### International Journal of Science and Research (IJSR) ISSN: 2319-7064

SJIF (2022): 7.942

# A Study to Assess the Awareness and Utilization of Services of Kishori Shakti Yojana among Adolescent Girls Residing in Rural Region of Maharashtra

Shilpa Upadhyay<sup>1</sup>, Sandeep G Kolaskar<sup>2</sup>

<sup>1</sup>M. Sc. Nursing Student Dr. Panjabrao Deshmukh Nursing Institute, Amravati, Maharashtra, India

<sup>2</sup>Assistant Professor, Dr. Panjabrao Deshmukh Nursing Institute, Amravati, Maharashtra, India Corresponding Author Email: sandipkolaskar[at]gmail.com

Mobile No.: 9604407979

Abstract: Adolescence is the period of transition between childhood and adulthood. It includes some big changes in the body, and to the way a young person relates to the world. The physical, sexual, cognitive, social, and emotional changes that happen during this time can bring anticipation and anxiety for both children and their families. Understanding what to expect at different stages can promote healthy development throughout adolescence and into early adulthood. Methods: A cross-sectional survey was conducted to assess the awareness and utilization of services of Kishori Shakti Yojana among adolescent girls residing in rural region of Maharashtra. One hundred & fifty (n=150) adolescent girls were selected by purposive sampling technique. A study was conducted at rural region of Maharashtra. Data gathered were analyzed and interpreted using descriptive & inferential statistics. Result: It was observed that 40.7% adolescent girls had poor knowledge whereas 35% had average knowledge, 15.3% had good knowledge & 12.7% had very good knowledge scores & I respect to utilization of Kishori Shakti Yojana Services majority of adolescent girls i.e. 85 (56.7%) had not utilized the services. Further, 46 (30.7%) of adolescent girls had partially utilized the services and only 19 (12.7%) of adolescent girls had completely utilized the services under KSY. Conclusion: The mean knowledge score on Kishori Shakti Yojana revealed that 61adolescent girls had poor knowledge with a mean score of 2.93+1.3 whereas 35 of them had average knowledge on Kishori Shakti Yojana with a mean score of 13.0+1.4. However, 19 adolescent girls had very good knowledge with a mean score of 17.9+1.3 and only 12 adolescent girls had excellent knowledge with a mean score of 22.7+1.1. Hence, it was interpreted that majority of adolescent girls had only poor and average knowledge on Kishori Shakti Yojana.

Keyword: Knowledge, KSY, Adolescent girls

#### 1. Introduction

Women empowerment has attracted the attention of the researchers as an active area of research since 1980's. It can be viewed as an ultimate as well as a mean to achieve other developmental goals. The status of women is affected by the level of their education. As the quality of female education increases, it improves the status of women and has larger impact on demographic behaviour. A mother's education level has a very strong and positive impact on morality and upbringing of her off springs. In traditional Indian society women were given due importance. They were recognized as equal as men. <sup>1</sup>

The status of women in complex society like ours is not uniform. Within Indian subcontinent, there have been infinite variations of the status of women, differing according to the cultural milieu, family structure, caste, class, occupation, property rights etc. All these factors are significant determinants of variations in her position in different groups.<sup>2</sup>

Addressing the constraints to women's economic empowerment is fundamental to poverty reduction and food security, lasting, inclusive and sustainable economic growth, and the achievement of gender equality. Approaches to economic empowerment includes increasing skills and

access to productive resources, improving the enabling and institutional environment, and assisting women in their ability to make and act upon decisions regarding economic growth and development. Skill building can be viewed as an instrument to empower the individual and improve his/her social acceptance or value.<sup>3</sup>

If women go to higher education, they make more money. As women earn more money, they spend it on their children's education and health. As women's economic status improves, they will gain more social knowledge and a voice in the family and village. As women gain influence and awareness, they become more assertive; get better credit and higher incomes, and get the attention of police and courts when attacked.

