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## Research Article

### ADVANTAGES OF 'SABLA' SCHEME AS PERCEIVED BY THE BENEFICIARIES OF BIKANER DISTRICT OF RAJASTHAN

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#### ABSTRACT

Adolescent Girls are a core resource for national growth. Investment in their health and development is investment in the greater well-being of the country. They need to be looked at in terms of their needs both as a group as well as individuals since they are the future productive members of the society in future. Recognizing the unmet needs of adolescent girls, Rajiv Gandhi Scheme for Empowerment of Adolescent Girls - *Sabla* has been launched as a comprehensive intervention for adolescent girls in the age-group of 11-18 years, with a focus on out of school girls. The objectives of the scheme are Nutrition Provision, Iron Folic Acid (IFA) Supplementation, Health check-up and Referral Services, Nutrition and Health Education, Guidance on Family Welfare, Adolescent Reproductive and Sexual Health (ARSH), Child Care Practices and Home Management, Life Skills Education and Accessing Public Services, Vocational Training (16-18 yrs). The present investigation was under taken to know the advantages of 'SABLA' scheme as perceived by the beneficiaries and get a clear picture of SABLA in Bikaner district so that the proper feedback could be given to the concerned personnel, institutions and agencies to make it more effective and beneficial. This study was conducted in six villages of Bikaner district of Rajasthan. Total sample size comprised of 120 registered girls in Sabla Scheme by using proportionate random sampling. Interview method was used for data collection. The results indicated that majority of beneficiaries belonged to upper age group (15-18 years), from nuclear family (80.83%), with monthly income of Rs. 6001 to 8000, belonged to general caste (35.83%), farming as family occupation, primary passed with medium level of mass media exposure, having land above 2.1-5 hectare. Majority of these beneficiaries had high level of urban contact, with medium level of extension contact and they had not participated in any training programme related to these activities earlier. Iron Folic Acid (IFA) Supplementation, Guidance on Family Welfare, Adolescent Reproductive and Sexual Health (ARSH), Child Care Practices and Home Management, Nutrition Provision were the major advantages of SABLA as perceived by beneficiaries.

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#### INTRODUCTION

Adolescence is a period of transition from childhood to adulthood and is characterized by efforts to achieve goals related to the expectations of the mainstream culture, and by spurts of physical, mental, emotional and social development (WHO, 1986). Adolescence is a crucial phase in the life of woman when a girl stands at the threshold of adulthood which is intermediary between childhood and womanhood. It extends roughly from 10-12 years of age till 19-20 for girls. Adolescence in girls has been recognized as a special period in their life cycle that requires specific and special attention in terms of nutritional, biological, and family life. (Academia.edu, 2015) India has the largest population of adolescents in the

world by being home to 243 million individuals aged 10-19 years, the country's adolescents constituted 20 per cent of the world's 1.2 billion adolescents. (UNICEF, 2011).

They need to be looked at in terms of their needs both as a group as well as individuals as they are the future productive members of the society. Recognizing the unmet needs of adolescent girls, Rajiv Gandhi Scheme for Empowerment of Adolescent Girls- *Sabla* has been launched as a comprehensive intervention for Adolescent girls in the age-group of 11-18 years, with a focus on out of school girls. Sabla, a Centrally-sponsored scheme was approved by the Government on 16, Aug, 2010. To begin with, the Scheme was implemented in 200 districts of the country on a pilot basis and the scheme was

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started in Bikaner in January 2011 with bhilwara and dungarpur districts. The present investigation was therefore under taken to study the advantages of 'SABLA' as perceived by beneficiaries.

### Research Methodology

The present study was conducted in Bikaner district of Rajasthan. There are seven Panchayat Samities in Bikaner District, out of them; Bikaner Panchayat samiti was selected purposely.

**Table 1** Extent of advantages perceived by the beneficiaries with respect to different aspects of the SABLA scheme  
n = 120

