Girl Icon Program

IMPACT ASSESSMENT REPORT

Milaan

Building a movement of Girl Leaders

Milaan — Be The Change

Milaan is a non-profit, social impact organization dedicated to the empowerment of adolescent girls and young women. Through targeted interventions,Milaan endeavours to equip girls with the requisite knowledge, skills, and socio-cultural support necessary to pursue their ambitions. Embracing the philosophy of movement building,Milaan works in close collaboration with local communities to interrogate entrenched social norms that perpetuate gender disparities.

Central to their mission is the reshaping of prevailing narratives that shape the lived experiences of women and girls, with the overarching objective of dismantling systems of social, economic, and political marginalization.

Milaan's operational focus centers on nurturing, investing in, and amplifying the voices of adolescent girls from marginalised communities across India. Driven by the conviction that adolescent girls possess untapped potential and a fervent desire for societal transformation,Milaan endeavours to harness their narratives of hope and aspiration as catalysts for challenging regressive socio-cultural paradigms. Through their multifaceted approach,Milaan emerges as a beacon of progress, advocating for the realization of gender equity and social justice on both local and global scales.

Note From the Co-founder and CEO

With 1.3 billion adolescents worldwide, constituting 16% of the global population, today's youth face a critical juncture between childhood and adulthood, marked by profound growth and development. However, within this demographic, adolescent girls confront substantial hurdles stemming from entrenched gender disparities.

In India, where adolescent girls represent 17% of the population, over 82% of them grapple with dire poverty, lacking access to fundamental necessities like sanitation, healthcare, and education. Shockingly, 23% are wed before reaching 18, while less than 40% complete secondary education. Among those married early, 18% endure intimate partner violence, and 11% become mothers before adulthood. These statistics merely scratch the surface of the myriad challenges confronting adolescent girls, exacerbated by regressive societal norms and community practices that stifle their opportunities for growth and advancement.

In response to this pressing need, Milaan has spearheaded the Girl Icon Program, targeting adolescent girls and their communities across three key Indian states. By challenging entrenched norms and fostering positive shifts in crucial areas such as school enrollment, healthcare, including menstrual hygiene and sexual and reproductive health, the program, launched in 2015, has positively impacted thousands of lives.

This impact assessment report provides an in-depth analysis of the program's efficacy, spotlighting its remarkable influence on the trajectory of adolescent girls in India. It underscores the program's achievements in bolstering educational attainment, facilitating occupational opportunities, promoting digital literacy, and cultivating awareness of fundamental rights and financial acumen. Notably, 94% of Girl Icons and 92% of Peer Girls are actively pursuing education, signaling a promising trajectory toward personal and intellectual enrichment. Furthermore, the report sheds light on the digital divide among the program's beneficiaries, emphasizing the imperative of bridging this gap to ensure equitable access to digital resources and opportunities.

I extend my heartfelt gratitude to our dedicated team, partners, and supporters for their steadfast commitment to our shared mission. Together, we are effecting tangible change in the lives of girls and women across India, empowering them to unleash their full potential.

Dhirendra Pratap Singh

Executive Summary

The Girl Icon Program Impact Assessment Report presents an evaluation of the Girl Icon Program, which aims to empower adolescent girls in India through education and skill development. The study involved a sample of **65 Girl Icons,**
403 Peer Girls, and 403 Control Group Girls/Women from three states, namely, Uttar Pradesh, Madhya Pradesh, and Karnataka, where the program has been operating since 2015.

The independent assessment, intended to evaluate the alignment of the current program design to the desired outcomes presents a comprehensive overview across the several focus areas of the program.

The results indicate that the Girl Icon Program has been successful in improving the educational outcomes of the participants, **with 49% of the Girl Icons currently enrolled in higher secondary school** compared to 30% of the Peer Girls and 25% of the Control Group. The program has also positively impacted the occupational status of the participants, with 94% of the Girl Icons and 92% of the Peer Girls engaged in educational pursuits compared to only 39% of the Control Group.

The report also highlights disparities in digital literacy among the three groups, with **Girl Icon participants having the highest access to smartphones and digital tools. The Girl Icons outperform both the Peer Girls and the Control Group in terms of email usage and virtual meeting participation, indicating a higher level of digital engagement.**

Furthermore, the study reveals that the Girl Icon Program has significantly improved the awareness of fundamental rights among the participants, with 92% of the Girl Icons aware of their rights compared to only 44% of the Control Group. The program has also promoted financial literacy, with 91% of the Girl Icon respondents having a savings account and actively participating in savings activities.

Acknowledgments

This report has been prepared with the support of our partners and consultants. We would like to acknowledge **Verian (formerly Kantar Public)** for leading the independent impact assessment, **Echidna Giving** for funding the study and the Girl Icons, Peer Girls and the women and girls from the control group as well as the community members for participating in the study.

OVERVIEW

The report is divide into 4 broad sections

Section 1 Landscape Analysis

This section provides insights into the current landscape and an overview of the gendered inequities prevalent globally and in India across several domains such as education, healthcare, etc.

Section 2
Introduction to the study

This section introduces the Girl Icon Program and the overall need and objectives of the study. Readers can review this section to understand the study methodology and descriptive statistics of the respondents

Section 3
Impact Assessment

This section presents the insights from the impact assessment and the overall efficacy of the Girl Icon Program. It also highlights the insights of the Community Influencers

Section 4
Recommendation and conclusion

Taking into consideration the overall impact of the Girl Icon Program, this section presents recommendations for improvement and the conclusion of the assessment

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1

LANDSCAPE ANALYSIS

“In recent times, girls have outpaced boys in pursuing education, marking a significant shift in village attitudes.”

Renuka, ASHA Worker

"There is a notable reduction in child marriages; girls are marrying after reaching the legal age due to growing awareness."

Aslam, Pradhan

Landscape Analysis

Introduction

Gender inequality persists as a pressing global concern, manifesting in pronounced disparities, particularly in developing nations. Women and girls continue to encounter multifaceted challenges, including restricted access to education, limited decision-making autonomy in crucial areas such as marriage and fertility, constrained participation in the labor market, and curtailed freedom of movement and social relationships. Despite strides in economic progress, these enduring gender gaps remain deeply entrenched in cultural norms and values. Increased vulnerability due to intersectional factors such as age, demography, religious disparities often exacerbate the challenges faced by women and girls across the world.

These vulnerabilities are further compounded by poverty and associated resource limitations. In this context, adolescent girls, defined by the World Bank and United Nations, as between the ages of 10 -19 years, are often at risk of heightened restrictions in accessing basic resources such as education and healthcare.

Adolescence is amongst the most critical periods of any child's life. It is characterized by distinct and multifaceted developments encompassing physical, cognitive, social, emotional, and sexual dimensions, necessitating specialized attention within the framework of national development policies, programs, and strategies.[1]

Presently, the global population includes an unprecedented 1.3 billion adolescents, constituting a substantial 16% of the world's population. According to United Nations estimates, India alone accounts for 254 million of these adolescents. Among this vast demographic, 121 million are females, representing 17 percent of the overall population, while the remaining 133 million are males, constituting 18 percent of the total population.[2]

As adolescents go through this important phase of their lives, they are exposed to several challenges in accessing accurate information about the changes that they are experiencing in their lives. Furthermore, they confront limited opportunities to develop vital competencies essential for active societal engagement. Adolescent girls, more specifically, face a multitude of vulnerabilities rooted in deeply ingrained societal norms that devalue their worth.[3] These norms, in turn, erode their autonomy, constraining their ability to make decisions regarding their education, employment, marriage, and social interactions.[4]

1. Christie D, Viner R (2015). Adolescent development.
2. UNICEF: Adolescent Data Portal
3. Stark, L., Seff, I., & Reis, C. (2021). Gender-based violence against adolescent girls in humanitarian settings: a review of the evidence. : https://linkinghub.elsevier.com/retrieve/pii/S2352464220302455
4. National Research Council.(2001). https://www.ncbi.nlm.nih.gov/books/NBK223734/pdf/Bookshelf_NBK223734.pdf

Education

Education stands as a cornerstone of societal advancement, wielding transformative power for individuals and nations alike. Countries boasting higher levels of education often experience enhanced political stability, increased life expectancy rates, and improved overall health outcomes. [5] However, despite the recognized benefits of education, a staggering number of adolescents worldwide remain out of school, with over 250 million adolescents already excluded from educational opportunities before the onset of the COVID-19 pandemic (UNESCO, 2020). Projections suggest that by 2030, an additional 825 million children will lack the basic secondary-level skills essential for lifelong learning and employment, amplifying existing disparities and hindering global progress (UNESCO, 2020). Among the marginalized segments of society, adolescent girls represent a particularly vulnerable group, with approximately 129 million girls globally deprived of educational access (UNESCO, 2020).

When it comes to educating girls and boys, it is essential to recognize that both genders yield similar outcomes in terms of subsequent earnings and future opportunities. However, it is imperative to recognize that investing in the education of girls yields significant socioeconomic dividends, transcending individual benefits to positively impact entire communities. Education empowers girls, amplifying their agency within households and enabling them to make informed choices, including decisions related to fertility and family planning.

Moreover, education serves as a formidable tool in ameliorating adverse health outcomes among girls, particularly concerning early marriage and childbirth. Research indicates that girls who receive secondary education are more likely to delay marriage and motherhood, contributing to reduced lifetime fertility rates and mitigating the risks associated with early pregnancy and childbirth (UNESCO, 2018). However, despite progress in reducing the number of out-of-school adolescents in recent years, persistent challenges remain. A significant proportion of adolescents, both male and female, continue to drop out before completing elementary education, highlighting the urgent need for targeted interventions to address educational disparities among marginalised children (UNESCO, 2020).

In India, between 2006 to 2014, there was a notable decrease in the number of out-of-school children, from 13.46 million to 6.1 million. Despite this substantial decline, even today, 29 percent of both male and female adolescents drop out of school before completing their full elementary education, highlighting a concerning trend among the most marginalized children.

