Research Abstracts on Women's Empowerment

1998 - 2008

2009

Documentation Centre for Women and Children
National Institute of Public Cooperation and Child Development
5, Siri Institutional Area, Hauz Khas, New Delhi - 110016
Number of Copies: 100

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Project Team

Guidance and Support : Dr. Dinesh Paul
                     : Dr. Sulochana Vasudevan

Project In-Charge : Meenakshi Sood

Abstracting : Prekshi

Computer Assistance : Pawan Kumar
Foreword

Research on women and children reveals that there are several areas which require the attention of planners and programme implementers. Policy decisions based on research findings are rooted in ground reality, and therefore have the capacity to bring about tangible improvement in the situation, whether it is with regard to nutritional status, health practices, income generation, domestic violence or rights of women and children. Research on social issues in India is being conducted by a plethora of organisations, namely research institutes, government ministries and departments, autonomous organisations, home science colleges, social work departments of universities, medical colleges, international and national voluntary organisations. As research is a vital input for development, planners, administrators and researchers are on the look out for social factors which have the potential to impact the outcomes of various programmes. With this aim in view, the Documentation Centre for Women and Children (DCWC) of the Institute is engaged in the process of collecting and documenting valuable research in the areas of women and children. DCWC collects research findings from many widely scattered sources for the use of researchers. Hence this project was undertaken to bring out compilations of research abstracts on various areas for the benefit of users.

"Research Abstracts on Women's Empowerment, 1998-2008" has been compiled to present widely scattered research in a compact form, and assist in making encapsulated information and recommendations of research available to planners, programme implementers and researchers. Research studies conducted by various organisations during the period 1998 to 2008 have been summarised on various subjects such as agriculture and women, deserted and divorced women, domestic violence, dowry, women's empowerment, gender issues, marriage, panchayati raj, terrorist violence, self help groups, situation of women, widows, working women, etc.

It is hoped that this document would be of immense value to all stakeholders working for the survival, development and empowerment of women and children. It would not have been possible to bring out this document without the cooperation of various organisations who have very kindly shared their research studies with NIPCCD. I wish to place on record my appreciation of the efforts put in by the staff of DCWC specially Smt. Meenakshi Sood, Deputy Director, and Dr. Dinesh Paul, Additional Director (TC) and Dr. Sulochana Vasudevan, Joint Director (WD) for overall guidance and support in completion of the project.

(A.K. Gopal)
### Contents

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Agriculture and Women</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sujaya, C.P.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- M.S. Swaminathan Research Foundation, Chennai.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>AIDS</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sophia Centre for Women's Studies and Development, Dept of Psychology and Education, Sophia College, Mumbai.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Awareness Generation Projects</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Vidyasagar School of Social Work, Kolkata.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Childlessness</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Ram, Usha.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- International Institute for Population Sciences, Mumbai.</td>
<td></td>
</tr>
</tbody>
</table>

Research Abstracts on Women’s Empowerment, 1998 - 2008
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.</td>
<td>Impact study of Rashtriya Mahila Kosh credit facilities to poor women through non-governmental organisations. (1997). Tandon, Jannavi, Mishra, R. N. and Saxena, H. C. Banaras Hindu Univ., Faculty of Social Sciences, Centre for Women’s Studies and Development, Varanasi.</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td><strong>Deserted Women/ Divorced Women</strong></td>
<td></td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td></td>
<td>Jayaprakash Institute of Social Change, Vidyasagar School of Social Work, Kolkata.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mathew, Anna.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Roda Mistry College of Social Work and Research Centre, Hyderabad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Moinuddin, S.A.H.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rawat, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NIPCCD, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sri Padmavati Mahila Visvavidyalayam, Dept of Women’s Studies, Tirupati.</td>
<td></td>
</tr>
</tbody>
</table>

Displaced Women/ Evicted Women

<p>|       | Kaushik, Susheela et al.                                                            |          |
|       | Centre for Development Studies and Action, New Delhi.                              |          |
|       | Madhiwalla, Neha and Gopal, Meena.                                                 |          |
|       | CEHAT, Centre for Enquiry into Health and Allied Themes, Mumbai.                   |          |
|       | Pandey, Balaji and Rout, Binaya Kumar.                                             |          |
|       | National Commission for Women, New Delhi.                                          |          |</p>
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Domestic Violence</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Athalye, Naina Rao.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sophia Centre for Women's Studies and Development, Mumbai.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Bokil, Milind.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Development Support Team, Pune.</td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>A Study on the psychosocial circumstances in the family life and environment of married women victims in the reported cases of family violence in Delhi and Kolkata Metropolis. (2001).</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td>- Gangopadhyay, Maushumi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Institute of Criminology and Forensic Science, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>27.</td>
<td>Innovative, women-initiated community level responses to domestic violence: a study of Nari Adalat. (2002).</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>- International Centre for Research on Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- International Centre for Research on Women, Washington, DC.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Lakdawala, Hanif and Surendradas, Sandhya.</td>
<td></td>
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<tr>
<td></td>
<td>- Sanchetana Community Health and Research Centre, Ahmedabad.</td>
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</tr>
<tr>
<td></td>
<td>- Lakdawala, Hanif, Sen Balasaria, Rini and Rajput, Payal.</td>
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<tr>
<td></td>
<td>- Sanchetana Community Health and Research Centre, Ahmedabad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Mitra, Nishi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Tata Institute of Social Science, Unit for Women's Studies, Mumbai.</td>
<td></td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td></td>
<td>- Panda, Pradeep Kumar.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Centre for Development Studies, Thiruvananthapuram.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Prasad, Shweta.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Banaras Hindu Univ., Faculty of Social Sciences, Centre for Women’s Studies and Development, Varanasi.</td>
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<tr>
<td></td>
<td>- Society for Operations Research and Training, Baroda.</td>
<td></td>
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<tr>
<td></td>
<td>- Society for Promotion of Art, Culture, Education and Environmental Excellence (SPACE), Gangtok, Sikkim.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sundar, Sumithra.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Madras Univ., Dept. of Psychology, Chennai.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sunny, Celine, et al.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Rajagiri College of Social Sciences, Research Institute, Kalamassery, Kerala.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Swabhiman, Bhubaneswar.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Thornhill, Laura.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Seva Mandir, Udaipur.</td>
<td></td>
</tr>
<tr>
<td>40.</td>
<td>Support services to counter violence against women in Kerala : a resource directory. (2002).</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>- UNIFEM, New Delhi.</td>
<td></td>
</tr>
<tr>
<td><strong>Dowry</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>41.</td>
<td>Expanding dimensions of dowry. (2003).</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>- All India Democratic Women’s Association, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>42.</td>
<td>Reaching for half the sky. (2003).</td>
<td>51</td>
</tr>
<tr>
<td></td>
<td>- Chakraborty, Indrani.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- SANLAAP, Kolkata.</td>
<td></td>
</tr>
<tr>
<td>43.</td>
<td>Crimes against women role of Section 498-A IPC in states of Delhi and Haryana: study report. (2002).</td>
<td>53</td>
</tr>
<tr>
<td></td>
<td>- Shinghal, N.K.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Bureau of Police Research and Development, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>44.</td>
<td>IPC Section 498 A: used or misused. (2005).</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>- Council for Social Research, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Srinivasan, Padma and Lee, Gary, R.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Journal of Marriage and Family.</td>
<td></td>
</tr>
<tr>
<td><strong>Drudgery</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Jamwal, Vijay.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Uttaranchal, Dept. of Women and Child Development, Swa-Shakti Project, Dehradun.</td>
<td></td>
</tr>
<tr>
<td><strong>Empowerment of Women</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>47.</td>
<td>Pilot study on impact evaluation of STEP in Andhra Pradesh, Karnataka, Kerala, Maharashtra and Orissa.</td>
<td>58</td>
</tr>
<tr>
<td></td>
<td>- Andhra Pradesh Industrial and Technical Consultancy Organization, Hyderabad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Baksh, J.D.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- People’s Action for People in Need, Andheri Village, Sirmour Dist, Himachal Pradesh.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Institute of Social Studies Trust, Bangalore.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Joshi, Meenakshi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Social Welfare.</td>
<td></td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>51.</td>
<td>Evaluation study of various specific women related schemes during the Eighth Five year Plan in Manipur : research project. (~2003).</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td>- Mass Rehabilitation Society, Imphal.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Mohammad, Noor and Shahid, Mohammad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Women’s Link.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Mukherjee, Tuhin.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Vidyasagar School of Social Work, Kolkata.</td>
<td></td>
</tr>
<tr>
<td>54.</td>
<td>Search for a vision statement on women’s empowerment vis-a-vis legislation and judicial decision. (2002).</td>
<td>67</td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Food and Nutrition Bulletin.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Siwal, B.R.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- NIPCCD, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>57.</td>
<td>Enhancing women’s empowerment through information and communication technology: a report. (2008).</td>
<td>71</td>
</tr>
<tr>
<td></td>
<td>- Voluntary Association for People Services, Virudhunagar.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- World Bank, New Delhi.</td>
<td></td>
</tr>
<tr>
<td><strong>Family Counselling</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Jayaprakash Institute of Social Change, Vidyasagar School of Social Work, Kolkata.</td>
<td></td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
- Nanivadekar, Medha.  
- Rambhau Mhalgi Prabodhini, New Delhi.                                                                                                                                   | 74       |
- National Commission for Women, New Delhi.                                                                                                                                                      | 75       |
- Sharma, Adarsh.  
- National Institute of Public Cooperation and Child Development, New Delhi.                                                                                               | 76       |
| 63.   | Gender inequality in the work environment at institutes of higher learning in science and technology in India. (2003).  
- Gupta, Namrata and Sharma, A K.  
- Indian Institute of Technology Kanpur, Dept. of Humanities and Social Sciences, Kanpur.                                                                                              | 78       |
| 64.   | Gender in the making of a scientist : a study of the academic environment and aspirations of men and women doctoral students at the premier institutes of science and technology in India. (2005).  
- Gupta, Namrata.  
- Indian Institute of Technology, Dept. of Humanities and Social Sciences, Kanpur.                                                                                                          | 79       |
- Singamma Sreenivasan Foundation, Women’s Information and Resource Centre, Bangalore.                                                                                                           | 80       |
- Talwar, Sabanna et al.  
- Belgaum, Karnataka : Karnataka Univ., Dept. of Studies and Research in Economics.                                                                                                        | 82       |
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>67.</td>
<td>Study of initiatives for increasing community involvement in Karnataka and Tamil Nadu. (1997). Institute of Social Studies Trust, Bangalore.</td>
<td>84</td>
</tr>
<tr>
<td>Homes for Women/ Short Stay Homes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>70.</td>
<td>Short stay homes in Uttar Pradesh: a status appraisal. (2009). NIPCCD, Regional Centre, Lucknow.</td>
<td>87</td>
</tr>
<tr>
<td>Marriage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health/ Stress</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75.</td>
<td>Mental health and aging: focus on women with depression. (2005). Dave, Parul et al. M.S. Univ., Women's Studies and Research Centre, Vadodara.</td>
<td>94</td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
- Gunthey, Ravi.  
- Jai Narain Vyas Univ., Dept. of Psychology, Jodhpur.                                                                                                                                                                                                                                                                                                                                                   | 95       |
| 77.   | 'Stress' experienced by homemakers with young children. (2005).  
- Royce, Saramma.  
- Singh, Manisha.  
- Banaras Hindu Univ., Faculty of Social Sciences, Centre for Women's Studies and Development, Varanasi.                                                                                                                                                                                                                                                                                                                                    | 97       |
|       | **Panchayati Raj**                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |          |
- India, Ministry of Panchayati Raj, New Delhi.                                                                                                                                                                                                                                                                                                                                                                                             | 99       |
- Nahar, U.R. et al.  
- Jai Narain Vyas Univ., Dept. of Sociology, Jodhpur.                                                                                                                                                                                                                                                                                                                                                                               | 100      |
- Regional Centre for Urban and Environmental Studies, Lucknow.                                                                                                                                                                                                                                                                                                                                                             | 101      |
- Singh, Surat.  
- *Kurukshetra*.                                                                                                                                                                                                                                                                                                                                                                                                     | 103      |
- Sophia Centre for Women's Studies and Development, Mumbai.                                                                                                                                                                                                                                                                                                                                                                              | 104      |
- Srivastava, Alka.  
- Indian Social Institute, New Delhi.                                                                                                                                                                                                                                                                                                                                                                                                             | 105      |
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Poverty/ Slum Women</strong></td>
<td></td>
</tr>
</tbody>
</table>
<pre><code>  | - Bengal Social Service League, Kolkata.                                            | 106      |
  | - Indian Institute of Public Administration, Chronic Poverty Research Centre, New Delhi. | 107      |
  | - Vijayanthi, K. N.                                                              | 108      |
</code></pre>
<p>|       | <strong>Riot Affected Women</strong>                                                           |          |</p>
| 88.   | How has the Gujarat massacre affected minority women ? The survivors speak. (2005).  
<pre><code>  | - Nirantar, New Delhi.                                                           | 110      |
</code></pre>
<p>|       | <strong>Sexual Violence/ Rape/ Abuse</strong>                                                  |          |
| 89.   | Sexual harassment at workplace: sowing seeds of thought. (2001).                  | 112      |
|      | - Chatterjee, Chaitali.                                                           |          |
|      | - Sanlaap, Kolkata.                                                               |          |
| - Fazl, Fareha, et al.                                                            | 113      |
|      | - Delhi Univ., Dept. of Psychology, New Delhi.                                   |          |
| 91.   | Harassment of women at workplace with sexual overtures. (2003).                   | 114      |
|      | - Jayaprakash Institute of Social Change, Vidyasagar School of Social Work, Kolkata. |          |
|      | - Khan, M. E. et al.                                                             |          |
|      | - Centre for Operations Research and Training, Vadodara.                         |          |
|      | - Population Council, New Delhi.                                                  |          |</p>
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>97.</td>
<td>Decent employment for women: learnings and recommendations from the pilot project. (2004). Institute of Social Studies Trust, New Delhi.</td>
<td>121</td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>--------</td>
<td>--------------------</td>
<td>----------</td>
</tr>
<tr>
<td></td>
<td>Ravi, R. Venkata and Venkataramana, M.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Council for Social Development, Hyderabad.</td>
<td></td>
</tr>
<tr>
<td>103.</td>
<td>Problems while organising: drawn from the meeting with co-operative members. (2003).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Saha, Surashree.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Self Employed Women’s Association, Ahmedabad.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Singh, Naresh.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>V.V. Giri National Labour Institute, NOIDA.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Srivastava, Alka.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Indian Social Institute, New Delhi.</td>
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<tr>
<td></td>
<td>Stormer, John.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Save the Children Fund (UK), Northwest India Programme Office, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Vasudeva Rao, D.</td>
<td></td>
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<tr>
<td></td>
<td>Council for Social Development, Hyderabad.</td>
<td></td>
</tr>
</tbody>
</table>

**Situation of Women**

<p>|        | Biswal, D. N. et al. |
|        | Centre for Developmental Activities, Rourkela, Orissa. |
|        | Brara, N. Vijaylakshmi. |
|        | National Commission for Women, New Delhi. |</p>
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>- Chakravarti, Tapati.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>112.</td>
<td>A Situational analysis of women and girls in Goa. (2005).</td>
<td>139</td>
</tr>
<tr>
<td></td>
<td>- De Souza, Shaila.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
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<td>- Gopalan, Sarala.</td>
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<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>114.</td>
<td>A Situational analysis of women and girls in the union territory of Daman and Diu.</td>
<td>141</td>
</tr>
<tr>
<td></td>
<td>- Goswami, Lalita K.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
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<td>- Integrated Rural Technology Centre, Mundur, Palakkad, Kerala.</td>
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<td>Subjects and Titles</td>
<td>Page No.</td>
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<td>-------</td>
<td>---------------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
- Sharma, Archana.  
- National Commission for Women, New Delhi. | 162 |
- Tewari, Suruchi.  
- Social Change. | 163 |
- Tinnari, Third World Centre for Comparative Studies, New Delhi. | 164 |
- Tinnari, Third World Centre for Comparative Studies, New Delhi. | 165 |
- Vaidya, Vijay.  
- National Commission for Women, New Delhi. | 166 |
- Verma, Sudhir.  
- National Commission for Women, New Delhi. | 167 |
|       | **Swa-Shakti Project** |  
- Agricultural Finance Corporation Ltd., New Delhi. | 169 |
- Balodi, Arti.  
- Uttaranchal, Dept. of Women and Child Development, Swa-Shakti Project, Dehradun. | 170 |
|       | **Terrorist Violence Victims** |  
- Kumar, Pramod, Dagar, Rainuka and Neerja.  
- Institute for Development and Communication, Chandigarh. | 171 |
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Walikhanna, Charu.</td>
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<td>Banatwala, Qudsiya.</td>
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<td>Sophia Centre for Women’s Studies and Development, Mumbai.</td>
<td></td>
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<tr>
<td>143.</td>
<td>A Study on special arrangements to combat violence and crime against women in the States of Punjab and Haryana. (2005).</td>
<td>175</td>
</tr>
<tr>
<td></td>
<td>Centre for Social Research, New Delhi.</td>
<td></td>
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<td>Mysore Univ., Dept. of Sociology, Mysore.</td>
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<td>Widows</td>
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<td>Bhanot, Deepali.</td>
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<tr>
<td></td>
<td>Centre for Development Research and Services for Human Welfare, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>149.</td>
<td>Socio-economic problems of old people among Bhils of Udaipur region: with particular reference to ageing widows and their support services needs. (2001).</td>
<td>181</td>
</tr>
<tr>
<td></td>
<td>Dak, T. M.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Institute of Social Development, Udaipur.</td>
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<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
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<td>- Giri, Mohini and Khanna, Meera.</td>
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<td></td>
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<tr>
<td>152.</td>
<td>Life after death: a journey into the lives of war widows. (2002).</td>
<td>183</td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td>153.</td>
<td>Report on study of war widows.</td>
<td>184</td>
</tr>
<tr>
<td></td>
<td>- National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Thara Bhai, L.</td>
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<tr>
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<td>Widows in India. (2004).</td>
<td>186</td>
</tr>
<tr>
<td></td>
<td>- Thara Bhai, L.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Vijaya Kumar, S.</td>
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</tbody>
</table>

**Witches**

|        | - Barman, Mita.                                                                                                                                                                                                      |          |
|        | - The Indian Anthropological Society, Kolkata.                                                                                                                                                                       |          |
|        | - Mathur, Kanchan et al.                                                                                                                                                                                               |          |
|        | - Institute of Development Studies, Jaipur.                                                                                                                                                                           |          |

**Women in Media**

<p>|        | - Joint Women’s Programme, New Delhi.                                                                                                                         |          |</p>
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Subjects and Titles</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mohan, Kamlesh.</td>
<td>192</td>
</tr>
<tr>
<td></td>
<td>National Commission for Women, New Delhi.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sophia Centre for Women’s Studies and Development, Mumbai.</td>
<td>193</td>
</tr>
<tr>
<td>162.</td>
<td>Working Women</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Benni, Basavaraj S.</td>
<td>195</td>
</tr>
<tr>
<td></td>
<td>Chhatrapati Shahu Central Institute of Business Education and Research, Kolhapur.</td>
<td></td>
</tr>
<tr>
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<td>Bhandan, Mala.</td>
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<td>Centre for Organization Development, Hyderabad.</td>
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</tr>
<tr>
<td></td>
<td>Chakravarty, Deepita.</td>
<td>198</td>
</tr>
<tr>
<td></td>
<td>Economic and Political Weekly.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Damodarani, Sumangala and Menon, Krishna.</td>
<td>199</td>
</tr>
<tr>
<td></td>
<td>V.V. Giri National Labour Institute, NOIDA.</td>
<td></td>
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<tr>
<td></td>
<td>Eapen, Mridul.</td>
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<td>Centre for Development Studies, Thiruvananthapuram.</td>
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<td>George, Alex.</td>
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<td>Centre for Health and Social Sector Studies. Secunderabad.</td>
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<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
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<tr>
<td>-------</td>
<td>---------------------</td>
<td>----------</td>
</tr>
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<td>203</td>
</tr>
<tr>
<td>171.</td>
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<td>204</td>
</tr>
<tr>
<td>S. No.</td>
<td>Subjects and Titles</td>
<td>Page No.</td>
</tr>
<tr>
<td>-------</td>
<td>--------------------</td>
<td>----------</td>
</tr>
</tbody>
</table>
- Sahu, F.M. and Rath, Sangeeta.  
- *Psychology and Developing Societies.*  | 212 |
- Sarada Devi, M. and Rayalu, T.R.  
- *Psycholingu.*  | 213 |
- Sahoo, Alka.  
- Chaudhuary Charan Singh Univ., Dept. of Sociology, Meerut.  | 213 |
- Sheena, P.  
- Calicut Univ., Dept of Economics, Dr. John Matthai Centre, Thrissur, Kerala.  | 214 |
- Singh Sengupta, Sunita.  
- Indian Institute of Management Calcutta, Kolkata.  | 216 |
| 183.  | Women, work and insecurities in India. (2003).  
- Uma Rani and Unni, Jeemol.  
- Gujarat Institute of Development Research, Ahmedabad.  | 217 |
Agriculture and Women


Key Words : 1. WOMEN WELFARE  2. SCHEDULED CASTE WOMEN IN AGRICULTURE
3. SCHEDULED CASTE WOMEN  4. WOMEN IN AGRICULTURE  5. EMPLOYMENT SCHEDULED
CASTE WOMEN  6. EMPOWERMENT SCHEDULED CASTE WOMEN  7. AGRICULTURE AND
WOMEN.

Abstract : The status of women in a complex society like India is not uniform. Scheduled Caste (SC) women, who constitute a sizeable proportion of India’s population, were subjected to gender bias and indignities arising out of the age old tradition of untouchability. As per 1991 Census, SC female population of 66.29 million represented 16.43% of the country’s total female population. The number of SC females per 1000 SC males in 1991 Census was 922. From 1971 to 1984 the female age at marriage among SC population increased by 1.4 years in rural areas and by 1.1 years in urban areas. According to 1991 Census, only 23.29% of SC females were literate, as against 52.21% general literacy rate in the country. In 1991, SC female work force employed in the primary sector was highest as agricultural labourers (66.52%), and the secondary sector had 3% SC female workers as self-employed artisans and those who owned enterprises. In the tertiary sector, SC women were engaged in conservancy services and on salaried jobs like peon, etc. SC women constituted 20.68% of the total female workers, and among agricultural labourers, 31.10% were SC women. The work participation rate (WPR) among SC females (25.98%) was less than that of ST females (44.76%), and higher than that of non SC/ST females which was 18.97%. Andhra Pradesh had the highest WPR (46.71%) and Punjab had the lowest WPR (5.40%). About 33% landless labourers in India belonged to scheduled castes, 49.07% of main workers among SC were agricultural labourers, and 66.52% were women agricultural labourers. SC women agricultural labourers who worked in fields of high caste landlords were exposed to all sorts of humiliation and abuse, including sexual harassment. This economic dependence of SC households on agriculture, under the age old concepts of Artha, Dharma, Kama and Moksha, has over the centuries created a divide between those who own lands and those who do not own lands. In rural areas, it was always the SC
women agricultural workers who were at the receiving end. Concern about the plight of SC female agricultural labourers should start at the highest policy making levels, and concerted action should be taken to protect them. Development and related problems with regard to SC female workers should not be considered in isolation, but should include the household as a whole. There is a need to involve the voluntary sector in their welfare, and more information based action is required to improve the situation of SC agricultural workers including women labourers.


Key Words : 1. WOMEN WELFARE 2. AGRICULTURE AND WOMEN 3. WOMEN IN AGRICULTURE 4. POLICIES AND PROGRAMMES FOR WOMEN 5. NATIONAL TASK FORCE 6. NATIONAL TASK FORCE ON WOMEN IN AGRICULTURE 7. WOMEN LABOUR 8. WOMEN AGRICULTURAL LABOUR 9. AGRICULTURAL LABOUR 10. CHILD LABOUR 11. LEGISLATION FOR WOMEN 12. LEGISLATION FOR CHILDREN.

Abstract : This study was undertaken to assess the status of women who are involved in agriculture. The population of females increased from 117 million to 407 million between 1901 and 1991. A sectoral profile of the female work force indicated that more than 80% female workers are engaged in the agriculture sector in rural India. High percentage of independent participation of women (43%-81%) was observed in all homestead activities like cooking, cleaning, collection of fuel, fetching water, care of children, etc. Independent participation of women was found to be very marginal in major crop production (1%), post harvest activity (2%), livestock management (6%), and entrepreneurial activities (0%). This indicated the involvement of men in skilled agricultural work, and limiting the role of women to drudgery prone, unskilled activities like weeding, transplanting, harvest cleaning, grading, etc. Nearly 80% women are engaged in agriculture, while the figure for men is 60%. While the number of women engaged in agriculture and allied activities (primary sector) has increased in absolute terms, their participation rate has come down from about 90% to 85%. The National Policy for Empowerment of Women, 2001 aims to help women by providing appropriate technologies suiting their needs. The Technology Mission in the Department of Agriculture and Cooperation is implementing the scheme "National Perspective Plan for Women Farmers". Under the Oil Seeds Production Programme and the National Pulse Development Programme preference is given to women farmers. Efforts have also been made to involve farm women groups under both the programmes to perform activities involved in maize production in the country. The Indian Council for Agricultural Research has established a National Research Centre for Women in Agriculture (NRCWA) at
Bhubaneswar for undertaking women specific research studies in the field of agriculture. The Central Sector Scheme for Women in Agriculture was approved for implementation in one district each of 15 states of the country during the Ninth Five Year Plan. The project entitled “Training and Extension of Women, Orissa” in its second phase is being implemented in eight districts of Orissa. The drudgery involved in household and agricultural work is tremendous and leads to several health problems. It has been seen that the most common occupational health hazard of women is overwork. Careful studies on the impact of new technologies should be undertaken in selected farm areas. Specific steps must be taken to provide women with managerial and organizational skills. Only concerted action of the agricultural research system and policy makers can lead to meaningful research on issues concerning women. In order to have effective implementation of programmes, there should be integrated women’s development programme.


