



## Learning Games for Girls in India: Research Brief

### Background

Approximately 20 percent of India's one billion citizens are adolescent girls between the ages of 10 and 19 years old. These girls are often caught in a cycle of poor health, early marriage, early and repeated pregnancies, limited mobility and poverty. Freedom from Hunger developed education curriculum particularly for these adolescent girls called *Learning Games for Girls* to improve their health and financial status. *Learning Games* is a dialogue-based education methodology made up of a series of learning sessions that are designed to equip adolescent girls and young women with new knowledge to improve their food security.

Freedom from Hunger's partner, Reach India, leverages the self-help group (SHG) platform to deliver the Learning Games through a low-cost, sustainable network of Service Centers—two-person training teams—that promote and train a vast existing network of self-help promoting institutions (SHPIs)—community- and faith-based organizations, specialized microfinance institutions, rural and cooperative banks and local government departments. These SHPIs already reach millions of women in some of the poorest rural communities of the poorest states of India, and by supporting existing field animators that support SHGs to facilitate *Learning Games*, Reach India optimizes the most ubiquitous microfinance platform in India today. Reach India's approach encourages adolescent girls to participate in Learning Game sessions with their mothers and mothers-in-law in existing SHGs. Between 2006 and 2009, 35,000 adolescent girls participated in the *Learning Games* in three ways:

1. Mixed groups: existing women self-help groups members invited their daughters and daughters-in-law to participate in *Learning Games*;
2. Girl-only groups: adolescent girls formed self-help groups of their own and participated in *Learning Games*; and
3. Other channels: adolescent girls participated in *Learning Games* through non-self-help group channels, such as school and after-school programs, and other mechanisms.

### Methods

Between 2006 and 2009, Sri Mayapur Vikas Sangha (SMVS), a Reach India partner SHPI located in rural West Bengal, facilitated *Learning Games for Girls* and participated in evaluation activities. A community-based randomized controlled trial (CBRCT) design was applied to 150 SHG groups to compare the financial and health-related knowledge, attitudes and behaviors of SHG members and

their adolescent daughters and daughters-in-law participating in *Learning Games* to SHG members and their daughters and daughters-in-law who did not participate in *Learning Games*. At baseline, all mother participants were current SHG members. The evaluation assessed the same mothers and daughters at three evaluation points—baseline, midline and endline. Thus, at the 6- or 12-month evaluation point, they may no longer have been SHG members, but were still part of the evaluation.

In addition to the CBRCT, adolescent participants of *Learning Games* at 51 Reach India network institutions participated in a quantitative survey to evaluate changes in knowledge, attitudes and stated behaviors after participating in *Learning Games*. Employing Lot Quality Assurance Sampling (LQAS), nineteen girls from each of five Indian states served by Reach India—Assam, Bihar, Jharkhand, Orissa and West Bengal—were randomly selected, yielding a total of 95 girls randomly selected to participate in the survey. Of the 95, four girls and their mothers from each of the five states were selected to participate in a lengthier qualitative interview or “impact story.” The purpose of the impact story was to better understand girls and mothers’ hopes and aspirations, differing perspectives between mothers and daughters, decision-making power, and what among *Learning Games* was perceived to be most interesting or useful.

## Lessons Learned

The results of the CBRCT evaluation revealed that participation in *Learning Games* improves daughters and mothers’ confidence regarding money management. Similarly, in the qualitative study, many *Learning Game* participants felt they improved their ability to save money, bargain more effectively and reduce their expenses. However, statistically significant improvements in savings levels and effective bargaining behaviors were not detected in the quantitative study. Given this improved confidence among daughters and mothers regarding money management, it is hypothesized that loan delinquency and deteriorating economic conditions may have contributed to a lack of improvement in actual savings rates.

Although improved gains in knowledge, attitudes and behaviors were expected in all health categories, the only topic with significant gains was HIV/AIDS knowledge. All other topics, such as hand-washing, diarrhea, nutrition and reproductive health, revealed insignificant differences between those who participated in *Learning Games* and those who did not. There were gains in girls’ comfort levels discussing topics with their family members. Where products were promoted, such as soap for hand-washing, oral rehydration solution for treating diarrhea, and foods rich in iron and protein, there was no significant increase in use. It is hypothesized that this lack of use may be due to girls and women’s perception that the ongoing cost to use these products was too high. This suggests that when such products are promoted, greater attention must be given to increased access and/or consumer education to help families prioritize their use.

Qualitative findings revealed satisfaction with *Learning Games* overall. When mothers and daughters participated in *Learning Games* together, they enjoyed the opportunity to learn together and communicate with each other about important topics. When girls participated in girl-only groups, they appreciated having a safe, peer forum to discuss reproductive and sexual health and HIV/AIDS

without the presence of adults. Overall, this initiative generated important learning about both the efficacy of *Learning Games* and important related marketing, access and delivery channel challenges that need to be addressed in tandem. In general, the research confirmed that SHPIs with more experience in and commitment to working with adolescent girls had more success facilitating *Learning Games*. Additionally, SHPIs with strong ties to communities they serve, and who prepare those communities to support adolescent girls, are effective at implementing *Learning Games*.

## Conclusion

*Learning Games for Girls* was popular among participating SHPIs in east India and among girls and mothers served by those institutions. The study yielded fairly clear signals that *Learning Games* can effect change among girls, provided SHPIs introducing them are able to prepare communities for some sensitive content and facilitate all education sessions as intended. Some Games, such as hand-washing, are more popular among girls and women, while others, such as HIV/AIDS, lead to more measurable changes in knowledge. In conclusion, this research experience demonstrates that adolescent girls can be reached effectively with *Learning Games for Girls* through an existing self-help group platform in India and that important changes in self-confidence, knowledge and behavior are achievable, making this a cost-effective and promising approach to improving the lives of adolescent girls.

For more information on the results of the evaluation, please contact Freedom from Hunger at [info@freedomfromhunger.org](mailto:info@freedomfromhunger.org).

For more information on this program, please contact Reach Global at [info@reach-global.org](mailto:info@reach-global.org). Learn more about Reach at [www.reach-global.org](http://www.reach-global.org).