

Udaan

A 360 approach to prevent adolescent pregnancies in Rajasthan (2017-2022)



Rajasthan, with an estimated population of 7.5 million* adolescent girls in 2016, had high rate of early marriages, teenage pregnancies and secondary school drop-outs. Over one-third of the girls in Rajasthan were married before the legal age of 18 (NFHS-4, 2015-16) - a practice that drives early and frequent pregnancies, as well as dropping out of school.

* Projected population an on 1st March as per Report on Population Projections for India and States, 2011-2036

Currently married women age 15-19 with demand satisfied by modern contraceptives*

27.9%

6.3%

Women age 15-19 begun child-bearing*

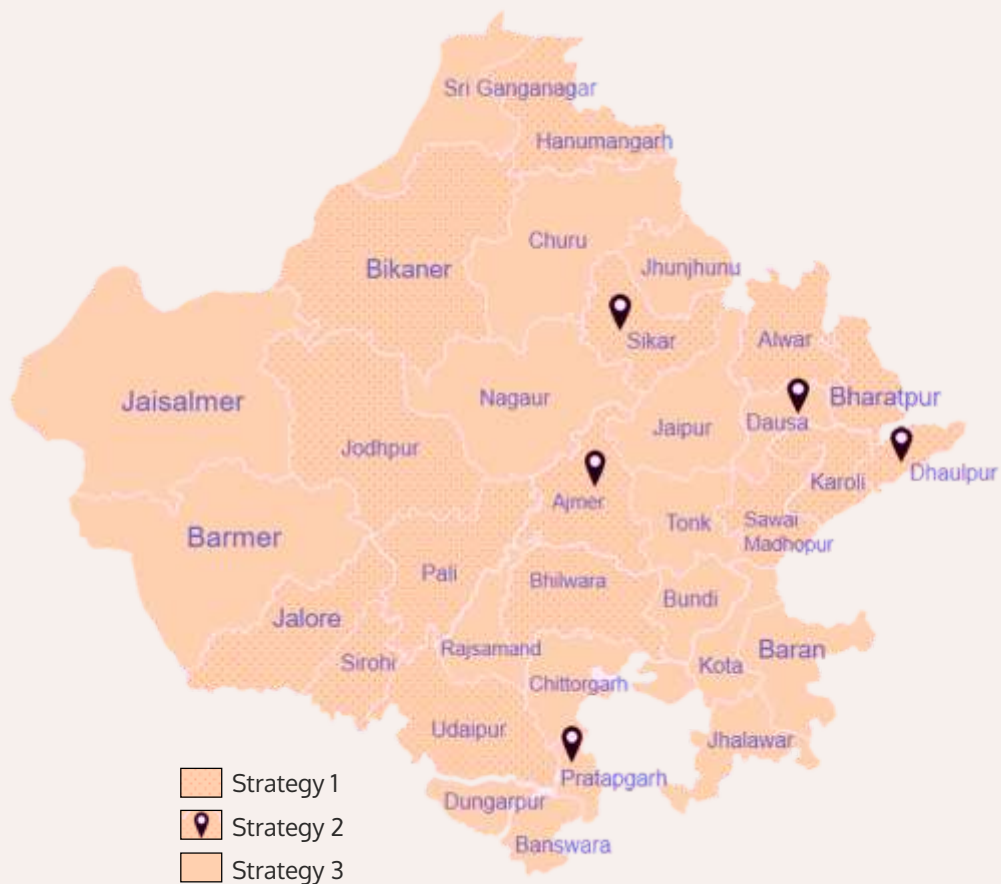
42.0%

Adolescent girls with 12 or more years of education having correct knowledge of specific sex and pregnancy-related matters^

National Family Health Survey – 4 (2015-16)

^ Adolescents in Rajasthan 2012: Changing situation and needs, New Delhi: Population Council

To address this situation, project Udaan was initiated in 2017 with the aim of reducing early marriage of girls and preventing teenage pregnancies



Strategy 1

Keeping girls in secondary schools

Strategy 2

Strengthening knowledge, attitude, and practices on sexual and reproduction health among adolescents

Strategy 3

Expanding contraception method mix and choices for young women



RESULTS

29,800

Early marriages prevented through keeping girls in school

30,000

Teenage pregnancies averted through keeping girls in school, SRH education to students and access to injectable contraceptives

Keeping Girls in Secondary School

Evidence suggests that girls who remain in school longer are less likely to get married early* thereby averting early pregnancy. Financial constraint is a key reason for girls dropping out after grade 8. Udaan therefore focused on improving delivery and access to government's pre-matric scholarships (Grades 9 & 10) to overcome the cost barriers for girls' education

*Brown, Gordon. 2012. "Out of Wedlock into School: Combating Child Marriage Through Education."