**Key Words**: 1.WOMEN WELFARE 2.AGRICULTURE AND WOMEN 3.SITUATIONAL ANALYSIS 4.SELF HELP GROUPS 5.FISHER WOMEN 6.RURAL WOMEN 7.INCOME GENERATION 8.ADITHI PROGRAMMES 9.TSUNAMI AFFECTED WOMEN.

**Abstract**: From the earliest days of agriculture, women have played a key role in the selection of plants for cultivation, animals for domestication and in conservation. Yet women’s efforts and achievements have been little recognized or rewarded. Involvement of women in agriculture is due to out migration of males from low paid agriculture to higher paid industry. Incidence of work-related migration for less than a year is as low as 3.6% for rural women as compared to a high 33.7% for rural men. Women’s work participation is mostly related to available local work or family enterprises, which restricts their upward mobility. Women’s remuneration is lower and working conditions are worse. Women’s employment in the informal sector is increasing due to factors connected with globalization such as export-oriented industrialization and relocation of industries in developing countries. According to Census 2001, more than 110 million women are engaged as workers; in rural areas, 36.5% of them are cultivators and 43% work as agricultural labourers. Female agricultural workers are subject to the worst ill effects of poverty. In rural India, agriculture and allied sectors employ 89.5% of the total female labour. Women work extensively in livestock maintenance, forest resource use and fish processing. Women provide 50% of the labour in rice cultivation. In the plantation sector, women are the crucial labourers. The study found that in livestock management,
indoor jobs are done by women in 90% of the families. In animal husbandry women account for 93% of the total employment. Women have a role in land use (providing fertilizer to the soil) and in supplying inputs from the forests (fodder for the cattle). In Mizoram, women have knowledge about animal ecology that male hunters acquire. In overall farm production, women’s average contribution is estimated at 55 - 66% of the total labour, and is much higher in certain regions. In the Himalayan region, a pair of bullocks works 1064 hours, a man 1212 hours and a woman 3485 hours in a year, on a one hectare farm. These figures illustrate women’s significant contribution to agricultural production. BPFA (Beijing Platform for Action) mandates that women should be enabled to benefit from ongoing acquisition of knowledge and skills beyond those acquired in youth. About 50,000 women receive training in Industrial Training Institutes and women’s wings in general and private ITIs. The existing facilities for training in agriculture available at college / university level respond to a very different kind of demand. There is a basic mismatch between the kind of work that women in farming and allied sectors actually perform in their day to day lives in primary sectors such as agriculture, fisheries and dairying, and the training offered. Training is offered in simple agricultural skills and technologies, such as soil testing and preparation, seed selection and testing, preparing compost, vermi-composting, bio-pesticides and bio pest control. The study found 600 trained women as link workers in Tamil Nadu with communication skills training, who then trained other farming women in agricultural techniques. The Information Age with its transformational potential raises the question whether the ICT revolution can become a powerful vehicle for gender equality. The National Research Centre for Women in Agriculture (NRCWA) has initiated projects on almost all aspects of the roles of women in agriculture. Women’s issues in 2005 claim just a little more political space than they did a decade ago. Governments need to link macro-economic policies and development strategies to meet the needs of women in poverty, with their full involvement and equal participation. They should be provided safety nets to enable women living in poverty withstand adverse conditions and preserve their livelihoods in times of crisis.
AIDS


Abstract: The aim of the study was to explore the changes in knowledge and attitudes of Sophia College undergraduate students, after they attended a formal discussion on “Women and AIDS.” To study the cognitive and attitudinal impact of exposure to relevant programmes, the Department of Education and Psychology of Sophia College organized a Panel Discussion on the social, psychological, medical and legal aspects of “Women and AIDS” and its implications. The “MDACS Knowledge Test” was used to measure information and understanding about modes of HIV transmission, clinical testing and prevention. The “MDACS Attitudinal Scale” measured the individual’s attitudes towards those infected with HIV/AIDS, peer pressures, HIV/AIDS intervention strategies, employment rights, and marital and reproductive health issues. The sample consisted of 136 female undergraduate students in the age group 19-20 years. 72.8% students were from nuclear families, 14% from extended nuclear, and 13.2% were from joint families. The students were from Arts, Science and Vocational Studies. The panel discussion was effective in bringing about changes in both knowledge and attitudes. The Panel Discussion had a large impact on increase in knowledge (d = 0.87), but the impact on the attitude was moderate (d = 0.50). 43% of the variance limitations of the study were that a one-group pre-test / post-test design was used. The intervention was brief, limited by space and time, and the post-test evaluation was also immediate. Intentions and behaviour should also be included in future research. A multi-component model for HIV/AIDS prevention and education on college campuses, based on surveys of students and faculty members prior knowledge and attitudes about HIV/AIDS, seems to be necessary. Women’s issues in HIV/AIDS prevention and sexual health promotion with regard to biological and social conditions and constraints in women’s lives should also be explored. In addition to group contact programs, mass media can be used to reduce high risk drug or sexual behaviour. Misinformation, feelings of invulnerability, and perceptions about sexually and personal freedom, continued to be major barriers to the effort to prevent AIDS.

Research Abstracts on Women’s Empowerment, 1998 - 2008
Abstract: The scheme of Awareness Generation Projects (AGP) has been implemented through NGOs by Central Social Welfare Board (CSWB) to create awareness on issues relating to status, rights and problems of women, especially rural women. The objectives of the present study were to assess the activities of AGP and its impact on the target population, and also to check out the programmes undertaken by voluntary organizations during and after AGP. Data was collected from five states namely Uttar Pradesh (UP), Tamil Nadu (TN), Delhi, Gujarat and West Bengal (WB) through interviews of 804 women beneficiaries who attended the camps, 119 chief functionaries of voluntary organizations, and 110 organizers. It was found that nearly 50% of all the voluntary organizations were new and they had been first time recipients of grants. The amount given for training participants was not sufficient for quality training. Voluntary organizations did not follow the guidelines for deputing participants. The areas most liked by trainees related to women’s status, family conflict and income generation, but they did not like talks on HIV/AIDS and STDs. Training institutions were not involved in actual implementation of the project. Many NGOs had not conducted any preliminary appraisal/ survey/ assessment study to identify the needs and problems of women in that area. Most of the respondents pointed out that major problems of women were violence against them, alcoholic husbands, illiteracy, general and reproductive health issues, and lack of infrastructural facilities. Women had little access to formal or informal educational facilities and consequently lacked even basic information on issues and problems directly confronting them. In AGP camps, lecture method was commonly used to teach which created boredom. Most women felt that AGP camps were appropriate, but they criticized the duration of camps as lengthy and tedious. Involvement of community and the local power structure was not encouraging. Majority of women were either illiterate or educated up to primary level (70%). AGP camps were organized for a period of 8 days and due to one reason or the other, more than 60% participants did not attended the camp on all 8 days. Awareness level of participants on domestic violence, female foeticide, dowry, reproductive and child health issues increased. Many women felt that the camp was
not at all effective on issues like economy and governance. Majority of the women wanted training on income generation activities to raise their financial status. The study showed that AGP scheme suffered due to non-availability of support services, absence of a network at district and local level, shortage of funds, time lag in organizing camps, and lack of proper planning for sustained action. The study suggested that AGP activities should be planned, efforts should be made to build a strong communication network through use of programmes and media tools, and there is need to assess the activities of AGP.
Childlessness


Key Words : 1. WOMEN WELFARE 2.CHILDLESSNESS 3.CONSEQUENCES OF CHILDLESSNESS.

Abstract : The inability of women to have children becomes a cause to subject them to social discrimination and places restrictions on their participation in social events and celebrations. This study was based on the National Family Health Surveys 1998-99 and NFHS 2005-06. In India 13% of ever married women aged 15-49 years were childless in 1981 (Census) (13.4%) in rural areas and 11.3% in urban areas, compared to 16% in 2001 (15.6% in rural areas and 16.1%) in urban areas). Over 50% of the married women in the 15-19 years age group were childless in 1981, which increased to 70% in 2001. The age specific childlessness rate (ASCR) in 30-34 years age group was 4% in 1981 and 6% in 2001. Rural General Marital Childlessness Rate (GMCR) in southern states ranged from 15% in Kerala to 18% in Tamil Nadu, and in northern states from 15% in Madhya Pradesh to between 17-20% in Bihar, UP and Rajasthan. In urban areas Kerala had lowest GMCR among southern states and GMCR varied between 14-18% among northern states. GMCR for Hindu women in 1981 and 2001 was 13.31% and 15.79% respectively, for Muslim women in 1981 and 2001 it was 11.71% and 16.07% respectively, for Christian women in 1981 and 2001 it was 8.96% and 15.89% respectively, and for women of other religions in 1981 and 2001 GMCR was 10.61% and 13.95% respectively. The GMCR for illiterate women and women who were graduates and above was 13.71% and 20.93% respectively in 2001, while in 1981 for illiterate women and women who were graduates and above GMCR was 12.97% and 14.66% respectively. About 64% and 75% districts in 1981 and 2001 respectively fell in Medium Prevalence Districts (MPD) group. Nearly 28% districts in 1981 fell in LPD group, which declined to 3% in 2001. About 4% districts in 1981 fell in MPD which increased to 22% in 2001 indicating a dramatic shift in the positions of the districts from low to high prevalence of childlessness. Factors affecting likelihood of childlessness are closely associated with place of residence, religion, standard of living index, educational and economic activity status, age at marriage, body mass index (BMI), reproductive morbidity status, and caste (at significance level of 5% among young women aged 15-34 years). Among older women aged 35-49 years childlessness was greater for those with schooling, economically active, married after age 18 years, having medium BMI, substance users and had reproductive morbidity in the past. Consequences of childlessness were marital
disruption. Over 4% of younger childless women aged 15-34 years were divorced/separated/deserted as against just 1.5% among those with children. Over 23% of the childless women aged 35-39 years and 5% of them aged 15-34 years living in southern states experienced marital disruption in comparison to just 3% and less than 3% respectively for women with any children. 11% of older childless women experienced marital disruption in the north and north-eastern region as compared to less than 3% among women with children. Gender based violence in which the proportion of women who experienced violence from husband/in-laws was 16-22% for older childless women compared to 13-21% for women who had children. The analyses further showed that the women who remain childless face many adverse results in the form of divorce/desertion and discrimination.
Credit for Women


Key Words: 1. WOMEN WELFARE 2. MICRO CREDIT 3. CREDIT FOR WOMEN 4. LOAN 5. MICRO ENTERPRISES 6. SELF HELP GROUP 7. WOMEN LABOUR 8. LABOUR WOMEN.

Abstract: In recent years, the traditional roles of women have undergone some changes due to economic needs, and some efforts were made to bring visibility and mainstream women’s contribution to the overall growth and development of society. An empirical study was done by Development Support Team (DST) on women engaged in micro-enterprises in Maharashtra. A sample of 150 women was taken from rural (n=97) and urban (n=57) areas of Maharashtra, and data was collected through a questionnaire. Most of the respondents (61%) were in the age group of 31-45 years and 25% were between 19-30 years of age. A large majority of women (88%) were married, and 36% women were illiterate (rural 38% and urban 19%). In urban areas, majority of the women were staying in pucca (permanent) houses (72%), whereas in rural areas no respondent had a pucca house, so nearly 50% respondents were staying in kaccha (non permanent) houses. Only 21% urban cases and 10% rural cases were houses owned by women, rest of the houses were owned by families or by mothers-in-law. As for basic amenities like electricity, bathrooms and toilets, only 28% in urban areas and 26% in rural areas had private toilets. The other facilities were found to be in good condition. Domestic utilities in both rural and urban areas were found to be average. Majority of both rural (62%) and urban (75.4%) families had monthly income less than Rs. 3000. Mostly the respondents in urban areas (60%) and rural areas (40%) were engaged in petty trade such as selling of bangles, clothes, footwear, vegetables, plastic items, stationary, general utility items and grocery. Tailoring was a favoured occupation in both urban and rural areas, whereas in villages, agriculture and dairy were key occupations. As all the respondents were involved in micro-enterprises so a total of 92 loans were accessed by 57 urban respondents and 196 loans were accessed by 107 rural respondents. The ratio works out to be 1.61 loans for urban and 1.83 loans for rural respondents. In urban areas, women spent 5.83 hours per day in the business/occupation, whereas in rural areas women spent 6.93 hours per day in this occupation. On other domestic chores, rural women spent 5.23 hours per day, whereas urban women spent 4.96 hours per day. Being overburdened, around 60% urban and 70% rural respondents reported health problems, the most notable being backache and body ache. Almost all respondents mentioned that they did not get time for themselves. Self-employed women need to
be engaged in wider community activities by freeing their energies, which at present are imprisoned in domestic chores and occupational responsibilities. Then alone would their human potential be fully utilized, and be a true indicator of development.


**Key Words**: 1.WOMEN WELFARE 2.MICRO CREDIT 3.SELF HELP GROUPS 4.CREDIT FOR WOMEN 5.MODELS FOR CREDIT DELIVERY.

**Abstract**: The Independent Commission for People’s Rights and Development (ICPRD), New Delhi has monitored various micro-finance - based schemes implemented by NGOs, Central, and State Governments, involving 816 NGOs from 21 states of India spread over 100 districts. The SHG model needs variation and flexibility based on best practices such as the “Women’s Credit Group model of the Working Women’s Forum”, Chennai. Currently SHGs are being mostly initiated merely for credit operation, ignoring the social change and empowerment aspect of women’s credit groups. Economic empowerment is a first step towards the goal of equal participation of women in local communities, and to break socially oppressive traditional practices through women’s credit groups. Several issues need to be taken into account in implementing micro credit programmes for poor women. The credit plus activities are vital links in transforming women into entities of empowerment rather than mere clients of micro finance interventions. There is a need to invest in human capital, for both, capacity building to run small credit groups, manage thrift and credit groups, deal with financial institutions, as well as gender/class oriented capacity building. Several micro finance institutions have been criticized for creaming of the poor, and failing to reach the poorest of the poor. It was often seen that apart from the roles of reproduction and home management, micro-credit programmes became the triple burden in poor women’s lives. The micro-credit group or SHGs often became a vehicle for providing security. Not only were business opportunities learnt through SHGs, but also collective marketing, self-care health services, adult literacy classes, and awareness generation programmes were often taken up in the absence of state provided services. This is a part of the privatisation process or mechanisms devised by the poor, especially women, to develop and create basic services in the face of none. The emphasis on savings and loans rather than the group process was the weakest link. The poorest often dropped out due to the pressure to save, and often defaulted. Attention needs to the given to the group process and dynamics. It is therefore essential to develop micro finance agencies or institutions that have both, organized
collective action as well as ensure high repayment, i.e. uphold the twin agenda of women's empowerment with financial viability. This requires special interventions that are tailor-made, and based on a grass roots approach to planning, along with a well organized structure of layered credit groups, along with regular thrift training to workers.


Key Words: 1. WOMEN WELFARE 2. SELF HELP GROUPS 3. MICRO CREDIT 4. MICRO ENTERPRISES 5. CREDIT FOR WOMEN 6. ECONOMIC EMPOWERMENT WOMEN 7. ENTREPRENEURSHIP DEVELOPMENT 8. ECONOMIC EMPOWERMENT 9. RAJASTHAN 10. TRAINING WOMEN 11. TAMIL NADU.

Abstract: Self help group (SHG) is a self governed peer controlled small informal association of the poor, usually from socio-economically homogenous families, who are organized around savings and credit activities. The study was done to assess the various enterprise models of community financial mediation promoted by Government, banks, and NGOs. Field survey was carried out in four districts of Rajasthan, namely Jodhpur, Alwar, Ajmer and Jaipur, and four districts of Tamil Nadu, namely Kanchipuram, Coimbatore, Thiruvarpur and Kanyakumari. Initially 100 SHGs from each district were selected at random for the study but due to problems encountered during the survey, only 350 SHGs covering around 4195 women in Rajasthan and 189 SHGs covering around 3136 women in Tamil Nadu were covered. Clients reported a marginally higher income but the main reason for this was increase in agricultural output. Clients were aware about insurance and were more than willing to pay the premium for insurance. There was no difference in the expenditure on children's education or other development related work in households. About 58% of the households reported increase in assets. The number of SHGs increased from 75,247 in 2001 to 1,78,571 in 2004; women members increased from 13,01,597 in 2001 to 29,84,132 in 2004; savings by SHGs increased from Rs.81 crore in 2001 to Rs.532 crore in 2004; and loans received by SHGs increased from 22,829 in 2001 to 1,59,164 in 2004. The scheduled caste members covered were 14 (2.73%); OBC women covered were 341 (66.6%); and no scheduled tribes were covered. Around 7 - 8% of the total SHG groups in Tamil Nadu were defunct according to a few evaluation studies. The activities SHGs undertook were provision of drinking water, plantation of flower and fruit trees, cashewnut production, formation of youth clubs, AIDS prevention groups, and co-operatives.

12
Self help group concept should target the holistic development of women. There is a
dearth of relevant information on SHGs for members and even social workers who
are into promotion of women's SHGs. The study also recommended skill training for
income generation activities which could be taken up like bakery; paper products
(file pads, bags); agarbathi, candle and chalk piece making; screen printing, spices;
foot mats; leather products; catering, etc.

Micro-finance and women's empowerment : programme and policy review. .
New Delhi : CARE India. 95 p.

Key Words : 1.WOMEN WELFARE  2.MICRO CREDIT  3.MICRO FINANCE   4.SELF HELP
GROUPS  5.SWA-SHAKTI PROJECT  6.ECONOMIC EMPOWERMENT 7.EMPLOYMENT
WOMEN  8.INCOME GENERATION.

Abstract : The Indian Government has paid special attention to women's
empowerment, and both the National Policy for Empowerment of Women (NPEW)
2001, as well as the 10th Five Year Plan, illustrate its commitment to women's
empowerment and welfare. Given a lack of employment opportunities for women,
support for self-employment and women's enterprises came to be recognized as
essential for releasing women's economic potential. Many NGOs have subsequently
taken on the task of women's empowerment through micro-enterprises in recognition
of the impact it can have on women, their families and poverty alleviation. The Tenth
Plan document defines different aspects of women's empowerment. Social
empowerment aims to provide women easy and equal access to all the basic minimum
services to enable them to realize their full potential. Economic empowerment aims
to make all women economically independent through training, employment and
income generation activities, allow women to enjoy not only the de-jure but also the
de-facto rights and fundamental freedom at par with men in all spheres. Cultural
parameters are not mentioned in the Tenth Plan but refer to the concept of
empowerment in relation to respect of rights of indigenous people and inclusion of
their knowledge and practices. The dimensions of power are not specifically
considered but are important in the context of women's empowerment in India.
These include women's collectivization and greater participation in the political
processes. The NPEW places micro-credit under the over all objectives of economic
empowerment of women. The policy demonstrates a supply-dominated view of micro-
credit, where priority is given to promoting structures that enhance the supply of
credit to women. Women's Self-Help Groups have become effective channels of
credit for enterprises. Thus Government banks and wholesale financing
organizations now work with NGOs who promote groups and/or provide finance to
them. A landmark decision of the RBI (Reserve Bank of India) has been that banks
will consider rotation of women’s savings among themselves as a criterion for grading the groups, so women are the primary savers and users of their own savings. It also allows NGOs and women leaders to take more than a proportionate benefit of schemes and even make individual profit in the name of SHGs. This factor results in the fact that policies that are meant to empower women from the bottom upwards actually promotes the leadership and power of elite women and NGOs within the informal micro-finance sector: policies link women’s empowerment to micro-credit, but there is no means of measuring if women are empowered as a result of these policies and programmes; and lack of human capital development leads to sub-optimal results, limited support to Self Help Groups (SHGs) and overburdening of staff without accountability. These factors limit the extent to which micro-credit can positively impact empowerment. If empowerment is accepted as a policy goal, the costs of enabling that empowerment must be reflected through direct budgetary commitment. National policies should include appropriate indicators of women’s empowerment, which each department and programme can report progress against. Micro-credit programmes must include strategies and funding for building the capacity of SHGs to manage savings and credit, augment vocational skills and promote enterprise, and design a wide range of financial producers and services to meet the needs of poor women. There is a need to help women to own and manage their own institutions of which SHGs are the foundation.


Key Words : 1.WOMEN WELFARE 2.MICRO CREDIT 3.MICRO FINANCE 4.POVERTY 5.POVERTY ALLEVIATION 6.SELF HELP GROUPS.

Abstract : Micro finance aims at providing the rural and urban poor, especially women, with savings, credit and insurance and aims to improve household income security. This study examined the economic and social benefits of micro finance programmes implemented by two NGOs in Karnataka and Andhra Pradesh. In 1991, about 38% of the total population were workers in Kolar district, Karnataka. The proportion of workers in the total male population was 47.79%, while the proportion of females was 26.94%. Of the 881,514 workers; 48.71% were cultivators and 26.02% were agricultural labourers. The illiteracy level was high especially among women. The total credit flow from institutional agencies increased from Rs.102.18 crores in 1995-96 to Rs.147.18 crores in 1998-99. The achievement exceeded 100% in the case of crop loans and 200%-300% in case of horticulture and plantation.
during 1995-1997. Targets could not be achieved in the case of sericulture and animal husbandry. In 1972, under the World Bank Aided Project, Dairy Development Corporation was instrumental in initiating the White Revolution in Southern Karnataka. In Andhra Pradesh, Krishna is one of the most prominent coastal districts. The total population of the district was 42.18 lakhs comprising 21.51 lakh males and 20.67 lakh females. The literacy rate for the district as a whole was 53.2%, excluding population in the 0-4 years age group. In 1991, 43.29% population was of workers and rest was of non-workers. These 'non-workers' in the age group of less than 15 years and more than 60 years have been shown as a separate category of others as the work participation tends to be low in these two age groups. Non-workers formed nearly 21% of the population while others formed 35.99%. The work force participation rate was low in the district in general. About 70% agricultural families maintained one or two milch animals for additional income. Similarities between the two districts were the geographical proximity and size. The dissimilarities were rainfall, which was more uneven and uncertain in Kokar district; irrigation facilities; occupational distribution; and banking network. Gram Vikas, an NGO working in Kolar district, has a goal of “empowering marginalized rural women” with special emphasis on children, natural resource management and networking with rural women’s associations to accomplish sustainable development through food security. For children, important activities were providing nutritious food, non-formal education, support towards education and health care activities. Credit was available to women from savings fund, federation loans and credit from banks. In Krishna district, Sanghamitra, an NGO, has been working since 1985 in the area of poverty alleviation and empowerment of women. The contribution was by way of giving loans from the revolving credit fund built with the help of donor assistance. Under its Savings Programme, Lending Programme and Credit from Savings Fund were the activities undertaken. The rule formulated by Grama Vikas that households sending children to school would be accorded priority in the loan sanction was an attempt to translate the strategy of micro-finance as an instrument of poverty reduction into practice. The savings programme of Grama Vikas was larger than that of Sanghamitra. The micro-finance programmes undertaken by NGOs do provide access to credit for the poor, enable them to undertake income generation programmes, and contribute to higher recovery rates. Responsibilities such as development of economic infrastructure and providing bank finance to micro-finance groups must be undertaken by the Government, as only micro-finance programmes cannot alleviate poverty.

Impact study of Rashtriya Mahila Kosh credit facilities to poor women through non-governmental organisations. Varanasi: Banaras Hindu Univ., Faculty of Social Sciences, Centre for Women’s Studies and Development. 100 p.


Abstract: Non-availability of credit has been a critical constraint in the efforts of poor women of our country to achieve economic self reliance. The major objective of the Kosh was to promote or undertake provision of credit as an instrument of socio-economic change for the development of women. The objectives of this study were to see the working of NGOs in relation to credit loans and their respective policies and procedures; to study the socio-economic and demographic profile of women applying for loans; to study the repayment schedules; and to solicit their views regarding the entire loan system. The study investigated the total impact of the loan distributed from two NGO centres. The work area of the NGOs was scattered and covered a large part of the state. Adithi, Patna, Bihar covered Muzzaffarpur, Vaishali and Sitamarhi, while Shramik Bharti at Kanpur covered the whole of Kanpur. Adithi took up credit based activity since 1989. At first the activity was only for empowerment of women and dissemination of information. But later Adithi started the empowerment of women below the poverty line through livelihood and income generation programmes by forming self sustainable groups. Loans were given by Adithi only for productive purposes and not for consumable items. After disbursement of loans, meetings were conducted to assess the scheduled programmes, and calculate the marginal loss or profit likely to accrue. The NGO instituted monthly meetings as a rule, which were followed very consciously by majority of the groups. It was observed that most of the women members did not need to be called repeatedly for meetings. In Bihar, 80% of the total groups have collected and deposited cash in their group accounts in banks. More women in U.P. (28.8%) compared to Bihar (15.5%) were of the age group 45 years and above. 48.8% women in U.P. compared to 41.41% in Bihar were illiterate. Significantly, more women (64.8%) in U.P. compared to 39.7% in Bihar were without any land owned by their families. Housing condition of around 50% women was not satisfactory in both the states. Majority of the women in Bihar (60.4%) as against 7.0% in U.P. took loans for starting cottage industries. Women in Bihar (91.4%) were more knowledgeable about RMK than women in U.P. (56.8%). About 62.4% women in U.P. compared to 37.9% women in Bihar felt that the amount of loan sanctioned was insufficient for the purpose. For marketing their goods, 98.4% women of U.P compared to 56.9% women of Bihar did not receive assistance from NGOs. Utilization of loan by self in the
agriculture sector was 66.7% for women of U.P as against none in Bihar. Minor conflicts within the groups regarding conflicting personal views and interests were resolved smoothly. Women felt that the loan amount should be increased and they should be assisted in marketing their goods.


**Key Words**: 1. WOMEN WELFARE 2. CREDIT FOR WOMEN 3. SAVING CREDIT PROGRAMME 4. EMPOWERMENT WOMEN 5. WOMEN EMPOWERMENT 6. LOANS FOR WOMEN.

