Breaking the silence

The ‘16 days of activism against gender based violence’ beginning from November 25th and culminating on December 10th is a time to celebrate the rights that women have gained through consistent struggle and to highlight the need for more awareness regarding gender equality.

This year it was decided that we would reach out to common people rather than have discussions within the circle of people who are already familiar with the idea of gender equality. So we decided to reach out to different age groups and sections of people with the message of Gender Equality and Prevention of Violence against Women.

‘Jor se Bol’ – Students speak up on sexual violence:

On the 25th of Nov. we launched our campaign to stop violence against women with a dialogue on Sexual Harassment (S.H.) with class XI girls of B.M. Ruia Junior College. A role play by the students followed by a short film on Sexual Harassment, ‘Jor se Bol’ acted as ice-breakers after which the students began to share their experiences. This was followed by tracing the reasons behind this harassment faced by girls in society, like gender inequality and a patriarchal mindset. The girls also shared their experience of being harassed outside the college by boys. They were advised to take it up with their teachers and principal. They were given a brief introduction to the Prevention of Sexual Harassment Act and all that comes within its ambit.

Jannat Qureshi stated that the session widened her worldview and made her aware about harassment that could happen within private spaces like the home in addition to public spaces. One of the most heartwarming responses was that of Babli Paswan who shared that she has been raised in such a way that she has always been scared of boys, so much so, that if she sees a group of boys she most definitely changes her own path. But this session – that encouraged open sharing – has given her courage to not be afraid and face the boys.
On the 6th of December we were once again invited by B.M. Ruia College to conduct a similar session with their degree college students, at the NSS camp. So, on the death anniversary of Dr. B. R. Ambedkar, we had a lively dialogue with the students about safety of girls in public and private spaces and Prevention of Sexual Harassment. 60 girls attended the one hour session. A couple of short films were shown to make the session more impactful. The discussion following the films encouraged the girls to share their own experiences regarding harassment and how they felt when targeted.

The feedback from some of the girls was:
Pooja Chaudhary – “We got information about the 103 helpline.”
Shivani Jain – “Sexual Harassment is a result of inequality in society.”

BEST conversations:

On the 29th of November, which is the day for defending women’s rights as human rights, we had a novel gender training experience with the running staff and office staff of one of the biggest BEST depots in Mumbai at Electric House. When our 3 member team of women walked into the depot heads started turning as there is a prevalence of male staff in the depot and hardly any women are to be seen. Some conductors trickled into the room allotted to us for the discussion wondering what was in store. They were then joined by some women from the accounts department.

The session began with an informal discussion on whether the participants had witnessed incidents of sexual harassment in the bus while on duty and what they did at such times. The participants, initially hesitant, started opening up slowly saying that they had witnessed incidents but sometimes when they raised their voices the women who were at
the receiving end kept quiet and in the bargain they ended up having an argument with the perpetrators. Therefore they felt that the women should speak up themselves. However, they did agree that there were men who purposely leaned against the seats where women were seated or tried to grope them in a crowd.

The PF team facilitator then directed the conversation towards why they think harassment happens in the first place and why women do not speak up. This led to a very interesting debate among the participants. On being asked whether the clothes worn by women provoked men to misbehave some male participants agreed but the female participants disagreed and argued that it had nothing to do with how women dressed. It was the way men looked at women, as objects of visual pleasure. The women participants stressed on the fact that women should have the freedom to dress as they wished and that did not give anybody the right to harass them. On being asked why only women were harassed and not men one or two conductors said that it was because of the objectification of women in popular culture and the inbuilt gender inequality in society. This led to a discussion on patriarchy which is responsible for gender stereotyping and concentration of resources as well decision making powers in the hands of men in society. Since men were more powerful they often targeted women and tried to keep them in an inferior position with the use of force.

The session concluded with an overall understanding that more such interactions are necessary to sensitize men and that girls should be given equal nutrition, healthcare and educational as well as skill building opportunities in order to be able to challenge the gender inequality in society.
“Being the father of a daughter, I am worried!”

