information. Classes conducted by women teachers in the community were held five days a week, in the late evenings. However, classes were scheduled and rescheduled, according to the needs of the learners. They were held in the open under a street lamp or with the help of a lantern. About 10-15, and no more than 20 girls, were enrolled in each of the classes.

Originally a course for the duration of 18 months, was planned for each group of learners. Classes were scheduled and re-scheduled according to the needs of the learners. However, given that classes were held for only two hours each evening and that the learners were too busy during the day to review what they had learned, RUWSEC found that it took a minimum of three years before a person who was illiterate could read and write simple text.

The curriculum for these classes included three major subjects: literacy in Tamil, numeracy, and general knowledge including science and social studies. The curriculum was developed and modified over the course of the study. The methodology used in the project was active learning through a number of games and exercises. Text books, work books and teacher's resource books were prepared by the staff and books for general reading were borrowed from local libraries and distributed to the learners. Several additional activities to enhance the educational

status of adolescent girls were added on the basis of demands from learners and residents of RUWSEC's target villages. These included helping keen learners to complete Grade VIII, ensuring that all girls are admitted to school after they complete five years of age, and helping drop-outs reintegrate into the school system, ensuring a certain standard is availed to the learners.

Phase I of the project came to a close in 1997, with very positive outcomes (see section on Achievements). Phase II began in January 1999 and continues. Twenty villages with high female illiteracy are involved, and the project aims to cover 1,200 girls between 5-18 years, including 950 between the ages of 8-18 years. Of them, 600 have never been to school or are functionally illiterate, about 350 in the same age group are currently in school but may be expected to drop out over the next few years; and 250-300 are between 5 and 8 years and not yet in school.

## b) Youth centres in two villages

RUWSEC is currently supporting two youth centres. The first was initiated by RUWSEC in 1996. The second began functioning in 1998 and was organised by a local youth organisation run by young men from one of RUWSEC's target villages. The youth centres cater to about 250 young people from villages in the vicinity. The life-skills education workshops described earlier, constitute only a small part of the centres' activities. The youth centres are drop-in centres for young men (young women also drop in, but not as frequently), and are located in a rented or donated room in the centre of their respective villages. Both centres house a library and serve as resource centres that provide information on employment, education and vocational training opportunities.

Tutoring classes to help those who failed in high school to reappear for exams, are held five days a week. Day long training classes are also held a month before the exams. About 20 boys in the first centre and more than 50 boys and girls in the second centre benefit from this activity. The centres also provide applications for admission to various courses and institutions, and information on and applications for scholarships and financial aid. Support services such as typing or help with filling out applications as well as preparing curriculum vitae; and training for interviews are provided to job seekers. Applications for public works jobs are made available at the centres, making it easier for young men to apply. Vocational and entrepreneurship training programmes have been organised, over the past two years, in collaboration with relevant government departments. Help with loans for starting small enterprises,

such as collecting application forms and making them available; providing information on how to go about it; and filling out forms if necessary, has also been provided.

The importance of providing educational and vocational support to adolescents cannot be overemphasised, as they face increasing pressures to earn money in a changing economy. At the same time, adolescent boys face particular pressures related to traditional expectations that they serve as "bread winners" in their families. Many adolescents are frustrated by the limited opportunities available to them because of their poverty and lack of access to information. Failure to complete schooling and inability to earn an income leads to low self-esteem. These factors contribute to a number of problems - substance abuse, sexual harassment of girls, and at the extreme, suicidal tendencies. Local youth see the centres as catering to long-pending needs, as much for the services mentioned above as for the recreational and social activities they sponsor.

#### 4. Recreational and social activities

Recreational and social activities constitute an important part of RUWSEC's Adolescents Programme. The life skills education workshop projects include time set aside specifically for singing, dance, theatre, poster drawing, *rangoli* (Indian design form), handwork, and in-door (and out-door, where possible) games. The only exceptions are workshops run for school students that have limited time and physical space.