**Abstract**: This study analyzed the use of savings credit program to satisfy the various needs of urban poor families in Baroda city, and compared the pre- and post loan status of women and their households. A sample of 175 women loanees from 15 slums, where savings credit program was operational, were taken. Data was collected through interviews and from other secondary sources like loan books, etc. It was found that 70% women were in the age group 20-45 years, 32% were SCs, 84% were married, and 27% were illiterate. Saving credit program had membership fees ranging between Rs.2.00 - 10.00, upper limit of loan was Rs.7500.00, rate of interest was 12% per annum, period of repayment was 12-24 months, and only 89.7% respondents were regular in repayment. The greatest effect of saving credit programme was that there was an increase in monthly household income, 66% women converted their houses into permanent structures, husbands started looking after their wives during sickness, and the quality and quantity of family’s meal improved. There was a drastic change in social awareness and social status of women after the programme. In the pre-loan period, 52% did not participate in outdoor activities, but in the post loan period, the ratio of participation in outdoor activities rose to 79%. 82% husbands were the major decision-makers in pre-loan period; while in post loan period, 65% women shared in decision making. Only 2% respondents could interact with male members in the pre-loan period, whereas 95% women could interact with males in the post loan period. 21 out of 154 women had a right on husband’s income in the pre-loan period, whereas in the post loan period the number increased to 81. In pre-loan period, 97% women had no bank account and only 3% had a joint bank account, while in the post loan period 11% respondents had their individual account and 9% had joint accounts. Majority of the respondents felt that child marriage should be prohibited. In the pre-loan era, 6% women found ‘purdah’ (veiling) to be a barrier in economic activity of women, 8% believed dowry was a social evil, and 40% agreed that remarriage of women would upset society. In the
post-loan era, 44% women were against 'purdah' system, 90% were against dowry system, and 18% agreed for remarriage of women. 90% women felt that seats should be reserved for women in Government, only 17% were aware of various laws related to women, and 56% respondents felt that family responsibilities should be jointly shared. It could be concluded that Saving Credit Programme had a positive impact on society, and provided an informal source of finance, needed by the urban poor.
Deserted Women/ Divorced Women

All India Democratic Women’s Association, New Delhi. (2005). 

Key Words : 1.WOMEN WELFARE   2.MUSLIM LAWS   3.MUSLIM WOMEN   4.DIVORCE 5.MAINTENANCE.

Abstract : India has the largest Muslim population (18%) in the world after Indonesia. Muslim women in India can be said to be a discriminated minority community. Reforms in Muslim personal law are often opposed by sections within the community in the name of protection of minority identity. Reforms were demanded by women’s groups, activists and other liberal sections of society in consonance with the constitutional provisions of equality and non-discrimination on the grounds of sex. After the Shah Bano judgment given by the Supreme Court of India (1985) and the passing of the Muslim Women (Protection of Rights and Divorce) Act, 1986, the demand for a Uniform Civil Code was dropped by most progressive and liberal women’s organizations and groups, who then started emphasizing on reforms on various personal laws from within the community. They argued that the Shariat envisages gender equality, but had been deliberately misinterpreted by patriarchal and fundamentalist interests. The Muslim Personal Law (Shariat) Application Act, 1937 and the Dissolution of Muslim Marriage Act, 1939 were two important legislations which were passed during British rule. The Act recognized the right of Muslim Women to get divorce on various grounds, including cruelty, addressed or provided for by the Act. Mehr (a lump sum to be paid to a muslim woman in case of divorce), which is supposed to provide divorced women with some succour, is hardly ever paid to the women by their husbands. To ensure this, Muslim Women (Protection of Rights on Divorce) Act 1986 was passed. Under this Act, Muslim women continued to approach the courts for maintenance and for a ban on the unilateral form of divorce. The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) provides a comprehensive framework for challenging the various forces that have created and sustained discrimination based on sex. Since Article 5(a) of the CEDAW Convention asks all States to take appropriate measures to modify conduct to achieve “elimination of prejudices and customary and other practices which are based on the idea of the inferiority or superiority of either of the sexes or on stereo type rules for men and women” this stand has obvious implications for reform in women’s status in India, as the retention of the inferior status of women in the family is often justified in the name of culture and tradition. Women’s organizations and others interested in
Deserted Women/ Divorced Women

personal law reform have explored various possibilities to bring about progressive changes in personal laws and bring them in consonance with the provisions of the Indian Constitution and CEDAW. Women's groups again demanded change of the standard Nikahnama, in which all discriminatory provisions should be removed and all rights should be included. They have also suggested a law for compulsory registration of marriage and a civil law on domestic violence for separated and divorced women. Muslim Personal Law (MPL) in India is based on the Shariat and customs. While the Shariat Application Act abolished the use of customary law in some areas, customary practices continued to prevail in certain areas like adoption and making of wills. The manner in which MPL has been practiced in India has in significant ways been stated to be against the spirit of the Shariat and contrary to its basic tenets of equality and justice for women. The developments in MPL, along with other factors like socio-economic status, has helped maintain the subordinate status of muslim women in the family. The State has consistently held that any reform in personal laws must be at the initiative of the particular community it affects. Muslim women have, however, been able to find some democratic spaces in which they can fight for justice.


Key Words: 1. WOMEN WELFARE 2. DESERTED WOMEN 3. DESERTED WIVES 4. NRI MARRIAGES 5. PUNJAB.

Abstract: Many Indian women who enter into arranged marriages with non-resident Indians (NRIs) are led up the garden path by the husband's family who project rosy and misleading pictures about their income and status. The present study was undertaken to identify the motivating factors and social causes driving NRI boys and Indian girls to enter such marriages, find out the coping mechanisms of deserted women, and suggest strategies to protect deserted wives. Data was collected from 26 deserted women in 2 cities of Punjab namely Jalandhar and Hoshiarpur, through interviews and discussions. Out of the total sample of 26, most girls got married around 20 years of age. The age difference between boys and girls was 3-5 years and some times it was even 15 years. Out of the total sample, 37% girls and 35% boys were graduates, whereas only 11% girls were post graduates. Of the total 26 girls, 7 were working and the rest depended on their parents. Only one girl stayed with her in-laws, one had remarried, 2 were staying alone and the rest were staying with their parents. Out of 26 girls, 9 of them had one child, and 3 had 2 children. Most of the children were living with their mothers and only 2 children
were with their fathers and living abroad. There were many reasons why NRI grooms preferred such marriages. They got dowry, a holiday wife for the period they stayed in India, an unpaid maid to take care of his parents, and if sometimes the girl went abroad she worked as a maid for the groom and his foreigner wife and children. Girls wanted to marry NRIs because they felt that life would become glamorous with lots of money in a foreign country. According to parents/relatives of girls, dowry was the main reason for break up of the marriage. The girl suffered physical violence, mental torture and unreasonable demands made by the groom’s family. Boys and their relatives mentioned loose character of the girl, and the girl not being adjustable as the main reasons for the break up. Social awareness programmes to inform people of the different laws in foreign countries, and laws regarding marriage, divorce, custody of children, maintenance, etc. should be organized. People should also be made aware of the consequences of such marriages by highlighting the plight of these girls using all means of communication, particularly media.


Key Words: 1. WOMEN WELFARE 2. MUSLIM WOMEN 3. DIVORCED MUSLIM WOMEN 4. SEPARATED MUSLIM WOMEN 5. DIVORCED WOMEN 6. SEPARATED WOMEN 7. WEST BENGAL.

Abstract: Different religious communities are governed by different personal laws. Thus, Hindus, Muslims, Christians and Parsees are governed by different marriage and divorce laws. Muslim law is basically uncodified. The main objectives of the study were to know the family background and socio-economic condition of divorced/separated Muslim women; and explore the causes and situations which compel them for divorce or separation. The total population of divorced or separated women in rural and urban areas of Midnapore district was 6,552 in 1995-1996. 10 respondents each from four districts namely Panskuta, Keshpur, Midnapore Sadar and Kharagpur were chosen. About 49% respondents were illiterate to just literate; and only 4% female members from upper class Muslim families were studying. Many of the divorced and separated women were not able to earn anything (16%). Other women’s earnings ranged from Rs.500 to Rs.2500. Around 10% male members got married once; 57% respondents’ male partners married twice; 31% married three times and 2% married 4 times. In 78% cases, respondents were forced by their male partners to get divorce. 22% respondents willingly took separation from their
Deserted Women/ Divorced Women

former husbands. Reasons for divorce were extra marital affairs (20%); economic
crisis (22%); maladjustment with spouse (20%); and other reasons (12%). 78%
deserted or divorced women had not received any money or assets from their
husbands. In most cases, respondents got help from their parents (49%); 20% from
nearest friends; 25% from brothers and only 6% from neighbours. Children faced
many problems relating to the divorce and separation of their parents. The study
recommended postponement of the age of marriage through legal reformation,
compulsory education for muslim girl children, and preparing a situation based,
realistic, basic education system. Court marriage should be made compulsory under
the observation of any officer, and quota for vulnerable sections of women should
be sanctioned, to increase their political participation and for the betterment of
their life.

Problems in women-headed households resulting from desertion. Hyderabad :
Roda Mistry College of Social Work and Research Centre.  8 p.

Key Words : 1.WOMEN WELFARE  2.DESERTED WOMEN  3.FEMALE HEADED
HOUSEHOLD  4.PROBLEMS OF FEMALE HEADED HOUSEHOLD  5.ABANDONED WOMEN
6.REHABILITATION.

Abstract : According to NSSO (National Sample Survey Organisation) and
Sarvekshana reports, the percentage of women headed households in the country
has increased from 8.68% to 9.92% in urban areas and from 9.65% to 10.36% in
rural areas, in the period 1984 to 1988. This study was undertaken to examine the
socio-economic characteristics of deserted women, explore the reasons for
desertion, find out the problems faced by them, and the social support available to
them. The study was exploratory in nature and was conducted on 56 women headed
households in the cities of Hyderabad and Secunderabad. Data was collected
through interviews and home visits, which were made to study the home
environment. Findings indicated that the reasons for desertion varied and
overlapped, 16 women expressed their husband's inability to financially support the
family, 14 women stated alcoholism as the cause, 13 women were not able to satisfy
dowry demands, 10 women suspected their husbands had illicit relations, and 3
women were branded by their husbands as mentally disturbed. Some of the
emotional problems noticed in the deserted women were feelings of trauma (39%),
feelings of emptiness and loneliness (24%), feelings of fear, uncertainty and
insecurity (24%), and intense suicidal tendencies (7%). Almost all of them felt that
the deep scar would remain for ever, and held themselves solely responsible for
their condition. A large number of women respondents (87%) were the sole earners
in their households and their monthly income was below Rs.800, whereas the income of those with another family member working ranged from Rs.800 to Rs.1000 per month. Though they were forced to borrow small amounts from their employers during emergencies, resulting in small debts, the need to borrow large amounts had not yet arisen. Difficulties in bringing up children single handedly was expressed by almost all the respondents. The sponsorship programme for a single child was the only redeeming factor for them. With regard to children going to school, 64% were boys and 36% were girls. Most of the children who were not being sponsored for education did not attend school due to lack of financial resources (43%), particularly girls (57%) who helped the mother in the houses where they worked, and some were employed in petty jobs. Though almost 75% respondents received some help and protection from their parents, in-laws and neighbours at the time desertion, they however had to manage single handedly after moving into their own households. They felt that they were overloaded in their multiple roles, and the absence of a father figure had resulted in an atmosphere lacking in discipline, authority and undermining of their status as a mother. Hence, programmes should be initiated for the enhancement of living standards of deserted women. Also, counselling centres with trained social workers need to be established so that family breakdowns can be averted by timely action, and more short stay centres and homes should be established for women who need shelter during such crisis situations.


Key Words : 1. WOMEN WELFARE 2. DIVORCE 3. MUSLIM WOMEN.

Abstract : Divorced Muslim women are those whose talaq or release from marriage has occurred in the presence of legal authorities (maulana, maulvi, imam and court of law). Separated Muslim women are those who at present are living with their parents and do not have any connection with their husbands. The aim of the present study was to depict the present position of divorced and separated Muslim women belonging to gram panchayats in Bardhaman and Murshidabad districts of West Bengal, and thus trace out the system of divorce in operation and other factors responsible for such practices. In all, 67 divorced and 61 separated women were interviewed. In mate selection, parents preferred the working capacity or rather the good physique of the bridegroom, and the amount of property he had. Educational qualification was not a consideration. Age at marriage was extremely low - 41.83% in Murshidabad and 54.28% in Bardhaman got married in the age group of 10-15 years. Also, the practice of dowry was widely prevalent whatever be their socio-economic status. 78.13% respondents paid dowry in the gram panchayats
(village level meetings) of both the districts. Land, along with cash was an important mode of payment of dowry. Muslim women had to face the practice of arbitrary divorce. No husband waited for 3 menstrual cycles for the final pronouncement of *talaq* as specified in the *Quran*. The reasons for divorce were extra marital affair of husband, poor economic conditions of both parties and family quarrel. Other reasons were dowry, no issue, second marriage, and re-establishment of husband’s relations with estranged first wife. Only in 6.25% cases were the *Quranic* prescriptions regarding divorce followed. Local people were not aware of *Quranic* principles of *talaq*, 51% had taken divorce due to dowry. In some cases, divorce was taken against the will of the respondents. Some husbands moved the court and then informed the respondents that they had been divorced. Divorce was prevalent among low income groups (monthly income of Rs.600/- or less) and low status groups (rickshaw pullers, labourers, gardeners, etc.) 45% in Murshidabad and 54% in Bardhaman belonged to low social status. Also, only 2 women in the study got *mehr* (a lump sum of money to be given to the bride in case of divorce). Local people should be made aware of the tenets of *Quran* regarding *talaq*, *mehr*, etc. Women should be informed about their rights, so that they can be aware of legal options available to them, in case of arbitrating in divorce cases.


**Key Words**: 1. WOMEN WELFARE 2. DESERTED WOMEN 3. NRI MARRIAGES 4. DIVORCED WOMEN 5. ABANDONED WIVES 6. NRI WIVES 7. ANDHRA PRADESH 8. PUNJAB

**Abstract**: Desertion of women has been an issue in fora of women activists and NGOs for the past few decades. Their concern is for deserted women belonging to the lower strata of society. This study explored the problems of married women deserted by non-resident Indians (NRIs) in Andhra Pradesh and Punjab. Data could be collected only from 52 respondents from Andhra Pradesh and 50 respondents from Punjab, along with a few case studies. Around 8.8% respondents were below 20 years, and all the respondents in this age group were from Andhra Pradesh. All respondents from Punjab (100%) were Sikh/Punjabi. In Andhra Pradesh 35 respondents were Hindus, 14 were Muslims, and a negligible number, 3, were Christians. Among the Muslim respondents 6 were deserted by Arabs. Nearly half the respondents (48%) were graduates and above. Only 18% respondents had education up to primary level and they were all Muslim girls. In Punjab, 70.6% of respondents were educated upto Standard XII, and 38% were graduates and post
graduates. 41.2% respondents were housewives, and 15.7% were students. In Punjab, 12.7% respondents were undergoing some vocational training in order to become self-reliant. Nearly 11 respondents in Andhra Pradesh were working as professionals. Nearly 75% of the husbands from Andhra Pradesh were professionals (IT and Management). A majority of NRI marriages were proposed by relatives in Punjab (45 cases), while in Andhra Pradesh, marriages were proposed by relatives/ friends. About 50% parents made an enquiry about the groom, his employment and other status before marriage. Nearly 8% respondents paid Rs.0.6 - Rs.1 million cash as dowry. They also gave gold jewelry, household articles, furniture, vehicles, landed property and a lump sum amount of cash and gifts to family members. Nearly 90% respondents stated that after marriage, within days to months, their in-laws started demanding more dowry and harassed the girls. Among the respondents from Punjab, a large number (86%) did not seek any counselling before divorce/ separation as against 14% who sought counselling. About 73.5% respondents had filed FIRs and Court cases. It was recommended that registration of FIRs should be made mandatory in cases of desertion. It should also be ensured that no name of any accused person is deleted from the FIR. The Indian Government should enter into a bilateral agreement with countries having a large Indian diaspora to take criminal action against offenders on the basis of reciprocity, especially Section 44A of CrPC and Section 3 of Maintenance Orders Enforcement Act of 1921. Ex-parte divorces taken by NRIs from courts abroad should not be recognized as legally binding in India. Rehabilitation and support services should be provided to deserted women such as shelter homes, legal aid, vocational/ skill training, etc. Counselling centres in police stations should provide support to the victims.


Key Words: 1. WOMEN WELFARE 2. DESERTED WOMEN 3. NRI 4. NON RESIDENT INDIANS 5. CASE STUDIES 6. ATROCITIES ON WOMEN 7. WIFE BATTERING 8. DESERTED MARRIED WOMEN 9. DESERTED WOMEN 10. WIFE ABUSE.

Abstract: The present study was conducted by the Department of Women’s Studies, Sri Padmavati Mahila Visvavidyalayam, Tirupati. The aim was to identify the factors leading to the desertion of women by NRIs; to analyze the legal aspects regarding relief and rehabilitation needs of deserted women, in terms of psychological counselling, economic support, legal aid, social support, medical aid, etc; to suggest suitable immigration policies to curb such fraudulent marriages and the dowry system; gender sensitization; to suggest legal measures for protection of
married women and role of parents. Married women of Andhra Pradesh who were deserted by NRIs constituted the sample of the study. Data was collected by purposive sampling procedure from Family Courts in Hyderabad, Vijaywada and Guntur Civil Court, which represented the coastal Andhra region. An interview schedule, mailed questionnaire and case study methods were employed. Most women got married above the legal age of marriage. More than 75% males married after 25 years, while 23% of them married when they were between 21-25 years. More than 80% women had below one month gap between the betrothal and marriage. About 60% of them were Hindus, followed by 28% Muslims and 12% Christians. Around 80% respondents reported that their parents were the persons who took the decisions regarding marriage. Around 60% of them said that they saw their spouse only once when they came to see the girls. About 87% of them reported that there was no mediation between them before desertion. Nearly 33% of the respondents reported that they did not have any knowledge about the procedures to be followed for their visit and stay abroad. Some of the recommendations were to get speedy judgment in cases filed for maintenance and divorce; to get back the dowry given; promotion of self employment among women; provision of Legal Aid Cells in all district headquarters; establishment of rehabilitation centers abroad; better communication and collaboration between legal systems in India and USA; and education among the community regarding H4 dependent visas.
Displaced Women/ Evicted Women


Abstract : Displacement has different implications for men, women and children. It has different consequences for the various classes and sections of the displaced community. The vital concern of this study was to examine and understand the problem of gender inequality that added to the plight of women and girls as refugees. A total of 500 people including 391 women and 109 girl children were contacted in their places of location - camps/ tents, homes of relatives, short stay homes and orphanages. Women were particularly affected as many of their problems were because of their gender. Women respondents also considered that the present system of aid assessment and assistance was rather discriminatory against women due to the existing differences in providing monthly allowance. Another major problem specific to displaced women was sanitation. Lack of toilet facilities was inconvenient and made women physically unhealthy and uncomfortable; it also made them more vulnerable to physical and sexual harassment. Almost all women faced problems in the upbringing of their children due to lack of financial resources. Most women had cordial relationships with their husband/ in-laws. They felt that the Government should have a special policy for displaced women and children, so that they could become economically independent. Recreational facilities like library, reading room, playground or parks have not been provided by the authorities in resettlement areas. Most of the girls never reacted against the discrimination within families. While distributing agricultural land, plots for houses, and cash, the same should be done in the form of a joint patta in the names of both, the husband and wife. At the policy or programme level, there should be more stability and similarity in the rehabilitation process. The measures towards self-reliance can be encouraged cautiously after a careful assessment of programme evaluation. Only 15.3% women accepted that after displacement their personal life had improved; 18% believed that family life had improved. Both, women and girls have repeatedly complained against the presence of liquor shops in their areas. There is need to provide more transport and medical clinics with regular medical staff in the area. In the rehabilitation programme, loan facility or financial support for establishing new
businesses and house construction for the oustee families at minimal rates of interest should be provided. There is a need to explore the means of establishing self-sufficient health care units which are administered by the refugee community itself.


Key Words : 1.WOMEN WELFARE  2.DISPLACED WOMEN  3.EVICTED WOMEN  4.REHABILITATION SLUM WOMEN  5.MUMBAI  6.MAHARASHTRA.

Abstract : Involuntary resettlement refers to the movement of populations when the choice to remain in a place is not granted. The existing debates on resettlement of slums in Mumbai have a long history. CEHAT conducted a research study on the impact of economic change on the work, health and living environment of women in this area in 1999-2000. The objective of the study was to assess whether any displacement took place which resulted in the violation of human rights of the population and was unacceptable, and to assess the extent to which a community is empowered to make improvements in its standard of living. The specific focus of the study was the households which were relocated from Rafique Nagar in Jari Mari, Kurla (West) to Shantiniketan, Goregaon. Respondents from a total of 474 households were interviewed. Women and children (10-14 years old) were selected from the households; adolescents (16-18 year olds), girls from a school run by an NGO Sahyog, and adolescent boys who were siblings of the Sahyog students were selected. Around 76.8% were Muslims; 20.7% were Hindus and rest were from other communities. Majority of the respondents (59.9%) were in the age group 25-45 years. Nearly 47.7% did not have any education and 6.1% had studied till college. Marital status of respondents was married (87.3%); unmarried (5.3%); and separated (1.5%). During the shifting from Rafique Nagar to Shantiniketan colony, each household was asked to break down their own homes within three days. During the shifting 12% families got separated. As their places of work were near their previous location, most faced a drop in income. Women took up several forms of home-based production to add to the household income. Apart from mental stress, the minute work took a toll on their eyesight, and their girls' health. Around 97% women and 1.5% men were engaged in home-based piece work. Nearly 16.1% women were employed as domestic workers out of whom 57.6% travelled to Jari Mari for work. 27.3% people had no fixed area of work; and 23.6% worked in big factories, Government offices, construction companies, etc. Many children were forced to
work after the resettlement. Only 26.5% had done birth registration of their children, but there was no registration for antenatal care. Nearly 41% women reported some health problem for themselves or their babies following delivery or abortion. 50.4% households were found to have at least one member suffering from a chronic illness. Nearly 65% children of Rafique Nagar from the pre-school to the high school category had been enrolled in some form of educational institution in Jari Mari, and of these nearly 75% - 82% were in the age group of 5-14 years. Data indicated that girls are at a greater disadvantage in seeking admission to schools in the new place. The problem was mainly with the administration of the school system (42.6%), and 35.2% were admission related factors. Nearly 79% children who dropped out were in Classes 7 to 10. The reason for dropping out from school for boys (29.4%) and girls (21.2%) was financial problems. It can be concluded from the study that resettlement is associated with economic hardship, disturbance of social fabric and psychological trauma. There is need for a wider debate on development based displacement that includes involuntary resettlement in the urban context. Transparency in dealings and information regarding entitlements and rights also need to be made available to communities so that they can negotiate effectively and safeguard their interests.


**Key Words**: 1. WOMEN WELFARE 2. DISPLACED WOMEN 3. REHABILITATION OF DISPLACED WOMEN 4. PARTICIPATION OF WOMEN 5. VIOLENCE AGAINST WOMEN 6. COMMUNITY INVOLVEMENT 7. MOVEMENTS 8. WOMEN’S MOVEMENTS.

**Abstract**: The study was conducted by National Commission for Women to find out the adverse effects of displacement of people from their original place of habitation due to large-scale land acquisition; to find out the economic, social and environmental problems faced by displaced people; and to know the severity of problems due to multipurpose dam projects. India’s development programmes have caused the displacement of approximately 20 million people over roughly four decades, but as many as 75% of these people have not been rehabilitated. A significant number among the displaced people are tribals and other economically marginalized rural people, who depended on the natural resource base for their livelihood. The tenancy land owners whose lands are being acquired by development projects are entitled to cash compensation at market prices as per the legal instruments such as Land Acquisition Act, 1984 and Coal Mining Bearing Act, 1957. Different State Governments and Central Ministries have followed different
policies on resettlement and rehabilitation in the absence of a National Resettlement and Rehabilitation Policy. Only recently have the links between gender, poverty and development induced displacement come to be recognized. In the policy revision process, the World Bank took no proactive steps to address the issues of gender, or try to improve the status or rights of displaced women. Whenever there is unemployment arising out of displacement and jobs are scarce, women are the first ones to lose. This is not only because they lack skills, but more so because they have to make way for men. It has been observed that most tribal communities are patriarchal, but compared to mainstream society, they allow greater freedom to women. In the eligibility for R and R (resettlement and rehabilitation) benefits, women should be treated at par with their male counterparts. House and land should be allotted and registered in joint names. Ministries or Departments of the Central or State Governments undertaking projects that displace people should amend their existing R and R policies to ensure payment of R and R benefits in the form of cash in the joint names of female and male heads of households. Sanitation facilities in resettlement colonies must be provided, and better educational facilities should be given to the children of disabled persons.
Domestic Violence


Key Words: 1. WOMEN WELFARE  2. VIOLENCE AGAINST WOMEN  3. DOMESTIC VIOLENCE  4. HEALTH  5. STRESS  6. PHYSICAL HEALTH  7. MENTAL HEALTH  8. CRIME AGAINST WOMEN CELLS  9. POLICE CELLS FOR WOMEN  10. IMPACT OF DOMESTIC VIOLENCE.