30th November took our team to an entirely different group of people, male supervisors of factory workers at Mahindra Tractors, Kandivli. The session was organized jointly with the Samantar program of Mahindra Tractors under their Employee Social Options (ESOPS) banner – that engages employees on several social issues. Suvrata Gharge, Manager, Employee Relations & Development had suggested the theme “Being the father of a daughter, I am worried!” for the discussion. As there were only 15 members the focused group discussion format was used. Participants talked of their anxiety regarding their daughters due to the increase in incidents of violence against girls and women and talked of individual solutions like changing the school bus of their daughter or dropping and picking her up personally. The different forms of violence faced by women throughout their lives and the reasons behind them were the focus of the discussion. The facilitators elicited more responses and summed them up as physical, emotional, economic and sexual violence. One participant stressed the need to socialize girls into being independent and strong, although vigilant about security. Another participant stressed on the need to sensitize and train boys as much as we focus on the girls. The session ended with a brief mention of the laws available to counter the various forms of violence.

One important feedback by Mr. Suresh Pande was that “it is very important to sensitize men – especially boys when they are younger – to become gender sensitive and break the stereotypes about women’s role in society”.

Safe Abortion: A Reproductive Right

A one day workshop for media professionals from Maharashtra was organized on the 4th of Dec. at the FOGSI office, Lower Parel, Mumbai, to acquaint them with all the aspects of
abortion, dispel myths surrounding it, discuss the MTP & PCPNDT Acts and their conflation and examine the terminology and imagery used while reporting on abortion issues. Though this was part of our advocacy programme for abortion, in collaboration with Pratigya Campaign for gender equality and safe abortion, it also proved to be an asset to our ongoing campaign to prevent violence against women. By spreading awareness about safe and legal abortion we hope to bring down the mortality rate of women caused by unsafe abortions due to lack of knowledge about abortion or lack of services. Three fellows were also chosen from among the reporters to write about abortion from a rights based viewpoint over the next six months.

The 16 days campaign ended on the 12th of December with a Webinar for reporters, in collaboration with Pratigya Campaign for safe abortion. It was held to discuss the results of the Guttmacher study on abortion estimates, the first of its kind. The Webinar was moderated by Dr. A.L.Sharada, Director, Population First and Ms. Anupam Shukla, Pratigya Secretariat, Delhi and had eminent persons as panelists, answering the questions of reporters who had logged in. Dr. Chander Shekar of International Institute of Population Sciences, Mumbai and Rajib Acharya of Population Council, New Delhi were on the panel and answered the questions of reporters who had logged in from 10 am to 11 am.
1. This is the first comprehensive national study of the incidence of abortion and unintended pregnancy in India. Although abortion has been legal under a broad range of circumstances since 1971, there has never before been a study specifically designed to measure national abortion incidence in India.

2. An estimated 15.6 million abortions occur annually in India.

3. Almost half of the 48.1 million pregnancies that occur in India each year are unintended. Two-thirds of all unintended pregnancies end in abortion.

4. The national abortion rate in India is 47 per 1,000 women of reproductive age, which is similar to abortion rates in Pakistan (50), Nepal (42) and Bangladesh (39).

5. Close to one in four abortions in India (22%) are provided in health facilities. Almost three in four abortions (73%) are obtained independently through purchasing medical methods of abortion from a chemist or informal vendor. The remaining 5% are obtained using various methods that are often dangerous.

6. Medical methods of abortion (MMA)—using a combination of mifepristone and misoprostol—account for four in five abortions in India. Medical methods of abortion are safe and effective when used in accordance with World Health Organization guidelines.

7. Only 5% of abortions in India occur in public health facilities, which are a key source of health care for poor and rural women.

8. The majority of primary health centers and substantial proportions of community health centers, the most common types of public health facilities in India, do not offer abortion services. The most common reasons reported for not providing abortion services are lack of trained staff and lack of necessary equipment or supplies.

9. The researchers propose various steps to increase the availability of abortion services in health facilities, such as:
   - Training more doctors to provide abortions;
   - Expanding the number of approved abortion providers by permitting and training nurses, auxiliary nurse midwives and AYUSH doctors to provide medical methods of abortion;
   - Equipping health facilities with necessary equipment and supplies so that they can provide surgical abortions and medical methods of abortion;

10. The study’s findings on unintended pregnancy suggest that there is great need for improvements in contraceptive services so that programs can better help women and couples avoid pregnancies they do not want.

Vinoj Manning, Executive Director, Ipas Devt. Foundation

Overall, the churning of thoughts and debates thrown up while reaching out to different sections of citizens proved to be an enriching experience for us as it showed that so much more needs to be done to just get people thinking about the gender discrimination
prevalent in society and how it affects our lives. There are miles to go ... before people even begin to agree to the idea of gender justice and gender equality.