Getting together in community/youth centre-based workshops creates an opportunity for adolescents to evolve as a group, and inevitably, their own suggestions for group activities come up. Excursions were among the first of these, and the project design now includes an annual excursion for each of the villages/target groups where the programme is operational. These are usually trips to nearby places – the capital, Chennai, is a favourite. Participants meet three-fourths of the cost, and the rest is paid by RUWSEC. Sports events are organised through the youth centres, in which several teams from neighbouring villages, participate. Eagerly awaited by adolescent boys, they are on the way to becoming regular annual features.

Annual 'special events', which have also become a feature of the programme design, were originally suggested by adolescents' groups in some villages. With the support of RUWSEC's staff, as well as the local women's *sangham* (group) the local groups of adolescents in each project village (and an active group from the youth centres) takes responsibility for preparing the cultural programme for an evening and organising the event.

Once again, RUWSEC makes only a small financial contribution to these events; the adolescents contribute the rest. Typically, a 'special event' consists of a day of activities for adults, adolescents and children including races, games and competitions such as *rangoli*, drawing and painting, singing, skits, and quizzes. This day of much festivity and fun culminates in a cultural programme staged by the adolescents, which usually has one or two skits and several song and dance items. This is followed by a prize distribution to the winners. It is a day of much festivity and fun.

Special events for factory workers and secondary school students are much larger affairs. There is only one special event organised for each of these groups. All factory workers/trainees participate in the factory workers' special event. District education officers, headmasters, senior teachers and all students in the secondary schools participating in the project take part in the secondary school special event. The format, similar to that of the special events organised in the community, has some variations. For example in 1997, the special event for the secondary school project included a science exhibition, and in 1998 and 1999, the cultural programme consisted of competitions in public speaking, debating, poster drawing, skits, singing, dancing, and quizzes.

In addition to these organised events, groups take up issues and activities as they see fit and receive support from RUWSEC's staff. Some examples are taking the initiative for collecting used books for the youth centre's reading room and text books for distributing among needy students, cleaning the surrounding local wells, clearing stagnant water and organising a poster campaign against smoking.

The recreational and social activities form the backbone of the adolescents' programme. They offer participants something to look forward to that sustains their interest. In many instances, these become the entry point through which an adolescent gets involved in other activities, this is true especially of boys.

#### **MONITORING AND EVALUATING**

RUWSEC has a comprehensive system of monitoring and evaluation for its programmes, including the adolescent programme. It includes the following:

- supervisory visits;
- detailed documentation of each activity;
- six-monthly reflection-sessions involving programme staff as well as all senior staff;
- base-line assessment and end of the course evaluation:

- base-line data collection on specific indicators and updating information once in six months; and,
- annual events to assess the extent to which messages have been internalised

Supervisory visits by department co-ordinators and project officers take place on a regular and planned basis. These visits are used not for 'policing' and reproaching but as an opportunity to provide feedback to the staff. During this process, the evaluating project officers are themselves given the responsibility for carrying out some project activities so that they develop a better appreciation of the practical difficulties involved. Each workshop or activity is documented by the facilitator according to a check-list of issues and topics to be covered as well as detailed information on participants' responses. Reports are regularly read by the project officers, co-ordinators and the Executive Director, and are used to help facilitators tackle specific problems or to try new ideas. For example, attendance in community-based workshops was found to be low during November and December because of rain and dampness. Facilitators felt confident presenting this as a problem instead of glossing over it for fear of being blamed. It was decided that community-based workshops should not be held during those months and that additional workshops would be conducted during the dry months. In another instance, when some facilitators were nervous and not skilled enough to conduct workshops for school students, it was decided that various project officers and the co-ordinator would jointly run these workshops with them, for a few months. Over time, the facilitators gained more confidence and began to handle the workshops independently.

The 'planning and assessment' meetings earlier mentioned provide an important opportunity to take stock of where the project is headed and make changes, if necessary. Team members participate freely airing their views and concerns. There is no attempt to hide failures since the focus is on making the project work and not to assigning blame. Co-ordinators of other departments also participate in these meetings, help think through problems and devise solutions. Changes in project design, resulting from these meetings, have been discussed earlier.