Abstract: The concepts studied in the present research on domestic violence were stress measured as daily hassles, and health. Domestic violence ranged in frequency and intensity. The British Medical Association further categorized domestic violence into physical violence, sexual abuse, psychological abuse and emotional abuse. In 1993, the World Bank estimated that domestic violence accounted for at least 5% of the health problems of women in the developed countries and 20% in developing nations. 280 women with mean age of 38.5 years were given inventories. Nearly 50% women were unaware of the laws protecting women from violence. 100% women agreed that they had been a victim of domestic violence. 60% were verbally abused by husbands in the presence of others for not following his instructions. 67.5% women cried and prayed when their husbands were violent. 65.5% women worried about their children when their husbands became abusive. 52.5% reported that financial independence would reduce the violence. 42% reported that they stayed in the marriage for the sake of their children. Women victims reported more stress as compared to the non-victimized group. Women reported more stress along with more health symptoms. A significant relation was found between daily hassles and health of the victimized and the non-victimized group. A victim of domestic violence would experience even routine tasks such as daily chores and child care as insurmountable mainly because of fatigue, chronic headaches, infections or depression. Men should overcome patriarchal beliefs and get involved in the process of establishing gender equity. The research design was too simplistic, other variables could be included. Future research could examine traditional gender role beliefs from different economic, social and religious strata of society.

Key Words: 1. WOMEN WELFARE  2. DOMESTIC VIOLENCE  3. SELF HELP GROUPS  4. ROLE OF SELF HELP GROUPS.

Abstract: The issue of domestic violence or violence within the family exists in all forms and is related to two institutions namely marriage and family which cannot be intruded upon by the state or judiciary beyond a limit. At present, self help groups (SHGs) have emerged as the most widespread women's organization at the grassroots level. The present study explored the usefulness of SHGs to tackle the issue of domestic violence. The study encompassed the metropolitan, urban, rural and tribal areas of Maharashtra, and gathered first hand information from 42 victims of domestic violence. Findings revealed that domestic violence was mostly committed against young women. The main reasons behind marital problems and subsequent domestic violence were the practice of early marriage, unequal power relationships in the matrimonial family, poverty, husband's alcohol addiction, greedy in-laws, lack of education and access to resources. Domestic violence was reported across all communities and almost all the cases belonged to poor households, however, it was relatively higher in Muslim families. In most cases, initially women suffered violence patiently and reported it to their parents or neighbours only when it became unbearable. Only in extreme cases were marriages dissolved, or the incidents reported to the police, as the affected women did not want to break the marriage due to its traumatic impact on the children and their subsequent separation from parents. The first and foremost resort of the affected women was their parent’s place, followed by sister's or brother's homes. The incidence of using women's shelter homes was nil. Some community based organizations such as SHGs were also observed to be wielding considerable influence. The various tasks undertaken by SHGs included arbitration in domestic quarrels and disputes, pressurizing the perpetrators to stop violence, counselling, assistance in seeking police support, facilitation of legal action and providing moral and motivational support to the victim. Although SHGs were best placed to address the issues of domestic violence, but their potential was not fully realized as the members were not equipped with knowledge about women's rights and legal provisions, were unable to provide shelter and security to the victim, and the promoting NGOs did not necessarily build their capacity in this regard. Hence, in order to make SHGs competent to handle the issues of domestic violence, it is essential that the
promoting NGOs impart proper education and build their capacity. Also, a special fund for helping women in distress is necessary, and shelter facilities are warranted at the community level. Campaigns to end domestic violence need to keep SHGs at the forefront of action and the SHG leaders can be trained as ‘Community Counsellors’ and ‘Barefoot Lawyers’.

A Study on the psychosocial circumstances in the family life and environment of married women victims in the reported cases of family violence in Delhi and Kolkata Metropolis. New Delhi: National Institute of Criminology and Forensic Science. 158 p.


Abstract: The term ‘domestic violence’ refers to a self contradictory incident in civilized, modern social life. The venue of domestic violence is the victim's family environment, where a powerful family member expresses atrocity on a helpless, dependent and powerless family member. The aim of the present study was to understand why family violence takes place and affects mainly married women, and whether the causes are universal. Purposive sampling method was used to identify the respondents. A homogenous group of victims belonging to two sub-groups of two different sub-cultures were selected. Out of them in Delhi only 20 and in Kolkata 30 cases were excluded on technical grounds applicable to undisposed cases. Around 180 victimised daughters-in-law from Delhi and Kolkata were divided into two sub-groups city-wise comprising 90 victimised daughters-in-laws from each metropolis. The victims belonged to higher middle economic class and lower middle economic class. In the Indian context, the family sub-culture had a parochial attitude and the daughter-in-law was expected to fulfill certain obligations and duties. Altogether, there were 79 cases where married women were maltreated and victimised for non-payment of promised dowry and other gifts, and subjected to physical and mental torture. Data was gathered using Family Violence Data Recording Inventory Scoring Schedule (FVDR) which had two modes. Around 130 victims perceived and described their in-law families as middle economic class, greedy, boastful and highly prejudiced, while another 50 victims perceived and described the status of their in-law families as hazy and unstable income class, greedy, pressurizing for gifts, ill-
reputed, highly prejudiced, boastful, ill-tempered and having women oppressors. 80 victims experienced ill-treatment by their in-laws before marriage, while 108 victims experienced ill-treatment after their marriage. In both modes boastfulness was found common with ill-temper or bad manners, while notoriety for women's oppression was found present in one of the modes. In 50 cases in Delhi and 40 cases in Kolkata, socio-cultural influences were different in their pre- and post-marital family environment. All victims, who were respondents, were not allowed to spend money for personal requirements from the family fund. Negotiations during marriage and conventional dowry payment was still present in 105 families, and of them 40 families failed to meet their commitments, while the rest 65 fulfilled the requirements. Significant differences were observed between the informants who were brought up and spent their married life in Delhi and Kolkata. Lack of economic self-sufficiency, devaluation of the self-esteem of daughters-in-law, no guarantee to get an oppression-free social life, fear of sexual exploitation, and other social insecurities were mentioned in Delhi. Education of women, with competence-based vocational training for them, must be made compulsory. Each and every adolescent girl student must be made aware of the essential ethics of conjugal life and cohabitation. For the criminal part of domestic violence, legal support for the victim and help for punishing the abuser are essentially required.


Key Words: 1. WOMEN WELFARE 2. DOMESTIC VIOLENCE 3. VIOLENCE AGAINST WOMEN 4. LOK ADALATS 5. NARI ADALAT 6. MAHILA PANCHAYAT 7. MAHILA SAMAKHYA PROGRAMME 8. BARODA 9. GUJARAT.

Abstract: In India, politicization of domestic violence as a public issue gained strength largely through the Indian women's movement. There was a difference in the nature of mobilization by women's groups in rural and urban areas. Gujarat ranked sixth among the low poverty states in India, with only 18% of the population below the poverty line in 1987-88. The age at marriage was high (20 years), and a fairly high percentage of girls (68%) aged 6-14 years were attending school. The sex ratio in Gujarat declined over the last decade from 934 to 921. The child sex ratio 0-6 years has fallen sharply from 928 to 878 in the last decade. Female literacy rate was 58.6%. Female work participation rates in urban Gujarat are far lower compared to rural areas. In 2000, studies show that anywhere from 40% to 75% of married women have reported partner violence, and 24% to 64% women seek help from women's groups. Registered crimes against women (CAW) have shown an
Domestic Violence

increase of 8.4% between 1997 and 1998 and 3.3% between 1998 and 1999. The Crime in India report 1999 showed that presently 2 out of every 10 crimes committed were crimes against women. The International Center for Research on Women (ICRW) and Mahila Samakhya (MS) program in Gujarat decided to initiate the documentation and impact assessment of innovative community level responses to domestic violence. Women did try to raise issues of domestic violence and sexual harassment in sangha (group) meetings, but there was fear and hesitation about discussing these issues openly. Women said that our men will not even allow us to come to this forum if we call ourselves the Nari Adalat (Women's Court). Reported cases of dowry have risen from 63 in 1993 to 94 in 1999. Nari Adalat and Mahila Panch are community level responses to violence against women. The police formed a more significant constituency, as threat of police action is a major strategy used to pressurize perpetrators.


Abstract : Domestic violence is a pervasive problem in India that cuts across age, education, social class and religion. The study explored variations in masculinities and domestic violence across regions and demographic variables, including caste, age, socio-economic status, education, employment and even sexual orientation. The study covered 3 states, namely Punjab (n=250 males), Tamil Nadu (n=235 married men), Rajasthan (n=486 married men), and Delhi (n=40 married men) was also added to provide a sample of men who have sex with men (MSM, n=114). Findings indicated that men from all regions surveyed agreed that certain characteristics including physical appearance, conduct, responsibilities and sexuality were markers of masculinity. Around 98% men agreed with their 3 major responsibilities. Key roles that were identified were having children (procreator role), earning money (provider role) and protecting the family (protector role). Men strongly correlated masculinity with being married, being sexually faithful and having the ability to satisfy the wife/ partner. There was no demographic variation in this. Around 85% men reported engaging in at least one violent behaviour (control behaviour, emotional, sexual and physical violence) in the past 12 months. The most common violent behaviours were slapping and hitting, forced sex, shouting, etc., and overall 24.7% men reported all forms of violence. Violence was more prevalent among lower
Domestic violence is defined as all actions against the wife (victim) by her present husband (perpetrator) that threaten the life, body, psychological integrity and restrict her liberty. The present study aimed to identify the health consequences of domestic violence (DV) on the victims, and identify appropriate strategies to reduce occurrence of DV. All married women in the reproductive age group of 15-45 years staying with their husbands in one of the slum areas of Ahmedabad formed the universe of the study. The total number of respondents was 400 and the number of survivors were 268 or 67%. Nearly 34.70% survivors suffered from verbal and physical abuse. Nearly 70.59% survivors were from joint families and 65.77% survivors were from nuclear families, suggesting that DV cuts across all family types. There was no major difference in the abuse pattern amongst Hindus (68.78% victimization) and Muslims (66.03% victimization). The percentage of survivors were found to be high in lower age groups (71.90% among 18 to 27 years) than the older age groups (58.33% in 38 to 45 years). The reasons given were...
that men mellow down with age, and children grow up so men find it embarrassing to beat their wives. 72.51% wife abusers were in the age group of 30 to 39 years, and most non-victim husbands were in the later age group of 50+. 70.94% survivors were illiterate, whereas non-victims were better educated. Illiteracy was a major hindrance which crippled survivors, as they believed that whatever happened to them was fate. Even husbands who did not abuse their wives were comparatively better educated. 71.26% husbands of survivors were illiterate. Daily wagers showed highest victimization rate of 78.05%. 66.13% survivors were home makers. Husbands of home makers believed that they enjoyed themselves at home by taking rest. Self-employed women had least victimization (53.57%). They were mostly engaged in home-based activities like kite-making, quilt-making, etc. Unemployed men showed lesser abuse rate (58.82%) as women earned and managed the family. Women living in nuclear families enjoyed more decision making power than in joint families. Neither could women say no to physical relations with husband, nor could they decide on adoption of family planning methods. DV resulted in traumatic physical and mental consequences. Severely battered women had typical injury patterns which included cut on the scalp, on the palm and on the hands. Few even complained of partial loss of hearing and vision after being hit on sensory organs. Minor lacerations and bruises, blood clotting, swelling, blue body, dark circles around eyes were spotted among those who were battered. Women who were sexually harassed suffered from vaginal infections and menstrual problems. Abuse led to a host of psychological problems. Women complained of restlessness and uneasiness which persisted even if their husbands were not around. Violence resulted in mood disorders (80.22% suffered from depression), eating and sleeping disorders. Only 12.13% of the victims went to the doctor in the aftermath of violence. Gender sensitivity training programmes need to be started to change the attitude of men. Counselling centres should be started to address the mental health needs of victims of DV. Self employment programmes need to be started for women.


Key Words : 1.WOMEN WELFARE 2.DOMESTIC VIOLENCE 3.VIOLENCE AGAINST WOMEN 4.FAMILY VIOLENCE 5.MEN’S PERSPECTIVE 6.OPINION OF MEN.

Abstract : Violence against women occurs in several forms including intimate partner violence, sexual harassment, sexual assault, forced prostitution and rape. The most pervasive form of violence against women is abuse by husband or intimate
male partner. Out of 130 households in one of the slums of Ahmedabad, 120 households were surveyed. A detailed questionnaire was used to elicit the responses of men and women perpetrators and non-perpetrators. The survey revealed 27 perpetrators and 93 non-perpetrators of DV. Most men respondents hardly ever thought of what their wives did for their family. Even though 45% women worked, 44.20% husbands saw no change in the role that the wife played on the home front. Husbands of home makers were unwilling to let their wives work, as they felt threatened with the idea of their wives working. 35% men whose wives worked, said that wives took decisions about household matters, followed by matters of child rearing and the children's education. Only 8% men said that their wives took financial decisions too. 92% wives had no say in money matters, even though 45% wives earned. 44.20% male respondents admitted that they did not believe in gender equality. Even most perpetrators did not consider men and women equal. 7.5% respondents approved of wife beating. Nearly 33% perpetrators disapproved of wife beating, but at the same time indulged in it. Those who did not approve of spousal violence said that a wife performs multiple roles that need to be appreciated. Wife beating would indirectly affect other family members, and could also result in heavy medical expenses, if she got injured in the process. Humiliation of battered women was never provided as a reason or consequence for disapproving of this form of violence. Nearly 74.20% respondents were aware of the physical impact of battering like injury, body pain and weakness. 89% of the perpetrators were also aware that wife beating is illegal and severely punishable. 66.70% respondents seemed aware that the prevalence of domestic violence (DV) adversely affected children in the family. 91 men in the study held alcohol addiction as the main culprit for DV. 37.10% men blamed alcohol addiction followed by economic stress (24.20%) as a reason for abuse. 66.70% respondents disapproved of wives turning to the justice system for help. Most respondents said that they had to raise their hand on the wife as they did not fulfill the duties of being a good housewife. Some respondents felt that the wife's attitude towards the husband was annoying such as her rudeness, denial of sex and her suspicious nature. Most respondents felt that help was always available for DV, primarily through relatives and neighbours. 14% respondents reported that if the matter turned serious it was taken to the Panch (village elders) for a solution. 3.30% men said that police was approached in some cases, but they played no preventive role. 81.50% perpetrators felt the need to stop DV. A multi-pronged approach involving family members, community, police, health care centres and education system needs to be adopted to make a difference. Gender sensitization training through broad-based campaigns seems to be an urgent need. Women's groups need to be organised to combat DV. Standardized interviewing procedures in health and hospital settings could help in better identification of abuse cases. To prevent abuse, counselling centres for couples are needed.

Key Words: 1. WOMEN WELFARE 2. DOMESTIC VIOLENCE 3. JUDICIAL SYSTEM 4. ENFORCEMENT MACHINERY 5. ROLE OF NGOs 6. BEST PRACTICE 7. LEGAL PROBLEMS 8. VIOLENCE AGAINST WOMEN 9. DOWRY DEATH.

Abstract: The study was undertaken in 2000 to assess patterns and trends of domestic violence in India and examine Government and Non-Governmental responses to domestic violence, so that appropriate measures can be identified. It covered 13 districts of Madhya Pradesh and 18 districts of Maharashtra. A cross-sectional survey was conducted, and unstructured interviews were used to gather information from government officials, representatives of NGOs, members of legal profession, etc. Results showed that from 1983, the Criminal Law Amendment Act and the enactment of Section 498A had special significance in dealing with violence against women in their homes. Police intervention was crucially important in determining the outcome of a case of domestic violence because flawed investigation weakens a women's case. Another problem was that battered women were unaware of their legal rights. Women's Police Stations and Police Counselling Cells had inadequate infrastructure and its staff lacked proper training and exposure. Women's Vigilance Committees were more active to protect the interests of women victims in some districts of Maharashtra, but judicial bodies were not successful in providing justice to battered women. Family courts ensured quick delivery of justice, and high recovery rates of maintenance for women. It was found that safe alternative shelter was an important requirement of women seeking escape from violence in homes. Vocational training of women in rehabilitation centres was restricted to traditional crafts like sewing, tailoring and knitting, but no systematic efforts were made to rehabilitate women economically. It was suggested that there is a need to modify and make some changes in economic and social rights granted to women by our Constitution. Strategies to create awareness about domestic violence should be more focussed, and society at large should be sensitised through information dissemination and training programmes. There is an urgent need to broaden the definition of domestic violence to include all forms of abuse namely, physical, mental, emotional, etc. It was recommended that different programmes for economic rehabilitation of women should be started. Measures like secondary schooling, autonomy in terms of access and control of resources, and delayed marriages can play an important role in decreasing women's sense of powerlessness and in protecting them from marital violence. These measures need to be strengthened.
Domestic Violence


Key Words: 1. WOMEN WELFARE 2. DOMESTIC VIOLENCE 3. WOMEN RIGHTS 4. PROPERTY RIGHTS 5. Dowry Harassment 6. FAMILY VIOLENCE 7. STRATEGY FOR PREVENTION 8. RIGHTS APPROACH 9. KERALA.

Abstract: Domestic violence against women is increasingly viewed as a serious violation of human rights subject to legal intervention. The study was an attempt to provide a framework for the prevention of domestic violence adopting an informed rights-based strategy in Kerala. The study covered 500 households: 300 rural and 200 urban; comprising 502 women: 302 rural and 200 urban women, between 15-49 years of age. Female investigators collected information on the extent of violence prevalent and social support measures. The average age of women respondents was 33 years and the average duration of marriage was 12 years. 95% men and women were literates. Approximately 66% women were employed outside compared to 7% men. 35.7% women reported physical violence at least once in their married life, and 64.9% reported psychological harassment. Both, physical and psychological violence were higher in rural areas compared to urban areas. Of the 443 women in the survey, 29% women (127 women) experienced slapping, kicking, hitting or forced sex during the last 12 months. Half of the women (218 women) had been subjected to any one of the psychological abuses in the last 12 months. 36% (46 women) experienced four of these five behaviours, and 58% (74) experienced at least two of these behaviours. Dowry harassment was reported by 29.7% women: 38.7% in rural and 16.0% in urban areas respectively. It was found that women in rural areas were more likely to report dowry demand compared to women in urban areas (57% and 33%). Due to dowry related problems, 149 women were ill-treated. Of them, 46% were beaten, 46% threatened, 13% sent back to their natal homes, and 21% were treated like servants. Overall 36% women reported experiencing at least one of the forms of physical violence at least once in their married life, and 64% women reported psychological violence. Reasons given for subjecting women to violence were that they did not look after children properly (78%), did not cook properly (54%), did not attend to the household properly (72%), etc. Nearly 21% women attributed the violence to infidelity. Lower the age of the woman (15-24 years) and lower the duration of marriage (less than 7 years), higher was the lifetime experience of physical and psychological violence among women. Around 45.6% women reported no social support from any source, and the greater social support a woman received, the less likely was she to be subjected to any kind of violence. A
majority of the women (66%) did not have the title deed to either land or house in their name. Most of the women (51.6%) reported that their husbands drank at least occasionally over the past one year, whereas 48.4% reported that their husbands were teetotallers. Harsh childhood punishment experienced by women was found to be high in rural areas compared to urban areas (64.6% and 44%). The strongest predictor that reduces domestic violence was found to be ownership of property by a woman. No significant association was found between women's education and their experience of violence. The study suggests that 'right to housing' and 'right to property and inheritance' are most fundamental for prevention of domestic violence. Empowerment of women is the key to prevent gender-based violence. Social support networks, especially of the natal family, neighbours, NGOs, and Self Help Groups (SHGs), etc. can help in changing attitudes, and also help women acquire immovable assets. Prevention of domestic violence at the national level depends on the level of public and government commitment to make prevention a long term priority, and to establish a consistent, coordinated and integrated approach for each community. Given the pervasiveness and harms of domestic violence, a national policy of zero tolerance for domestic violence is necessary.


Key Words: 1.WOMEN WELFARE 2.WIFE BATTERING 3.DOMESTIC VIOLENCE 4.FAMILY VIOLENCE 5.SLUMS VARANASI 6.CAUSES OF WIFE BATTERING 7.NATURE OF VIOLENCE 8.SLUMS 9.DOMESTIC WORKERS 10.SLUM WOMEN 11.VARANASI.

Abstract: Wife abuse is not a recent phenomenon. Its roots can be traced to the remote past. The National Family Health Survey (NFHS) II of India (1998-99) reported that 50% of women in India accepted at least one reason for wife-beating. About 40% women justified beating for neglecting the house or children; 7% for not paying the expected dowry; and 25-37% for some other reason. Out of 209 slums in Varanasi only one slum was selected for the present study. The total population of the basti was 1,188 and from the total number of women, 20 cases were taken up randomly for an in-depth study. 80% women experienced the first incidence of violence within 2 years of their marriage, 10% experienced between 4-5 years of marriage, while 10% did not experience any kind of physical violence. 70% reported that alcoholism was the major reason for wife battering. About 90% respondents believed that poverty was the reason behind their husband's aggressive behaviour, while 10% of them were uncertain about the reason for battering. Only 20% women
reported sexual jealousy to be the cause of violence. Almost all the women claimed that their husbands took good care of them during pregnancy. Dowry was reported to be a cause of marital violence in 40% cases. 30% respondents faced violent behaviour on other issues. 69% women sustained severe injuries due to beating. It was found that women suffered varying degrees of physical as well as psychological violence by their husbands. The process of sensitizing men on the issue of domestic violence should start from early childhood itself. There should be at least one shelter home in every city. Indigenous arbitration bodies like mahila mandals, self help groups, etc. should be formed in each locality to combat the problem of domestic violence locally.


Key Words: 1. WOMEN WELFARE 2. DOMESTIC VIOLENCE.

Abstract: This explorative study was conducted in Savli Taluka of Vadodara district in 2000, to study the perceptions of the community members on domestic violence; and to assess the views of community members regarding the extent of prevalence of domestic violence. A sample of 291 ever-married men and women, in the age group 18 years and above was taken. Focus group discussions, in-depth interviews and surveys were also conducted. Results showed that 95% respondents were Hindus and 5% were Muslims. 66% couples did not have privacy at night. They shared their room with their children or other members of the family. 23% respondents regularly visited temple/mosque and watched T.V. 64% husbands smoked and 9% consumed alcohol regularly. 66% females perceived the prevalence of verbal harassment occurring in the community as high as 90% and 65% males considered it as low as 20% or less. It was found that 88% males and 99% females mentioned wife as the main victim of domestic violence, whereas 77% males and 40% females felt that husbands were also victims of domestic violence. 96% males reported wife as the perpetrator of violence, while 73% females reported husband as the perpetrator. 87% males and 30% females reported slapping and beating with hands, kicking, punching and attacking to be the common forms of physical harassment. 79% males and 72% females reported mental torture also. 84% males and 74% females gave reasons for domestic violence like not preparing food on time, assigned task not being done by the wife on time, etc. 70% females and 53% males said that the husband’s habit of smoking, drinking and gambling were the major causes for domestic violence. 68% males and 35% females felt that it was justified to scold the wife if the husband suspected her of being unfaithful; whereas 58% females and 46% males felt that it was justified to scold the wife if she did not
Domestic Violence

cook the food properly. 81% males reported that women cried and sat in a corner of the house in case of physical harassment. 13% females mentioned that the victims died or committed suicide. It was suggested that there is need to set up some organisations to help women when the need arises. The formation of women’s support groups is also essential to provide timely and continued support to women.

Society for Promotion of Art, Culture, Education and Environmental Excellence (SPACE), Gangtok, Sikkim. (2002).


Key Words : 1.WOMEN WELFARE 2.DOMESTIC VIOLENCE 3.DOMESTIC VIOLENCE SIKKIM 4.VIOLENCE AGAINST WOMEN 5.CASE STUDIES 6.GENDER DISCRIMINATION 7.ATROCITIES ON WOMEN 8.NORTH EAST WOMEN 9.SIKKIM.

Abstract : Domestic violence is widely prevalent in Sikkim. The study was conducted by SPACE with the objective of gathering inputs from government and non-governmental representatives, media person and social workers, etc. Namchi, Geyzing, Gangtok and Mangan towns were selected for data collection. The main objective was to explore the causes of domestic violence (DV)/ violence against women (VAW) in the state of Sikkim. In Sikkim there were 42% men and 58% women. The tradition of dowry is in vogue in Sikkim, but its implications are not as severe as among the communities elsewhere in India, wherein daughters-in-law have to pay with their lives for their inability to satiate their in-laws desire for dowry. Only two cases of trafficking have been recorded so far. Victims of VAW and DV prefer to remain silent about their individual suffering since they believe that disclosing their woeful fate to others will only invite censure and ridicule instead of help from any quarter. Almost 98% of the respondents admitted, in varying degrees, that they were aware of one or the other kind of VAW and DV perpetrated in society. 50% respondents reported about wife battering by husbands under the effect of alcohol, or polygamous desire to bring home another wife, or jealousy and distrust, and so on. Almost 4.8% of the violence and battering was committed by in-laws mostly with the tacit approval of the victim’s husband. Cases of adultery, murder, rape, incest, etc. are not unheard of in Sikkim. All the respondents were themselves victims of verbal abuse by their in-laws, husbands, offspring, and people in general, to varying degrees. Compared to the other districts, the extreme northern district revealed lesser degree of VAW and DV, which could be due to the traditionally built-in gender equation in the family and social system of the Northern Bhutias. Very few Christians were encountered during this research in the context of domestic violence. 82.1% of the respondents were Hindus, 15.6% Buddhists, while
the Christians were only 2.3%. Here is another glaring example of the impact of the religious orientation. The traditional forms of VAW are non-existent among Christians although the other two types, psychological and physical violence against women, as well as domestic violence have been recorded. Tradition seems to play a big role in perpetuating violence against women. 34% of the reasons for VAW can be ascribed to obsolete traditional beliefs, closely followed by the impact of alcohol, which was approximately 27%. The effect of drugs and other intoxicants, the desire to assert control on the wife, and habitual compulsions, etc. are other preponderant causes of VAW. With regard to awareness about human rights and the legal provisions to safeguard their interests, 86% of the women of Sikkim were ignorant, 9.80% were aware to some extent, while 4.6% of them were content with information gathered from hearsay. Among the small percentage of women who were aware of the law, more than 20% believed that the legal provisions were not implemented, while the rest were ignorant about the implementation process and the procedures involved in demanding legal protection and justice. Majority of the women of Sikkim (48%) are economically dependant on their parents, brothers, etc. and 39% on their husbands. Those who are economically independent are only 13%. More than 63% of the people were unaware of the existence of rehabilitation and counselling centres run by the state or NGOs. It was recommended that an integrated approach should be adopted to deal with the problems of VAW or DV by incorporating value orientation within the matrix of awareness raising programmes. Workshops should be organized to discuss the efficacy of value orientation methods as long term strategies to curb violence against women. Awareness should be increased of human values to sublimate the baser tendencies and indulgences of people, and help in nurturing mutual understanding and love.