Systemic Reforms

- Increased budget allocation
- IT based scholarship management system

Simplified application process- reduced documentation and auto renewal

Raising awareness on process and entitlements on scholarships

Improving Accessibility

Transforming parental attitude towards girls education

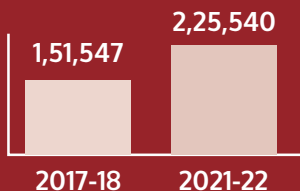
Experimenting a peer-based approach for retaining girls in school

APPROACHES

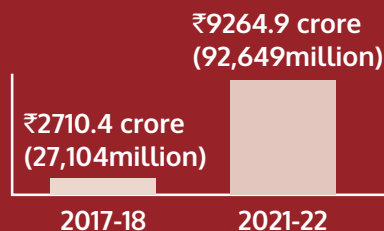


RESULTS

Increase in number of girls receiving scholarships



Increase in budget disbursement



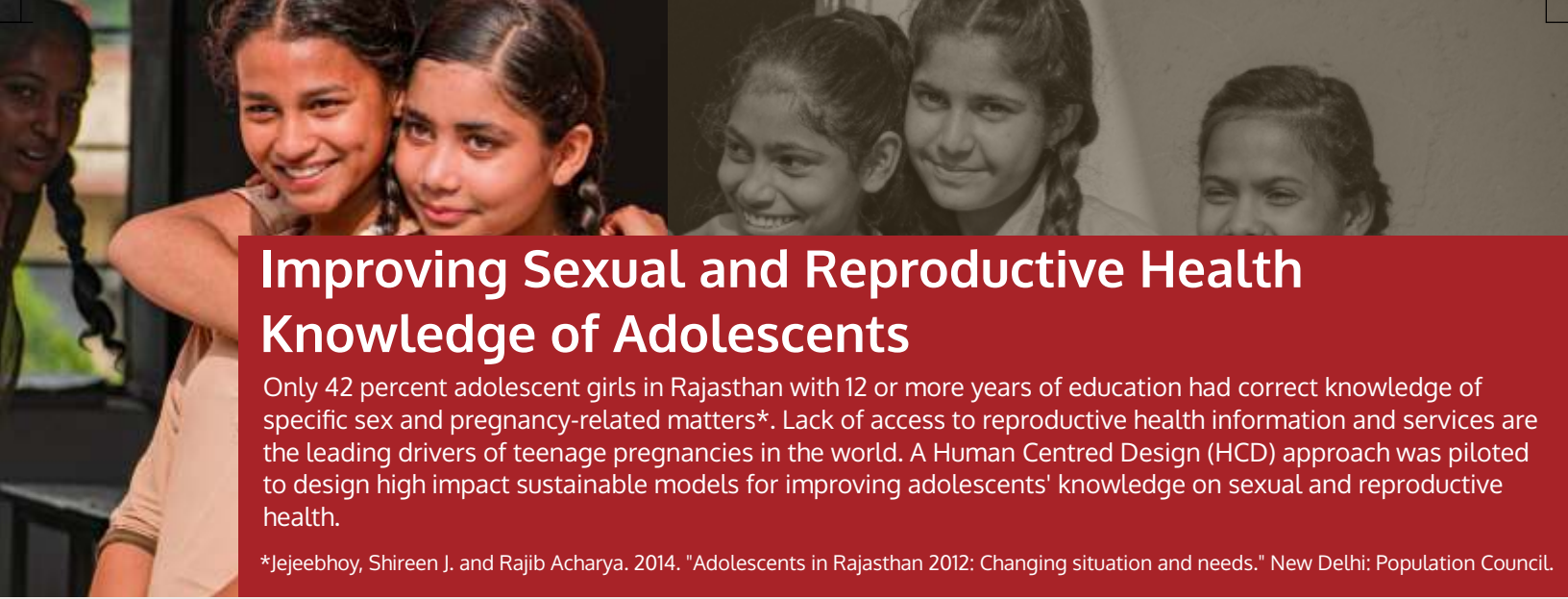
29,849

Child marriages averted of 15-19 yr.