For life-skills education workshops, base-line and end-of-the course assessments are based on a questionnaire, self-administered in the case of literate persons and filled in by members of the peer group in the case of others. Questions seek to understand the extent of participants' knowledge on their bodies, sexuality and reproduction, and also their attitudes to gender roles. All questions are open-ended. Data is also gathered as part of the base-line survey and updated every six months, with respect to specific indicators, as another means to assess programmes. Table 3 below presents these indicators.

Table 3
Indicators for Assessing the Impact of the Adolescents' Programme

	INDICATOR	MODE OF DATA COLLECTION	PERIODICITY OF DATA COLLECTION
•	proportion who have had at least 7 yrs of schooling (male /female)	Household survey	Base-line followed by once in 3 yrs
•	proportion married (female)	-do-	-do-
•	proportion who have had one or more children (female)	-do-	-do-
•	number of deaths/year (male/female), and proportion of deaths caused by suicide/violence	-do-	Base-line survey followed by six-monthly updates by health worker
•	proportion who have a reproductive health problem (by cause), and proportion seeking medical help for it	-do-	-do-
•	proportion who smoke or drink or use other addictive substances (e.g. pan parag, ganja)	self-administered ques- tionnaires	workshops on gender conducted for adolescents
•	proportion who believe in gender equity/justice (male/female)	- do-	workshops on these topics conducted for adolescents
•	proportion who are aware about their bodies (male/female): ( at least the following) puberty, menstruation, sexual intercourse, pregnancy and delivery, and contraception		

During 1998 and 1999, RUWSEC experimented with using the annual special events for the secondary school project and the factory workers' project as a means of assessing the extent to which key messages of life skills education workshops had been internalised by participants. All the competition activities were on themes related to those addressed in the workshops. For example, in 1998 the themes were:

Box 6.		
Extempore speaking	: Who is my role model for a man/woman ?	
Quiz	: Questions to test awareness about their bodies	
Singing	: The songs had to project values of equity and social justice	
Posters	: What would be the hallmarks of a household with equitable gender relations?	

Debate	: Is it social environment or inherent nature that determines whether or	
	not one falls victim to substance abuse	
Staging a play	: Stories had to be woven around i) How to deal with (or prevent) sexual	
	harassment or teasing of girls or ii) How to deal with a situation where	
	a school girl gets pregnant.	
Essays	: What would you consider as 'appropriate' norms of behaviour between	
	a boy and a girl a) in a friendly (not romantic) relationship b) when the two are in love	

Staff were pleasantly surprised at the contributions of the participants, details of which would merit a separate report in itself.

#### **COSTS**

The cost of implementing RUWSEC's Adolescents Programme is modest. The total annual cost during 1998-99 of running the eight projects that constitute the programme was Rs. 1,199,832 or approximately US\$ 28,000. This works out to about Rs. 280 per person (US\$ 6.40), assuming a 70 per cent coverage of all adolescents (total number covered approximately 4300), a figure based on an assessment made in early 1998. Given that each person is usually covered by more than one project input, it may be better to compute the cost per unit coverage with any of the programme activities. The total number covered by different projects is approximately 10,650 (approximate because the exact number attending each community meeting/workshop is not available). This works out to Rs 112 per unit (approximately US\$ 2.50).

The programme is labour-intensive, and 37 per cent of the total cost (US\$ 10,250) covers the costs for staff time. The staff are all local women and men, and receive modest salaries. The field activities together account for only 28 per cent of total cost or US\$ 7,750. The literacy project component (including staff costs) has been listed separately, and this accounts for the remaining 35 per cent. (See Box 7)

Box 7. Costs of the Adolescents Programme			
1. STAFF TIME	INR/YR	US\$/YR	
(including staff welfare contribution)	440,832	10,250	
2. LITERACY PROJECT	432,000	10,000	

3. FIELD COSTS Staff training		18.000
Field travel for staff	12,000	,
Community-based workshops	12,000	
Centre-based workshops	50,000	
Training resources	30,000	
Health services (60 villages		
plus other target groups)	70,000	
Special events (8)	100,000	
Youth centre activities		
excluding workshops and		
special events (2 centres)	35,000	
	327,000	7,605
GRAND TOTAL	1,199,832	27,854

The programme works on a very tight budget, and there is limited scope for pruning costs. However, RUWSEC is re-evaluating the value of resources expended in the case of community-based health check-ups for adolescent girls. They were useful so far in motivating adolescent girls to use the services, but RUWSEC may now experiment with having one check-up for five to ten villages rather than in every village. Another high-cost intervention is the 'special event' component. On the one hand, this intervention is very popular and gives the participants something to look forward to; on the other, it costs more than the field costs of most other interventions. The challenge before RUWSEC is to contain costs without seriously compromising on project effects. The literacy project is the most resource intensive of all interventions, but is essential if the programme's effects are to be sustained.