Wife abuse: a study of the influencing factors and its consequences. 
Chennai: Madras Univ., Dept. of Psychology. 208 p.

Key Words: 1. WOMEN WELFARE  2. WIFE ABUSE  3. WIFE BATTERING  4. VIOLENCE AGAINST WOMEN  5. DOMESTIC VIOLENCE  6. FAMILY VIOLENCE.

Abstract: The study conducted in Madras, aimed to identify the various forms of wife abuse; various factors associated with wife abuse; and the consequences of wife abuse on the family. Sample size was 280 and data was collected through interviews. The respondents were between 20 to 58 years. The study found that various forms of violence such as scolding, slapping, pushing, etc. were widely prevalent (above 90%). As the age of husband increased, wife abuse decreased; education of the wife was not related to wife abuse. As the number of years the wife lived with her husband increased, abuse decreased. The study also found that as the number of children in the family increased, wife abuse decreased. The study
recommended that appropriate prevention and awareness efforts should be initiated and continued. Wide publicity campaigns should be undertaken in which mass media can play a vital role. It was suggested that to combat wife abuse, preventive education programmes should be organized for young men and women of marriageable age. The content of these education programmes for girls should include training in family life education, behaviour and social skills. Boys and girls can also be given moral and sex education. It should involve group discussions and role plays depicting moral dilemma at various stages of growth. It is proposed that organizations such as victim service centres may be started. Victim service centres should train the victims reporting to them in assertive behaviour, family management and social skills. Victim centres may adopt income generation programmes. It was suggested that integrated projects should be developed to identify such affected children at school and help them to come out of their traumatic experience. The research findings point to society's inadequate response to wife abuse and calls for an integrated policy formulation at the national and local level, as also coordinated implementation of such policies to combat the problem of wife abuse, and to enhance the quality of life among people.


**Key Words**: 1. WOMEN WELFARE 2. DOMESTIC VIOLENCE 3. VIOLENCE AGAINST WOMEN 4. SITUATION OF WOMEN 5. SITUATIONAL ANALYSIS OF WOMEN 6. CAUSES OF DOMESTIC VIOLENCE 7. CASE STUDIES 8. KERALA.

**Abstract**: Women in India are subject to violence not only from husbands but also from members of both, the natal and marital home. This study was carried out to assess the incidence of domestic violence against women in Kerala. Survey of the registered/recorded cases of domestic violence was done to enlist 100 victimized women from each district. A total of 1540 respondents (1400 respondents + 140 key persons) were covered under the study. Information was also collected from teachers, elderly persons, religious persons, representatives of SHGs and panchayati raj institutions (PRI) members. Almost 80% of the victims of domestic violence (DV) were between 20-40 years of age. Data showed that DV was more against women who were adults or middle aged. 68% of the respondents had only secondary/higher secondary school education. Illiterates constituted 4.9% of the sample, and 8.9% and 3.1% were graduates or post graduates respectively. 75.4% of the husbands of respondents were alcoholics. 15.2% mentioned that their husbands were drug addicts. 13.6% victims were attacked by their in-laws. 30% of the respondents were psychologically hurt by their in-laws. Extra marital affairs and dowry were reported by 12.1% and 10.2% victims respectively. Kottayam district had comparatively a higher number of victims (48%) who mentioned financial constraints as the leading cause of DV. Lack of property, dowry and property disputes were
stated by 6.8%, 5.9% and 5.3% of the victims respectively. Sexual maladjustment was reported by 7.9% of the victims. A total of 81.6% of the victims had suffered physical violence. 21% stated hitting and kicking as the frequent manifestations of DV. 17.1% had to bear physical brutality daily. Beating was experienced daily, frequently and occasionally by 14.2%, 42.7% and 31.7% of the victims respectively. Hitting, kicking, slapping, threatening using weapons, and forced sex was experienced on a daily basis by 40.9%, 25.1%, 7.7%, 1.3% and 2.6% women respectively. Infliction of physical violence on a daily basis was comparatively higher in the districts of Idukki and Alappuzha, with 23.1% and 38.6% women stating demeaning as the most common mode of hurting them. 28% and 15.9% victims mentioned threatening and threat of abandoning them as the commonest mode of psychological torture. Demeaning as a manifestation of psychological violence was occurring greatly (more than 50% each) in the districts of Kannur and Palakkad. Threatening was comparatively higher in the districts of Kozhikode (48%) and Pathanamthitta (47%). Infidelity was found to be 35% and 34% in Kasargod and Ernakulam districts. 40.4% and 20.1% victims had to suffer psychological strain on frequent and occasional basis. 74.6% of the respondents were physically injured by the attacks on them, and of them 26.7% and 31.7% respectively were very seriously and seriously injured. 46% of the victims were denied one meal; two meals were denied to 16.1% victims. 98% of the victims had experienced mental depression due to domestic violence. 40.9% victims reacted to domestic violence by going to their parents' home. 35% of the victims always thought of ending their lives. With the prevailing status of domestic violence against women in Kerala, it was recommended that Domestic Violence Bill should be passed by Parliament at the earliest. The laws regarding drug addiction and dowry should be strictly enforced to reduce the occurrence of domestic violence. Measures should be taken to deal severely with alcoholics who perpetuate domestic violence. All police stations should be equipped with special aid cells to provide assistance to victims of domestic violence.


Key Words : 1. WOMEN WELFARE 2. VIOLENCE AGAINST DISABLED WOMEN 3. ABUSE 4. FAMILY VIOLENCE 5. WOMEN ABUSE 6. DISABLED WOMEN 7. ORISSA.

Abstract : Women with disabilities are more vulnerable to sexual, physical and emotional abuse. The present study covered 729 disabled women from 12 districts of Orissa. Both quantitative and qualitative data were used. Women with disability (WWD) neglected their personal hygiene. Only 42% reported taking bath on a daily basis and 43% changed their clothes daily. Only 27% of the physically disabled (PD) women and 31% of the mentally challenged (MC) women got access to medical and health care. Both, PD (22.6%) and MC (48.5%) women were beaten at home. Rape
was also reported by 12.6% of the PD and 19% of the MC women. Some of these women reported that they were raped by their family members (20% PD and 22% MC). The reason for higher incidence of rape and beatings of MC women was that they did not understand the concept of shame, thus they reported freely. Also, their families did not hesitate in reporting rapes as it could be used as an excuse for forced sterilization of these women. The sexuality of WWD was not recognized. According to society, sex was needed only for procreation, thus a denial of reproductive role meant a denial of their sexual life. Only 44.2% PD women and 21.6% MC women expressed the desire to have children. PD women (6%) and MC women (8%) were forcibly sterilized. Domestic violence against disabled women led to depression, post-traumatic stress disorder, etc. among them. Community workers and service providers need to be trained adequately on the issue of violence against disabled women. Skill Development programs and Self Help Groups should be organized for WWD. Society needs to be oriented about the needs of WWD so that they are not abused.


**Key Words**: 1. WOMEN WELFARE  2. DOMESTIC VIOLENCE  3. RAJASTHAN.

**Abstract**: Violence against women is universal, and some societies have higher rates of violence against women. In India, between 22 and 60% of Indian women have been victims of physical abuse by an intimate partner. Seva Mandir, an NGO in Udaipur, was set up in 1960s, and started Women's Development Programme in 1982. Udaipur is predominantly a tribal region. Child sex ratio in the age group 0-6 years improved from 956 in 1991 to 972 in 2001 though the child sex ratio is declining across Rajasthan. Rural female literacy rate was 35.46% compared to 69.52% for rural men. The average age at marriage for females was 16 years. Seva Mandir worked on the sensitive and difficult issue of domestic violence to assist village women who were beaten by their husbands. It also wanted to understand the help-seeking behaviour of battered women, so that the organization could develop effective strategies and networks for responding to domestic violence in the village set up. Pilot studies indicated that women only considered the most serious beatings and acts of violence, such as an open handed slap, as acts of violence. A questionnaire was administered to 302 women in 20 villages. 95% respondents reported that it is unacceptable for a man to beat his wife, and 91% respondents reported that it is unacceptable for a man to slap his wife. 64.5% knew that it is against India's statutory law for a man to beat his wife, and more than 25% respondents said it was
plausible for a woman to slap or beat her husband if he related to another woman. 61.3% respondents reported that they had been slapped, hit or beaten by their husbands; 5.3% reported that they had been beaten by their mothers-in-law, 2.3% by their fathers-in-law, and 7.3% by brothers-in-law. 26 of the 300 women reported they had been beaten by two people and 3 of the respondents reported that they were beaten by 3 people in their households. 73.1% respondents were subjected to mental violence by abusive language and insults, 36.7% reported physical violence, 44.3% reported being forced to have sex against their will, and 16.8% reported something had been thrown at them. Some data also highlighted the link between domestic abuse and alcohol use. High magnitude of domestic violence in Udaipur district threatens to undermine all the organization's work for the empowerment of women. Change often starts with youth, hence they should be targeted and educated about the dangers and negative consequences of all types of violence. Seva Mandir's field workers should continue to facilitate training sessions around issues of violence, even though its staff lacks the capacity to form such a group in the village. Seva Mandir staff should facilitate the formation of men's and youth groups within the community.


Key Words: 1. WOMEN WELFARE  2. VIOLENCE AGAINST WOMEN  3. DIRECTORY VOLUNTARY ORGANISATIONS WOMEN  4. SUPPORT SERVICES TO WOMEN  5. Dowry.

Abstract: Although Kerala is advanced on many indicators of human development, the incidence of violence against women is also high. The study was a response to the long felt need of access to information on resources and support services available for women who were victims of violence. Kerala has a total population of 31,838,619 which includes 15,468,664 males and 16,369,995 females (Census of India 2001). Kerala has surged forward in achieving formal literacy (90.92%), reducing fertility rate, infant and maternal mortality rate, achieving higher life expectancy, etc. The Human Development Report of UNDP, in the section which discusses the Gender Development Index (GDI) for 16 Indian states, places Kerala at the top of the list in terms of basic female capabilities. Kerala is the only Indian state to have a favourable female sex ratio (1058 females for 1000 males), though the sex ratio is not uniform in all districts. The highest sex ratio of 1054 is found in Pathanmthitta district and the lowest in Idukki district which has 993 females per 1000 males. This indicates the high status of women in Kerala. But, in the younger age group the female sex ratio is decreasing, and male children constitute 12.48%
Domestic Violence

while female children constitute 10.95% of the population of Kerala. A recent survey report revealed that there were 10,000 foeticides occurring in Kerala per year. The survey found that a majority of parents think that girl children are a cause of tension and a burden for them. According to Census 2001, female literacy in Kerala was 87.86% compared to 94.20% for males. Kerala has one of the highest suicide rates in the country, and according to National Crime Records Bureau, 1547 housewives committed suicide in the year 2000. Child marriage is still practiced in some parts of Kerala, despite having high literacy. It was found that it has increased in Northern Kerala where 36% girls are getting married before 18 years. Women in Kerala have poor participation and representation in politics, and out of 144 seats in the state assembly, the number of women has never been more than 13(10%). The State Women's Commission has received about 15,000 complaints within 2 years of its inception, 80% of which are related to sexual and family violence. According to State Women’s Commission, in 1996, 191 cases of dowry deaths and 300 cases of dowry related violence were reported. Rape and other atrocities numbered almost 500, while there were 228 cases of sexual harassment. The sex ratio is satisfactory but it is decreasing specially in the 0-6 years age group. Violence against women is increasing steadily in Kerala and society is yet to recognize this reality and act to change the situation.
Dowry

Abstract: Dowry is a reflection of the devaluation and inequalities which women experience in Indian society from birth throughout their life cycle. Dowry has become an important point against women because of the debts incurred by parents due to expenses at the time of a daughter's marriage. It is also linked to female infanticide and female foeticide, which is reflected in the skewed sex ratio and increase in the number of female suicides and murders. The survey, conducted in 18 states, reported how lavish the expenditure on marriage had become over the last 10-15 years. Dowry now influences both urban and rural life in Assam. Almost 21% unmarried girls were of the view that without dowry marriage is not possible, and they justified dowry as their legitimate right over their parental property. In tribal society, dowry is still absent. In Tripura, 80% killings of married women were connected to dowry, and dowry has become a part of the lives of all communities, including tribals, backward castes, and muslims. In Orissa, the concept of dowry also exists nowadays. The terrible cyclone destroyed everything, and parents were unable to collect fresh dowries. Many women remained unmarried, and for earning a living, some have taken up prostitution. Bihar, Uttar Pradesh and Delhi are also facing the problem of dowry. Most marriages are fixed on the basis of the sales skills of middlemen, and girls are left at the mercy of their destiny. 45% muslim, 71% SC and 80% OBC girls said it was not possible to marry without dowry, but 80% girls of all castes opposed dowry. Muslim girls of Delhi said that as they did not get any share in their parents' property, this was the only way they could have some part of it. The marriages of many dalit girls were breaking up due to dowry. Girls oppose this system but because of tradition they cannot stop it. In Haryana, 6% girls were totally opposed dowry, while 11% prefered a very simple marriage, and 25% people prefered giving property rights to girls. Uttaranchal is one of those states where dowry system did not exist but it has increased in the last 15 years. 58% said that without dowry marriage was possible, and 42% said that it was not possible. Among muslims, dowry is practiced on a large scale. In Himachal Pradesh and Madhya Pradesh, most parents are against giving daughters a share in the property, but they prefer giving dowry. In Rajasthan, over 70% parents said without dowry they could not marry off their daughters; 19% were not in favour of this, but they would prefer to take their decision on the basis of the boy. Over 50% girls of all groups
felt that it was an insult to get married with dowry. Even today there is no practice of giving dowry or any money among the tribals of Maharashtra. People were hesitant to talk about dowry in Gujarat, but the figures of young women who die due to unnatural causes within seven years of marriage reveals a lot. Many girls were ready to join a movement against dowry in Andhra Pradesh. In Tamil Nadu, dowry varies according to caste. Marriages were very simple in Kerala but all this has changed. In Karnataka, taking dowry is considered to be a reflection of low status. As dowry has spread, the sex ratio has shown a declining trend. Juvenile sex ratio has decreased at a much faster rate then the overall sex ratio after 1981. Girls should be educated to become financially independent. They should speak out against the practice, and refuse to take or give dowry. Inter caste marriages or registered marriages should be preferred. For proper implementation of the law, our own efforts are required.

Reaching for half the sky. Kolkata : SANLAAP. 51 p.

Key Words : 1. WOMEN WELFARE 2. DOWRY 3. DOWRY DEATH 4. CASE STUDY 5. DOWRY 6. HARASSMENT 7. TORTURE 8. IPC SECTION 498 9. ROLE OF NGOs 10. CRIME AGAINST WOMEN CELL.

Abstract : This study was conducted during 2001-2003 in Kolkata and 24 Parganas (South) to examine the effectiveness of Section 498A, 304B & 306 of I.P.C. in addressing problems of domestic violence and dowry death; and to analyse the role of law enforcement agencies, judiciary and non-government organizations. Sample of the study included 21 and 11 officers-in-charge of police stations, 6 and 5 Public Prosecutors, 3 and 2 advocates, 8 and 4 NGO personnel, and 7 victim girls each from Kolkata and 24 Parganas (South), respectively. Data was collected from crime index and Khatian from 18 police stations of Kolkata and 11 police stations of 24 Parganas (South) and also through interviews. A total of 128 victims were found from 18 police stations. Victims were generally aged between 19-40 years and majority of them were illiterate. It was found that irrespective of the nature of marriage, women became victims of domestic violence, dowry death and abetment of suicide. Victims mainly suffered physical torture viz. beating, searing with burning cigarettes, pushing a pregnant women causing miscarriage; and mental torture, like trying to prove women as 'insane', trying to defame her of having sexual relationship with any other person, intentional avoidance and non-sympathetic attitude, addressing her as a 'whore', etc. Reasons for torturing were generally demand for dowry; extra marital affairs; differences of opinion; and higher earning of wife. 70% respondents of NGOs felt that domestic violence is linked with the status of
the women. Under Section 498A complaints were lodged by the victim from the first month to 13 years after marriage. Under Section 304B & 306, victim’s blood relatives lodged a complaint after the death of the victim. The accused and arrested person in cases related to 498A, 304B & 306 of the I.P.C. was generally found to be husband, either directly involved or on instigation by other family members. 87.5% respondents of NGOs worked in collaboration with the police, lawyer, and public prosecutor, and 12.5% resolved conflicts between the victim and other members of the family through counselling. 38% officers in charge, 22.2% public prosecutors, and 12.5% NGO workers felt that Section 498A was deliberately misused. South 24 Parganas reported 4 times more cases than Kolkata, mainly from Joynagar, Canning, Diamond Harbour and Basanti. 80% victims were illiterate. Extra marital affairs had been identified as the major reason for torture. Only a few NGOs dealt with the cases of domestic violence and dowry deaths. NGOs did not rely on Law Enforcement Agencies and Judiciary while resolving the cases. Rate of conviction was found to be very low in cases under Section 498A, whereas the accused person in 70-80% cases under Section 304B & 306 have been convicted. Public prosecutors, advocates, and officers-in-charge commented that most of the women were misusing the provisions of Section 498A of I.P.C. It was recommended that traditional attitudes and social norms need restructuring to remove gender bias. Mass awareness campaigns and seminars should be held, and lawmakers and enforcers should work jointly with activists and social workers towards eradication of gender imbalance and domestic violence. The process of investigation by the police should be transparent and they must develop a trustworthy relationship with the public so that the common man comes forward to cooperate without fear. More public prosecutors should be appointed to redress the grievances of victims. There is a need to reconstruct the justice delivery system, which would ensure an enquiry and investigation before arresting the accused person, especially in cases of women and aged, and conclude the investigation within a definite time period. NGOs should organize women’s meetings in different localities and create awareness on legal provisions. Police sensitization programmes should also be held to impart legal education to lower grade police personnel. Local Self Government personnel should take active part in combating domestic violence and dowry death. Police should keep a strong vigil in rural areas where more cases of domestic violence are reported.


52
Abstract: Violence against women (VAW) is a phenomenon that cuts across boundaries of culture, class, education, ethnicity and age. The most important amendment came in the form of the introduction of Section 498A in the Indian Penal Code (IPC), which deals with domestic violence against women. Section 498A of the Indian Penal Code, is a criminal offence. It is a cognizable, non-bailable, and compoundable offence. The key objectives of the study were to analyse the prevalence, patterns and trends of domestic violence (DV) related cases filed under Section 498A and to assess the need for this provision; to serve as a base for conducting further detailed studies pertaining to the legal effectiveness of the current statutes, and the need for new statutes to combat domestic violence. NGOs and the community were selected to understand the developments at every stage in the process and also to analyse their perception of the processes involved. 30 case studies were taken up covering all the states, five cases were taken from each centre, and only five cases were taken up from Karnataka. Out of 46 victims, 36 approached other sources of help such as family friends, NGOs, lawyers and Police before filing cases under IPC Section 498A. A chargesheet was filed in the rest of the 40 cases and these cases were sent for judicial trial. Of the 40 cases which went for trial in Court, 28 cases are still pending. In Karnataka, out of three cases, two of the victims suffered physical and mental torture for over three and a half years before approaching the police. Out of the total cases that reached the court, 16% cases have either been compounded or withdrawn. According to NFHS-2 study conducted in 1998-99, a sample of 90,000 married women aged 15-49 years were interviewed, and of them 18.9% experienced domestic (physical) violence at the hands of their spouses. One in five women experienced at least some form of violence. UNFPA reported that 40% women in India suffer some form of domestic violence. The National Crime Records Bureau (NCRB) data for 2003 also showed that approximately 50,000 cases of domestic violence were reported in India during the year. There has been a 67% decadal growth rate in Crime Against Women (CAW) between 1993 and 2003. Cruelty by husband and relatives has a major share in CAW. According to NCRB data, 2003, 36.1% of CAW was due to cruelty at home, followed by cases of molestation and rape. In four study areas namely Delhi, Karnataka, Rajasthan and West Bengal, cruelty by husbands and relatives was lowest compared to other crimes. Incidences of cruelty have increased sharply from 2000-2001 except for Delhi, where the increase was marginal. A majority of women (80%) reported the incidence of violence only when physical torture was inflicted on them.
According to 46 victims who were studied in depth, it was difficult for them to prove mental cruelty and at times physical cruelty too. In Karnataka, 8 out of 10 victims rated community response as supportive. Except in Rajasthan (6 out of 10 victims) and a few in West Bengal (2 out of 10 victims), most women reported that the police had been uncooperative in providing support. Of the 18 NGOs contacted, 11 NGOs recognized the need for a Domestic Violence Bill. A majority of lawyers (62%) and all the seven Public Prosecutors felt that there was no need for a separate law since the Indian Penal Code had sufficient tools to take care of DV. On the basis of interviews conducted, victims found Section 498A of IPC to be somewhat useful and felt the need for further strengthening it.


**Key Words:** 1. WOMEN WELFARE 2. DOWRY 3. DOWRY DEATH 4. CRIME AGAINST WOMEN 5. IPC SECTION 498 A.

**Abstract:** There are growing cases of cruelty and torture of married women particularly for dowry, some times even culminating in killing of or commission of suicide by victimised women. The present study assessed the effectiveness of legislation related to torture of married women and atrocities by husbands and their family, particularly under Section 498 A IPC. Section 498 A IPC covers any wilful conduct under certain circumstances when it is likely to drive the woman to commit suicide or cause grave injury or danger to life, limb or health. Section 304 IPC covers dowry death caused by burns or bodily injury other than under normal circumstances; death within 7 years of marriage; being subjected to cruelty or harassment for dowry soon before death. Section 306 IPC was made to facilitate successful prosecution of the husband and his relatives. The study was undertaken in Delhi and 3 districts of Haryana. The objectives of the study were to assess the adequacy of special legal provisions relating to dowry; examine their implementation in practice, deficiencies, difficulties or misuse; and suggest amendments, if any necessary, to make the laws more effective for preventing marital violence against women. In Delhi, during 2000, 3382 complaints of marital cruelty were received, out of which 543 were pending and 847 criminal cases were registered under Section 498-A/ 406 IPC, 1336 cases were mutually compromised and in 656 cases Stri Dhan (married women's assets) was returned. In Faridabad, Haryana, 1201 complaints relating to marital harassment were received during 1995-1999, out of which in 7% (89) cases Stri Dhan was returned, 18% were motivated or false cases,
and 63% and 12% were criminal cases registered after enquiry under Section 498 A/ 406 IPC and other sections, respectively. In Gurgaon, 429 complaints were received relating to marital harassment, out of which 18% (36) were mutually compromised or Stri Dhan was returned, 10% (44) cases were closed due to inadequate evidence, 15%, 51% and 70% were the criminal cases registered after enquiry under section 498 A IPC, 498 A/ 406 IPC and dowry deaths, respectively. In Sonepat, 13 cases were reported under Section 498 A IPC, 26 cases were under Section 498 A/ 406 IPC and 15 cases were reported under dowry deaths in the year 2000. It was found that there are deficiencies in Section 498 A IPC which are (i) lack of proper elucidation or illustration of the terms "grave injury and danger to mental health"; emphasis on dowry related violence and non-inclusion of violence not so related, in clear and specific turns under the sections; absence of any provision for protection or relief to the victim; non-compoundable and non-bailable procedures under this section; and the quantum of punishment is often much less than the maximum of 3 years. The basic lacunae under Section 304 B IPC were the limited acceptability to cases of unnatural deaths being connected to dowry demand related harassment/ torture: defining the term "dowry demand" as implied under "Dowry Prohibition Act"; and limitation of applicability to unnatural deaths to within 7 years of the marriage only. In the present social context, unless the basic issue of "violence against women" is taken into consideration, the law will continue to remains deficient and inadequate. Therefore, more intensive and focused efforts will have to be made, with the help of media, to improve legal awareness about the implications and requirements of these laws among people, and inform and educate them about the need to take timely notice of harassment and violence rather than taking an ostrich-like attitude, both to prevent a bigger tragedy as well as to make the implementation of these laws more effective.


Key Words: 1. WOMEN WELFARE  2. DOWRY SYSTEM  3. SOCIAL CHANGE OF WOMEN  4. LITERACY RATE  5. DOWRY  6. POPULATION AND DEVELOPMENT  7. AIDS  8. MARITAL PROBLEMS  9. DYNAMICS OF MARRIAGE.

Abstract: The study was conducted to know the attitudes toward dowry system among married women in the Northern province of Bihar, where dowry has strong roots in tradition. Data for this study were obtained from the National Family Health Survey conducted in 1992-1993. A total of 5949 married women below 50 years were interviewed. Systematic multi-stage stratified method ensured
representativeness within the state. The analysis was restricted to 85.5% women of the sample who had given birth, and 96.8% of these women who still had children living in the home. Over one-third (35.5%) married women in this sample approved of dowry, indicating that the custom was widely unpopular. This was interesting as the sample consisted largely of women with very traditional characteristics: rural residents (78%); illiterates (75%), Hindus (84%), the unemployed 74%, and those who spoke Hindi (85%). Relatively small proportions of these women listened to the radio (17%) or watched television (28%) as frequently as once a week. Those who disapproved of dowry were more likely to be urban (26.6% vs. 14.8%), educated (13.1% vs. 4.2% with high school education or more), and Muslim (15.5% vs. 12.0%). They were also more likely to watch television (20.8% vs. 9.1%), listen to radio (31.1% vs. 23.6%) at least once a week, and the average number of daughters they had was 1.3 compared to 1.2 daughters for those who approved of dowry. Those who disapproved were also slightly less likely to be involved in consanguineous marriages (5.8% vs. 7.5%). A higher proportion of women who did unpaid work approved of dowry (17.7%) compared to those who did paid work (11.8%). Caste was found to be unrelated to approval of dowry. It was concluded that Indian dowry system should not be viewed simply as a traditional practice that would eventually be eliminated by the process of social change, but rather as an important component of a marriage system that is changing in response to a progressively more materialistic culture.
Drudgery


Key Words: 1. WOMEN WELFARE  2. DRUDGERY  3. DRUDGERY REDUCTION  4. SWA-SHAKTI PROJECT.

