

## **EXECUTIVE SUMMARY**

### **Background and Study Objectives**

The Karnataka Evaluation Authority assigned the responsibility of undertaking an evaluation study of Suchi Sambhrama Kit scheme to OUTREACH Association of Volunteers for Rural Development, Bengaluru. The study entitled “**Evaluation of Suchi Sambhrama Kit for SC/ST Boys and Girls in Karnataka**” had the following primary objectives:

- 1) Assessing the awareness, perception and practice of personal hygiene among beneficiaries.
- 2) Assessing the awareness about the scheme among students in hostels.
- 3) Assessing the utility and impact of the scheme on the beneficiaries and their families.
- 4) Assessing the satisfaction level of the beneficiaries about the kit provided for maintenance of personal hygiene.
- 5) Examining the functioning and monitoring of the SSK scheme.
- 6) Identifying the issues and challenges in the process of implementation including procurement and distribution of the kit among the various stakeholders of the scheme.
- 7) Giving suggestions for a more effective implementation of the scheme to attain the desired outcomes and to identify alternative models that are feasible and possible.

### **About the Suchi Sambhrama Kit Scheme**

The Suchi Sambhrama Kit scheme was started in the State of Karnataka in the year 1994 with the objectives of creating awareness about, and promoting personal hygiene among students staying in government hostels in the state and providing the necessary resources for maintenance of personal hygiene. The programme, which is managed by the Department of Social Welfare (D.S.W.), covered only pre matric hostels till 2015-16. 2016-17 onwards, students in post matric hostels are also being covered by the scheme. As of now the kits are given to students in hostels functioning under the aegis of the Department of Social Welfare, Backward Classes & Minority institutions and Morarji Desai and Navodaya schools. The Karnataka Soaps and Detergents Ltd. is entrusted with the responsibility of supplying hygiene kits to students.

### Suchi Sambhrama Kit: Contents and Quantity

The Suchi Sambhrama kit or ‘wave kit’ contains the following items in the quantity mentioned against each item:

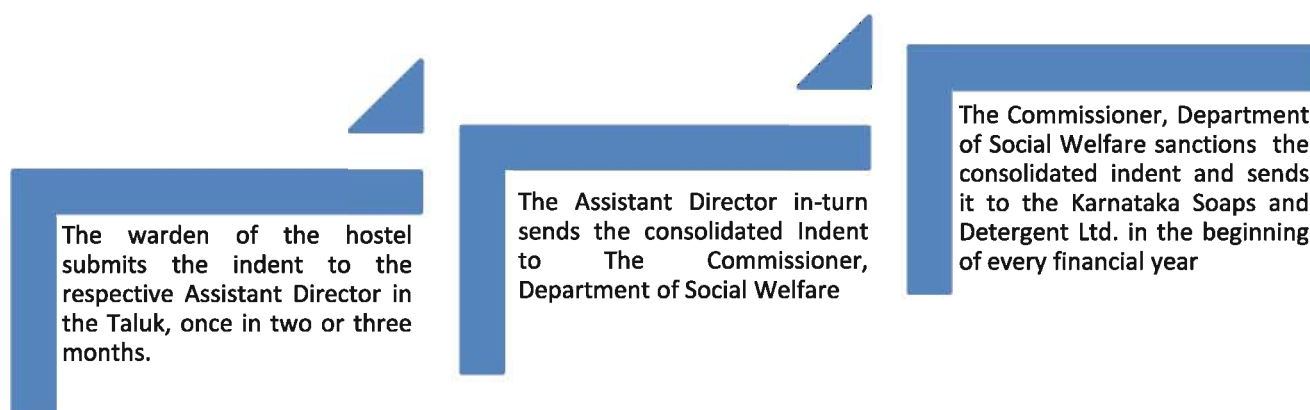
	Item	Quantity
<b>Girls</b>	1. Mysore sandal soap 2. Mysore sandal’s coconut oil 3. Mysore sandal talcum 4. MDC detergent soap 5. Ajanta toothpaste and tooth brush	75g. 1no. 100 ml. 1no. 50g. 1no. 150g – 2 nos. Ajnata tooth paste -50g. 1no. Ajanta tooth brush-1 no.
<b>Boys</b>	1. Mysore sandal soap 2. Mysore sandal’s coconut oil 3. MDC detergent soap 4. Ajanta toothpaste and tooth brush	75g. 1no. 50ml. 1no. 150g. – 2 nos. Ajnata tooth paste -50g. 1no. Ajanta tooth brush-1 no.

### Process of Procurement and Distribution of Suchi Sambhrama Kit

The procurement procedure of the Suchi Sambhrama Kit is shown in Figure one.

**Figure One**

#### Process of Distribution of Suchi Sambhrama Kit



The Karnataka Soap and Detergent LTD, once it gets the sanctioned order from the Commissioner D.S.W., supplies the kit to the taluks and from taluk, kit gets distributed to the wardens of the hostel as per their indent.