#### **OBSTACLES AND CHALLENGES**

RUWSEC's Adolescent Programme has faced several challenges particularly in the early years (1982–89). In those days it was not an easy task to collect a public gathering of unmarried adolescent girls. Parents and community elders were afraid that such activities would encourage immoral behaviour among the girls. After about a year of low attendance through which RUWSEC persisted, participation improved and stabilised across the 18 villages that constituted RUWSEC's project area till 1987. In some villages, less than 10 per cent of the girls participated, while in others, more than 60 per cent. Several factors contributed to these differences. The general level of economic development of the village played a significant role because in the better-off villages fewer girls were engaged in agricultural wage labour and more were in school. Therefore, the girls had more time and motivation to participate in evening meetings and take time off for inter-village workshops. In villages with a community centre for meetings, attendance was also better because of

greater privacy. If the formal leadership in a village - the men in the village governing council - came to view the projects as teaching the girls 'useful things', then the projects prospered. Variations in the skill and enthusiasm of the community workers who carried out these projects were another crucial factor.

There were many crises in almost every village, if a girl 'fell in love and ran away' with a boy, or when an unmarried girl become pregnant. Village elders would attribute it to the 'ideas' the girls were learning in RUWSEC meetings and workshops, and to the singing and dancing that would often be part of the community-based meetings. For several months following such an incident, no one would attend the meeting or RUWSEC staff would be denied permission to hold the meetings. After three to four months, a slow start would be made again, and then things would become normal until the next crisis. Such crises are still part of the programme experience, but are now dealt with greater calm and maturity.

Every project, initiated subsequently, had its own set of problems. The difficulties and disappointments related to starting the project for factory workers were highlighted earlier. Similarly, the secondary school project was a long-drawn process. A lot of time was spent making contact with different schools, holding meetings with teachers and headmasters, and securing permission from the district health authorities. Staff had to give up the initial plan to train school teachers as life skills educators, put together a team of RUWSEC staff to run the project, and organise intensive training for them. For some of the team members who did not have more than eight years of schooling, the thought of holding workshops in a school setting, was especially daunting. Almost the entire group of senior staff, irrespective of the programmes they were responsible for, contributed to getting the project running smoothly.

There were several teething problems with the youth centre project, when it first began in 1996. The place RUWSEC was able to rent was not very convenient for everyone. Bus facilities to the village had been disrupted for some months because of road construction work, causing irregularities in staff visits. To make matters worse, staff were caught between two rival youth groups, (both from the scheduled caste), each of whom wanted to deny the other the use of the sports equipment and in-door game facilities. RUWSEC staff were intimidated and at their wits' end when things began to turn around. They decided to make the centre's activities widely known in the area and held meetings in several villages in the vicinity. Then they employed a couple of local youth to keep the youth centre open at all times and to provide information and basic services, so that work did not get affected by the absence of staff. When RUWSEC was finally able to find another, more neutral (not within any village) location for the youth centre, the problems stopped.

Setting up the second youth centre was, in contrast, relatively easy. The local youth group that initiated it, continues to take responsibility to keep it functioning. They also deal with any problems arising in the community. On reflection, RUWSEC staff believe that this is the way ahead: that if they want to upscale, local youth groups involved in ongoing activities should be identified and provided with partial support to widen their range of activities to include life-skills education and support services. Through these problems and crises RUWSEC has learnt that it pays to persevere. For instance, after initial resistance they succeeded in making public meetings of young unmarried girls a regular and normal feature of community life, something that was completely unheard of, before they ventured into it. At the same time, RUWSEC has an in-built process of constant soul-searching, and the willingness to make changes or even drop some activities if it becomes clear that they are not meeting the needs of adolescents.