Abstract: India has witnessed a three-fold increase in population over the last half century without corresponding growth in opportunities, especially in rural areas. Women constitute 50% of the population and are the backbone of the family. Swa-Shakti Project planners felt that formation of women's groups would lead to leadership development among women, enable the group to take up problems related to women, inculcate saving habit, build their capacities to develop micro enterprises and generate income, establish a networking of SHGs, initiate community development and impose a high moral standard. Some of the entry point activities were distribution of improved stoves and pressure cookers, construction and repair of local water resources and meeting place, and attending to the health problems of women in the project area. The objectives of the study were to assess the time saved by women as a result of inputs provided to them; alternative usage of the time saved by women; and utilization of community assets mobilized by the project. In all 20 beneficiaries were selected. The sample consisted of 19 groups, 6 in Pithoragarh, 6 in Almora and 7 in Tehri Garwal. In Almora, community assets for drinking water were created and the training and implementation related to grading were promoted in Tehri Garhwal and Pithoragarh. As a result of the introduction of gas and improved stoves the time required for cooking was reduced. There were some external factors also that helped in the reduction of drudgery like opening of primary schools in the vicinity; drinking water schemes of Government, etc. Women were using most of their saved time by relaxing and participating in meetings and trainings, which showed their increased awareness. Swa-Shakti promoted the development of community assets, but the community also contributed in its construction, as well as mobilized resources from other sources. The major part of the investment in Almora was mobilized from other sources, whereas in Pithoragarh the Project was the major contributor, and the situation was more or less the same in the case of Tehri Garhwal, where three quarters of the contribution was made by the Project. Benefits enumerated by the beneficiaries were availability of clean drinking water and knowledge of sanitation; availability of water for irrigation; availability of a meeting place; saving in costs and a well laid down path that reduced the inconvenience of commuting.
Empowerment of Women


Pilot study on impact evaluation of STEP in Andhra Pradesh, Karnataka, Kerala, Maharashtra and Orissa. Hyderabad: APITCO. 244 p.


Abstract: Women, in Indian society, are traditionally expected to confine themselves to domestic environs and play a passive role as daughters, daughters-in-law, wives and mothers. The present study was commissioned by Department of Women and Child Welfare (DWCD) through APITCO to evaluate the impact of STEP projects in the states of Andhra Pradesh, Karnataka, Kerala, Maharashtra and Orissa. STEP aims at empowering poor women and promoting sustainable livelihoods for them in 10 traditional sectors (agriculture, small animal husbandry, dairying, fisheries, handlooms, handicrafts, khadi and village industries, sericulture, social forestry, and wasteland development) through mobilizing them into cohesive and active groups and upgrading their skills. The study focuses on understanding the incremental incomes of the beneficiaries, sustainability of activities during post-programme phase, entrepreneurial competencies of the beneficiaries, enabling role played by implementing agencies, and major constraints in the process of implementation. Information was gathered from beneficiaries, control units, implementing agencies, trainers, support providers and end users. In all, 4789 beneficiaries and 753 control units, spread over 380 villages across 81 districts in the five states were contacted. The results revealed that 27 projects were approved under STEP with an aggregate outlay of Rs. 890.1 million, and project inputs aimed at developing vocational skills of the beneficiaries. It was observed that 66.8% beneficiaries were either landless or owned not more than two acres of agricultural land. All implementing agencies, except Karnataka State Handloom
Empowerment of Women

Development Cooperation (KSHDC), mobilized the beneficiaries either into women's development cooperation or self help groups. Dairying was the single largest income generating activity pursued by beneficiaries. Selection of the income generating activities was based predominantly on the implementing agency's experience and convenience. Infrastructure available for training was rated 'very good' in respect of all the four apex dairy development cooperatives implementing STEP projects in Karnataka, Orissa, Maharashtra and Andhra Pradesh. The trainer base for vocational skill development of all the implementing agencies was regarded as good. Training inputs in terms of coverage and quality varied widely between implementing agencies. Coverage and quality were better of agencies involved in dairy development projects. Handloom and mushroom cultivation were also regarded to be better. STEP projects were well conceived and clearly delineated only with respect to Karnataka Milk Federation (KMF) and Orissa Milk Federation (OMFED) the two major partners of DWCD in STEP implementation. Maharashtra Rajya Sahakari Dudh Mahasangh Maryadit and Andhra Pradesh Dairy Development Cooperative Federation (APDDCF) organizational structures for STEP implementation were considered to be inadequate and weak given the magnitude of the job involved. Among others, Rashtriya Sewa Samiti (RASS) and Kagal Education Society (KES) had fairly well defined organization structures. Concurrent evaluation of STEP projects periodically was not in vogue at the time. Such evaluations were carried out only when DWCD required them. STEP made a definite impact on the socio-economic empowerment of poor women in Andhra Pradesh, Karnataka, Kerala, Maharashtra and Orissa. The vocational base skills of the beneficiaries across the activities improved considerably. Women's Development Cooperatives contribute close to 30% of the milk procurement by implementing agencies in Andhra Pradesh, Karnataka, Maharashtra and Orissa. The programme sustained the livelihoods of 0.169 million poor women in rural areas. 76.9% of the beneficiaries assisted earned incremental incomes up to Rs. 1,000 per month. Lifestyles of the beneficiaries improved as a sequel to STEP. 38.4% beneficiaries felt that the programme has had a positive impact on their children’s education. 42.6% of the beneficiaries felt that the programme had made them health conscious. The study recommended that implementing agencies should be exposed to the techniques of systematic selection of income generation activities. The training infrastructure should provide access to better and contemporary equipment. Periodic training and re-training of trainers is necessary to enhance their capabilities. DWCD should release funds only when the required MIS is in place with the implementing agencies. STEP project proposals should be sanctioned only after a thorough project appraisal is done by a competent agency. DWCD should indicate the period of operation of STEP at any given point of time.
Impact evaluation of women and girl beneficiary oriented programmes and schemes on their socio-economic status in Himachal Pradesh with executive summary. Andheri Village, Sirmour Dist, Himachal Pradesh : People's Action for People in Need. 122 p

**Key Words**: 1. WOMEN WELFARE 2. PROGRAMMES FOR WOMEN AND GIRLS 3. BENEFICIARY ORIENTED PROGRAMMES 4. EMPLOYMENT PROGRAMMES 5. ECONOMIC DEVELOPMENT 6. IMPACT ON WOMEN 7. EVALUATION OF PROGRAMMES 8. GIRLS EDUCATION 9. EDUCATION 10. STATUS OF WOMEN AND GIRLS 11. HIMACHAL PRADESH.

**Abstract**: The Government has been undertaking several programmes to improve the socio-economic situation of women/girls in Himachal Pradesh. The present study is an attempt to assess the outreach and impact of various programmes in certain focal panchayats. In this study, the beneficiaries under 10 schemes for women/girls were covered in 12 districts of Himachal Pradesh taking two development blocks – one comparatively developed and the other backward. A total of 1000 respondents from 125 House Holds (HH) were taken. The 10 specific schemes taken up were 1. Scheme of Widow Pension, 2. Balika Samridhi Yojana, 3. Vocational Training for Destitute Girls/Women, 4. Working Women’s Hostels, 5. ICDS, 6. Old Age Pension, 7. Grant for Construction of House (SC/ST), 8. Assistance to Women Victims of Atrocities (SC/ST), 9. Incentive for Inter-Caste Marriages, and 10. Hostels for SC/ST Girls. The maximum number of women respondents (42.32%) were in the age group of 34-41 years, followed by the age group 26-33 years (17.23%), and 18-25 years (16.33%). Thus, maximum respondents were in the age group of 18-41 years (76%). Of the total respondents 39.53% were just literate, 11.23% were educated up to primary level, 10.22% up to middle standard, 9.24% up to high school level and about 2.33% up to college level. 27.42% were illiterate. 38.42% were SCs, 14.73% were STs, 7% were BCs, and 40% belong to general communities. 47.13% women were engaged in agriculture, 4.19% were self employed, 1.77% were in service and 34.12% were housewives. Awareness regarding development schemes was highest about ICDS (72.27%), Mahila Mandal Programme (71.21%), Safe delivery kits (70.57%), and the Widow Pension Scheme (60.59%). Schemes about which there was 40-60% awareness were Old Age Pension Scheme (57.75%), Girls Education Incentive Scheme (54.56%), BSY (48.35%), and Health Education (43.30%). The study reported that 54.27% awareness was generated by Anganwadis. About 37.94% respondents gained awareness from Mahila Mandals and about 17.10% were made aware of schemes by their husbands. 8.27% of the
respondents received information from village Pradhans, 4.98% from media, 19% from school teachers and 4.38% from village Patwaris. 240 respondents benefited under the Widow Pension Scheme. Under Balika Samriddhi Yojana there were 116 beneficiaries. The ICDS was covering 240 respondent families. Under the Scheme of Stipend to SC/ST Girls for Technical Education in ITI, the daughters of 163 respondents were benefiting and 77 respondents had already gained from the scheme. Only 36 persons had benefited from the Inter-Caste Marriage Scheme. Of these, 19 respondents had already availed the benefits and 17 were in the process of availing inter-caste marriage grants. Under the scheme of Training for Self Employment, 86 were availing and 60 had availed benefits; under Swarnajayanti Gram Swarozgar Yojana 179 were availing and 61 had availed services; under National Maternity Benefit Scheme 90 were availing and 75 had availed services; under the Scheme of Safe Delivery Kit 20 were availing and 220 had availed benefits; under Health Education 29 were availing and 211 had availed benefits; and under Girls Education Incentive Scheme 213 girls were availing benefits and 27 had already availed benefits. The problems faced by beneficiaries at different levels were 'completion of formalities at different levels' (5.70%), and distance of programme implementing agency from home (61%). It was suggested that the in-built difficulties in implementing different schemes for women should be reduced. Financial norms should be revised to enhance the amount of assistance extended to women beneficiaries. Provisions should be made for a single window system to reach the benefits, and mainstreaming of gender perspective should be introduced in different schemes.

Institute of Social Studies Trust, Bangalore. (2000).

Key Words: 1. WOMEN WELFARE 2. TRAINING WOMEN 3. EMPOWERMENT WOMEN 4. EVALUATION OF TRAINING 5. POLICY IMPLICATIONS 6. EVALUATION OF TRAINING WOMEN.

Abstract: The Department of Women and Child Development organized a consultation workshop on 19th June 2000 for the preparation of a Policy Document for Women's Empowerment. In this workshop, the views and experiences of NGOs were solicited. They shared their field and research experiences. ISST had undertaken a research project and the objectives of the study were to conduct a review of training initiatives for women in Karnataka with particular focus on capacity building initiatives for political and economic empowerment; to assess gaps from the vantage point of women's empowerment; and to provide relevant input for designing a policy for women's empowerment in Karnataka. Very basic and
fundamental aspects/ components of training/ capacity building emerged as areas of prime concern in the study. Women at the grassroots are already familiar with the term ‘training’ and for them ‘what goes into it, their experience of it and what comes out of it’ is of prime concern. Data was insufficient. There were hardly any in-service on-going trainings/ capacity building for Government officials either to prepare them as trainers or to serve as gender sensitive officers. No provision has been made in the Panchayati Raj Act to make training an obligatory function of the State and Panchayats, or to appropriately remunerate elected representatives. There exist no terms of reference to facilitate constructive and consistent collaborations between NGOs and the Government. It was felt that most often collaboration with Government was not worked out on equal terms. State capacity building initiatives do not address and arrange for practical gender needs like crèches, etc. State initiatives to prioritize Training/Capacity Building for women must get reflected in budget allocation to the concerned department. It is important to develop Monitoring - Evaluation indicators based on gender perspective for attitude and behaviour impact; knowledge and skill impact; ripple effect in society, and move on from the present priority of pedagogy impact. The study highlights the need for such on-going exercises, not only with an objective of redesigning policy, but also with a view to review ‘policy performance’. There is need to pay special attention to basic components of training like the objectives, perspective and philosophy of Training/ Capacity Building for empowerment of women.


Key Words : 1.WOMEN WELFARE 2.EMPOWERMENT WOMEN 3.WOMEN EMPOWERMENT 4.SELF HELP GROUPS 5.INCOME WOMEN 6.MICRO ENTERPRISE 7.POLITICAL PARTICIPATION

Abstract : This paper analyzed the impact of interventions on women in a project being implemented in Uttarakhand. The study covers rural areas of District Pauri, Nainital and Udham Singh Nagar. It was found that there were 496 SHGs linked with 6700 women. Construction of water harvesting tanks, irrigation channels, biogas and fodder plantation have reduced the drudgery of women to a certain extent. These interventions have resulted in women saving around two to three hours, which is utilized for awareness programmes, group activities, and Income Generating Activities (IGAs), Capacity Building Activities, and so on. Women in the project area now have greater awareness regarding their roles, responsibilities and rights.
Empowerment of Women

Women have generated group savings of about Rs.30 lakhs. The average group fund size is approximately Rs.6000/-. SHGs members have been earning between Rs.500-6000 since taking up various IGAs. Capacity building, support and involvement in economic activity has helped women to gain respect and self-confidence. The study also found increased role of "women as a group" in solving community problems by their 'shramdan'. Participation in Panchayati Raj institutions and their role in decision-making had also increased. Study suggests that the State could capitalize on project interventions in agriculture and horticulture by developing a brand name for Micro enterprise products of SHGs from Uttaranchal. These efforts need to be maintained and strengthened, and should aim at placing women at the center of project activities.

Evaluation study of various specific women related schemes during the Eighth Five year Plan in Manipur : research project. Imphal : MRS. ~135 p.

Key Words : 1.WOMEN WELFARE 2.PROGRAMMES FOR WOMEN 3.EMPLOYMENT WOMEN 4.ICDS MANIPUR 5.MANIPUR.

Abstract : This study was undertaken in Manipur to assess the performance and impact of women related development programmes on the status of women. Information was collected from 1000 women residing in two districts namely Imphal East and Imphal West. The State Government continued to implement development programmes during the Eighth Plan period, and women beneficiaries were also covered under poverty alleviation programmes like Integrated Rural Development Programme (IRDP), Training Rural Youth for Self Employment (TRYSEM), Jawahar Rozgar Yojana (JRY), Indira Awas Yojana (IAY) and Development of Women and Children in Rural Areas (DW CRA). The women specific programmes implemented during 8th Plan by the Social Welfare Department were 1. Support to Training - cum - Employment Programme for Women (STEP); 2. Construction of Working Women's Hostels; 3. Border Areas Welfare Extension Projects; 4. Vocational Training Courses; 5. Socio-Economic Programme; 6. Voluntary Action Bureau; 7. Orientation Training Programme; 8. Self-Employment Scheme; 9. Creche Programme; 10. Nutritional Programme; 11. DWCRA; 12. Grant - in - Aid to Destitute Widows; and 13. Family Counselling Centres. Only 16.72% of the respondents were illiterate, 24% respondents could read and write; 2.25% were educated up to primary level; 10.69% and 21.20% respondents were educated up to middle and high school level respectively; and 27% respondents were educated up to matric. Of the 640 families
of respondents, the head of the families were engaged in self-employment in 163 (25.47%) cases; agriculture 128 (20%); service sector 210 (32.81%); and domestic work 212 (33.13%). Activities under the Self Employment Scheme were dress making, wool knitting and embroidery. Between 9-29% women were aware about Self Employment Schemes. In Imphal West, 117 (36.56%) women were aware of embroidery training. Only 11.25-34% respondents were aware of the Vocational Training Courses Scheme. 50 (15.62%) respondents of Imphal East, 63 (19.68%) of Imphal West and 65 (13.40%) respondents of fully surveyed villages were aware of the Creche Programme. 55 (17.18%) respondents of Imphal East, 81 (25.31%) of Imphal West, and 79 (16.28%) respondents of fully surveyed villages were aware of the Nutrition Programme. 96 (19.79%) respondents of fully surveyed villages were aware of Chulah Programme. 115 (35.95%) respondents of Imphal East, 121 out of 320 respondents in Imphal West, and 189 (38.96%) respondents of fully surveyed villages were aware of the Socio-Economic Programmes. 26 (32.5%) respondents of Imphal West, 64 (20%) of Imphal East, and 109 (22.47%) of fully surveyed villages were aware of the Condensed Courses Programme. 47 (14.6%) respondents of Imphal East, 50 (15.62%) of Imphal West, and 71 (14.63%) of fully surveyed villages participated in the Craft Programme. 54 (14.86%) respondents of Imphal East, 55 (17.18%) of Imphal West, and 76 (15.67%) respondents of fully surveyed villages participated in Women's Education Programme. 98 (38.62%) respondents of Imphal East, 105 (32.81%) of Imphal West, and 94 (19.38%) respondents of fully surveyed villages participated in the Self Employment Scheme. 124 (38.75%) women respondents of Imphal East, 105 (32.81%) of Imphal West, and 97 (28%) respondents of fully surveyed villages participated in the Mahila Mandal Programme. 76 (23.75%) respondents of Imphal East, 71 (22.18%) of Imphal West, and 83 (17.11%) of fully surveyed villages participated in the ICDS Programme (anganwadi centres). 41 (12.81%) respondents of Imphal East, 37 (11.56%) of Imphal West, and 55 (11.34%) of fully surveyed villages participated in the Programme of Women in Panchayati Raj. It was recommended that Government should take up mass adult education/ informal education programmes in rural areas. Mass media and information technology should be utilized for creating awareness and benefiting people residing in rural areas. Voluntary organizations should be fully involved in implementing women related/ women specific schemes. They should be involved from the initial stages and help in monitoring the schemes so that the schemes can be run more effectively and successfully.
Abstract: This article analysed the outdoor participation potential of women; the process of women’s empowerment; and the interrelationships of women participation, empowerment, gender equality and their functional dependency on age, education, income and caste. A sample of 90 grassroots level women workers were selected from Lodha block of Aligarh district, Uttar Pradesh, of whom 35 were Community Based Distributors (CBDs), 35 were Anganwadi Workers (AWWs) and 20 were Women Pradhans (WPs). It was found that 60% of the sample were in the age group of 25-45 years, 22% were below 25 years and 17.7% were above 45 years. 72% women were educated till primary and intermediate level, 7.8% were graduates, 3.3% post graduates and 8.9% were illiterates. 80% WPs and all the sampled CBDs and AWWs had very limited income. Data showed that the CBDs were more articulate, mobile, active, and sent their children to schools. The AWWs were very vocal and authoritative. Due to outdoor participation respondents developed self-confidence and self-respect. At home also, they participated effectively in decision making regarding income expenditure, children’s education, family planning, etc. It was revealed that women in the 25-45 age group were more participative, vocal and active than women below 25 years and above 45 years of age. The CBDs and AWWs were equally participative whether they had higher or lower education. All the sampled WPs were illiterate, and low caste WPs who had limited income, wanted to overcome their illiteracy, by undergoing training and actively participating in outdoor political and economic activities. It was suggested that there is a need to provide empowerment training to all voluntary workers and local leaders. A strategy should be formed so that more and more women can be involved in outdoor activities, particularly those women who want to work, are educated and belong to low income, and low caste category.

**Key Words**: 1. WOMEN WELFARE 2. EMPOWERMENT WOMEN 3. ECONOMIC EMPOWERMENT 4. SWARNJAYANTI GRAM SWAROZGAR YOJANA 5. SELF HELP GROUPS 6. EMPLOYMENT WOMEN 7. WEST BENGAL.

**Abstract**: In April 1999, Government of India launched a new self employment programme known as Swarnjayanti Gram Swarozgar Yajana (SGSY) which is a holistic programme covering all aspects of self employment like Self Help Groups (SHGs) training, credit, technology, infrastructure and marketing. The study was done to assess the impact of SGSY programme on empowerment of women at Babpur village under Purbakhilkapur Gram Panchayat, Kolkata. Out of the total sample of 50, 25 women were taken from SHGs which constituted the control group, and 25 women who were not associated with SHGs constituted the experimental group. Data was collected using a questionnaire containing open and close ended questions. Indicators used in the study were economic indicator, political indicator, household decision-making scale and awareness level of the respondents with respect to social and health issues. About 64% women of the control group and 92% of the experimental group were found to be economically independent, 40% respondents of the control group and only 4% of the experimental group had saving habit, and it was found that 8% respondents of the control group had created assets after taking loans from SHGs. Political indicators showed that 72% respondents of the control group had access to the panchayat, 80% of them attended gram sansad (village) meetings regularly, and 72% of them cast their vote in favour of the candidate of their own choice. On the other hand, only 4% respondents of the experimental group had access to the panchayat, 28% of them only attend gram sansad meetings regularly, and 56% respondents cast their vote freely. On decision making parameters it was found that 50% to 75% respondents of the control group took decisions about various important aspects of household management like expenditure on education of child, marriage of child, medical care, etc. But in case of the experimental group, decision making power was exercised by only 24% women, and 52% women took decisions with respect to the daily meal and dress. All respondents from both the groups were aware about breastfeeding and immunization (100%). On an average, 80% respondents of the control group were aware of social and health issues, but the percentage of respondents from experimental group who were aware about social and health issues was below 40%, which was quite poor. Awareness generation campaigns regarding the importance of Self Help Groups should be launched on a war footing, and attention should be given to formation and sustenance of more Self Help Groups, as the impact of empowerment of women members of SHGs was evident.

Search for a vision statement on women’s empowerment vis-a-vis legislation and judicial decision. New Delhi: NCW. 190 p.


**Abstract**: Indian Trust for Innovation and Social Change studied a large number of judicial decisions of Supreme and various High Courts; examined the legal provisions available for women; conducted personal interviews with a number of legal experts and other eminent persons; and organized a brainstorming meet to look at policy issues and future plans that could best enhance the role of women’s contribution towards sustainable development in the country. It also investigated the challenges that policy makers and the judiciary face on how to improve the status of women. The study examined the merits and demerits of the existing provisions of law and other policies. Enforcement and awareness are not quite there in our society. Women belonging to deprived and poorer sections of Indian society, irrespective of their social strata or region, are by themselves, in no position to solve tough problems. More than 400 million women of this country hardly have social, economic, legal or political attributes of any strength. Even though during the period 1994-96 and 1999-2001, many legal judgments have been studied, they only constituted a minor input in the determination of feeble or dominant trends that characterized women’s empowerment. Evidence based judicial dispensation did not provide stimulus for envisionment. They were mostly indicative of the continuation of a trend on how societal aberrations should be corrected in upholding the scale of justice. The core of women’s empowerment demands detailed scrutiny of Government policies and implementation or non-implementation of developmental plans. By the same token, whether new laws affecting women are really ensuring gender justice has to be judged, by how many millions are aware of the existence of these laws and how many are still ignorant of the same. Our socio-economic reforms and their impact need to be studied in depth. Achieving gender equality does involve a process of active social changes and cannot be automatically connected to economic growth in a given region.


67
Empowerment of Women

Key Words: 1. WOMEN WELFARE  2. WOMEN'S EMPOWERMENT  3. DOMESTIC VIOLENCE  
4. CHILD NUTRITION  5. MATERNAL NUTRITION  6. NUTRITIONAL STATUS  7. SOCIO-CULTURAL DETERMINANTS  
8. TRIBAL COMMUNITIES  9. RURAL COMMUNITIES  10. SOUTH INDIA  11. KARNATAKA.

Abstract: Women's lack of empowerment is believed to be an important factor in the persistent prevalence of malnutrition. The objective of the study was to explore the relationship between women's empowerment, maternal nutritional status and the nutritional status of their children aged 6 to 24 months in rural Karnataka. Structured interviews with mothers were used to collect data and anthropometric measurements were obtained for 820 mother-child pairs. Results showed that malnutrition was significantly more prevalent in the tribal community. Some degree of malnutrition was seen in 83.5% children and 72.4% mothers. Tribal families had less access to electricity, education, and health care than rural families. Child feeding practices were similar across the sample, and more than 80% of the children were still being breastfed at the time of the study. Tribal women had greater decision making capabilities and freedom of movement than rural women. The prevalence of domestic violence did not differ significantly between tribal and rural women, and it was experienced by 34% mothers in the sample. Biological variables explain the greatest variance (15.1%) in the sample. Women's empowerment variables were significantly associated with child nutrition and 5.6% of the variance in the sample could be attributed to women's empowerment. Maternal experience of psychological abuse and sexual coercion increased the risk of malnutrition in mothers and children. The study findings suggest that better community based nutrition programmes should be designed which help in reducing malnutrition.


Key Words: 1. WOMEN WELFARE  2. KUDUMBASHREE  3. SELF HELP GROUPS  
4. GOVERNMENT NGO  5. EMPOWERMENT WOMEN  6. INNOVATIVE PROJECT WOMEN  
7. BEST PRACTICES  8. ECONOMIC EMPOWERMENT OF WOMEN.