The kit is given to students for 10 months in a year. The warden takes the signature of each student in the SSK distribution register and hands over the kit to each inmate of the hostel. The kit is generally given in the first week of every month and the student is expected to use the contents for a whole month. If the item under use is over he/she has to wait for a new kit till the following month, or buy the product outside at his/her own expense.

### **Methodology**

#### **Study Sample**

The evaluation study was undertaken in eight districts of Karnataka, two each in the 4 revenue divisions of the state. In each division one district was chosen as an SC district and the other as ST district. Bellary district was chosen to study the impact of migration. In all, the study has been undertaken in nine districts of the state of Karnataka

In all, the study covered 7,600 students from 262 pre matric and 101 post matric hostels. With the exception of Bellary district (101 girls and 221 boys formed part of the sample in this district), in all the other districts put together, 869 SC girls and 3664 SC boys in pre matric hostels and 207 ST girls and 455 ST boys were included in the sample. In the post matric category, 751 and 924 SC girls and boys respectively, and 185 ST girls and 223 ST boys were part of the sample.

225 hostel wardens and 49 officials of the Department of Social Welfare participated in the study.

Of the pre matric hostels, 22 girls' and 150 boys' hostels are located in rural areas and 35 girls' and 55 boys' pre matric hostels are located in urban areas. In the post matric hostels category, one girls' and seven boys' hostels are situated in rural areas. 45 girls' and 48 boys' post matric hostels are situated in urban areas.

#### **Data Collection Techniques**

To answer the ToR questions, 3 interview schedules and one discussion guide were developed. The details are given here under:

1. Interview schedule I- For students of pre matric and post matric hostels.
2. Interview schedule II- For wardens of hostels.
3. Interview schedule III: For district and state level officials.
4. Discussion guide was used to conduct Focus Group Discussions (FGDs) and In-Depth Interviews (IDIs) to generate qualitative data.

Data were gathered by the research team, which included 9 field investigators, in the course of interviews, FGDs and IDIs with students, wardens and department officials. 41 FGDs and more than 90 IDIs have been conducted. Interviews and discussions were conducted in the hostels and offices of D.S.W.

## Major Findings

1. All the students contacted for the study learnt about the SSK scheme after joining their respective hostels. Majority of them started using the products regularly after they came to the hostels. With the exception of post matric hostels in Raichur and Vijayapura districts, in all the other post matric and all pre matric hostels in all the districts, the wardens of the hostels were the main source of information about maintenance of personal hygiene. In these two districts students said that parents were the main sources of information
2. The level of awareness about matters relating to personal hygiene was higher among the inmates of post matric than pre matric hostels. This was mainly because they were older and had more exposure. Also, important was the fact that most (92.07%) post matric hostels are located in urban areas.
3. The main personal hygiene practices which the SSK scheme inculcated are: having a daily bath; changing clothes twice a day; cutting one's nails at least once a fortnight; brushing the teeth after meals and washing hands after using the toilet. As for girls, their understanding of the need to keep themselves clean during their menstrual cycle increased. Keeping one self-clean, however is closely related to constant availability of running water and sanitary napkins.
4. The 'out-of-pocket' expense incurred towards health care has reduced by 48 percent (3648). This reduction in expense incurred in seeking health care has been reported equally in all the hostels contacted for the study.
5. All the items provided in the SSK are used by all the students. However, there is a need to increase the quantity of the items as they may not all last for a full month. This is especially true in the case of toilet soap and tooth paste. 75.75 percent of the students in pre matric and 87.44 percent in post matric hostels make up this shortfall by purchasing toiletries from stores outside. Since this is a question of affordability and not all students have the requisite resources, there is need to increase the quantity of the items provided in the kit. The most visible impact of the SSK scheme is the internalisation of the value of importance of physical hygiene.
6. Due to hygienic habits cultivated, there is reduction in the incidence of diarrhoea and scabies. One change that the students mentioned was the reduced number of visits to doctors. The other noticeable impact was the reduction in discomforts experienced by girl students during their monthly cycle because of use of soap and attempts to keep themselves clean during this period. The indirect impact was that the girls sensitized other women in the family to the benefit of using sanitary pads/clean clothes during their menstrual cycle.

7. All the students expressed their satisfaction about the scheme and the contents of the kit. They, however desired that a few more items be added to the kit both for boys and girls, as these would further enhance the quality of their personal hygiene. These include shampoo, hair lice medicine for both boys and girls and sanitary napkins for girls and talcum powder and shaving kit for boys.
8. The Suchi Sambhrama Kit Scheme is being operated by the Department of Social Welfare, Government of Karnataka. There are different levels at which the programme is being operationalized. At the hostel level it is the warden who is responsible for storing the kits and distributing them at the beginning of every month. The taluk welfare officer pays frequent visits for monitoring the functioning of the scheme. However, visits by higher officials were reported to be minimal.
9. In a few post matric boys' hostels the presence of unauthorized occupants and over stay by past students were noticed. Such tendencies must be put on check as they create a feeling of fear among genuine inmates.
10. In Bellari district there is seasonal migration. However migration of parents does not always have a negative impact on children continuing in the hostels. As some wardens observed, parental migration increases a demand for seats in pre matric hostel, as parents feel comfortable leaving their children in the security of hostels rather than have them tag along to different work spots.
11. During the course of field work it was seen that in some [(102) 28%] hostels infrastructural facilities such as, doors for toilets, running water in taps were not in place. It was also seen that there was a mis-match between the number of inmates and number of toilet and rooms.