Kishori Sakti Yojana was launched in 2001 as part of a comprehensive child development program. The program is currently implemented in 2,000 projects in the Comprehensive Child Development Program. Kishori Shakti Yojana is implemented through Anganwadi Centres in rural and urban areas. The program aims to break down the intergenerational life cycle of nutritional and gender disadvantage and create a supportive environment for self-development. Kishori Shakti Yojana aims to empower and self-development of adolescent girls, preparing them for future productive and reproductive roles as confident

Volume 12 Issue 2, February 2023

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

Paper ID: SR23224123257 DOI: 10.21275/SR23224123257 1495

## International Journal of Science and Research (IJSR) ISSN: 2319-7064

ISSN: 2319-7064 SJIF (2022): 7.942

individuals, not only in building families but also in building nations.<sup>5</sup>

Adolescence is the period of transition between childhood and adulthood. It includes some big changes-to the body, and to the way a young person relates to the world. The physical, sexual, cognitive, social, and emotional changes that happen during this time can bring anticipation and anxiety for both children and their families. Understanding what to expect at different stages can promote healthy development throughout adolescence and into early adulthood<sup>6</sup>.

India has the largest cohort of adolescents in the world, approximately 243 million. A recent national review found that adolescents were commonly affected by both under and over nutrition, common mental disorders, substance use and violence. Girls are particularly vulnerable: 45% of girls aged 15-18 have a BMI less than 18.5, and 27% of women aged 20-24 were married before the age of 18. Sixty-eight percent of women are literate compared to 86% of men. These national figures mask important in equities across States, and between wealth and caste/tribal groups<sup>7</sup>.

The report of UNICEF India (2019) found that adolescent girls suffer multiple nutritional deprivations. While more girls suffer from shortness than boys, anaemia affects 40% of adolescent girls, compared to 18% of boys, and worsens as they get older. The report stated that focusing on adolescent girls, before they become mothers, is critical to break India's intergenerational cycle of malnutrition<sup>8</sup>.

There are over 355 million menstruating women and girls in India, but many girls across the globe still face major problems with a relaxed and dignified menstrual hygiene management experience. In India, during their menstrual cycle, about 88 percent of girls use homemade items. The incidence of reproductive tract infection (RTI) was 70% more prevalent among women and girls if hygienic sanitary practices weren't practiced during menstruation. Menstrual hygiene is an issue that every girl has to deal with in her life, but there is lack of awareness on the process of menstruation, the physical and psychological changes associated with puberty and proper requirement for managing menstruation. The taboos surrounding this issue in the Indian society prevent girls and women from articulating their menstrual needs.

India has the largest cohort of adolescents in the world, approximately 243 million. A recent national review found that adolescents were commonly affected by both under and over nutrition, common mental disorders, substance use and violence. Girls are particularly vulnerable: 45% of girls aged 15-18 have a BMI less than 18.5, and 27% of women aged 20-24 were married before the age of 18.10

#### **Objectives:**

To assess the awareness and utilization of services of Kishori Shakti Yojana among adolescent girls.

#### 2. Material & Methods

To accomplish the objectives of the study, a cross-sectional survey was conducted. The population of the study included adolescent girls in rural Maharashtra region, thus 150 adolescent girls were selected using purposive sampling technique. The study was conducted at selected rural areas of Maharashtra region.

Self-Administered Questionnaire was used to collect the data which consist-

Part-I: information on demographic variables of adolescent girls in selected rural areas of Maharashtra region. The variable includes; Age in years, Education, Religion, Monthly Family Income, Source of Information.

Part-II: Dealt with knowledge structured questions/statements that seek information on awareness of Kishori Shakti Yojana program among adolescent girls at selected rural areas.

Part III: Dealt with checklist related to semi-structured questions/ statements that seek information on utilization of services of Kishori Shakti Yojana among adolescent girls at selected rural area. The checklist has Yes/No type of questions related to utilization of services of Kishori Shakti Yojana.

The knowledge level were classified arbitrary as poor (20% & below), average (21%-40%), good (41%-60%), very good (61%-80%) & excellent (81% & above)

The prepared tool was validated by experts from different faculty. The reliability of tool was r=0.99. The pilot study showed that the study was feasible.

#### 3. Result

It was found that 33% of adolescent girls were in the age group of 11-12 years whereas 27% of adolescent girls belonged to 15-16 years. Further, 30% of adolescent girls were aged between 17-18 years. However, only 11% of adolescent girls were aged between 13-14 years. According percentage wise distribution of adolescent girls to their educational status revealed that the highest percentage 30% of adolescent girls had secondary school education. Similarly, 28% of adolescent girls had primary school education. Further, 24% of adolescent girls had no formal education. However, only 18% of adolescent girls had higher secondary education. As per religion according to their religion shows that the highest percentage 33% of adolescent girls was Hindus. Whereas the Christian & other religions were 16% 17% respectively. However, adolescent girls belonged to Muslim religion was 21%. Further, around 18% of adolescent girls were Buddhist. According to Monthly income of the family revealed the highest percentage 37% of adolescent girls were had monthly income above Rs. 4401, whereas 26% of adolescent girls belonged to category of monthly income less than Rs. 1400/-. Further, 20% of adolescent girls had monthly family income Rs. 2401-Rs. 4400. However, around 17% of adolescent girls had monthly family income Rs. 1401-Rs. 2400 &