~Fighting Malnutrition – A Case Study~

Making healthcare accessible

Hritik Valya Waghe, a seven month old boy from village Bamanpada in Shahapur block of Thane district came to Sub-district Hospital (SDH) on 11th July, 2017 with his mother Tulsi. The doctor advised him to get admitted in the Child Treatment Centre (CTC) at the SDH as he was severely malnourished. However, Tulsi refused to admit him saying she did not have clothes and had not informed anyone at home. On 2nd August Hritik came back to SDH accompanied by Tulsi and the Anganwadi Worker of the village. This time around his condition was critical as he was very weak and could not breathe properly. The doctor at SDH referred him to Thane Civil Hospital as the child was diagnosed with pneumonia. The SDH didn’t have facilities to treat him.

Tulsi again refused to go to Thane Civil Hospital as she had two daughters at home to take care of and did not want to lose her daily earnings. Hritik’s condition was so bad that none of the private hospitals in Shahapur were ready to treat him. The chances of his survival appeared dismal. After much counseling by the PF team member and on assurance of being accompanied by a staff of SDH in the government vehicle, Hritik was finally admitted in the Thane Civil Hospital. He was treated there for 19 days and was cured of the infection. Throughout the stay, a PF team member monitored his condition and ensured that he was treated well by the Hospital staff. Tulsi was told to come back to SDH for another 14-day treatment for Hritik as he was still severely malnourished.

The PF team came to know later that Tulsi had jaundice when Hritik was four months old and she could not feed him for about a month. Since he had severe cough and cold for the last 15 days he was unable to digest top milk. That is why he became severely malnourished. However, ASHA, the Anganwadi Worker (AWW) or the ANM (Nurse) were completely unaware of the fact. The ANM is supposed to visit homes of lactating mothers in the first six months to ensure breastfeeding while AWW and ASHA should have known that the child suffered from pneumonia and not just cough and cold. Hritik’s condition kept on worsening till he became critical and was brought to the SDH the second time. Hritik was lucky that he was brought in time to the government health care system where with PF’s efforts, the system responded quickly and saved his life.

Many such children, especially the children from remote tribal wadis (hamlets), succumb to death. These children do not get the services of the Anganwadi and escape the attention of AWW as the wadis are typically located far from the Anganwadi Centre. Children in the age
group 0-3 years do not get cooked food daily but Take Home Ration (THR) once in one or two months from the Anganwadi. Since the AWW rarely visits these children in tribal wadis, it is not known if the THR is being given to the children. Migration of tribal families poses another barrier in access to healthcare. People are not aware that their child must attend the Anganwadi everyday and that they must be present during monthly weighing of their child. ANMs too rarely stay in the village the whole day to observe the children on the day of immunization which is a part of their assigned duty.

With so many systemic gaps it is not a surprise that many a child dies for want of regular attention and timely medical attention. Coupled with ignorance about malnutrition on the part of parents and community, reduction of malnutrition from tribal villages remains an onerous task.

On one hand NITI Aayog’s National Nutrition Strategy document “Nourishing India” recognizes the fact that despite the presence of number of nutrition schemes/services in the country, including Integrated Child Development Services, National Health Mission (RMNCH + A), Janani Suraksha Yojana, Matrutva Anudan Yojana, National Food Security Mission, etc. child under-nutrition remains high and prevalence of cases of stunting, wasting and underweight have not improved much in the last decade as seen from the data of NFHS-3 and NFHS-4. The recently launched National Nutrition Mission (NNM), with a three year budget of Rs. 9,046 Crore, aims to provide holistic development and adequate nutrition to pregnant women, lactating mothers and children. On the other hand, the health care system is not accessible to a large number of tribal children due to number of systemic gaps. While it is important to have convergence of various nutrition schemes and higher allocation of funds for nutrition, it is as important to address the systemic gaps on the ground level by making the system more responsive, sensitive and accessible to the end-user.

AMCHI project of Population First is committed to strengthen the government health care system for women and children by making communities aware of their rights and responsibilities and motivating the village-level service providers to perform better. It also works with the government functionaries at the Primary Health Centre and Sub-District Hospital (SDH) level. One of the initiatives has been to encourage parents and Anganwadi
Workers to bring malnourished children to the SDH where they can be examined and treated effectively.

~ News & Views ~

SDGs are Transformative
But what about CSR Investments?