5. Adolescent education and skills, https://www.unicef.org/education/skills-development

Additionally, around 50 percent of adolescents fail to complete their secondary education, underscoring a significant challenge in providing adequate educational opportunities for this age group. Furthermore, it is worth noting that approximately 20 million adolescents do not have access to preschool education, further emphasizing the critical need for improved educational access and retention for adolescents, who are pivotal in shaping the future of society. Education for adolescent girls is shaped by a complex interplay of socio-cultural, economic, and political factors in India. While government initiatives such as the Sarva Shiksha Abhiyan (SSA) and the Right to Education Act (RTE) have made strides in expanding educational access, challenges persist, particularly in rural and marginalized communities. Deep-seated patriarchal norms, poverty, and caste-based discrimination continue to impede girls' access to education, necessitating comprehensive strategies to address these barriers (Bajpai & Kumar, 2019).[6]

Civil society organizations and grassroots movements have played a pivotal role in advocating for girls' education in India, implementing innovative interventions to overcome challenges such as menstrual hygiene management and school-related gender-based violence (Kishor & Gupta, 2004)[7]. However, sustained efforts are required to ensure equitable and inclusive educational opportunities for all adolescent girls. By prioritizing girls' education and implementing targeted interventions, nations can unlock the full potential of adolescent girls, fostering sustainable development and social progress on a global scale.

6] Bajpai, N., & Kumar, S. (2019). Education and Empowerment of Women in India: Policies and Perspectives. Indian Journal of Human Development, 13(2), 184-204.

[7] Kishor, S., & Gupta, K. (2004). Women's empowerment in India and its states: evidence from the NFHS. Economic and Political Weekly, 39(7), 694-712.

Healthcare and well-being

Gendered vulnerabilities are pervasive across a variety of sectors, however, they manifest most strongly as physiological ailments and healthcare issues. Adolescence presents a stage which substantial changes in both psychological and physical aspects of a child's life. In this context, absence of adequate awareness, knowledge and access to good quality health increases the risk of long-term healthcare issues.

Adolescent sexual and reproductive health (ASRH) is a fundamental component of overall well-being during adolescence. It encompasses the prevention of unintended pregnancies, sexually transmitted infections (STIs), including HIV/AIDS, and sexual violence. Globally, the adolescent fertility rate stands at 42 pregnancies per 1,000 live births, highlighting the prevalence of early motherhood. In India, with a slightly higher rate of 43 pregnancies per 1,000 live births, ASRH issues are further compounded by cultural and socioeconomic factors.

Adequate nutrition during adolescence is crucial for physical and cognitive development. Unfortunately, many adolescents, especially girls, lack access to diverse and nutritious food sources, leading to deficiencies in vital micronutrients such as iron. Iron-deficiency anemia is particularly prevalent among adolescent girls in India.

Anemic adolescent girls also face elevated risks during pregnancy, posing threats to maternal and infant health.

Menstrual hygiene is an essential aspect of adolescent girl healthcare, yet it is often overlooked or stigmatised. Proper menstrual hygiene management is integral to the well-being of girls and women, as it can prevent reproductive tract infections and other health complications. In India, while a commendable proportion of women aged 15-24 use hygienic methods during menstruation (77.3% nationally), disparities exist among states, with some exhibiting lower rates of adoption.

There are also several challenges in addressing the healthcare needs of adolescent girls. These include inadequate awareness, cultural barriers, limited access to healthcare services, and socioeconomic disparities. However, there are also opportunities for intervention and improvement. School-based interventions, for instance, have shown promise in promoting health literacy and fostering healthy behaviors among adolescents. Additionally, targeted policies and programs can mitigate the challenges faced by adolescent girls.

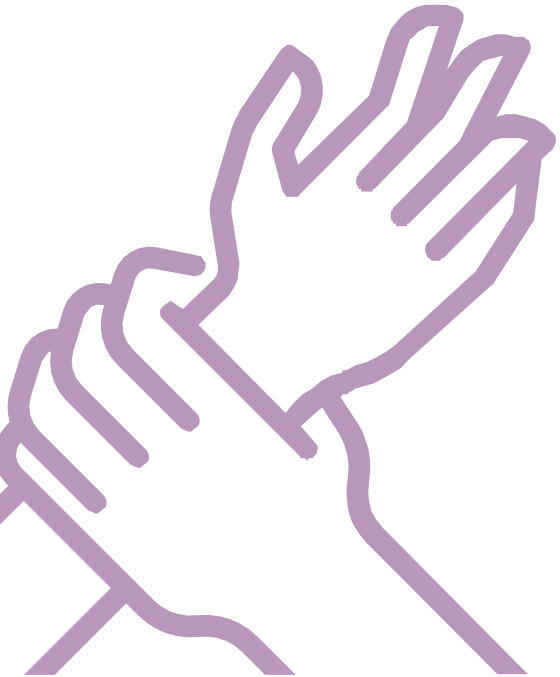
Adolescent girl healthcare is a complex and multifaceted issue that requires a comprehensive approach. By addressing the interconnected challenges of sexual and reproductive health, nutrition, and menstrual hygiene, policymakers, healthcare providers, and communities can promote the well-being of adolescent girls and empower them to lead healthy and fulfilling lives.

Violence against Women and girls

The fundamental entitlement of each adolescent to mature within a secure and nurturing setting is a protected right, as outlined in international human rights conventions, including the Convention on the Rights of the Child.40 This right is not only a legal prerogative but is also paramount for their growth and welfare. The framework established by the United Nations (UN) H6+ Technical Working Group on Adolescent Health and Wellbeing underscores the imperative that adolescents must encounter an environment where they are shielded from all categories of violence, maltreatment, and exploitation, both physically and psychologically. 41

Over 1 billion children, representing half of the global child population, confront violence annually. This violence manifests in various forms, spanning both online and offline environments, from their households and schools to their communities. Children can be victims, witnesses, or exposed to violence, often encountering a confluence of multiple forms or a sequential progression along a distressing continuum.42

Gender-based violence (GBV) against women and girls, recognized as a grave human rights violation, is a significant global public health concern. The United Nations General Assembly defines GBV as any act causing or likely to cause physical, sexual, or psychological harm or suffering, encompassing threats, coercion, or arbitrary deprivation of liberty, whether in public or private contexts.



STATE PROFILES

MADHYA PRADESH

UTTAR PRADESH

KARNATAKA

UTTAR PRADESH

16% WOMEN WERE EMPLOYED OVER THE PAST 12 MONTHS

GIRLS WERE ENROLLED IN SECONDARY SCHOOL 66.2%

51.1% WOMEN AGREE THAT A MAN CAN HIT A WOMAN

GIRLS ARE MARRIED BEFORE THE AGE OF 18 14.8%

29.7% WOMEN WERE EMPLOYED OVER THE PAST 12 MONTHS

GIRLS WERE ENROLLED IN SECONDARY SCHOOL 68.4%

47.2% WOMEN AGREE THAT A MAN CAN HIT A WOMAN

GIRLS ARE MARRIED BEFORE THE AGE OF 18 21.8%

KARNATAKA

24.6% WOMEN WERE EMPLOYED OVER THE PAST 12 MONTHS

GIRLS WERE ENROLLED IN SECONDARY SCHOOL **94.9%**

43.7% WOMEN AGREE THAT A MAN CAN HIT A WOMAN

GIRLS ARE MARRIED BEFORE THE AGE OF 18 **20.5%**

2

INTRODUCTION TO THE STUDY

“ Milaan's educational message is clear: girls must not just attend school but aim to complete high school, ensuring a brighter future.”

Preeti Mishra, Teacher

"Programs like Girl Icons are creating a trend where more girls are going back to school to complete their high school education."

Vidya, Pradhan

The Girl Icon Program

The Girl Icon program, rooted in the guiding principles of "Leading self, Leading others, and Leading social change," represents an evidence-informed endeavor aimed at nurturing the leadership potential of adolescent girls hailing from low-income families.
Launched in 2015, this initiative is tailored to girls aged 12-18 years, offering them comprehensive life skills education while catalysing collective social actions on issues pertinent to adolescent girls.

At its core, the Girl Icon program intends to empower girls to become agents of change, equipping them with smartphones to transcend societal norms and bridge the gender digital divide.
Notably, many Girl Icons represent the first generation of girls within their communities to possess smartphone ownership. Through fortnightly training sessions accessible via smartphones, Girl Icons are afforded the opportunity to enhance their knowledge, awareness, and critical skills such as negotiation and communication from the comfort of their homes.
Additionally, the program provides a platform for amplifying girls' voices through workshops and events, exemplified by the Girl Icon Leadership Summit.

Strategically positioned to challenge societal norms inhibiting gender equality, particularly regarding the attainment of secondary education for girls, the Girl Icon Program is concentrated in rural areas of Uttar Pradesh, Madhya Pradesh, and Karnataka.

Specifically targeting girls aged 1 o 18, the program not only encourages educational pursuits aligned with individual preferences and potentials but also cultivates grassroots girl leaders who serve as catalysts for transformative change.

Over an approximate 18-month cycle, Girl Icons assume leadership roles wi hin their peer groups. Midway through the program, these girls collaborativ ly identify and address social barriers to education through the design and implementation of social action projects. To date, the initiative has yielded tangible results, with 600 Girl Icons positively impacting over 10,000 adolescent girls and indirectly influencing approximately 75,000 community members through the execution of 900+ social action projects. In 2022, the program witnessed expansion, welcoming over 1800 new Girl Icons and engaging 36,000 adolescent girls across the aforementioned states.

The ripple effect of this outreach extends to an estimated 18,000 community members, exemplifying ongoing endeavors to effect meaningful change through education and empowerment.
In order to assess the impact of the Girl Icon program, Verian Group conducted this study as an independent study.

The Process

The Girl Icon program follows a systematic approach in identifying and selecting its participants, including both Girl Icons and Peer Girls. The initial phase concentrates on maximizing awareness of the program, primarily facilitated through engagement with educational institutions, where 36.9% of Girl Icons were first introduced to the program. Additionally, information dissemination through existing Girl Icons, relatives, and friends contributes significantly to program awareness. As part of this process, a considerable proportion (75%) of existing Girl Icons report making an independent decision to participate, while others receive support from various familial, social, and organizational networks.