S.No	Advantage	Extent						MS	Rank
		Very important (3)		Important (2)		Less important (1)			
		F	%	f	%	f	%		
<b>1</b>	<b>Nutrition provision</b>								
(i)	Supplementary nutrition for 300 days	28	23.33	48	40.00	44	36.67	5.21	2
(ii)	Take home ration (THR) 15-18 years. Adolescent girls	22	18.33	98	81.67	0	0.00	6.09	1
(iii)	Hot cooked meal	14	11.67	48	40.00	58	48.33	4.47	3
	<b>IFA Supplementation</b>								
(i)	Provision of 100 adult tablets of IFA	60	50.00	36	30.00	24	20.00	6.33	
<b>3.</b>	<b>Health Check-ups and Referral Services</b>								
(i)	Provision of general health check-ups once in three months on <i>kishori Divas</i>	38	31.67	36	30.00	18	15.00	5.67	1
(ii)	Provision of deworming tablets	38	31.67	0	0.00	62	51.67	3.81	3
(iii)	Record of height and weight measurement on Kishori Divas	58	48.33	64	53.33	36	30.00	5.26	2
<b>4</b>	<b>Nutrition and health education</b>								
(i)	Information about balanced diet and recommended dietary intake	20	16.67	60	50.00	40	33.33	4.19	5
(ii)	Information about nutrient deficiency disorders and there prevention	40	33.33	0	0.00	80	66.67	3.26	6
(iii)	Identification of locally available nutritious food	40	33.33	76	63.33	4	3.33	6.33	1
(iv)	Awareness about nutrition during pregnancy and for infants	60	50.00	20	16.67	40	33.33	5.12	4
(v)	Information about Exercise/Yoga	40	33.33	36	30.00	44	36.67	5.40	3
(vi)	Importance of healthy cooking and eating habits	40	33.33	56	46.67	24	20.00	5.40	3
(vii)	Importance of use of safe drinking water and sanitation	40	33.33	56	46.67	24	20.00	5.86	2
<b>5</b>	<b>Guidance on family welfare ARSH, Child care practices and home management</b>								
(i)	Knowledge about problems during menarche	41	34.17	76	63.33	3	2.50	6.33	4
(ii)	Awareness about the physiological changes during menarche	20	16.67	56	46.67	44	36.67	4.00	7
(iii)	Awareness to keep body clean, avoid wearing tight clothes etc.	80	66.67	36	30.00	4	3.33	7.26	1
(iv)	Awareness about marriage and pregnancy at right age	80	66.67	36	30.00	4	3.33	7.26	1
(v)	Awareness about family planning	43	35.83	6	5.00	71	59.17	4.05	6
(vi)	Awareness to promote institutional delivery among family members	40	33.33	20	16.67	60	50.00	3.72	8
(vii)	Essentiality of required immunization card for new born baby at health centers	66	55.00	14	11.67	40	33.33	5.63	5
(viii)	Colostrum must be given just after birth to new born baby	80	66.67	36	30.00	4	3.33	7.26	1
(ix)	Importance of mother's milk	80	66.67	36	30.00	4	3.33	7.26	1
(x)	Breast feeding should be continued till 6 <sup>th</sup> month	68	56.67	48	40.00	4	3.33	6.98	2
(xi)	Supplementary feeding after 6 <sup>th</sup> months with breast feeding	48	40.00	68	56.67	4	3.33	6.51	3
<b>6</b>	<b>Life skills education and accessing public services</b>								
(i)	Awareness about importance of education	84	70.00	32	26.67	4	3.33	7.35	1
(ii)	Awareness about formal and non formal school	20	16.67	40	33.33	60	50.00	3.63	9
(iii)	Formal education is better than non-formal education	20	16.67	60	50.00	40	33.33	4.56	7
(iv)	Awareness about health check-ups at PHC and CHC's	28	23.33	68	56.67	24	20.00	5.12	5
(v)	Provision of free medicines, delivery services, timely check-ups and immunization	24	20.00	55	45.83	41	34.17	3.07	11
(vi)	Hygienic environment at health centers	60	50.00	56	46.67	4	3.33	6.33	3
(vii)	Awareness about post office	32	26.67	40	33.33	48	40.00	4.47	8
(viii)	Awareness about bank	64	53.33	20	16.67	36	30.00	5.40	4
(ix)	Awareness about PHC and CHC	68	56.67	40	33.33	12	10.00	6.60	2
(x)	Essentiality of confidence building	48	40.00	28	23.33	44	36.67	5.12	5
(xi)	Aware about self awareness and self esteem	48	40.00	28	23.33	44	36.67	5.12	5
(xii)	Information about decision making and critical thinking	48	40.00	0	0.00	72	60.00	3.35	10
(xiii)	Communication skills are helpful in confidence building / increasing living standards	48	40.00	20	16.67	52	43.33	4.93	6
(xiv)	Awareness about rights and entitlement	44	36.67	0	0.00	76	63.33	3.07	11
<b>7</b>	<b>Vocational training(16-18 yrs adolescent girls)</b>								
(i)	Awareness about vocational training	48	40.00	0	0.00	72	60.00	3.35	1
(ii)	Improve economic condition	48	40.00	0	0.00	72	60.00	3.35	1
(iii)	Upgrade home based skills	44	36.67	0	0.00	76	63.33	3.07	2
(iv)	Upgrade vocational skills	24	20.00	20	16.67	76	63.33	2.60	3