Often when we are sitting passively listening to others talk in a conference there is a certain sense of De ja vu ... You feel you have heard the speaker speak earlier on the same issues. I did not frankly expect much from the UN Global Compact’s conference on SDGs organized at Leela hotel in Mumbai on 8th December 2017. But I was in for a pleasant surprise as there were some insightful presentations and sharing which were quite enriching.

Just as I was thinking that the conversation is totally taking place from the point of view of the corporates, there comes on stage Nisha Agrawal, Chief Executive Officer, Oxfam. If I say she was passionate it would be an understatement. I suddenly felt as if I had got an opportunity to express my views on the stage.

I have been witness to the changes in the approach of corporates to engagement with social development issues after the CSR guidelines were formulated in 2013. While it is good that some money is being earmarked for socially useful work, often remember the ‘socially useful and productive work’ (SUPW) assignments of my son when I see the CSR engagements of some of the corporates. True there are some amazing corporate initiatives but I continue to feel they are not as many as we would like.

Nisha in her brilliant presentation had analysed the shortcomings of the CSR as it is being practised today in an objective manner articulating the issues sharply. I am sure many of us, particularly those working in the area of rights based initiatives, community empowerment and gender advocacy, would endorse her stand completely. To put it briefly, these are the points that she made.

- One third of the money, according to her, goes for education. A major chunk of the remaining money goes to sanitation programmes. Has the fact that these are the two programmes which are personally driven by the Prime Minister influenced the choice of CSR investments of the corporates? What about the myriad other issues?

- The CSR guidelines also encourage and promote CSR investments in the project and field areas of the corporates. Inspite of the consistent good work that many NGOs are doing in remote areas or areas where there are no corporates, they are facing a huge fund crunch often forcing them to cut down their activities. These are the communities which are left out of the ambit of development. Focus on backyard investment leaves many critical areas and issues out of the CSR investments.
The requirements of reporting and monitoring as well as Return on Investment indicators has made it easy to measure service delivery projects popular with the CSR departments, often overlooking issues related to sustainability and people’s participation.

This in essence means advocacy initiatives for gender equality, women’s rights and rights of the other marginalised communities are totally overlooked.

Policy research is yet another important area which is starved of funds.

Most of the corporates have established their own foundations and are channelising their CSR funds through them. This is undermining the role of civil society organisations and NGOs as the watchdogs, the catalysts and the change makers.

The CSR agenda keeps changing at the corporate level every few years putting hurdles in long term investments in a particular sector or a particular issue.

An off shoot of this is the short term funding that is granted to NGOs for a couple of years with insistence on measurable impact.

Nisha very forcefully argued that this approach to CSR goes against the spirit of SDGs which are about transformational change, which does not happen with short term service delivery projects. We cannot agree more.

**MY TAKE**

Gender equality is a cross cutting SDG which should be at the core of achieving many of the other SDGs. Gender equality and a society free of gender based violence is possible only when we change mindsets, mainstream gender sensitivity into institutions, policies and programmes, create champions of the cause across sectors and bring about a transformative change that would create a culture and ethos of inclusiveness. These require investments as well. They require long term investments. We need greater commitment, support and engagement of corporates to make the above happen because a peaceful, inclusive and egalitarian society makes good sense for business as well.

~ Rhyme and Reason ~

Climate change and its devastating impact seen throughout the country and all over the world has been very much in the news, be it the smog in Delhi or the Cyclone that hit the west coast. Human civilization and greed are largely responsible for these devastating changes. Below is a poem written by Savitribai Phule about how important it is for man to
preserve and conserve the bounties of nature and live in tune with nature and other fellow creatures. Just goes to show how much ahead of her times Savitribai was and how comprehensive she was in her thinking.

**Man and Nature**

*The rains have drenched the fields, bathed Nature pure and clean*

*Fruits, flowers and pulses all are invigorated and green*

*The pitter-patter of falling rain, Nature is at her loveliest*

*In a shimmering sari with motifs of fruit and flowers bedecked*

*The koel sings melodiously, the peacock sways and dances*

*Around the flowers, full of glee the pirate bee prances*

*Beautiful is nature, beautiful human beings, beautiful is all life*

*Let the rains of goodwill bring blossoms and wipe away all strife*

*Let’s beautify human existence and make progress*

*Let’s live and let live, get rid of all our fears and stress*

*Human beings and all of creation are but two sides of a coin*

*To preserve these priceless bounties let us our hands join*

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*(Translation from Marathi – Ujjwala Mhatre)*
Ringing in the New Year (2018) with Greetings and Best Wishes from the Population First Team!!