#### **ACHIEVEMENTS**

Through needs-based project planning, flexibility and creativity in the implementation of projects, and effective monitoring and evaluation systems, RUWSEC has been able to achieve success at many different levels through the adolescent programme. Most notable are the changes in attitudes regarding gender and the action that adolescents themselves have begun to take to improve their own health and wellbeing. RUWSEC attributes its early success to the many women who currently work in the organisation, and who attended the community-based meetings for adolescent girls, as a success from its initial years. According to these women, the projects played a definite role in shaping their thinking about their social and gender roles. Many other women who have participated in the workshops over the years, are in leadership positions in their communities: as members of the panchayat (local governing council), staff of the state-run nutrition programme or child-care centres, literacy teachers in the National Literacy Mission's community-based classes for adults, women's sangham (group) leaders, and members of local units of political parties. In early 1998 RUWSEC carried out an assessment<sup>6</sup> among members of the community to determine the level of empowerment among girls. Findings from the assessment indicate that:

• In some villages, adolescent girls have led the women's organisation for equal wages for casual agricultural work.

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<sup>&</sup>lt;sup>6</sup> As yet, RUWSEC has not conduced an assessment on the programme's impact on boys, but plans to undertake one in the near future.

- They have shown the ability to solve problems and to take initiative, both within their families and at the community level. For example, they have helped family members in securing the know-how regarding government schemes; have taken immediate action during an epidemic of gastro-enteritis, assisted the health worker in maintaining the wells and other clean water sources, and to complete the immunisation of children.
- All mothers interviewed talked about the girls' enhanced knowledge about their bodies and about self-care and home remedies. One mother described her daughter's attempt to introduce low-cost nutritious food into the family diet. Another mother shared her experience of learning about menstruation and personal hygiene from her daughter. A brother described being given emergency care when he ran a very high fever.
- A break-through was achieved in terms of traditional norms of behaviour: Four learners from the literacy project went to Chennai on their own to participate in a three-month long training course on screen-printing. With only an address to guide them, they found and stayed in a rented house, with no 'chaperon.'
- Community members praised learners' ability to act in role plays and skits (in the special annual events), and speak in public.

#### **Gender awareness**

Some of the girls' remarks presented above, reveal a rethinking of gender by both women and girls. The 'gender values' questionnaires, administered for school students, showed girls to be fairly advanced in comparison to boys, at the beginning of the course in June 1997. For example, 88 per cent of the girls did not agree with the statement that boys should be educated more than girls, while only 60 per cent of the boys did. Two-thirds of the boys believed that men cannot take care of children, while only a third of the girls thought so. Half the boys said that women should not be allowed independence in spending money, while 80 per cent of the girls disagreed with this view. More than 60 per cent of the boys (62 per cent) were of the view that girls should not stay out of the house after dark, while only 30 per cent of the girls thought so. The latter felt that it was not safe to be out after dark, not that it was immoral.

However, the assessment from the special event at the end of the course is that a process of reflection has begun among the boys. One group of boys who staged the play on prevention of sexual harassment, advocated a more healthy relationship- talking to the girls and

developing friendships, rather than following them in groups, teasing or and singing vulgar songs in 'filmi style'<sup>7</sup>. They concluded the play with a commentary on the need for a change in social attitudes for more healthy relationships with the opposite sex, and in particular, the need for girls to be open to friendships and not act as if talking to boys was an immoral act. Some of the posters on egalitarian gender relations drawn by boys as part of a poster-drawing competition in this special event, are also encouraging. One poster depicted, through a series of scenes, what in the boys' image were egalitarian gender relations between a married couple. The couple meet, get to know each other and decide to marry. No dowry is demanded and the marriage is simple. The couple visit a family planning counsellor to learn about how to space their children; they share the housework - he fetches water while she washes clothes; they have two children; child care is shared - the woman is bathing a child while the man is feeding another. Both husband and wife go out to work in the farm together; they spend time with their children in the evening - each of them helps one child with homework; both go to bed at the same time.