Abstract: Kerala is considered to be one of the most successful states in poverty reduction in the country. It is primarily because of its high level of education and health. It seeks to achieve change through decentralization and empowerment of women's groups. Recent policy initiatives include participatory planning, decision making and implementation, combined with fiscal devolution. Kerala's population density is 819 persons per square kilometre and it stands 3rd in density, West Bengal being first and Bihar claiming the second position. Crude birth rate in Kerala is 16 in 68.
2001. Kerala is the most literate state in the country with a literacy rate of 90.92%. 65% women in India marry before the age of 18 years, but in Kerala only 7% women do so. The average age at marriage in Kerala is 23.5 years for women and 27 years for men. For every 1000 widowers there are 762 widows. As girls marry late the child bearing age has also gone up accordingly. 97.3% deliveries take place in hospitals, and MMR in Kerala is 140 per one lakh deliveries, and low birth weight babies are also minimal in number. Divorce rates are high in Kerala, and it ranks 1st in Asia. Trivandrum district ranked first with 1850 divorces having taken place during 2002. Girls commit suicide because of failure in examination. The suicide rate continues to be 29.6 per 1 lakh population for the last three years (2002). Reported offences are available under six categories of crime - rape, kidnapping and abduction, dowry deaths, cruelty by husband and relatives, molestation and sexual harassment. In the ascending order of total crimes against women, Kerala ranks 24th among states/ UTs. The male work participation rate (WPR) in Kerala has increased from 42.22% to 50.4% i.e. by 8.18% within a span of 30 years, but in the case of women it has increased only by 0.7%, whereas in India it has increased from 14.22% to 25.7%. The well known Kudumbashree initiative of the Government of Kerala is a women oriented poverty eradication programme with women's empowerment as one of its major goals. It was begun in 1998 by the Government of Kerala with the aim of eliminating poverty within 10 years, by 2008. Kudumbashree followed a strategy which includes: (a) convergence of various government programmes and resources at the community-based organization level, (b) efforts to involve the CDS structure in local level anti-poverty planning, and (c) development of women's micro-enterprises and thrift and credit societies. This study assessed the measures taken for economic empowerment with special focus on micro-credit and micro-enterprises development in rural and urban areas of Thiruvananthapuram, Alappuzha, Malapuram and Kasargod districts. The grass root level poor women are organized through Neighbourhood Groups (NHGs) consisting of 20-40 women with 5 volunteers - community health volunteer, income generation volunteer, infrastructure volunteer, secretary and president. Main functions and activities of Kudumbashree (other than SHG and micro-enterprises) are lease land farming, ashraya, HRD, Bal Sabha (children's NHG), community health, micro housing project for poor, solid waste management/clean Kerala, special employment programme for educated youth, special school for disabled children, and nutrimix - the baby food products production project. The motivating agents of SHGs were the officials of Kudumbashree and animators of NGOs. In the functioning of SHGs, proper documents like account books, registers, reports were maintained, women participated in the decision making process in the family, decisions were taken on consensus during meetings, and thrift collected was used by community members for needs such as treatment, delivery, death and education of children. Micro-enterprise development is viewed as an opportunity for providing employment to
women below the poverty line to enhance their income and standard of living. The Kudumbashree definition of Micro Enterprise includes investment ranging from Rs.5000 to Rs.2.5 lakhs. This encourages innovative business ideas. In 2007 there were 18,969 enterprises in urban and rural areas, covering enterprises like goat rearing and dairying, catering units, job clubs, health care enterprises, computer hardware and data entry units in IT sector, innovative enterprises like Clean Kerala Business for solid waste management, and coir products. Micro-enterprises raised the income and satisfaction in meeting basic needs. Changes were brought about in existing power relations in favour of poor marginalized women, and changes were also attempted in knowledge, attitude and behaviour of both men and women. Awareness was built about women's situation, discrimination, rights and opportunities as a step towards gender equity; and capacity building and skills development was undertaken. Kudumbashree organized women into Self Help Groups (SHGs) for economic independence and freedom from moneylenders. Women's income leads to increased expenditure on their well being and that of their children. Opportunities for saving and credit are linked to the panchayats. As Kudumbashree was supported by the Government, a declining spirit of volunteerism was evident. Observers of civil social affairs in Kerala pointed to the danger of bureaucratization of Neighbourhood Groups (NHGs). Women activists have involved positively in the new institutions of local self government and development. Kudumbashree has promoted the active presence of women in politics. Kudumbashree has developed a culture of learning by doing and reflection. Group activities have led to cohesion and reduced the feeling of vulnerability. Women reported that violence diminished as men realized the importance of the economic contribution of women to the household. Women became more aware of child care services and availed the facility of supplementary nutrition for lactating mothers. Many SHG members were willing to start their own micro-enterprises and expected Kudumbashree to help them in this venture. Kudumbashree staff spent its energy mainly on micro-enterprise activities. NHGs have shown the potential for public action against social and economic injustice. Kudumbashree needs to make arrangements for quality control of products of SHGs and organize regular training programmes for new and old women entrepreneurs. The agenda of SHGs needs to include social justice and equity issues, although women have taken up issues related to violence against women even in the absence of support from NHGs.

Voluntary Association for People Services, Virudhunagar. (2008).
Enhancing women's empowerment through information and communication technology: a report. Virudhunagar: VAPS. ~125 p.
Empowerment of Women

Key Words: 1. WOMEN WELFARE 2. INFORMATION AND COMMUNICATION TECHNOLOGY 3. EMPOWERMENT WOMEN 4. SELF HELP GROUPS 5. STATUS OF WOMEN 6. INFORMATION KIOSK 7. TAMIL NADU.

Abstract: Women are equal beneficiaries to the advantages offered by technology and the products and processes, which are by products of technology use. The present study was carried out to assess ICT infrastructure in rural areas vis-à-vis that in urban areas for women’s empowerment, and to assess the status of ICT in education in terms of policies regarding scholarships, reservations, business development programmes, etc. for self-employment opportunities for women. The study was conducted in all five major corporations in the state of Tamil Nadu, i.e. Chennai, Thiruchirappalli, Madurai, Coimbatore, and Thirunelveli. The total sample size was 500 women/girls. Out of 500 respondents, the highest number of women/girls interviewed were in the age group of 32 years, followed by girls below 17 years. Majority of the respondents were college educated (374), followed by school educated (57), technically educated (44), and the rest were just literate or those who had no schooling. It was found that ICT introduction has made life easier for 284 respondents, followed by 169 who somewhat agreed. Only 24 and 19 respondents said that they did not know, or could not say respectively, whereas only 3 respondents said that they did not agree with the idea. 224 respondents said that ICTs were easily available, 23 respondents disagreed, and 52 said that they did not know. Only 30 respondents said that they used information technology, 12 for booking tickets, 27 to get information about different aspects of life, and 5 persons said they used IT for banking and insurance. Out of the 500 respondents, 111 said they got information from the Internet, which showed that Internet facility was available in their locality. 90 respondents said communication was through print media, and 33 mentioned radio as a source of information. Of the respondents who said there was easy availability of the Internet, the highest number (170) said they preferred cyber cafes. 116 said they used IT in the office, both for official purposes and personal work. Respondents used Internet according to their need, but only 103 said that they used it almost regularly. 118 respondents used Internet once a week, 88 used it when they felt it necessary, 66 used it very rarely and also said that it was not necessary for them to use Internet daily or for unnecessary purposes. 48 said that they never used the Internet. 234 respondents strongly agreed that ICT had enabled women to know what is happening across the globe more easily. 376 respondents said that it was essential in their job. Regarding the facility of working from home, 215 respondents said they were to some extent provided this facility of working from home. Also, 132 strongly agreed that ICT enabled people to work from home. About 204 respondents said it took away women’s relaxation time. Majority (258) of the respondents wanted to make use of ICT for the next generation. It was concluded that the use of ICT helps to bridge
the gap between people's opportunities for self-employment in the informal economy and the high growth sectors of the world's economy. SEWA has started using telecommunication as a tool for capacity building among the rural population. It was suggested that Government departments and others should come together to make poverty alleviation programmes successful through women centric initiatives in which poor women are organized to circumvent the problems of liberal development processes. Women need to be encouraged and trained to become producers on all ICTs. Clearly, engendered ICT policy needs to be developed.


Key Words: 1. WOMEN WELFARE  2. SWA-SHAKTI  3. RURAL WOMEN'S DEVELOPMENT AND EMPOWERMENT PROJECT  4. SELF HELP GROUPS  5. WORLD BANK ASSISTED SWA-SHAKTI.

Abstract: The World Bank sent a team to evaluate Rural Women's Development and Empowerment Project in January, 2003. In November 2002, the Project supported 17,587 Women's Self Help Groups (SHGs) involving 240,236 women in 7274 villages in 56 districts of 9 states. This represents 10% of all districts and has the potential to scale up and replicate the lessons learnt. Work is done in partnership with the Government and 232 NGOs. Some improvements were required in financial aspects related to bottlenecks in fund flow, procurement and staffing. Excellent work and achievements were observed in many states, such as work in earthquake affected areas of Gujarat, gender equality in Haryana, marginalized groups in Bihar, such as musahars, etc. The Project has successfully institutionalized linkages with various agencies and departments providing services to poor women in UP. Bank accounts were opened for nearly 90% of the project groups. Sustainable improvements in livelihood remain one of the most challenging issues faced by the project. Staff positions need to be filled with suitably qualified staff, as absence of staff affects the functioning of the project. It was suggested that sustainability issues need to be addressed in the action plans of various state annual plans. It was recommended that participatory approach may be adopted for monitoring and evaluation of the project in each state.
Family Counselling


Key Words: 1. WOMEN WELFARE 2. FAMILY COUNSELLING CENTRES 3. MARITAL PROBLEMS 4. MARITAL CONFLICT 5. MARRIAGE 6. FAMILY RELATIONSHIP 7. HUSBAND WIFE RELATIONSHIP 8. DIVORCE 9. WEST BENGAL

Abstract: Today, in modern society, there is increase in the disturbance in marital relations leading to a state of conflict, sometimes leading to marital violence and also sometimes ending in divorce. The objectives of the study were to identify the various factors behind marital conflict; check effect of socio-cultural variables like education and employment in maintaining marital bonds; and recognize the extended form of problems faced by a person in case of marital conflict. About 60% respondents got married between the age of 18-26 years and 20% were married before 18 years. Almost 73.3% respondents negotiated at the time of marriage and 26.7% got married by mutual consent, but they also faced problems or conflicting situations. Most of the respondents were literate (93.3%) and had studied till school level. 93.3% respondents were still in their married status and dealt with their conflicts after wedlock in their bond of marriage. Only 6.7% acquired divorce status to gain respite from the major conflicting situation in their life. In 93.3% cases, the relation worsened from initial stages itself. The reason for straining of relationship were interference from in-laws; personality and cultural differences; extra marital relations and alcoholism, etc. The main way of adjustment was making husbands understand that they should work towards their relationship. Some could not bear the pressure of the conflict and left the matrimonial home. Respondents tried to save the relationship as marriage is regarded as a sacrament. Many women were worried about their children. Others made adjustments due to lack of economic activity and security. To cope with their problem, 33.3% respondents tried for some kind of legal help, 13.3% engaged themselves in economic activity, and 6.7% reconciled with the marital disharmony. Some suggestions which could help reduce atrocities and conflicts were education must be ensured, family should be educated
about inter-personal relationship between couples and other members of family, change in attitude of police is needed, and awareness programmes should be organized by Family Counselling Centres (FCC), panchayats, Government, State Social Welfare Boards (SSWB) and Central Social Welfare Board (CSWB) jointly. Seeking professional help in cases of marital conflict should be popularized and more counselling facilities should be available to help couples in distress.

Indian family : trends and trauma : summary of the desk study : based on the data from Central Social Welfare Board’s Family Counselling Centres. New Delhi : Rambhau Mhalgi Prabodhini. 18 p.

Key Words : 1.WOMEN WELFARE 2.FAMILY COUNSELLING CENTRES 3.FAMILY PROBLEMS 4.COUNSELLING 5.CSWB PROGRAMME 6.SUMMARY REPORT.

Abstract : The family is the first instrument of socialization. This study looked into the trends and traumas of family in India, through a record of 16,270 cases out of total 3,00,000 cases registered with the Family Counselling Centres (FCCs) funded by the CSWB (Central Social Welfare Board). About 72.88% cases were reported by female clients and the remaining 27.12% by male clients. Data was gathered from 91 FCCs from seven states, namely Maharashtra, Delhi, Kerala, West Bengal, Madhya Pradesh, Meghalaya and Manipur. The study focussed on the factors leading to instability of the family; identified newly emerging trends in the Indian family; and suggested possible interventions to overcome the disorders. Results revealed the following reasons for discord in the family - alcohol/ drug addiction (11.94%), personality clash (8.87%), extra-marital/ pre-marital affairs (8.20%), interference of parents (6.7%), psychological problems (4.78%), dowry demand (4.55%), economic crisis/ poverty (4.43%), harassment by in-laws (3.73%), desertion (2.92%), interference by in-laws (2.1%), physical or mental torture (2.05%), and conflict with other relatives (1.87%). As the main reasons of family discord were reported to be addiction, alcohol and drug abuse, and personality clashes, recruitment of counsellors and mental health professionals is important for the FCC scheme. Findings highlight the need for a gender-sensitive family centered approach to be adopted in counselling practices of FCCs, and suggest that activities like awareness generation camps should be organized, combined with pre-marital counselling for prevention of family discord.
Gender Budget


Key Words: 1. WOMEN WELFARE  2. GENDER BUDGET   3. BUDGET FOR WOMEN  4. POVERTY  5. UNEMPLOYMENT WOMEN  6. SEX RATIO  7. VIOLENCE AGAINST WOMEN  8. POOR WOMEN  9. POVERTY ALLEVIATION  10. PROGRAMMES FOR WOMEN  11. GOVERNMENT INITIATIVES  12. LACUNAE.

Abstract: Even today, there are villages that are 10 km away from a pucca (proper) road, do not have electricity, or a school. Despite the Five Year Plans and major and minor changes in development policy and poverty alleviation strategies adopted since Independence, poverty and hunger still persist. The Economic Survey 2002-03 and the Tenth Plan document emphasized the Millennium Development Goals (MDGs) and set monitorable targets for eradicating poverty and achieving development. The incidence of poverty has declined from 54.9% in 1973-74 to 26.1% in 1999-2000. The rate of growth of employment on current daily status declined from 2.7% per annum in 1983-94 to 1.07% per annum in 1994-2000. A Nationwide survey showed that over 43.5 million people living in 1.42 lakhs habitations were at health risk due to problems of drinking water quality like excess fluoride, arsenic, salinity, iron and pesticides. The World Bank and WHO have estimated that in India, 21% of all communicable diseases (11.5% of all diseases) were water related. It was estimated, India has 20% of the global child population but accounts for 40% of the world’s malnourished children. 4.2% of rural and 1.1% of urban households reported getting two square meals a day only during some months of the year. The Report on the State of Food Insecurity in the World, 1999 estimated that in the developing world, 790 million people did not have enough to eat. 204 million people were identified as undernourished in India. Sex ratio in the 0-6 age group declined steeply from 945 in 1991 to 927 in 2001, implying that millions of girls went missing in just a decade. The incidence of anaemia among pregnant women was estimated to be as high as 88%. A WHO study in six states in India revealed that 40% women reported physical abuse by their partners, and 14% faced severe abuse. Budgetary allocations (2003-04) for women were working women’s hostels (Rs. 44.8 million), labour and social securities (Rs. 300 million), maternity benefits (Rs. 220 million), RCH
(Rs. 1229.6 million), and tuberculosis and malaria (Rs. 100 million). The share of women's component of composite public expenditure of Central Government showed a decline from 3.89% in 1995-96 to 2.02% in 2001-02. Women constitute around 50% of the population and they must be part of the budget formulation process. Employment creation programmes must be strengthened. Domestic violence must be treated as a crime and adequate allocations must be made for shelters for women. Access to work, drinking water, drainage and toilets, public infrastructure such as roads, transport facilities, medical facilities, shelter and social security should be given much greater priority in the budget.


Abstract: Gendering the budget is to analyze the budgetary expenditures from a gender perspective. The objective was to enhance fiscal policy making and measures, by providing a mechanism for ascertaining their impacts on women, men, girls and boys. Study analysed data of ten selected states, namely Assam, Bihar, Meghalaya, Gujarat, Jammu and Kashmir, Maharashtra, Rajasthan, Madhya Pradesh, Orissa, and Manipur. It involved analysis of public expenditure, and methods of raising revenues; analysis of gender targeted allocations especially programmes targeting women; and a review of equal opportunities, policies and allocations within government services. It was found that Assam, Meghalaya, and Manipur allocated substantial percentage of the state budget to social sector. In other states social sector budget received around 22-36% of state budget allocations in 2000-01. In 10 states selected, range of allocations to women programmes varied between 3 - 13% of the state budget. Targeted schemes, as compared to pro-women schemes, received lower percent allocations, and in 4 states they allocated less than 1%. Allocation to pro-women schemes showed vide variations across states and ranged between less than 1-11%. It was observed that fiscal flow to women's programmes in all states were far below the desired level and lower than the norms recommended by Planning Commission (30%). The percentage allocations to women targeted programmes of the social sector budgets were less than 5% in Bihar, Madhya Pradesh, Orissa, and Assam, and less than 1% in Manipur. Department of Women and Child Development/Social Welfare, Education, Health and Family Welfare made higher percentage allocations of their departmental budgets to both women targeted and pro-women programmes. For pro-women schemes, other departments
like Rural Department, Agriculture, Cooperatives and Tribal, and Labour played an important role in women's development by having pro- and targeted schemes and reasonable allocations. Status of women was reviewed through indicators like sex ratio, female literacy rate, female school enrolment ratio 6-11 years and 11-14 years, and female drop-out rate (6-11 years). It was suggested that a serious methodical debate should be carried out for gender based analysis, and tools for monitoring the progress of women's component plan should be sharpened. There is a need for more in-depth analysis on sectoral issues and formulating uniform guidelines and procedures, so that comparisons and inferences can be made at regional and national level. For a comprehensive assessment of gender impact of government budgets, DWCD should formulate and disseminate uniform guidelines on gender budgets and analysis to States, and develop software for such analysis. Restrictions should be imposed on re-appropriation of budgetary allocations meant for women and girls. Closer monitoring, accountability, and community involvement should be encouraged to improve implementation of programmes. Gender budget initiatives can improve efficiency of resource allocations, and strengthen economic governance through a framework that can enhance accountability and transparency.
Gender Issues


Gender inequality in the work environment at institutes of higher learning in science and technology in India. Kanpur : Indian Institute of Technology Kanpur, Dept. of Humanities and Social Sciences. 20 p.

Key Words: 1. WOMEN WELFARE 2. WOMEN SCIENTISTS 3. GENDER DISCRIMINATION SCIENTISTS 4. WORKING WOMEN 5. PATRIARCHY 6. WORK ENVIRONMENT 7. WORK SITUATION 8. SCIENCE AND TECHNOLOGY 9. GENDER BIAS. 10. SCIENTISTS.

Abstract: The present study assessed whether gender equality existed in the working environment at institutes of higher learning in science and technology in India. The study was conducted at Indian Institute of Technology, Delhi; IIT Kharagpur; Jadavpur University and University of Roorkee. Women faculty members of the above institutes were selected as the sample. Data was collected using triangulation, i.e. a combination of questionnaire, interview schedule, case studies and unobtrusive methods of observation. Findings showed that although rules of work were codified in the formal application of rules, about 40% respondents reported "subtle" or covert discrimination in favour of men. Some discriminatory practices, like not appointing women as faculty members in civil and mechanical engineering departments, were being followed until the 1990s. Women candidates who qualified the joint entrance exam for entry into UG programmes of IITs were not allowed to study mining, as Sections 46 (1) of the Mines Act 1952 did not permit women to work in mines. The institutes did not have any formal written rules that defined the method of assignment of research scholars to faculty members. Several respondents reported that colleagues were unable to accept a woman as equal. Lack of support facilities, such as insufficient separate toilets and their poor maintenance, security problems for women on the campus of some institutes, and the neglect of child care facility, also pointed to the failure of the system to recognize the special needs of women. Thus, there was a general feeling among women faculty members that the system was quite impervious to the needs of women. It was found that in science institutions the informal environment of work was influenced by a lack of critical mass of women, which led to a situation of tokenism. The Indian situation is complicated further due to social stereotypes that influenced the dynamics of informal interaction with colleagues, students and staff. About 75% respondents agreed that women were more noticeable. About 34% respondents felt that men colleagues often tended to form their own groups, isolating women scientists, and about 24% felt that this happened "sometimes".  

78
Around 10% respondents received indecent anonymous phone calls and e-mails. About 84% respondents agreed that they had fewer contacts because of the problems in interacting with men scientists, family constraints, lack of mobility, lack of time, and almost all agreed that contacts were quite important for success. Participation in informal activities by men was found to be higher than that of women. This study supported arguments that gender is one of the particularistic elements that has not been influenced on the universalistic scientific procedures and rewards. It is desirable that the solutions applied to non-western societies are suitably modified according to local conditions. Attaining a critical mass of women scientists might be more relevant because of the need for role models, and its general impact on the status of women. The need for mentoring and networking programmes and provision of child care facilities should be recognized.

Gender in the making of a scientist: a study of the academic environment and aspirations of men and women doctoral students at the premier institutes of science and technology in India. Kanpur: Indian Institute of Technology. 130 p.

Key Words: 1. WOMEN WELFARE 2. WOMEN SCIENTISTS 3. SCIENTISTS 4. GENDER DIFFERENCES 5. SCIENTIFIC INSTITUTION 6. ENVIRONMENT SCIENTIFIC INSTITUTIONS 7. INDIAN INSTITUTES OF TECHNOLOGY.

Abstract: Participation of women in higher education in science, including engineering, is very low. The present study was done to compare the socio-economic background and the role of family in the lives of men and women students pursuing doctoral education and engineering; differences in the perceptions of students regarding environment in the institute; to compare the nature of problems faced by them; and to compare the career aspirations and ambitions of students. Two prestigious Indian Institutes of Technology (IITs) of North India were selected for the study and data was collected through questionnaires/interviews. Of the total 81 men and 78 women, about 30% boys were born in a village and only one female respondent was born in a village. Parents of a majority of female doctoral students (40%) were better educated than those of male students (19%). Mothers of 11% boys were illiterate and 62% had never gone beyond the school level. More girls (64%) had a relative in science than boys (48%). More than 70% respondents were unmarried. Both male and female students agreed that stereotypes against women in science exist in society. About 33% boys believed that men were better teachers while only 10% girls thought so. Majority of students rejected the idea that faculty members were partial in grading. Around 60% female students interacted with their advisors for thesis work in the office only, while only 33% male students did so. It
was found that competition among students of the same laboratory and hierarchy among junior and senior scholars affected women adversely. One of the most important problems faced by girls was a diminutive in-group, that was a tiny circle of friends, seniors and juniors to depend on or to ask for help. Majority (58%) of male respondents interacted with scholars of their entire department, only 44% women did so. About 50% females and 55% male students agreed or partly agreed that boys found it difficult to ask women for help in assignments. Data showed that male scholars perceived the academic environment as being biased in favour of women, on the other hand, women research scholars perceived discrimination against themselves. More boys than girls agreed that professors treated girls differently in class, that professors had lower expectations from girls, and women faculty members gave special attention or were partial to girls. Only 30% girls were confident of producing good results, while the corresponding figure for boys was 53%. Findings showed that 48.5% boys opted for ‘professional success’ as their long term goal, while only 15% girls opted for it. 70.5% girls reported ‘balancing career with home’ as their long term goal. There is a need to recognize the problem of isolation of girls and also an open research environment in terms of avoiding groupism among students, and avoidance of spill over of rivalry between supervisors and faculty members to the detriment of students, which would help in making the academic environment healthier for all.


Key Words : 1.WOMEN WELFARE 2.GENDER AUDIT 3.GENDER PLANNING 4.GENDER 5.GENDER EMPOWERMENT MEASURE 6.FEMALE WORK PARTICIPATION RATE 7.WORK PARTICIPATION RATE 8.EMPOWERMENT WOMEN.

Abstract : The National Policy for Women's Empowerment mandates gender audits as an important method of monitoring women's empowerment. The main objective of the present study was to develop gender audits at the district level. 5000 households were surveyed from 2 districts, namely, Bangalore (urban) and Tumkur (rural) with 2,500 households from each district. Quantitative data was collected through household surveys and secondary data sources. Qualitative data was collected through Focus Group Discussions. Sex ratio was unfavourable to females in both the districts. Sex ratio in the 0-6 age group observed in the survey was much lower than the census figures (1991) and it was lower in Bangalore than in Tumkur. The reason for this was female foeticide following sex determination tests that
were done. Work Participation Rate (WPR) for females (main and marginal workers) was less than that for males especially in Bangalore (16% females: 57% males). Agricultural wage rates per day were higher for males than for females. In Tumkur, the wage rates for males and females were Rs.31/- and Rs.22/- respectively. Also, 40% of the females worked as unpaid family workers as opposed to 16% males. In Tumkur, girl children spent more time than male children in domestic services such as fetching water, fuel, cleaning, etc. Most girls were not able to go to schools due to this. More than two-thirds of the time spent on economic activities by women was unpaid. Literacy rates were higher for males than females in both the districts. However, there had been an increase in the literacy rates from 1991 to 1999 and the increase in literacy rate was greater for females than for males. Also, the male and female students who appeared for 10th Board Examination were equal in numbers. Not even 1% of the married men (20-49 years) had undergone sterilization, whereas nearly half the number of married women (15-44 years) had been sterilized, despite the fact that male sterilization was simpler and safer. 54% of the women in Tumkur were sterilized as opposed to 45% in Bangalore. Morbidity rates were higher for females than for males in both the districts. In Bangalore, morbidity rate for females was 37% higher than that for males. Only a small percentage of women owned assets (agricultural land, flat, livestock, etc.). In Tumkur men owned ten times more agricultural land and five times more flats than females. Urban women in Bangalore had greater control over their earnings and savings as compared to rural women in Tumkur. However, very few women had any savings (6 in the entire survey). Only 17% of the women in Tumkur and 33% of the women in Bangalore had no restrictions placed on their mobility. Restrictions were placed when women wanted to go shopping or wanted to go to a hotel/cinema, etc. All women conformed to gender relations that permitted them to go out, and permission was given by men in the family. Also, decisions about property, loans, number of children were taken by men, whereas women were confined to making decisions about rearing of children. 63% of the women were not involved in decision making in the family. Women also reported facing violence in the initial stages of marriage and were harassed by in-laws on the issue of having girl children. Harassment was faced about the issue of not earning enough money (working women) or not managing money properly (housewives), or mischief by the children. Men also picked up quarrels when under the influence of alcohol or when they were suspicious of their wives' character. Non-death crimes (rapes, physical assaults, etc.) against women were more in Bangalore than in Tumkur. Participation of women in elections was nil and it was seen that all contestants to the Lok Sabha elections were males. There is a need to sensitize various government agencies in the ways of handling gender differences. Professional empowerment should go beyond administrative and technical positions and should include participation in cooperatives and self help groups. Bringing about women's ownership or control over assets is extremely important.
Talwar, Sabanna et al. (2006).