14,650

Teenage pregnancies prevented

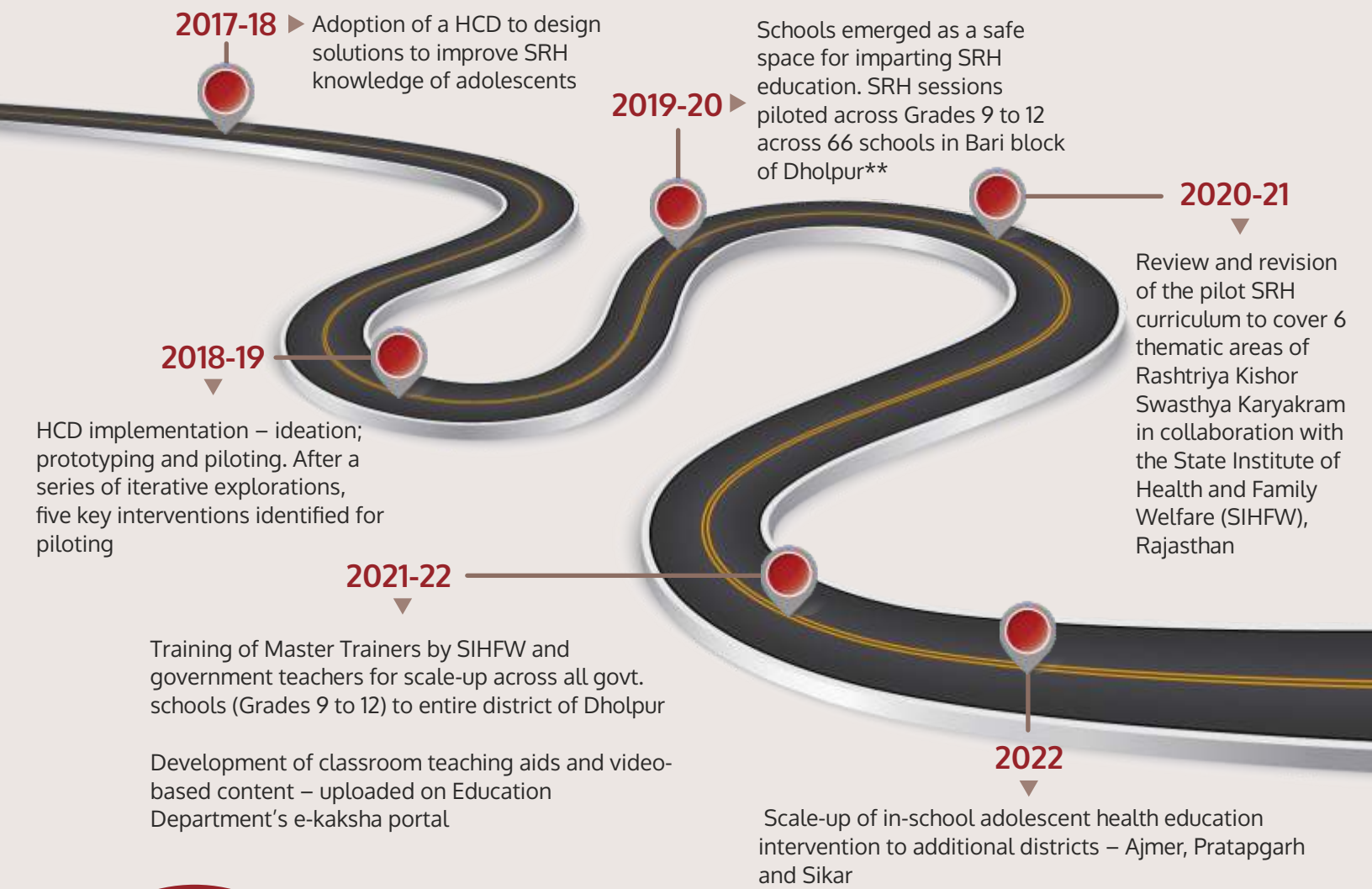
Udaan supported enrolment of over 52,650 additional girls in school in 15 districts



Improving Sexual and Reproductive Health Knowledge of Adolescents

Only 42 percent adolescent girls in Rajasthan with 12 or more years of education had correct knowledge of specific sex and pregnancy-related matters*. Lack of access to reproductive health information and services are the leading drivers of teenage pregnancies in the world. A Human Centred Design (HCD) approach was piloted to design high impact sustainable models for improving adolescents' knowledge on sexual and reproductive health.