The selection process entails a multi-step procedure, commencing with the creation and upload of a self-introduction video, followed by virtual interactions with Milaan team and individual telephonic interviews. District-level events are also employed to further engage and recruit Girl Icons. Prior to virtual interactions, each Girl Icon is tasked with selecting 10 Peer Girls, forming a complete cohort of 20 individuals. Girl Icons actively engage with schools, families, and community stakeholders, leveraging the assistance of local NGOs to connect with Peer Girls and establish cohorts.

Initial engagement efforts resulted in an average of 14.6 Peer Girls per Girl Icon, subsequently increasing to an average of 17.2, indicative of heightened community involvement and recognition f the program's value, leading to increased encouragement for participation among girls within families.

Weekly meetings, facilitated by 80% of Girl Icons, serve as platforms for comprehensive discussions on var ous social issues. Predominantly, topics such as the Right to Education (9 .8%), Menstrual Hygiene and Health Management (90.7%), and the Prevention of Child Marriage Act (81.5%) feature prominently in these dialogues.
Additionally, Girl Icons and Peer Girls collaborate on Social Action Projects (SAPs) within the community.

Amongst these, a substantial majority (81%) of SAPs focus on education, followed by menstrual health hygiene and management (8%), and initiatives aimed at combating early child marriage (8%).

The Girl Icon program was launched in 2015 and substantially expanded in 2022. During these 7 years, the program has been able to benefit a large number of adolescent girls and communities. The program has been operational across three states, namely, Uttar Pradesh, Madhya Pradesh and Karnataka. This study is targeted to assess the impact of the program over its period of operation.

Objective

This study has been commissioned for the following:

- **Conduct a landscape analysis in the context of the schemes and programs for adolescent girls**
- **Assess the Girl Icon Program's overall impact and alignment of the current program design to the expected outcomes.**

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Methodology

Research Design

To assess the impact of the Girl Icon program, the study employed a quasi-experimental design, utilizing a control group selected from a different village of the same block with similar age and socioeconomic characteristics to the program group. Special attention was given to choosing households for the control group that closely matched the characteristics of the households in the program group. This design allows for a comparison between the outcomes of the program group, which participated in the intervention, and the control group, which did not, while controlling for key demographic and socio-economic factors. The quasi-experimental design enhances the study's ability to draw meaningful conclusions about the impact of the intervention on the target population.

Sampling

Sample Size

The sample of Girl Icons aimed to provide an estimate of the agency and leadership developed for the Girl Leaders with a 90% confidence interval and a 10% margin of error at an overall level. Using a standard statistical formula, worked out sample size (based on 90% level of confidence and 10% margin of error) for the Girl Icons was 65. The sample of 390 peer girls and 390 girls from the control group was intended to provide an estimate of the attribution of the activities on the program with a 95% confidence interval and a 5% margin of error.

Sample Selection

The overall sample was selected through a multi-step process involving sampling at the district, village and individual level. Since the Girl Icon Program has been operation across three states, namely, Uttar Pradesh, Madhya Pradesh and Karnataka.

Districts Selection: District were selected on the basis of the availability of the sufficient number of Girl Icons and Peer Girls who had completed their leadership training from 2018, 2021 and 2022 batches. Consequently, in Uttar Pradesh, Lucknow & Varanasi districts, in Madhya Pradesh, Jabalpur & Chhatarpur districts and in Karnataka, Gadag & Dharwad districts were chosen.

Sampling of Villages: To achieve a sample size of 65 Girl Icons and 390 Peer Girls, it was decided that a total of 30 villages will be chosen from 6 districts (5 villages per district). To sample 5 villages in each district, list of intervention villages having at least one Girl Icon and 15-20 Peer girls were obtained from the program team of Milaan (M) for each of the districts and 5 villages were selected based on availability of maximum number of GIs and PGs from different batches.

Table 1: Sample of Peer Girls and Girl Icons

Batches	Age at the time of intervention	Current Age	Sample size for Peer Girls	Sample Size for Girl Icons
2018	12-18	20-26	90	16
2021	12-18	17-23	120	20
2022	12-18	14-20	180	30

Sampling of GIs and PGs: From each village, a Girl Icon and 12 Peer Girls were sampled for the survey. The sampling of peer girls was conducted using the Simple Random Sampling (SRS) methodology, with the village-wise list of peer girls collected from the Milaan program team. Since, the Girl Icons and Peer Girls were chosen from three completed batches of 2018, 2021 and 2022, girls from the control group were also selected from the similar age groups. As the girls were graduated in three different time periods, recall bias is expected. To balance out this problem, more girls were chosen from the recent batch i.e. 2022 batch and fewer girls were chosen from 2018 batch.

Table 1 above depicts the decided sample size for each of the batch separately for Girl Icons (GIs), Peer Girls (PGs) and Control Group Girls/Women (CG-G/W). On the basis of this sample size, list of GIs and PGs who had previously participated in the Girl Icon Program from the sampled districts were sought from Milaan.

Sampling of Control Group Girls/ Women (CG-G/W): To ensure that samples were comparable, girls were selected from the control villages within similar age brackets. The listing of households was carried out, and eligible girls of similar age brackets were identified, randomly sampled and interviewed. Similar to program group, 30 villages (10 from each state and 5 from each sampled district) were chosen with similar characteristics from the same block where program villages were selected to ensure a comparable geographic and socio-economic status of the control villages.

Table 2: Sample of the Control Group

Age	Sample Size
23-26	90
19-22	120
14-18	180

The long-term outcome of the program on Girl Icons and the impact on other associated community stakeholders were assessed through group discussions with peer girls and Girl Icons, along with in-depth interviews with stakeholders.

Overall Coverage

Table 3: Target and achieved sample distribution of the respondents.

States	Girl Icon		Peer Girls		Control Group	
	Target	Achieved	Target	Achieved	Target	Achieved
Uttar Pradesh	24	24	130	140	130	133
Madhya Pradesh	19	19	130	140	130	137
Karnataka	22	22	130	123	130	133
TOTAL	65	65	390	403	390	403

Quantitative:

A total of 65 Girl Icons and 403 Peer Girls interviewed from 30 program villages and 403 Control Group Girls were surveyed from 30 control group villages across three states. The table below presents the sample size achieved against the desired sample size for each of the States.

Qualitative:

In addition to the quantitative survey, focus group discussions were also conducted with the Girl Icon Alumni group (2 groups per state) and Parents of the last alumni peer girls (one group per state) to get the insights about the program.

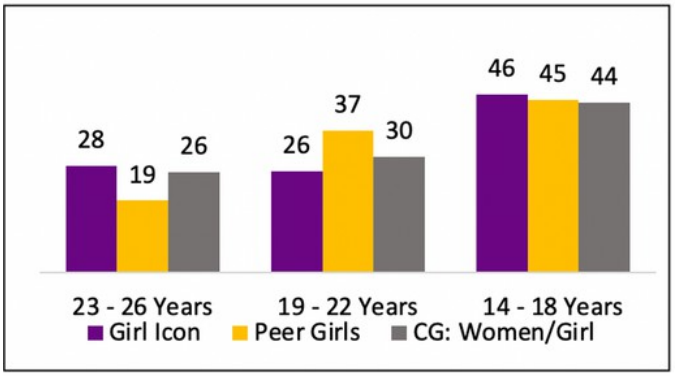
Descriptive Statistics

Girl Icons, Peer Girls, and the Control Group

Age Group

Marital Status

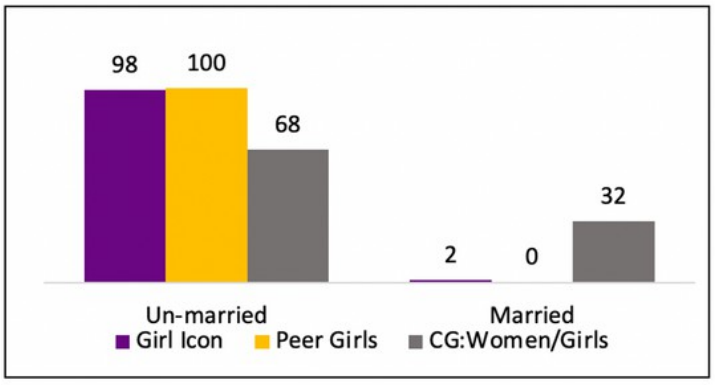
Graph 7-1: Age Group of the Respondents



Distribution of respondents across all three categories, Girl Icons, Peer Girls, and the women/ girls from the Control Group has been consistent. Majority of the respondents are within the 14-18 years age bracket followed by those within the 19-22 years age bracket. The 23-26 years age bracket is the least represented category. More respondents from younger age groups have been covered to avoid any recall bias. This implies that more respondents from the 2022 cohort of the Girl Icon Program were survey as compared to those from the 2021 and 2018 cohorts.

98% of the respondents from the Girl Icon cohort and 100% of those from the Peer Girl cohort were unmarried. This is in stark contrast to the women and girls who comprise the Control Group, 32% of which are married. These metrics highlight the efficacy and impact of the Girl Icon program in dissemination of knowledge and awareness about child marriage within the respective cohorts.