In Bikaner panchayat samiti there are 40 gram panchayats. Out of these, six gram panchayats were selected randomly namely, Napasar, Norangdesar, Palana, Jaalwali, Jamsar, Kilchoo. One village from each selected gram panchayat was selected randomly. Thus six villages were selected for present investigation (Napasar, Norangdesar, Palana, Lakhusr, Jamsar, and Kilchoo). One hundred twenty adolescent girls from the age group of 11-18 years who were registered under SABLA scheme were selected from these six villages by proportionate random sampling technique.

The responses related to advantages of SABLA were collected from beneficiaries on three point continuum ranging viz., Very Important, Important and Less important with score 3, 2 and 1, respectively.

### Statistical Analysis of Data

Appropriate statistical methods and tools like frequency and percentage, Mean percent score (MPS), standard deviation, Range and 't' Test were used for the analysis of data.

## RESULTS AND DISCUSSION

### Different components of SABLA as perceived by the beneficiaries

The advantage of the sabla scheme as perceived by the beneficiaries has been presented in table 1. On the aspect of nutrition provision, Take home ration (THR) for 15-18 years adolescent girls was ranked first with a mean score of 6.09. The lowest rank was given to hot cooked meal with mean score of 4.47, indicating that the presence of adolescent girls was to carry this ration home rather than eating hot cooked meal at the centre. Because by this they could cook it according to their personal taste and have it at a time of their choice. The response of the beneficiaries towards the advantage related to IFA Supplementation was perceived as most important provided under 'SABLA' Scheme. Provision of 100 adult tablets of IFAs was also perceived by 50 per cent beneficiaries with mean score of 6.33. The advantage related to *Health Check-ups and Referral Services* provided under 'SABLA' Scheme showed that the Provision of general health check-ups once in three months on kishori divas was ranked first by the beneficiaries with mean score of 5.67. Under the 'SABLA' Scheme related to Provision of Nutrition and Health Education first rank was allotted by beneficiaries to Identification of locally available nutritious food with mean score of 6.33. The other advantage i.e. Information about nutrient deficiency disorders and their prevention was assigned lowest rank with mean score of 3.26. The probable reason of which may be attributed to the fact that they don't have knowledge about nutrients and nutrients deficiency.

The table 1 further highlights that regarding advantages related to guidance on family welfare ARSH, child care practices and home management provided under 'SABLA' Scheme, the beneficiaries ranked as awareness about keeping body clean, avoiding tight clothes to wear etc.,

awareness about marriage and pregnancy at right age, colostrums feeding just after birth to new born baby and Importance of mother's milk at first position with mean score of 7.26. Lowest rank was given to awareness to promote institutional delivery among family members with a mean score of 3.72.

The present study finds supported from the study conducted by Indian Institute of Health Management (2000).

The data in table also brings to the notice that with regard to advantages related to life skills education and accessing public services provided under 'SABLA' Scheme, awareness about importance of education was ranked first by beneficiaries with mean score of 7.35. The lowest rank was given to the advantage of awareness about rights and entitlement with mean score of 3.07. When the beneficiaries were probed regarding ranking the advantages related to vocational training (16-18 yrs adolescent girls) provided under 'SABLA' Scheme, the results revealed that awareness about vocational training and improve economic condition were ranked first with mean score of 3.35. The lowest rank was given to the advantage of upgrade vocational skills with mean score of 2.60.

## CONCLUSION

SABLA scheme for adolescent girls is a unique programme that endeavours to have adolescent girls with enhanced self esteem, improved nutrition and health status with enhanced skills and the capacity to make informed choices, through various components included in it. *Sabla*, the government is investing in the health, nutrition and development needs of adolescent girls to advance their rights to education, health and protection which will help them to build a future of gender equality and justice. All this, will in turn help in building of a self-reliant and confident women citizenry. Majority of the beneficiaries were getting the benefit of the scheme and perceived it as an important initiative. It is recommended that similar study can be conducted in other district along with a large number of samples. A comparative study can be done on the topic "performance of SABLA scheme in rural and urban areas". Awareness programme could be planned on the functions of SABLA scheme.

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