*Jejeebhoy, Shireen J. and Rajib Acharya. 2014. "Adolescents in Rajasthan 2012: Changing situation and needs." New Delhi: Population Council.



RESULTS

4,463	Teachers trained in 4 districts	Over 3 lakh	Students received knowledge on SRH in 4 districts	2837	Teenage pregnancies prevented in 4 districts
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**Independent evaluation by Population Council showed significant improvements in adolescents' in-depth awareness of sexual and reproductive matters, and their awareness of adolescent-friendly services. Exposure to the intervention also improved Contraceptive self-efficacy for boys and was 2.9 units higher among boys in the intervention than the comparison block.



Expanding Contraception Method Mix and Choices for Young Women

Udaan focussed on increasing the adoption of the injectable contraceptive (DMPA) by young women to delay pregnancy and ensure healthy birth spacing. A Technical Support Unit (TSU) assisted the National Health Mission, Rajasthan in the roll-out of injectable contraceptive (Antara) services in the State and in implementing Mission Parivar Vikas (MPV) for improving Antara uptake.



System strengthening

to track & follow-up on Antara users; building capacities of service providers and FLWs to strengthen counselling services; quality monitoring; development of protocols on Antara effect management and data analysis for decision making to improve injectable uptake and continuation



Increasing demand

for injectable services through IEC campaigns for awareness creation; introduction of Nayi Pahalkit; orientation of ASHA for client segmentation and messaging to improve field level outreach; SMS and IVRS alerts to clients; e-counselling



Improving access

through operationalization of health facilities up to sub-center level for injectable services and piloting injectable service provision at MCHN (VHND) sites

- Job aids and tools for health service providers

- AntaraRaj software for Antara client management

- Contact less counselling through pre-recorded content played using headphones/ speakers



TOOLS

- Orientation and training of service providers to activate delivery points

- Antara e-training video modules for online training of service providers

- Introduced Effect Management kit (KMK) with essential drugs for Antara method effects management



RESULTS

1,406
Antara
users

Rajasthan emerged as an exemplar in contraceptive injectable performance with highest number of Antara users (1,406 per 100,000 unsterilized eligible couples*) in the country

Over
522,000

Antara users
between
2017 to 2022

2nd dose
>60%
3rd dose
>68%

Continuation
rate

18,375
(15-19 years)

Estimated Number of
teenage pregnancies
averted

Calculated using Health Management Information System (HMIS) data for Antara, NFHS-4 and NFHS-5 data for sterilization and RGI population projections

Agents of Change

The Rajasthan government's women empowerment project UDAAN is transforming the lives of girls in the districts of Dausa, Karauli and Tonk



Trisha Mukherjee

HAD Aarti not discovered that she was eligible for a government scholarship, she would likely have dropped out of school long ago. With only one earning member in a family of eight, educating children, especially girls, was a luxury the family couldn't afford.

So, when she found out that she could seek the government's aid to continue in school, she couldn't be happier. "The chances of me dropping out were very high. In view of the large size of our family, the scholarship amount was essential. I have two brothers and three sisters. More people mean more mouths to feed."

"My father is a construction labourer. Running the house is a difficult task. For girls, scholarship money is very important, because spending money on their studies is considered an economic burden," says Aarti, now a first-year college student.

Confidence personified! Girl students on their way

MESSAGE FOR TODAY

A clever person solves a problem. A wise person avoids it.

— ALBERT EINSTEIN

The Assam Tribune

Razor's edge

After going to school, a student must be prepared for what he would do after school. He must be ready to face the world of work. He must be ready to face the world of competition. He must be ready to face the world of challenges. He must be ready to face the world of opportunities.

One of the main objectives of the education system is to prepare the student for the world of work. This is done by providing the student with the necessary skills and knowledge. The student must be able to think critically and solve problems. The student must be able to work in a team and communicate effectively.

The student must also be prepared for the world of competition. This is done by providing the student with the necessary skills and knowledge. The student must be able to work hard and persevere. The student must be able to overcome challenges and achieve their goals.

The student must also be prepared for the world of opportunities. This is done by providing the student with the necessary skills and knowledge. The student must be able to identify opportunities and take advantage of them. The student must be able to set goals and work towards them.

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Lessons from Dholpur for the rest of India

Nachiket Mor

THE GOVERNMENT'S decision to launch the Dholpur model is a landmark step. It is a model that can be replicated in other parts of the country. It is a model that can help improve the lives of the people of Dholpur and other parts of the country.