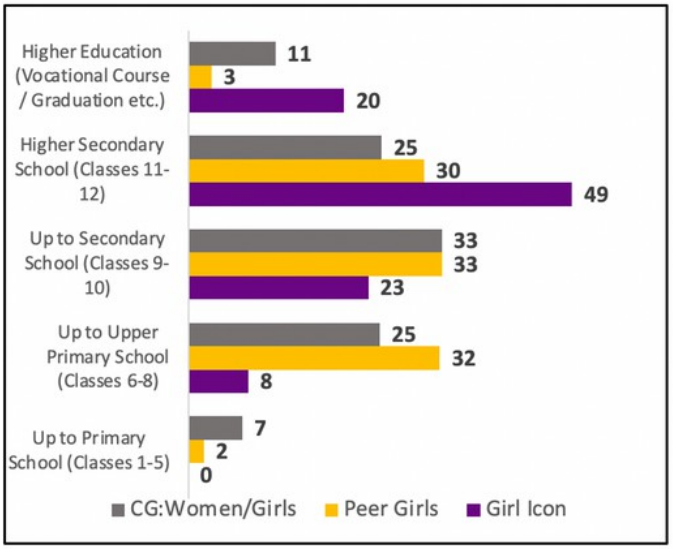
Graph 7-2: Marital Status of the Respondents



Educational Status

In alignment to the age groups of the respondents, in all three categories majority of respondents are currently in secondary school or higher secondary school. Amongst these, 49% of the Girl Icons are currently enrolled in higher secondary school compared to 30% of the Peer Girls and only 25% of the girls from the Control Group. Overall, the survey reveals that the educational status of GIs and PGs is far better than control group girls. This may be attributed to the sessions conducted as part of the Girl Icon Program and the positive influence of the program on community perceptions regarding education.

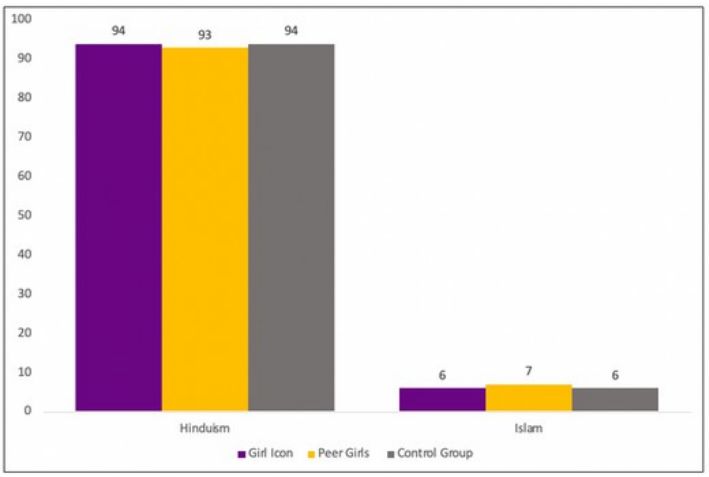
Graph 7-3: Educational Status of the Respondents



Religion

The religious affiliation of respondents mirrors the predominant religious beliefs within the identified district. Approximately 93-94% of Girl Icons, Peer Girls, and the Control Group follow Hinduism, with the remaining respondents identify as followers of Islam. Presented in graph 7-2.

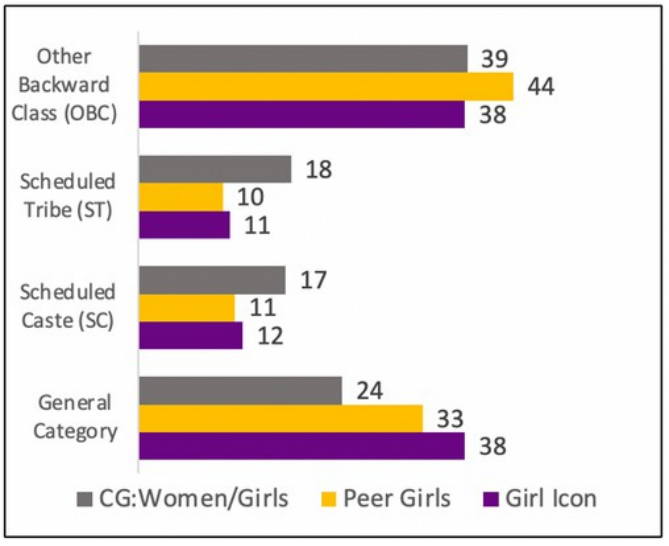
Graph 7-4: Religion of the Respondents



Social Categories

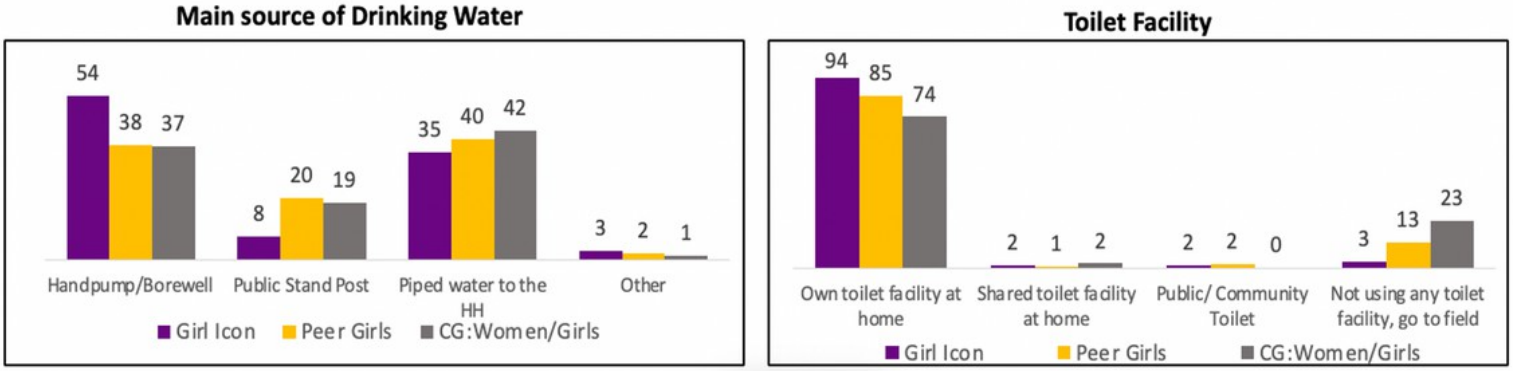
A breakdown of the social categories of the respondents from all three groups namely, Girl Icons, Peer Girls, and the Control Group indicates that several social categories are adequately represented. The sample of respondents covers individuals from Scheduled Tribes, Scheduled Castes, Other Backward Classes (OBC), and the general category. Most Girl Icons belong to the general category and other backward classes, 38% in each category. 44% of the Peer Girls belong to the OBC category and 39% of the control group belongs to this category.

Graph 7-5: Social Categories of the Respondents



Facilities Available

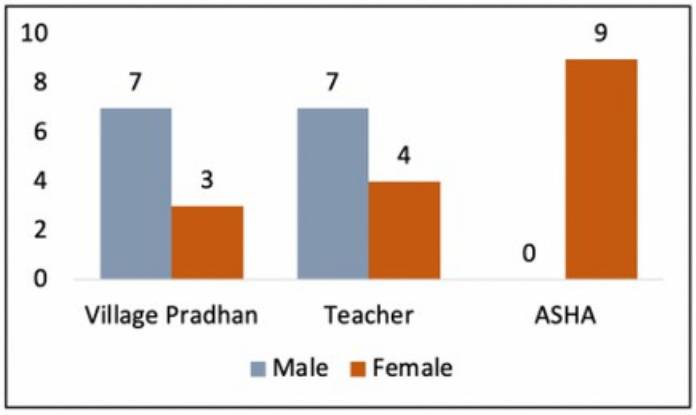
Graph 7-5: Resources for drinking water and toilets available to the Respondents



Respondents were also surveyed on the resources available to them such as access to piped water, handpumps/borewells and toilets. 54% of the Girl Icons had access to Handpumps/ Borewells as the main source of drinking water compared to 38% of the Peer Girls and 37% of women and girls constituting the Control Group. This was followed by 35% of the Girl Icons having piped water access to their households compared to 30% of the Peer Girls and 42% of the Control Group. In terms of toilet facilities, 94% of the Girl Icons have access to toilets at home in contrast to 85% of the Peer Girls and 74% of the Control Group.

Gender

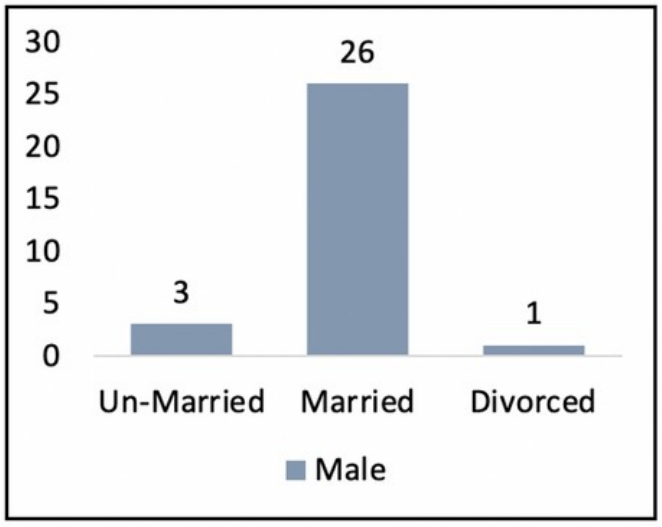
Graph 7-6: Gender Distribution of Community Members



Out of the 30 community influencers, 14 were males, and the remaining 16 were females. This distribution suggests a relatively balanced representation of both genders among the influencers interviewed.

Marital Status

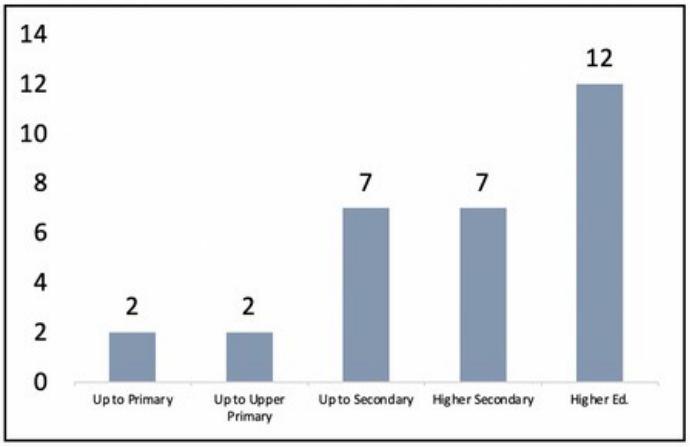
Graph 7-7: Marital Status of Community Members



influencers, a substantial majority, specifically 26 out of 30, were married. Additionally, 3 influencers were unmarried, while 1 was divorced.