# **Improving Literacy**

No less impressive are the outcomes of the literacy project. By the time Phase I came to an end in 1997, there were no more than one or two illiterate adolescents in the 37 villages where it had been operational. Seven hundred and forty girls completed at least three years of classes, as regular learners in the literacy project during 1991-97. About 600 of the 740 girls acquired literacy and numeracy skills equivalent to Class III of formal schools. More specifically, 34 girls reached a level equivalent to grade VIII, 278 reached a level of Grade V and the remaining 261, Grade III. This was ascertained through the initial, mid-term and final evaluations of learners carried out annually. Five girls who started out as illiterate were successful in the eighth grade public examinations. A further 300 girls of schooling age were admitted to Class I and 526 drop-outs from primary schools were readmitted.

## BEYOND AN ISLAND OF INNOVATION - STEPS TO THE FUTURE

What is the way ahead? Of all the component activities of RUWSEC's programme, life-skills education workshops and the youth centres are the least labour and resource intensive, and can be extended to cover a much larger population. There may be a number of ways in which this can be done:

 By recruiting and training project teams in various geographical locations which are centrally co-ordinated.

<sup>&</sup>lt;sup>7</sup> Songs that are commonplace in the popular Hindi films

- Working with and supporting grassroots organisations groups to develop adolescent programmes.
- Collaborating with and through government programmes such as the Integrated Child
   Development Programmes which has an adolescent girls' training component.

The first of these options poses more difficulties than the second one. The structure that will evolve out of such an expansion would be unwieldy from a management point of view. More importantly, the two-way communication and consultative processes from which the organisation derives its strength would get diluted, unless each of the teams functioned as an autonomous unit. For such a structure to hold together, leadership of the programme has to be exceptionally able and skilled. Being essentially a grassroots organisation, RUWSEC does not have professional managers. Recruitment of professional managers may destabilise the very essence of the organisation by taking leadership away from local women.

The third option is tantalising because of its scope for macro-level upscaling. At the same time, what keeps RUWSEC from taking this route is the fear that large-scale replication may rob the programme of its essential strengths. RUWSEC staff are currently seriously considering the second option. If this is chosen, RUWSEC would undertake activities such as

- training workshops on life-skills education for adolescents and on running gendersensitive literacy programmes for community-based informal organisations and grassroots NGOs;
- publishing training manuals on the above; and,
- producing publications to be used as learning and resource materials for the groups targeted for training.

RUWSEC believes that this appears to be a manageable proposition. What is not yet known is whether there would be adequate demand to sustain these activities, over a period of time.

## **LESSONS LEARNED**

♦ Adolescents need their own programmes to address their specific needs

While many adolescents increasingly seem to have adult responsibilities or needs, they still have unique needs as a result of their status as adolescents. To adequately prepare adolescents to be healthy women and men who can develop respectful and egalitarian relationships, they need to have their own programmes. RUWSEC's adolescent programmes for girls and boys both began as part of existing adult projects. Although those projects were quite comprehensive, they still were not able to adequately address the specific needs of the adolescents. It is only after special outreach efforts were made, and separate adolescent programmes were set up that participation increased and adolescent needs in the areas of health, literacy, recreation and life skills and gender training were successfully addressed.

## ♦ Each project area contributes to the success of the programme

RUWSEC's work in four areas illustrates how each project area contributes to the overall success of its adolescent programme. For example, the recreational activities were often a good way for adolescents to initially get involved in the programme. The literacy project provided adolescents with a concrete skill that they could use. The health services provided adolescents with increased access to services, as well as information about community adolescent health needs. The life skills and gender training provided ideas and skills for adolescents to better deal with the changes in their lives (both physical and emotional), their relationships with each other and their own sense of self. The combination of these skills and ideas resulted in a successful and comprehensive programme.