Volume 12 Issue 2, February 2023

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

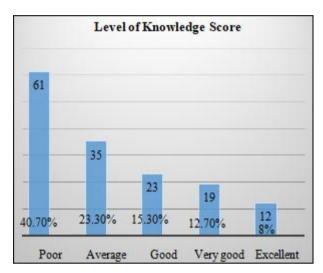
Paper ID: SR23224123257 DOI: 10.21275/SR23224123257 1496

### **International Journal of Science and Research (IJSR)** ISSN: 2319-7064

SJIF (2022): 7.942

according to their Source of Information depicts that the higher percentage 75% of adolescent girls had source of information from Anganwadi workers. However, 10%, 9% & 6% of them had their source of information as friends, gram panchayat and Asha workers respectively.

It was found that out of 150 adolescent girls, majority 40.7% of them had poor knowledge whereas 35% had average knowledge on Kishori Shakti Yojana. Further 15.3% & 12.7% had good & very good knowledge respectively. However, only 8% of the adolescent girls had excellent knowledge.



#### 4. Conclusion

Mean knowledge scores on Kishori Shakti Yojana shows the 61 adolescent girls had poor knowledge with a mean score of 2.93+1.3 whereas 35 of them had average knowledge on Kishori Shakti Yojana with a mean score of 13.0+1.4. However, 19 adolescent girls had very good knowledge with a mean score of 17.9+1.3 and only 12 adolescent girls had excellent knowledge with a mean score of 22.7+1.1. Hence, it can be interpreted that majority of the adolescent girls had poor knowledge on Kishori Shakti Yojana.

#### References

- Impact of Kishori Sakti Yojana for the empowerment of Scheduled Caste women in Kerala [Internet]. Ijcrt.org. [cited 2022 Jun 17]. Available from: https://ijcrt.org/papers/IJCRT1133459.pdf
- Chakraborty DSK. Women's rights in India: A constitutional insight. SSRN Electron J [Internet].2018 [cited 2022 Jun 17]; Available from: https://papers. ssrn.com/abstract=3688004
- Somaiya SPP. Economic Empowerment of Women Promoting Skills Development in Slum Areas [Internet].2016. Available from: https://wcd. nic. in/sites/default/files/Final%20Report-TISS-%20Skill%20in%20slums.pdf
- Facts and figures: Economic empowerment [Internet]. UN Women-Headquarters. [cited 2022 Jun 17]. Available from: https://www.unwomen.org/en/whatwe-do/economic-empowerment/facts-and-figures
- Dr Roopesh. Kishori Shakti Yojana: Essential details [Internet]. communitymedicine4all.2017 [cited 2022

- 17]. Available from: https://communitymedicine4all.com/2017/12/11/kishor i-shakti-yojana-essential-details/
- World Health Organization. WHO| adolescent development [Internet].2013. WHO. [cited 2021 June Available from: www.who.int/maternal\_child\_adolescent/topics/adoles cence/ dev/en/.
- Rose-Clarke, K., Pradhan, H., Rath, S. et al. Adolescent girls' health, nutrition and wellbeing in rural eastern India: a descriptive, cross-sectional community-based study. BMC Public Health 19, 673 (2019). https://doi.org/10.1186/s12889-019-7053-1
- UnicefOrg d. https://www.unicef.org/india/media/2631/file/CNNS-Thematic-Report-Adolescents-Diets-and-Nutrition.pdf (accessed August 2, 2021).
- Torondel B, Sinha S, Mohanty JR, Swain T, Sahoo P, Panda B, et al. Association between unhygienic menstrual management practices and prevalence of lower reproductive tract infections: a hospital-based cross-sectional study in Odisha, India. BMC Infect Dis 2018; 18: 473.
- [10] International Institute for Population Sciences. National family health survey (NFHS-3), 2005-06: India. International Institute for Population Sciences; 2007.

Volume 12 Issue 2, February 2023

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

DOI: 10.21275/SR23224123257 1497 Paper ID: SR23224123257