Educational Background

Graph 7-8: Educational Background of Community Members

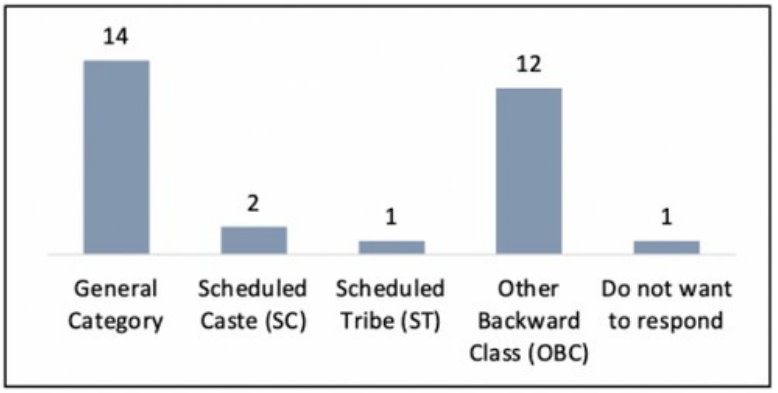


In the subset of Pradhan influencers, 4 out of 10 were educated up to the upper primary level, while the remaining Pradhan influencers had education levels above upper primary. This indicates a relatively higher educational attainment among Pradhan influencers, which can potentially influence their approach and understanding of community issues. Out of total 30 community influencers, 2 were educated about primary level, 2 upper primary, 7 secondary, 7 senior secondary and the rest 12 were educated above senior secondary indicating that a considerable number of community influencers covered under the study were well educated. This is mainly under community influencers teachers and ASHA were interviewed.

Social Categories

Out of the 30 community influencers interviewed, 14 were belonged to General Category (14) 12 were from Other Backward Classes (OBCs), 2 were from scheduled caste and 1 belonged to scheduled tribe.

Graph 7-7: Social Category of Community Members



3

IMPACT

“Bharthi and Kavya are two girls who discontinued their education suddenly, after some days we requested girl icon and few days later we found them going to school”.

Vidya, Pradhan

"With the law on their side and the organization's support, parents are increasingly hesitant to marry their daughters off prematurely.“

Sushma, ASHA Worker

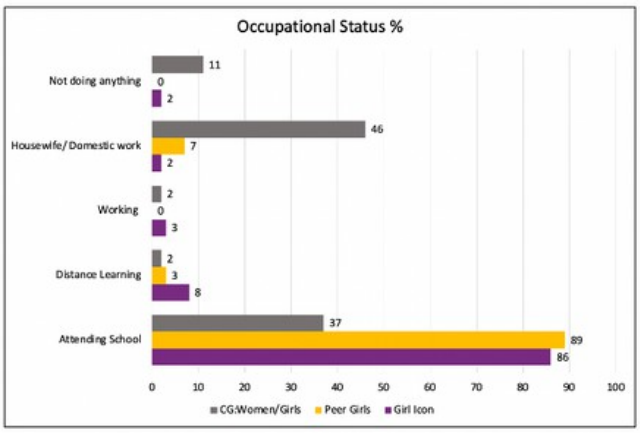
Impact Assessment

Educational Outcomes

The Girl Icon Program focusses on improving educational and professional outcomes of the participants, to this end Girl Icons engage with the Peer Girls and the overall community, holding discussions and undertaking social action projects. 81% of the Social Action Projects were done on education related issues and have resulted in improving the overall educational outcomes of the associated communities.

Occupational Status

Figure 9-1 Occupational Status of Respondents



The occupation status of the respondents is a significant indicator of the impact of the program on actual behavioral outcomes. On this front, Girl Icons and the Peer Girls outperform the Control Group on several aspects. 94% of the Girl Icons and 92% of the Peer Girls are engaged in educational pursuits, either through direct school engagements or distance learning compared to only 39% of the Control Group.

It is noteworthy that none of the Girl Icons identify as housewives, in contrast to a substantial 25% of the Control Group. This is exacerbated by another 21% of the Control Group girls engaged exclusively in domestic work. Moreover, 11% of the Control Group reports that they are "not doing anything", in contrast to only 2% of the Girl Icons and none of the Peer Girls.

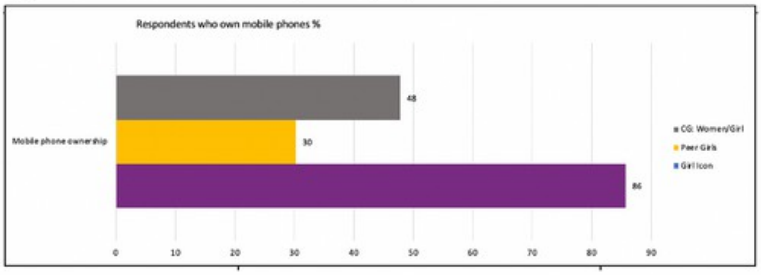
The findings underscore the transformative potential of the Girl Icon program in reshaping occupational aspirations and opportunities among young girls.

Digital Literacy

Access and the ability to use digital tools and platforms has increasingly become essential in the post-COVID-19 digital world. Both educational and occupational outcomes are heavily dependent on digital literacy. In this context, digital literacy of women and girls across the three groups, Girls Icons, Peer Girls and the Control Group is measured based on mobile phone accessibility, usage of social media and engagement in virtual meetings.

Among Girl Icon respondents, an overwhelming 97% reported having access to a smartphone, indicating widespread smartphone usage in this group. In contrast, in the Peer Girls group, 72% reported having access to a smartphone, reflecting a lower but still substantial percentage with smartphone accessibility.

Figure 9-2: Access to owned mobile phones by respondents.



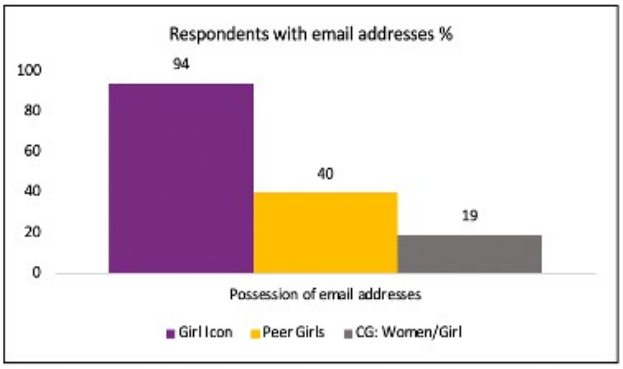
TThe Control Group exhibited the lowest percentage, with 56% of respondents reporting access to a smartphone. These findings highlight disparities in smartphone access among the three groups, with Girl Icon participants having the highest access, followed by Peer Girls, and a comparatively lower access rate in the Control Group. It is also noteworthy, that a majority of the Girl Icons (86%) independently owned mobile phones compared to only 30% among the Peer Girls and 48% amongst the Control Group

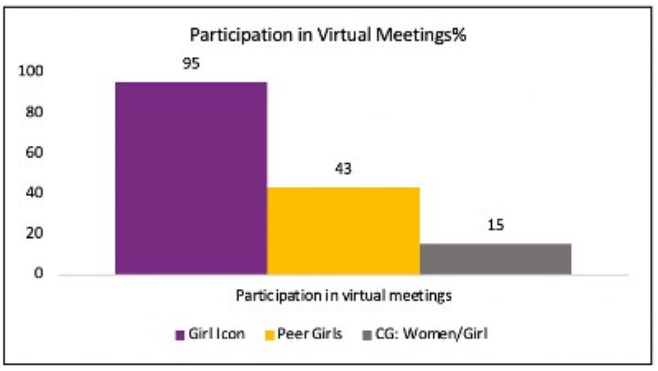
Possession of email addresses and participation in virtual meetings are significant indicators of both digital literacy and engagement. Across these two metrics, Girl Icons outperform both the Peer Girls and the Control Group.

Notably, a substantial 94% of Girl Icon respondents possess an email address, highlighting a high level of digital communication readiness. In contrast, only 40% of Peer Girls have an email account, and the Control Group exhibits the lowest percentage at 19%, indicating a significant digital divide. Similarly, in attending meetings through mobile phones, Girl Icon participants lead with an impressive 95%, showcasing a robust engagement in online communication and virtual collaboration.

In comparison, Peer Girls and the Control Group report lower percentages at 43% and 15%, respectively, suggesting a less pervasive adoption of mobile technology for meeting participation. Respondent's digital engagement is further analysed by assessing usage trends of virtual meeting platforms. Zoom and Google Meet are the most popular platforms for online meetings across all three groups. While majority of the Girl Icons and Peer Girls engage in virtual meetings attending meeting with Milaan, the respondents from the Control Group primarily utilize online platforms for attending online classes.

Figure 9-3 Engagement through email addresses and virtual meetings



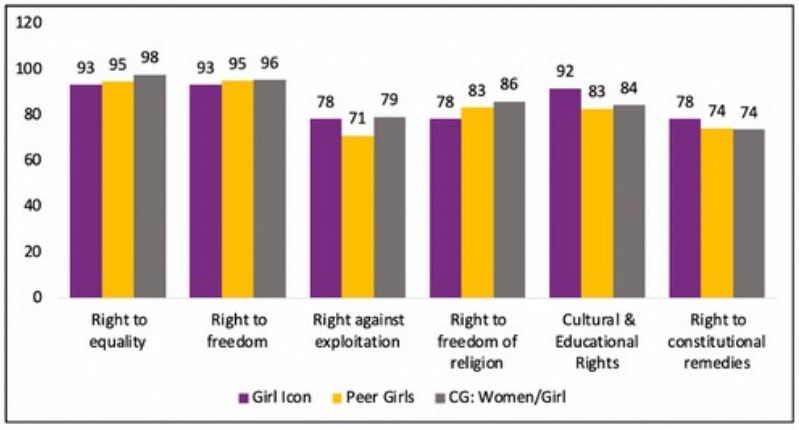


These findings emphasise the importance of targeted initiatives to enhance digital literacy and bridge the digital divide, ensuring more equitable access to digital tools and opportunities. The differential in digital engagement between the Girl Icons, Peer Girls and the Control Group is indicative of the positive impact of the initiative on increasing digital access and knowledge.