# Programmes for adolescents need to provide overall negotiation and life-skills training that can be applied to various facets of their lives

Adolescents are not a homogenous group. Different sub-groups may have different needs and priorities. A well-designed programme should have more than one project activity so as to be able to offer something for everyone. Flexibility and responsiveness to the evolving needs of adolescents go a long way towards programme effectiveness. Participants' interest in the programme can only be sustained through constant innovation. It does not help to design a project and cast it in stone till the end of the project period. Therefore, adolescent programmes that adopt a life-skills education approach with an explicit gender component take the totality of adolescents' lives into account and helping in developing them into capable and responsible adults. They provide the tools necessary for responsible sexual behaviour better than narrowly focused 'sex education' or the slightly broader 'family life education' which deal with only one dimension of adolescents' lives.

### Adolescents are more likely to use services that are brought to them specifically

RUWSEC found that by bringing health services to adolescents, the adolescents were more likely to use them. Furthermore, they were able to learn more about what the specific health concerns of adolescents in the communities were.

#### Working with adolescents is a long-term commitment

As in any programme there are no quick fixes, this is particularly true when working with adolescents in the way that RUWSEC is. RUWSEC is effectively trying to change a generation - the way it thinks about itself, the way it conducts its relationships and the way it is able to cope in the adult world. It may be a long time – 10 to 15 years - before the impact of an adolescent programme can be seen. An entire generation of those influenced by the programme may have to grow up to become parents and decision-makers. Impact assessments after only three or four years of intervention would do little justice to a programme.

# In designing and implementing adolescent programmes, the focus must be on the process and not on the product

Too often the discussion around programme implications gets mired in the quest to find 'good models' that can be replicated or expanded. To date, few models have been successfully replicated or upscaled. The focus on product and outcome needs to be shifted toward process and outcomes. Based on their experiences, RUWSEC staff believes that replicating a project is not difficult both in terms of the resources involved and the scale of operation. However, they advocate that it is the process and not the product that ought to be replicated, because each programme needs to be designed as per the target group, local context and with the participation of local stakeholders. Thus, there are no 'models' per se, rather general principles that can be shared and incorporated into the design of new programmes.

# Creating an enabling environment through involving stakeholders is key to the success of a programme for adolescents

It may be important to spend sufficient time on preparatory tasks to create a supportive climate for each project. Meetings with all stakeholders, gathering their views, drafting a project and touching base once again, having trial runs of workshop sessions, field-testing of training tools would be some important steps. Before starting a school-based project, for

example, it would be useful to consult not only the teachers and students, but officers of the education department and parents.

# Ongoing training of staff is an essential aspect of expanding and sustaining programmes

Implementing adolescent projects, especially those at the community level, does not require highly trained professional staff. What is essential is adequate and ongoing training and exposure to new ideas. Staff morale and motivation, however, can make or break a programme. This is dependent on the structure, management style, personnel relations and openness within the organisation as a whole, and not just on the programme concerned. Efforts need to be made to develop supportive structures for the staff as well as opportunities for them to grow and learn. RUWSEC's experience in training staff has been highly effective, not only in motivating staff but also in the successful and efficient implementation of its programme.

# ♦ Adults can play an important role in adolescent programmes

RUWSEC successfully used both peer and adult educators to conduct life skills workshops. It found that often, adolescents preferred to learn from adults rather than peers because they believed that the information would be more reliable and based on experience. However, when adults tried to impose their own views, as was the case with some of the teachers initially used to conduct workshops, they were not successful. This is evidence, that with careful needs-based planning, combined with openness and flexibility, adults can and should play an important role in the development of adolescents in their communities.

#### • By working with others, it is possible to create a comprehensive programme

RUWSEC was able to create such a comprehensive adolescent programme because it utilized many existing resources in the communities. For example, the district hospital, deaddiction groups, and exisiting youth groups. Through such cooperation, other organizations should be able to create comprehensive programmes that address the different needs of adolescents.

 Participatory and creative means of monitoring and evaluating result in flexible and good quality programmes RUWSEC's commitment to on-going project assessment and its use of creative assessment tools have resulted in less defensiveness by staff and more project creativity and improvement. The explicit use of monitoring and evaluation as a tool for project improvement and the creation of an environment for on-going staff development and learning have resulted in good quality programming. Often, organizations feel it is difficult to justify investing heavily in these areas. However, the investments by RUWSEC in these areas have clearly been beneficial to programme outcomes.

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