### **Recommendations**

The recommendations of the study are presented under:

- Improvements in the kit
- Health Services and Counselling
- Monitoring the Scheme

We begin with the changes that need to be brought about in the contents of the Kit.

### **IMPROVEMENTS IN THE KIT**

- The Suchi Sambhrama Kit scheme must be continued both in pre matric and post matric hostels. However, it is necessary to add a few more items in the kit. Table 1

shows the items being currently given with the quantity and the additional items/quantity recommended.

**Table -1 Items currently supplied in SSK and items recommended**

	Item	Existing Quantity	Recommended Item and Quantity
<b>Girls</b>	1. Mysore sandal soap 2. Mysore sandal's coconut oil 3. Mysore sandal talcum 4. MDC detergent soap 5. Ajanta toothpaste and brush	75g. 100ml. 50g. 150g. - 2 nos. Ajanata tooth paste -50g. Ajanta tooth brush-1 no.	1.Body Soap: 2 nos. of 75g each 2. Oil: 150 ml. 3. Talcum powder: No change required 4. Detergent soap: 150g. - 3 nos. 5. Toothpaste: 100g. required <b>New additions recommended</b> 6. Medicare for hair lice-1 bottle 7. Shampoo – 100ml bottle
<b>Boys</b>	1. Mysore sandal soap 2. Mysore sandal's coconut oil 3. MDC detergent soap 4. Ajanta toothpaste and brush	75g 50ml. 150g. – 2 nos. Ajnata tooth paste -50g. Ajanta tooth brush-1 no.	1. Soap: 2 nos. of 75g. each 2. Oil: 50g more required 3. Detergent soap: 150g- 3 nos. 4. Toothpaste: 100 g. required <b>New additions recommended:</b> 5. Talcum Powder -50g. 6. Medicare for hair lice– 1 bottle 7. Shampoo 100ml bottle (Shampoo to be provided only in bottles and not in sachets) 8. Shaving kit

### HEALTH SERVICES AND COUNSELLING

- Since the SSK scheme has resulted in reduction of at least 50 percent expenditure incurred by families on visiting hospitals/clinics for treatment of such health problems as scabies and diarrhoea, the SSK scheme has been reported as a means of saving 'out-of-pocket' expenses on healthcare. It is in this context that conducting regular medical check-up assumes importance.
- Health check-up camps must be organized in hostels at regular intervals so as to identify age and life style specific ailments among students and give medication and also health advisory that will further strengthen the SSK programme.
- All the PHCs have adolescent counselling centres. The doctors in charge of these centres should visit the hostels falling under their geographical jurisdiction once a month and provide counselling to the students in the hostel.

- The toll-free help line 104 is a round the clock free Call Centre number. The 104-Health Help Line Call Centres advise callers on treatment for minor ailments through free phone calls and send prescriptions through SMS. Besides, experts here also offer counselling services for medical and psychological conditions including depression, suicidal tendencies, drug addiction and other such ailments. This facility is launched by Karnataka Department of Health and Family Welfare. Information about the Health Help Line 104 be made available in all the hostels. There must be a working telephone available in the hostel, for enabling students to access the 104 Health Help Line.

#### **MONITORING THE SCHEME**

- A regular quality check of the products supplied in the kit must be undertaken .
- Hostel wardens must organise orientation programmes for freshers about the use of both the items in the kit and also why and how they must be used.
- A review of the infrastructure facilities in pre and post matric hostels may be undertaken, and a need based infrastructure augmentation programme may be initiated. It is recommended that infrastructure requirement for effective implementation of the programme be included in the SSK policy document.
- The School Development and Monitoring Committees (SDMC) of schools from which, students in pre matric hostels are drawn can also be given the responsibility of monitoring the functioning of the SSK scheme. Since the mandate of the SDMC is to ensure that the quality of both academic and developmental activities of the schools is enhanced, members of the SDMC may pay at least two visits per year to the hostels where children from their school are housed.
- Since the SDMC has representatives both from the state and civil society, certain supporting facilities required for a more effective functioning of SSK, such as, chests, almirahs, trunks and locks could be obtained with its support.
- There is need to increase the number of visits by top level bureaucracy of D.S.W. to hostels in the region. The Deputy Directors may pay quarterly visits to the hostels in their respective districts and the Commissioner of Social Welfare may visit all the hostels at least once in six months.
- An online portal can be created by D.S.W. for stakeholders to share their experiences, express their concerns and also give suggestions that could facilitate a more effective functioning of the SSK scheme.

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