Knowledge of Fundamental Rights

Overall knowledge and awareness of fundamental rights varied across all three groups. Only 44% women/girls of control group reported that they were aware of fundamental rights while 81% and 92% peer girls and girl icons respectively were aware about fundamental rights.

Figure 9-4 Respondent's awareness about fundamental rights



However, when asked about specific rights, most respondents demonstrated a high degree of awareness. This may have been due to these rights being taught at the school level, indicating the success of educational initiatives. Graph 9-4 presents the variations in the understanding of fundamental rights between the Girl Icons, Peer Girls and the Control group.

These results underscore the importance of continuing efforts to empower individuals with knowledge about their fundamental rights, contributing to a more informed and aware citizenry.

Financial Literacy

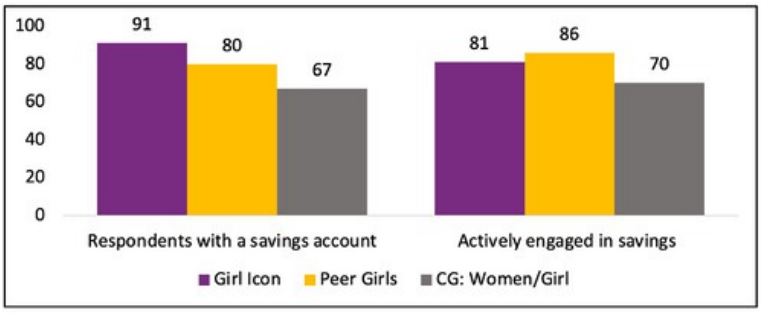
TThe data on the percentage of respondents having a savings account and actively engaging in savings activities reveals variations among Girl Icon, Peer Girls, and the Control Group (CG). Among Girl Icon respondents, 91% have a savings account in any bank or post office, indicating a high level of financial inclusion.

Additionally, 81% of Girl Icon respondents mentioned actively participating in savings. In the Peer Girls group, 80% have a savings account, and a slightly higher percentage of 86% mentioned engaging in savings activities.

However, in the Control Group, the percentages are lower, with 67% having a savings account and 70% actively participating in savings. These findings suggest that while a significant portion of respondents in all groups have embraced financial habits such as maintaining a savings account, there are differences in the levels of financial inclusion and active savings practices, with higher percentages observed in the Girl Icon and Peer Girls groups compared to the Control Group.

Efforts to promote financial literacy and inclusion may be beneficial, particularly in the Control Group, to enhance savings behaviours and economic empowerment.

Figure 9-5 Savings trends



The data on reasons for savings among Girl Icon, Peer Girls, and CG: Women/Girls reflects the diverse motivations driving individuals to engage in saving practices. These include saving for future personal expenses related to education, festivals, weddings, supporting siblings etc.

The findings underscore the multifaceted nature of savings goals, encompassing education, family support, and cultural celebrations, providing valuable insights for tailoring financial education initiatives to address the diverse motivations and priorities of each group.

Healthcare and well-being

A significant priority area of the Girl Icon Program is ensuring that the Girl Icons and their communities are equipped with the necessary know-how and basic knowledge of sexual and reproductive health. Focused discussions on menstruation, contraception and HIV/AIDs have been directed towards knowledge building and overcoming taboos and preconceived notions regarding sexual health.

Knowledge about Menstruation and Menstrual Hygiene and Health Management (MHHM)

Women and girls across all three categories of respondents i.e. Girl Icons, Peer Girls and the Control Group display varying levels of awareness about menstruation, it's duration, effects on the female body and associated perceptions.

Across all metrics Girl Icons and Peer Girls demonstrate a higher degree of awareness and understanding as compared to the Women and girls from the Control Group. Amongst the respondents in all three categories, approximately 50% have started menstruating and almost all respondents are aware about menstruation.

85% of the Girl Icons surveyed identified menstruation as a normal healthy process in women, with Peer Girls and CG: Women/Girls showing slightly lower percentages (57% and 59%, respectively).

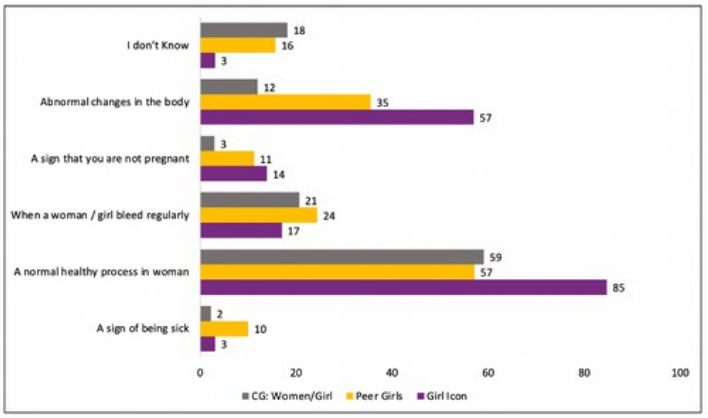
Understanding menstruation as a sign that a woman or girl is not pregnant is reported by a substantial portion of respondents in all groups, with higher percentages for Girl Icon and Peer Girls (14% and 11%) compared to Control Group (3%).

The findings also highlight differences in perceptions, attitudes, and beliefs regarding menstruation.

A significantly lower percentage of Girl Icon respondents agree that discussions about menstruation should be prohibited openly (14%) compared to Peer Girls (26%) and the Control Group (45%). Similarly, fewer respondents in the Girl Icon group agree with restrictions on physical contact with boys during periods (6%) compared to higher percentages in the other two groups (55-45%).

The Girl Icon group also exhibits lower agreement with restrictions on entering the kitchen (6%) and performing religious activities (25%) during menstruation compared to higher percentages in the other two groups (24-39% and 58-76%, respectively).

Figure 9-6 Knowledge about menstruation



Notably, fewer respondents in the Girl Icon group agree that menstruating girls should be considered unclean and impure (11%) compared to Peer Girls (22%) and the Control Group (47%). However, a higher percentage of respondents in the Girl Icon group feel that they have limited access to information on menstrual issues (49%) compared to Peer Girls (52%) and the Control Group (56%).

Additionally, a smaller percentage of Girl Icon respondents feel embarrassed to ask for sanitary napkins at shops (26%) compared to Peer Girls (37%) and the Control Group (57%).

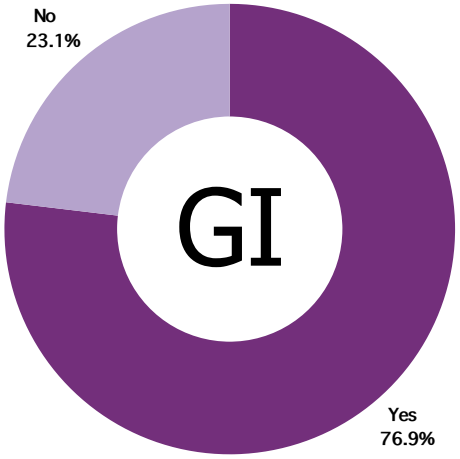
There is a positive trend in menstrual hygiene practices among respondents in all groups, more specifically in the Girl Icon cohort. They demonstrate not only a positive outlook towards menstruation as a biological process, but also improved knowledge about the right practices and

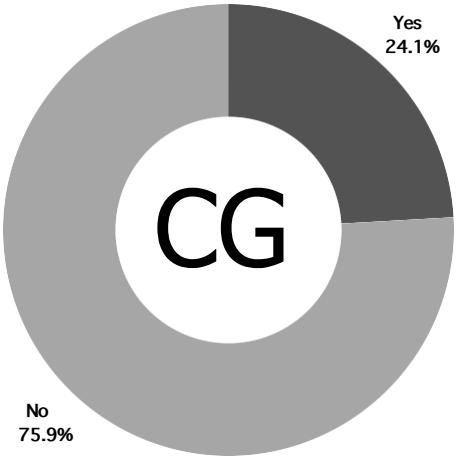
The prevalent differences in attitudes, beliefs, and access to information highlight the need for targeted educational initiatives to foster a more open and informed approach towards menstruation, especially in the Peer Girl and Control Group cohorts.

Awareness on contraceptives and HIV/AIDS

Knowledge of contraception, sexually transmitted diseases and HIV/AIDS is a key component of the sexual and reproductive health and overall wellbeing of adolescents. Questions regarding these components are often left unaddressed in schools and community spaces. The findings of the impact assessment survey highlight positive impact of the programme by enhancing the knowledge of the Girl Icons and subsequently the peer girls and the communities.

Graph 9-7 Knowledge of contraceptives amongst respondents





In the Girl Icon group, a substantial majority of respondents (76.9%) report being aware of contraceptive methods, suggesting a relatively high level of awareness among this cohort. On the contrary, in the Control Group, only 24.1% of respondents have heard of contraceptive methods, indicating a significantly lower level of awareness.

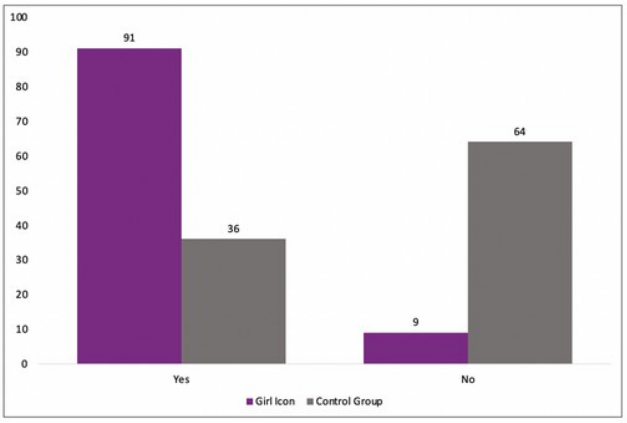
These findings highlight a potential gap in contraceptive awareness in the Control Group, emphasizing the importance of targeted education and information dissemination on family planning methods within that demographic.