Dholpur is a less known success story but it holds important lessons for the rest of India and offers ideas and pathways which can help break barriers and breach a topic that is sensitive and often considered not desirable in the context of India and prevailing attitudes on sexual health.

The Dholpur model is a success story because it has shown that it is possible to improve the lives of the people of Dholpur and other parts of the country. It has shown that it is possible to improve the lives of the people of Dholpur and other parts of the country.

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In the News

'Educate girls to prevent child marriages, health issues'

Jaipur: Experts expressed their concern over the health of rural girls as there is a clear and obvious link between their academic status and the state of their well-being. A lot of girls get married at an early age, resulting in early pregnancies due to which a lot of health issues occur and in some cases, fatalities happen.

The state government is discouraging early pregnancies and also encouraging girls to maintain the gap between two children. However, it is unfortunate that girls in rural areas still fall behind boys when it comes to accessing education because of numerous social and cultural inhibitions.

Organisations working in Rajasthan expressed the need for more girls to attend schools regularly. Ashish Mukherjee, Project Director (Udaan), IPE Global said, "In rural Rajasthan for instance, investment in a daughter's education is considered wasteful, since they have to be married off. Their schooling is usually disrupted due to financial or social pressures."

He added, "Early marriage seems to be the inevitable fate of these girls which in turn impacts their reproductive health and condemns them to a life devoid of economic opportunities and any semblance of personal growth."

Women taking control of family planning needs through app

Injectable contraceptive leads to social change with women's empowerment in rural areas of Rajasthan

MOHAMMED IQBAL

Taking control of their family planning needs, women in the rural areas of Rajasthan have utilised an innovative method to monitor the progress of injectable contraceptive, deal with anxiety related to side effects and get reminders for subsequent doses. An effective follow-up unit mechanism of health functionaries has ensured success of the project.



A woman being administered injectable contraceptive at a health facility in Sikar district. *SPECIAL ARRANGEMENT.

The adoption of a mobile and web-based app, Antara Raj, has helped in reducing the dropout of women through digital tracking. In its fourth year of operation, the project has led to a social change with the empowerment of women in the Shekhawati region, which has taken a lead in the roll-out of contraceptives.

The introduction of Medroxy Progesterone Acetate (MPA) as a subcutaneous injectable contraceptive was

accompanied by counselling and sharing of method-specific information to help out the women residing in villages. The involvement of accredited social health activists (ASHAs) and auxiliary nurse midwives (ANMs) has especially made Antara Raj crucial for the State government's family planning programme.

Rajasthan is the first State in the country to develop and

use the software, which has been supported under the Project Udaan, a joint initiative of the State government and Children's Investment Fund Foundation (CIFF), U.K. Antara Raj is being implemented in the State with the support of a consulting group, IPE Global.

Muni Kumari, ANM at the community health centre in Sikar district's Danta town, told The Hindu that the Antara

Raj app had helped her not only in recording the beneficiary details but also in sending monthly reports to the department. "The app, available in Hindi, makes it very easy for those of us working in the field. It works like a diary and tells us when the next dose is due for the women in our target areas," she said.

With several of the rural women facing issues such as abdominal pain, dizziness and nervousness during the first three months of injectable contraceptive, the trained service providers like Ms. Kumari counsel them and address their potential discomfort. "We are able to keep in touch with the women who have just started out and might need further counselling to continue and eventually avoid unwanted pregnancies," Ms. Kumari said.

The rural women have found Antara Raj useful by

getting regular text messages on their mobile phones and monitoring of the possible reasons for discontinuation of the injectable method. Sachin Kothari of IPE Global's technical support unit said the challenge of service providers' training during the pandemic was met by developing e-training modules for ASHAs and ANMs for operationalising all health facilities for Antara Raj services.

9.78 lakh doses of MPA. Till March 2022, over 9.78 lakh doses of MPA have been given to women in the State with the utilisation of Antara Raj app, while 4.56 lakh first doses were administered since 2018.

Uma Devi, a beneficiary who is also working as ASHA, said the MPA was the only contraceptive she had used on the advice of a community health worker who had helped her with the process at every stage.



Ashish Mukherjee

B-84, Defence Colony, New Delhi – 110024, Tel: +91 11 4075 5900



<https://bit.ly/3DYSX5h>



<https://bit.ly/3UJAlft>

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