Across the two groups, Girl Icons demonstrate a significantly high degree of understanding and knowledge about different methods of contraception as well as the reasons for using contraceptives. The overall findings suggest that both groups have a reasonable understanding of the purpose and use of contraceptives.

On the other hand, knowledge about HIV/AIDS varies across the three groups: Girl Icons, Peer Girls, and the Control Group. Within the Girl Icon cohort, 90.7% of respondents have heard of HIV/AIDS compared to only 35.7% of the respondents in the Control group. The high level of awareness amongst the Girl Icons is an indicator of the positive impact of the Girl Icon program and the sessions conducted on HIV/AIDS as part of it.

The findings also highlight stark contrasts in HIV/AIDS awareness between the Girl Icon and Control Group, as participants responded to various statements regarding HIV transmission and prevention.

Graph 9-8 Have you ever heard of an infection called HIV & AIDS?



IWithin the Girl Icon cohort, a significant majority demonstrate a solid grasp of the subject matter, with 74% acknowledging the efficacy of having a single uninfected sex partner in reducing HIV risk, 71% comprehending the preventive function of condoms, and 77% stating that HIV cannot be transmitted through blood products or transfusions.

In contrast, the Control Group exhibits a markedly lower level of awareness, with only 25% recognizing the protective aspect of monogamous relationships and 31% correctly understanding that HIV cannot be transmitted through mosquito bites. Furthermore, a substantial proportion (49%) within the Control Group expresses uncertainty regarding the effectiveness of condoms in reducing HIV transmission.

These findings underscore the need for targeted education and awareness programs, particularly in the Control Group, to enhance understanding about HIV/AIDS and promote preventive measures within that demographic.

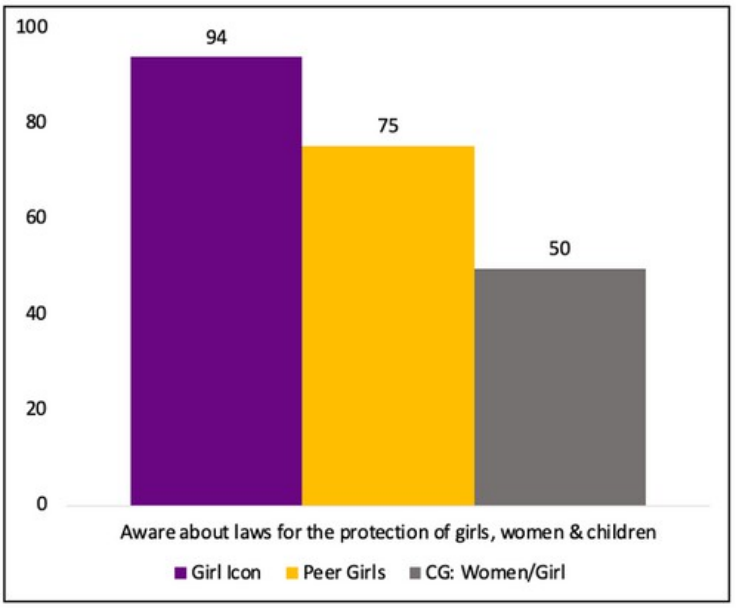
Prevention of Violence Against Women & Girls

The Girl Icon program focusses on enhancing women and girls' knowledge about the laws and rights associated with Violence Against Women (VAW), to this end discussions are held about Women protection laws such as Protection of Children from Sexual Offences (POCSO) and Protection of Women from Domestic Violence Act (PWDVA) of 2005.

This has led to an increase in the overall knowledge of the Girl Icon cohort and the peer girls on the laws associated with domestic violence and protection of young girls and women. Consequently, the findings highlight that 94% of the Girl Icons and 75% of the Peer Girls are aware about these laws compared to only 50% of the Control Group.

Diving deep into specific acts also brings forth a higher degree of understanding and knowledge by the Girl Icons and Peer Girls compared to the women and girls in the Control Group necessitating targeted interventions such as education and awareness campaigns for enhancing the knowledge of the Control Groups in these aspects.

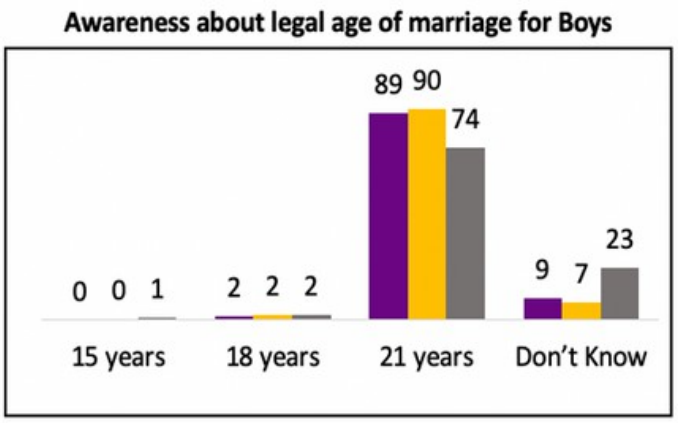
Graph 9-9 Awareness about laws

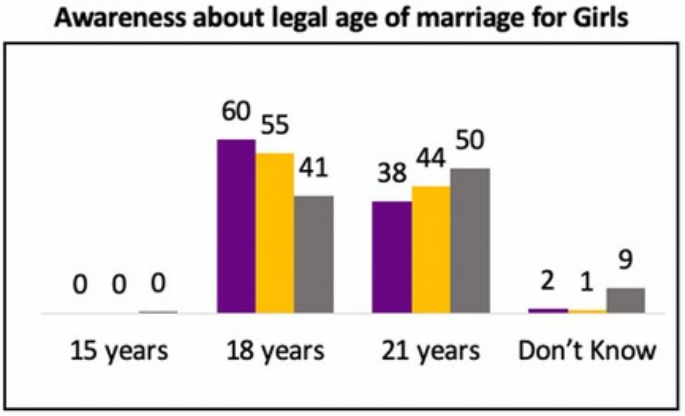


Significant differences are also reported in the knowledge about Child Labour (Prohibition & Regulation) Act 1986, Right to Education Act and mandatory reservation criteria for children from economically weaker section (EWS) and disadvantaged groups with Girl Icons and Peer girls demonstrating a higher degree of understanding and knowledge in all three categories ranging around 60-68% compared only 40-50% of the Control Group.

Child Marriage

Graph 9-10 Awareness legal age of marriage





The dissemination of information pertaining to the legal age of marriage, particularly for both boys and girls, is a key aspect within the operational framework of the Girl Icon program. An examination of the program's efficacy reveals noteworthy trends.

Across the cohorts of Girl Icons and Peer Girls, a substantial majority, comprising 89% and 90% respectively, exhibit awareness regarding the legal age of marriage for boys. This stands in stark contrast to the corresponding figure of 74% within the Control Group. However, disparities emerge when considering awareness levels regarding the legally prescribed age of marriage for girls. Notably, 60% of Girl Icons and 55% of Peer Girls accurately identify 18 years as the mandated age, whereas a mere 41% within the Control Group demonstrate similar awareness.

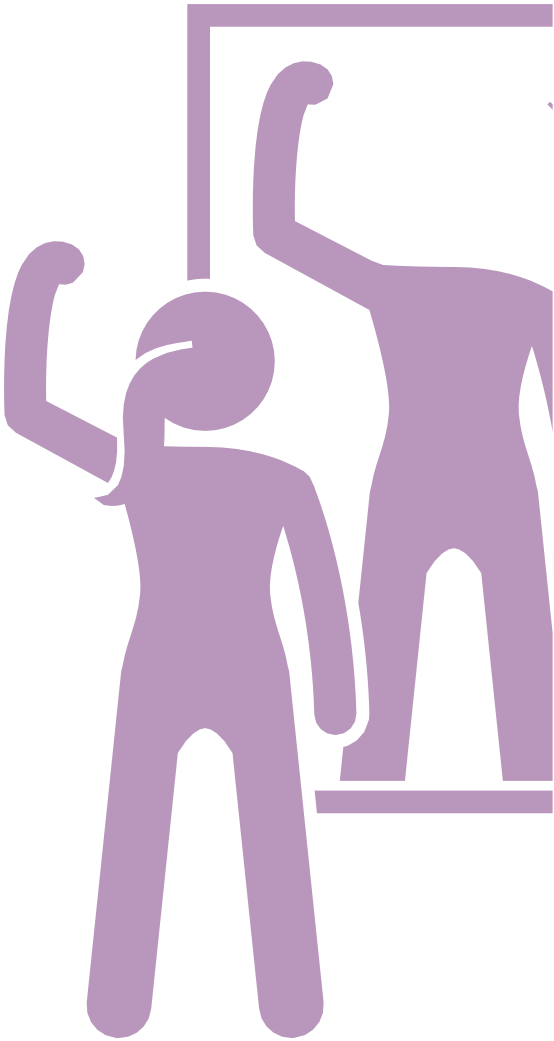
These findings underscore the imperative to reinforce endeavours aimed at the dissemination of accurate information. Such efforts are essential to bridge the existing gaps in knowledge, thereby fostering a more comprehensive understanding of legal provisions governing marriage.
aspects.

Empowerment and Confidence

The analysis of confidence levels among respondents from the Girl Icon program, Peer Girls, and the Control Group (CG) reveals nuanced disparities in self-assurance across diverse contexts. Notably, an impressive 92% of Girl Icon participants exhibit exceedingly high confidence in exercising their sartorial choices, surpassing both Peer Girls (78%) and the Control Group (80%).

Similarly, concerning individual empowerment, a significant majority of Girl Icon respondents demonstrate elevated confidence levels, particularly evident in activities such as independent travel (89%), engagement with government officials (94%), and advocacy against societal injustices like underage marriages (91%). In contrast, Peer Girls and the Control Group present lower levels of confidence in these spheres.

These findings underscore the tangible positive impact of the Girl Icon program in nurturing confidence and empowerment, especially concerning personal autonomy, civic participation, and advocacy for girls' rights. They also highlight the potential avenues for targeted interventions aimed at bolstering confidence levels among Peer Girls and the Control Group, underscoring the imperative of comprehensive empowerment initiatives tailored to the needs of young women.



Community Influencers

The findings from the interviews with 30 Community Influencers (CIs) shed light on the awareness, perceptions, and reactions of these influencers towards the Girl Icon Program, the Girl Icons (GIs), and Peer Girls (PGs) involved in the initiative.

Awareness Channels

A significant aspect highlighted in the data is how Community Influencers came to know about the Girl Icon Program. It is observed that the primary sources of awareness for CIs were the Girl Icons & their parents (19/30), Peer Girls (18/30), and Milaan staff (16/30). This indicates a comprehensive outreach strategy, leveraging both the direct involvement of program participants and the organizational staff.

Emotional Responses

Upon learning about the selection of a Girl Icon from their village, the majority of Community Influencers (23 out of 30) expressed happiness. This positive emotional response indicates a supportive and encouraging atmosphere within the community towards the Girl Icon Program. Additionally, a notable proportion (7 out of 30) reported feeling a sense of pride on the selection of a Girl Icon, reflecting a deeper connection and emotional investment in the success of the program.

Community Perception of Girl Icons and Peer Girls

It is observed that the work of Girl Icons and Peer Girls is generally well-received by the community. Almost all Community Influencers reported that villagers appreciate the work of Girl Icons and Peer Girls. Furthermore, a 13 out of 30 CIs mentioned that some villagers actively support the work of Girl Icons and expressed the sentiment that their daughters should aspire to be like them. This positive endorsement from the community suggests that the Girl Icon Program is making a visible impact and garnering support.

Community Attitude Towards Participation

The data reveals a nuanced perspective on the community's attitude towards the involvement of their daughters in the program. While 10 Community Influencers mentioned that many villagers desire their daughters to join the meetings, a smaller group (6 out of 30) expressed reservations, suggesting a diversity of opinions within the community.

Understanding these varying perspectives is crucial for tailoring program strategies and ensuring cultural sensitivity.

Nukkad Natak and Outreach Themes

The majority of Community Influencers (26 out of 30) confirmed that Girl Icons and Peer Girls conducted Nukkad Natak in their villages. 23 CIs confirmed that the people enjoyed the Nukkad Nataks. These street plays covered critical themes such as the importance of education (24/30), early child marriage (16/30), gender-based discrimination (11/30), and Menstrual Hygiene and Health Management (MHHM). This indicates a strategic approach to community outreach, utilizing engaging and culturally relevant mediums to convey essential messages.

The results highlight the positive reception of the Girl Icon Program within the community, as evidenced by the emotional responses, appreciation for the work of Girl Icons and Peer Girls, and the success of outreach activities like Nukkad Natak. On asking whether villagers took the message of Nukkad Natak positively, 24 CIs mentioned that the villagers took the message positively, 2 CIs reported that only few people had taken message seriously. 22 CIs also observed the changes in behaviours among the people due Nukkad Natak indicating the effectiveness of the message.

Focus Areas of GIs and PGs

As stated earlier, CIs reported that most of the Girl Icons and Peer Girls worked on importance of education where they re-enrolled many drop out girls of the villages in the schools and those who were already going to school, they motivated them to continue their education until senior secondary at least.

Second important area where most of the GIs and PGs worked was Early Child Marriage. GIs and PGs make sure that the PGs who working with them should not get married in early age. At the same time, they stopped some early child marriage to happen in the village. Gender based discrimination and Menstrual hygiene are the other two important areas where GIs and PGs have spent sufficient time. Through rallies, nukkad nataks they made the public aware about gender equality and menstrual health hygiene and management (MHHM). Hence, Community Influencers have not only verified but also appreciated the work of GIs and PGs and Milaan within their villages

4

RECOMMENDATION AND CONCLUSION

"Through the efforts of Milaan, the dark shadow of child marriage is gradually retreating from our village."

Rahul, Teacher

"The legal age of 18 for marriage stands as a symbol of our commitment to protecting the rights of young girls." ***Shyamala, Teacher***

Recommendations

Expansion of Girl Icon and Peer Girl Programs

The success of the Girl Icon program in fostering education and confidence among participants suggests the need for its expansion. Collaborate with educational institutions, NGOs, and community leaders to identify and include more girls from diverse backgrounds. Develop targeted outreach campaigns to raise awareness about the program's benefits, emphasizing its positive impact on education, confidence-building, and overall empowerment.

Incorporate Cultural Sensitivity in Menstrual Health Education

Tailor menstrual health education within Girl Icon and Peer Girl programs to be culturally sensitive and inclusive. Recognize diverse cultural beliefs and practices related to menstruation, addressing taboos and myths in a respectful manner. Involve local community leaders and influencers to champion these programs, ensuring greater acceptance and participation. Consider organizing community workshops or events to involve parents and guardians in the conversation, promoting a holistic approach to menstrual health.

Community-Led Sanitation Projects with Gender-Inclusive Facilities

Extend the impact of the programs by incorporating community-led sanitation projects. Collaborate with local communities, NGOs, and government bodies to improve sanitation facilities, ensuring they are gender inclusive. Engage with community members to create a sense of ownership and responsibility for these facilities. This approach not only addresses a critical need but also involves the community in the decision-making process, fostering a sustainable and inclusive environment.

Interactive Reproductive Health Workshops and Peer Education

Enhance reproductive health education within the Girl Icon and Peer Girl programs through interactive workshops. Encourage peer education where participants share knowledge within their communities, creating a ripple effect. Introduce guest speakers, healthcare professionals, or mentors to provide expert insights. Utilize modern communication tools, such as mobile apps or webinars, to ensure continuous access to reproductive health information and support.

Strategic Partnerships for HIV and AIDS Awareness

Strengthen HIV and AIDS awareness initiatives by forming strategic partnerships with healthcare organizations, local clinics, and NGOs. Leverage existing networks and healthcare infrastructure to disseminate information, conduct awareness campaigns, and offer testing services. Consider incorporating culturally relevant approaches, such as drama or art, to make the information engaging and memorable. Ensure that these initiatives are inclusive and address the unique needs of adolescent girls and women.

Inclusive Sports and Arts Programs

Recognize the power of sports and arts in building confidence and fostering teamwork. Introduce inclusive sports and arts programs within the Girl Icon and Peer Girl initiatives. Collaborate with local sports clubs, artists, and community organizations to organize events, workshops, or training sessions. These activities not only promote physical wellbeing but also provide a platform for self-expression and skill development.

Alumni Engagement and Mentorship Programs

Establish alumni networks from the Girl Icon program to serve as mentors for new participants. Create mentorship programs where experienced individuals guide newcomers through educational challenges, career decisions, and personal development. Alumni can also contribute to community outreach, sharing success stories that inspire others to join the program. This approach fosters a supportive community and sustains the impact of the program over the long term.

A comprehensive and inclusive approach is crucial to expanding the reach of Girl Icon and Peer Girl programs. By addressing cultural sensitivities, engaging with the community, leveraging digital tools, and fostering partnerships, these initiatives can create a lasting impact on the lives of more girls and women, ensuring they receive the education, support, and empowerment they deserve.

Conclusion

The assessment provides a comprehensive overview of the experiences of girls and young women, highlighting the transformative influence of the Girl Icon program when juxtaposed with both Peer Girls and the Control Group (CG). Across a variety of indicators, notable distinctions emerge, underlining the considerable potential for positive change attributable to the Girl Icon initiative.

Foremost among these disparities is the educational trajectory of the participants. Notably, Girl Icon respondents demonstrate high levels of engagement in academic pursuits, with 86% actively pursuing school education. This stands in stark contrast to a substantial proportion of Peer Girls (25%) and CG members (37%) who are identified primarily as housewives. Such data strongly suggests that the Girl Icon program has played a pivotal role in promoting educational empowerment among girls, laying a foundation for their personal and intellectual growth.

An essential facet of women's health, menstrual knowledge, also serves as a barometer of the program's efficacy. Girl Icon participants exhibit a notably higher understanding of menstruation as a normal physiological process in women (85%) compared to both Peer Girls (57%) and the Control Group (59%). Furthermore, a significant percentage of Girl Icon respondents are actively menstruating (57%), underscoring the program's success in fostering awareness and knowledge regarding menstrual health.

Similarly, findings regarding sanitation and hygiene underscore the positive impact of the Girl Icon initiative. A higher proportion of Girl Icon participants report having access to personal toilet facilities at home (94%) compared to Peer Girls (85%) and the Control Group (74%). Moreover, a greater percentage of Girl Icon respondents enjoy access to piped water in their households (35%) compared to their counterparts. These statistics underscore the program's effectiveness in promoting essential hygiene practices and ensuring access to sanitation facilities.

In matters concerning reproductive health, Girl Icon participants exhibit markedly higher levels of awareness about contraceptive methods (76.9%) compared to the Control Group (24.1%). This suggests that the program has effectively disseminated crucial information pertaining to reproductive health, thereby equipping participants with knowledge essential for their overall well-being. Additionally, awareness about HIV and AIDS is substantially higher among Girl Icon participants (90.7%) compared to the Control Group (35.7%), with key sources of information including Milaan Workers, schools, health workers, and television. This underscores the effectiveness of targeted educational initiatives in disseminating awareness about critical health issues.

Moreover, the data reveals heightened levels of confidence among Girl Icon participants across various domains of their lives, encompassing personal decision-making, travel autonomy, engagement with authorities, prevention of underage marriages, lodging complaints, addressing educational concerns, participation in sports, independent procurement of sanitary pads, and mobilization for pertinent issues. These elevated confidence levels signify that the Girl Icon program not only imparts knowledge but also nurtures self-esteem and empowerment among its participants.

This analysis strongly indicates that the Girl Icon program has made significant strides in empowering girls and young women across multiple dimensions of their lives. Comparative analyses with Peer Girls and the Control Group elucidate the program's effectiveness in promoting education, menstrual health awareness, hygiene practices, reproductive health knowledge, and overall confidence. The success of the Girl Icon initiative serves as compelling evidence of the positive impact that targeted interventions can have in fostering holistic development among young women, thereby contributing to their empowerment and well-being.