Key Words: 1. WOMEN WELFARE 2. DISCRIMINATION AGAINST WOMEN 3. INCOME WOMEN 4. GENDER DISCRIMINATION 5. EDUCATION WOMEN 6. EMPLOYMENT WOMEN 7. WAGE DIFFERENCES 8. ANDHRA PRADESH 9. KARNATAKA.

Abstract: The present study was conducted to find out the socio-economic factors responsible for gender discrimination in the field of education and employment in a backward region like Hyderabad-Karnataka in comparison with Mysore, Telangana and Marathwada regions. 800 rural and 800 urban females were selected. 34% women in rural areas and 38% women in urban areas were from upper castes. 25.25% rural and 21.25% urban women were SC/ST; 24.25% rural and 21.63% urban women belonged to backward classes; and 16.50% and 18.25% women belonged to minority community in rural and urban areas. It was found that 30.69% women were self-employed, followed by Government employees (24.25%), private employees employed in various private business agencies or were entrepreneurs (23.37%); and agricultural workers (21.69%). 576 (72%) women in rural areas and 567 (70.87%) in urban areas were married. The mean age at marriage is high in urban areas; it was 20.20 years in rural and 21.00 years in urban areas. The mean number of children of rural respondents was 2.29, while the mean number of children of urban women was 2.31. The mean number of male children was nominally higher in rural areas (1.60) than urban (1.56) areas. The mean size of the family was 5.85 in rural and 5.38 in urban areas. The mean distance between school and home of women respondents while studying was 1.71 kms in rural areas and 1.62 kms in urban areas. In urban areas, 5.75% women respondents and in rural areas 6.00% respondents used bicycles and bus services respectively. 455 (56.88%) women in rural areas and 376 (47.00%) in urban areas experienced gender discrimination while at school. About 44.84% women respondents faced discrimination in household activities, followed by facilities for study (20.22%), availability of time for school (16.70%), play (13.41%), and regularity of school (4.83%). 23.63% women had permanent jobs, 34.63% had temporary jobs, and 41.75% women had daily wage jobs in rural areas of the study region. In urban areas, 32.75% women were in permanent, 43.25% were in temporary, and 24% were in daily wage jobs. About 17.13% women in rural areas stated lack of skills/ training and 12.88% women respondents stated 'competition with women' to be two important constraints they faced at the time of entry into the work force. In urban areas, 20.5% women respondents stated competition with
men, 15.63% women stated lack of education, 14.25% women stated lack of help in the household, and 12.63% women respondents stated lack of training as the important constraints faced. 36.87% spent their own money but 43.13% women handed their money over to the husband in rural areas. In urban areas 44.75% women spend money on their own and 39.62% handed it over to their husband. The following suggestions were made to overcome this discrimination. Educational programmes for girls should be initiated in different fields. The number of government girls schools should be increased for easy accessibility of basic education to girls. Women must be facilitated to gain higher education, especially technical education, to obtain economic benefits from modern occupations. Organizational capacity should be built among women, and formation of groups/professional organizations like SHGs, Credit Societies, etc. should be encouraged.
Health and Women

Institute of Social Studies Trust, Bangalore. (1997).
Study of initiatives for increasing community involvement in Karnataka and Tamil Nadu. Bangalore: ISST. 83 p.

Key Words: 1. WOMEN WELFARE 2. COMMUNITY INVOLVEMENT 3. COMMUNITY PARTICIPATION 4. COMMUNITY DEVELOPMENT 5. ROLE OF NGOs 6. VOLUNTARY ORGANIZATIONS 7. PRIMARY HEALTH CENTRES 8. ANGANWADI WORKERS 9. HEALTH SYSTEM 10. KARNATAKA 11. TAMIL NADU.

Abstract: Health of women has profound implications for the development and well-being of a nation. Poverty, health and development are closely interlinked. The number of women who receive antenatal and post partum care through family welfare programme is still relatively low. A variety of socio-economic factors are responsible for women's lower educational attainment, the need for female labour at home, low expected returns of girls education, and social restrictions. The objectives of the study were to review the experiences of one district from each state in community involvement initiatives; to formulate operationally useful guidelines for effective training of panchayat functionaries; and prepare a communication strategy and communication package for training. One district in each state was selected for the study, Bijapur in Karnataka and Madurai in Tamil Nadu. The persons interviewed in Bijapur district were 28 and data was collected over two months. Tamil Nadu has a weak tradition of Panchayati Raj and is one of the last states to conduct elections to the 3-tier system, which were finally held in October 1996. In Karnataka, the fertility rate was 2.9 for women (15-49 years) which was about 15% lower than the national average. Most women knew about family planning methods but their knowledge was limited to sterilization. Their main source of Family Planning messages has been the electronic mass media, namely radio (52%) and television (22%). The IMR was 42% higher and the CMR was 78% higher in rural areas compared to urban areas. In Tamil Nadu, family welfare services are extended through a network of 1222 Primary Health Centres and 118 Post Partum Centres. Madurai has 41 primary health centres, 314 sub-centres and 87 NGOs are providing health care facilities. The sex ratio was 974. 24% ever married women married a first cousin and 22% married a second cousin, uncle or other blood relative. Overall 90% illiterate women approved of family planning. Breastfeeding was nearly universal in Tamil Nadu. Common illnesses found in Bijapur were diarrhoea, under nutrition and anaemia. Training programs were insufficient, and no training programs had been conducted for panchayat members. In the taluk (block) there were no drinking water
facilities. Common health problems were known to most of the people. Mass media has played a very important part in propagating health messages. On the whole, girls lacked knowledge about pregnancy and child care. There is a growing necessity to have training programs organized for panchayat members in both the districts, and to motivate and initiate them to articulate and demand health services. Increased educational status is associated with better bargaining power, control over resources, knowledge of skills, and informed choices for decision making. The IEC program should go beyond selective media methods to interpersonal communication. Panchayats can mobilize people to demand for services including health services.


Key Words: 1. WOMEN WELFARE 2. HEALTH STATUS 3. WOMEN'S EDUCATION 4. FAMILY WELFARE 5. LITERACY 6. IMPACT OF WOMEN'S EDUCATION.

Abstract: It is estimated that about 850 million people in the world are illiterate, and of them about 50% are in India alone. But if we take the illiteracy rate among women, the situation becomes more alarming. High morbidity and high mortality, particularly among infants and children, are an index not only of a community's low health level but also of inadequate health education. This study was undertaken to assess the impact of women's education on health and family welfare aspects. The sample comprised 100 mothers (50 illiterate and 50 literate) of school going children. Random sampling method was used in selecting the sample from Gyampalli village of K.V. Palle Mandal of Chittoor District. A questionnaire prepared for the purpose of data collection, contained thirty questions and was broadly divided into 3 categories namely physical health, child care and sanitation, and nutrition and diet. Results of the study indicated that a large percentage of women were caught up in old beliefs and faiths due to lack of knowledge which can be provided only through education on hygiene, sanitation, etc. which helps in reducing child mortality by taking care of diseases like diarrhoea. There were not many differences among responses of literate and illiterate mothers regarding knowledge. However, significant differences existed among some statements such as 'Our traditional habit of eating more rice and less vegetables and lentil makes a proper nutritional meal' which recorded 57% positive responses by illiterate mothers as compare to nil response by literate mothers. Illiterate mothers lacked knowledge about nutrition and the effect of surroundings on the child's health. Hence, to fill up the gaps in knowledge, it is essential that nutrition and health education is imparted to them, as a great number of diseases can be prevented with little or no medical intervention if the adult members of the community were adequately informed about them and were encouraged to take necessary precautions in time. So the education of adult women, who constitute an important and sizeable portion of the country's population, is the need of the hour.
Homes for Women/ Short Stay Homes


Key Words : 1. WOMEN WELFARE  2. SHORT STAY HOMES  3. AGED  4. OLD AGE HOMES  5. HOMES FOR AGED  6. WOMEN IN DISTRESS  7. CASE STUDIES.

Abstract : Short Stay Homes (SSHs) are residential institutions which provide accommodation, shelter and support services to women in distress who are victims of social discrimination. The main objective of the study was to devise a model home with adequate support structure to rehabilitate and empower women in distress. The study was carried out in 10 SSHs in 7 states, and included 258 residents, 56 management and staff, and 12 administrators. Findings revealed that only 3 out of 10 Homes had sufficient outside space which could be utilized for activities of inmates, as children's playgrounds, etc. In two Homes the space was utilized for installing biogas plant, water storage tanks and other infrastructural requirements. In all Homes economic activities were carried on inside the Home in 2 or 3 separate rooms. In the living area there were adequate bedrooms, bath/toilet facilities and office area in all except 2 Homes. It was observed that in view of the extraordinary rise in rents it was difficult to find new premises for shifting the Home, at a reasonable distance from the town, even though due to seepage and disrepair, this was an urgent need in 2 cases. The occupancy of Homes was on an average 80-85%.

Girls and women in the age group 15-35 years are admitted if they are from one of these categories: women at risk in their own homes, victims of domestic violence, dowry harassment, deserted/divorced women, those abandoned by companions, and unwed mothers. The Homes provide board and lodging facilities, toilet and bath facilities, and are perceived by residents to be in the range of 'adequate to good'. Maintenance of cleanliness and hygiene is up to the desired level in almost all Homes. In all Homes inmates cook food three times a day in the case of wheat based menus and twice a day in rice eating regions. Dal (pulses) and vegetables are a part of the diet. It was found that in the eastern region non-vegetarian items are cooked twice a week. The food is adequate in quantity, but the nutritive value can be increased by the addition of low cost, locally available nutritious grains like ragi, or gram wheat powder (sattu), which was done only in one Home. Most Homes had weekly or fortnightly visits by a doctor who was paid Rs. 600 per month. The nature of counselling and rehabilitation given in SSHs can be assessed from the responses of beneficiaries when questioned on the benefits of counselling. Inmates from below the poverty level, who formed 54% to 82% of the population in 5 Homes, and
comprised 62% to 85% of the group having low literacy, could perceive benefits ranging from 'nil' to 'very little' from counselling. In contrast, inmates of four Homes who were 54% to 100% from lower middle class, and had education levels of 70% to 100% of high school and above, could perceive a great deal of benefit 'from the guidance provided by the Counsellor'. On an average, only 1% of all respondents except from three Homes, found that counselling helped to solve their problems. From the data it can be presumed that the present methods of counselling become much more effective when supported by other services. It was concluded that poverty and deprivation are the two biggest adversities which women of all castes have to deal with. It was recommended that there is need for regular in-service orientation programmes for administrative personnel. There is also need to provide professional training for raising competence levels of Wardens, Counsellors, Rehabilitation Officers, and Accountants to coordinate with police and civic authorities for extending help to SSHs. Instead of sanctioning grants on the basis of quarterly inspection reports, grant sanction should be for 5 years, after 2 year assessment periods. Staff salaries should be raised to be at par with salaries of government staff similarly employed; and HRA and annual increment should be provided. Utilization of non-recurring grants should be specified in detail to ensure expenditure on facilities for inmates. A manual should be provided for administration and service delivery.

NIPCCD, Regional Centre, Lucknow. (2009).

Key Words: 1. WOMEN WELFARE 2. SHORT STAY HOMES 3. INSTITUTIONS FOR WOMEN 4. WOMEN IN DISTRESS 5. INCOME GENERATION.

Abstract: A status appraisal of Short Stay Homes (SSHs) in UP was conducted by NIPCCD, Regional Centre Lucknow, Central Social Welfare Board, State Social Welfare Board (UP), and Social Welfare Department of Government of UP. The study covered 8 short stay homes, i.e. 25% of the total 30 SSHs functioning in UP, situated at Lakhimpur Kheri, Raebareli, Kanpur, Pratapgarh, Mirzapur, Allahabad, Deoria and Saharanpur. SSHs were implementing a variety of programmes like women helpline, family counselling centres, crèches, SHGs, vocational training, income generation activities, rehabilitation, medical care, campaigns, and other programmes in the areas of health, education, agriculture and welfare. The inmates residing in SSHs were victims of marital disputes and family discord (50.55%), victims of harassment and facing moral danger (34.26%), destitute women (10.66%), victims of trafficking (2.25%), and 2.24% women had runaway from home. 63.48%
were unmarried and only 36.5% were married. Regarding educational status it was found that 11.23% were illiterate, 65.73% were educated up to 8th Standard, 15.16% were matriculate, 5.61% were intermediate and 2.24% women were graduates. To ensure appropriate rehabilitation, voluntary organizations should find suitable individual placement for each inmate. Police often made the situation adverse and hazardous for women therefore officials of SSHs avoided the involvement of police. Police need to play a constructive role in the matter. It was also suggested that every police station, anganwadi centre, PRI member (at village, block and district level), health centre personnel, elected representatives (MLAs and MPs) of the area, etc. should be aware of the services provided by SSHs, and a list of SSHs with complete addresses and telephone numbers needs to be prepared and supplied to them.


Key Words: 1. WOMEN WELFARE 2. DESTITUTE WOMEN 3. NEEDS OF DESTITUTE WOMEN 4. INSTITUTIONAL CARE WOMEN 5. MAHILA MANDIR 6. WOMEN IN DISTRESS 7. KERALA.

Abstract: In India, there are a large number of after care homes and institutions for the care and protection of destitute women. Also, the Social Welfare Departments of all States and Central Social Welfare Board (CSWB) run mahila mandirs (women temples) under the government's direct control. The objectives of the present study were to understand the psychological resources and psycho-social needs of destitute women living in mahila mandirs, personality profiles, levels of emotional maturity, adjustment capability and problems faced by the inmates of mahila mandirs, and examine the implementation of various rehabilitation programmes. Data was collected through field survey from 121 inmates living in 11 mahila mandirs, and in addition from 50 slum dwellers who were deserted. The age of inmates ranged from 26-56 years and nearly 90% of them belonged to low socio-economic status. Many inmates suffered from various psycho-somatic illnesses. Average allowance for an inmate of the mahila mandir was only Rs 300/- per month. Authorities of mahila mandirs reported that destitute women were extroverted, easily suggestible, irresponsible, unskilled, highly emotional, maladjusted and their coping skills were extremely poor. Many destitute women who were rehabilitated in the form of marriage or job placement, found their way back to institutions or streets again. Authorities had punitive attitude and behaviour towards inmates which increased the distress of these women and led to mutual antagonism, which
led to failure of effective implementation of programmes of Social Welfare Department. Institutions and care homes had not given any importance to the rehabilitation of these women, specially in the areas of health, education and self-employment, or made any attempt in the area of distress management and legal aid for abandoned and deserted women. Homes had poor living conditions, lack of security and inadequate staff. No counselling services were available for inmates and mentally ill patients. There were regular quarrels among inmates. Nearly 18% to 28% inmates were dissatisfied with the freedom allowed by institutions. Reasons for seeking shelter were alcoholic father, family problems, failure in love, problems with husband, sexual abuse, being discarded due to illness, and so on. There is requirement for skills training and short term personality development courses for destitute women. Also, job reservation for divorced women and unwed mothers would be a good measure to make them economically independent. Medical care should also be provided to mentally ill patients.
Marriage


Key Words: 1. WOMEN WELFARE 2. SINGLE WOMEN 3. MARRIAGE 4. PERCEPTION OF MARRIAGE 5. CAREER 6. CAREER CONSCIOUS 7. WORKING WOMEN 8. VARANASI 9. UTTAR PRADESH.

Abstract: Marriage choices are very much linked up with economic, demographic and cultural conditions. Today, the increasing incidence of singlehood among middle class women is explained by their economic independence. The objectives of the study were to ascertain the changing status of single women in urban areas and to examine how far they have been integrated into modern Indian society; what sort of change has come into the lives of single women in the present social context; what is the nature and extent of change in their informal social relations; and what is the pattern and accommodation of acceptance in the social milieu, family, community and workplace. This inter-generational study includes the never-married single women between the age group 30 and above. For the present study, a small sample of 30 single working women from different colleges and departments of Banaras Hindu University have been taken. A study of changing attitudes towards these issues is very significant in finding out the changing social behaviour. The collected data reveals that out of 26 Hindu respondents most of them (86.7%) were from upper castes, 42.3% (11) belonged to Brahmin, 26.9% (7) from Kayastha, 11.5% (3) from Rajput, and 3.8% (1) were from Bhumihar and Kurmi caste each. About 23.2% women were found to be living in their own house, 26.6% in parental house, 13.3% in rented accommodation and 36.6% in allotted quarters. About 40% respondents were living in nuclear families, 20% in joint families, 3.3% in extended families, and 36.6% of them had no specific family pattern, and were either living all alone, or living with one of their parents. Education for single women was very important because it was only after acquiring education that they could get a job. Their minimum qualification was a post graduate degree, with 80% having doctorate degrees. Mothers of the respondents above 45 years were less educated than the mothers of respondents in the age group 30-45 years. In some cases, girls were unwilling to marry in the absence of a suitable partner of their choice, academic calibre and understanding, etc. Only 3.3% respondents from the older age group reported that she remained unmarried out of her choice. 6.6% respondents from older age group and 3.3% from the younger age group wanted to serve society. 3.3% respondents in the younger age
group were sports persons and felt that they were misfits in society. These days girls do not consider marriage as the “major goal” or “end” of their life and they are finding many more options. About 30% young respondents remained unmarried because of their unwillingness to get married. Respondents approved the idea of compulsory education for women, and the reasons cited were to become economically independent and financially secure (99%), to make them aware and assertive about their rights (85%), to help in establishing self identity (77%), etc. Only 19.9%, 6.6% from 30-45 years age group and 13.3% from above 45 years age group approved of adoption. There is need to treat single persons as a part of the “mainstream or aggregates” and not as a “category” or “others”. Increments should be given to those working single women who have adopted children. Majority of single women suggested the opening of Old Age Homes for Single Women by voluntary organizations or the State. Media can play a significant role in negating the misconceptions, prejudices and bias against single women. Police needs to be reoriented in their thinking and provide security to single women. Above all, the most important aspect is the attitudinal change of society. These women expect society to be sensible, have good human values, and think in a far sighted way.


**Key Words** : 1.LEGISLATION    2.FAMILY COURTS    3.MARITAL PROBLEM    4.DIVORCE 5.MAINTENANCE   6.VARANASI   7.UTTAR PRADESH.

**Abstract** : Family court is a special court which is mainly concerned with resolving family disputes. The Government of India established family courts with the objective that family disputes should be dealt with separately from general criminal cases so that they are handled with a humanitarian view, and to enable women to approach the court easily without having to appear with general criminals. The efficiency of a family court depends on the speedy disposal of cases and providing justice to the aggrieved parties, especially victimized women. This is a collaborative case study of the Centre for Women’s Studies and Development (CWSD), Banaras Hindu University (BHU), Varanasi and the National Institute of Public Cooperation and Child Development, New Delhi, which is an autonomous body under the Ministry of Women and Child Development. The study investigated the type of cases dealt with by the family court, the reasons for delay, and the number of cases pending in the court. An intensive review of 150 cases was taken up. Cases were selected randomly and records, registers and case diaries of the court were scanned. Women victims and family court judges were interviewed and observations were made. A total of 5033 cases were registered in the Family Court Varanasi under different
categories. The highest number of cases numbering 2655 were registered under
dissolution of marriage; the next highest number of cases, 2039, were filed for
restitution of conjugal rights; the third highest, 162, were filed for custody of
children; and the fourth highest, comprising 71 cases, were to prove that their
marriages were null and void. Of the 5033 cases registered, 1025 cases were
disposed off under dissolution of marriage, of which 781 cases were for restoration
of conjugal rights: 53 cases were for custody of child; 33 cases were for null and
void marriages; 16 cases were dissolved for property rights; and 16 were settled for
judicial separation. The highest number of pending cases, 1630, were for dissolution
of marriage. Of the 150 cases, 91 were filed by female clients and 59 by males.
About 55% women victims were in the age group 18-28 years and their marriages
were already wrecked, whereas 25% victims were 29-39 years old, 9% were around
40 years, and 1% were below the legal marriage age of 18 years. 46% of the victims’
husbands were between 21 to 31 years, 31% were between 32 and 42 years, 11%
were 43 years and above, and only 1% were under the legal marriageable age of 21
years. The relationship of support services like NGOs, Mahila Thanas (Women Police
Stations), Counselling Centres, Short Stay Homes, Crèches, etc. with the Family
Court Varanasi was not good. There were 17 NGOs working actively in Varanasi.
There was only one Mahila Thana for the whole district. To date, the Family Court
had not referred any case to the Mahila Thana. Although the Family Court Act
provides that cruelty, physical or mental, is a ground for dissolution of marriage, it
was difficult for illiterate women to gather evidence to prove cruelty. It was found
that the Family Court, which was basically formed to help women approach the Court
easily to present their own cases, was not functioning in that manner. It was
recommended that the Court should immediately be shifted to a peaceful
environment away from the premises of the ordinary civil court so as to enable the
affected couples to resolve their disputes and minimize social stigma. The
interference of lawyers in these cases must be prohibited. Incorporation of
counselling centres within the Family Court premises was recommended. The working
environment for the court staff needed improvement. Disposal of the cases should
be speedy, and a Vigilance Cell should be incorporated.

Across-region marriages : poverty, female migration and the sex ratio.

Key Words : 1.WOMEN WELFARE 2.MARRIAGE 3.ACROSS REGION MARRIAGE
4.FEMALE MIGRATION 5.SEX RATIO 6.POVERTY.

Abstract : The study examined the impact of the low sex ratio on marriage
practices and analysed the unusual response to the shortage of marriageable girls in
North India. The study investigated two distinct sets of networks, one between Haryana and Assam and the other between West Bengal/Bihar and Uttar Pradesh. The study of two villages of Sonepat district in Haryana and Etah district in UP revealed the occurrences of such marriages in almost every caste. From the sample of 13 across-region marriages, 2 were with Brahmins, 2 with Jats, 3 with Dhimars, 2 with Kumhaars, 1 with Anahir, 2 with Telis and 1 with a Gadariya. The study revealed that poverty in the bride’s community and the adverse sex ratio among the bridegroom’s community were main factors responsible for bringing about such cross-regional, cross-cultural marriages. Women faced greater burden of adjustment having been dislocated from their local and cultural background. Marriages divert women of their sources of social security, and their cultural moorings. Women were forced to embrace their husband’s culture such as purdah practices, loss of mobility and freedom, loss of social safety networks, loss of cultural practices. Local women faced greater violence as compared to outside women. Cross-region marriages were made acceptable by adverse social conditions of poverty, dowry and low sex ratio. The long term unintended consequences of such marriages, which perforce broke cultural norms and barriers, could be shifts in dowry payments, a turn around in the adverse sex ratio, and a blurring of distinctions of caste, region and language. Low sex ratio may raise the value of local women due to their scarcity and they would be married to the best men in their own community. It is also possible that this would lead to dowry-less marriages, with men marrying poor women of their own community. There is need to research the wide variety of emerging social patterns due to cross-region marriages.
Mental Health/ Stress

Dave, Parul et al. (2005).
Mental health and aging: focus on women with depression. Vadodara: M.S. Univ., Women’s Studies and Research Centre. 181 p.


Abstract: Depression is one of the most common mental disorders that can affect anyone regardless of age, race, class or gender. Depression in older women may be more complex due to the difficulty in recognizing depression and their double disadvantage of being women and elderly persons. The present study examined the prevalence of depression and other mental health disorders by assessing the records of psychiatric units of all the major private and public hospitals and private practitioners in six major cities of Gujarat, namely Vadodara, Ahmedabad, Bhavnagar, Rajkot, Jamnagar and Surat. It also assessed the nutritional, psycho-social and cultural aspects of the population. 24 hour dietary recall method was used to assess nutritional intake, and anthropometric measurements were used to assess nutritional status. Women above 40 years of age who had a moderate degree of depression, were interviewed. The number of men who availed mental health services was higher than that of women, both retrospectively (56% men; 44% women) and prospectively (54.5% men; 44% women), except for the prospective data in Jamnagar, where the number of women was slightly higher than that of men. The most prevalent disorders were depression (50%), schizophrenia (60%), bipolar disorder and anxiety disorders (0.8%). The cases of depression were high in Surat (retrospective 32.2%; prospective 34.3%), Ahmedabad (retrospective 30.6%; prospective 25.3%), Vadodara (22.5%), Bhavnagar (22.2%) and Rajkot (21.5%). In Bhavnagar, the percentage of depression was 27.3% in retrospective data and 17% in prospective data. In Rajkot, depression was 29% prospective data and 13.9% in retrospective data. Depression was highest in the age group 61-75 years (33.4%), followed by the age group 41-60 years (31%). Menopausal and associated changes explain the higher prevalence of depression in women in the age group of 41-60 years. Across the six major cities, schizophrenia ranked first among all mental disorders - in Vadodara (retrospective 34.1%; prospective 30.7%) and Jamnagar (retrospective and prospective 19.1% each. The study found that depressed women had a history of alcohol dependence. Only 4.62% had minimal depression, 11.29% women had mild depression, and 18.18% women had severe depression. Least nutrient intake was seen among low income women above 60 years of age. Further, younger
depressed women from the middle income group showed a higher significant difference (p<0.05) and better nutrient intake with respect to energy, iron, folic acid and amino acids compared to older depressed women of the same income group. Findings also revealed significant difference (p<0.05) with poor intake of folic acid, selenium, vitamin B6 and B12. The study also revealed that the prevalence of major health problems was higher in middle income women. Locomotor problems ranked first (52%) in all the income groups, followed by oral cavity problems (43.3%) and cardiovascular problems (31%) in middle income women above 60 years of age. Nearly 33% depressed high income women aged 40-60 years reported respiratory and gastrointestinal (23.3%) problems. Over half the women with depression in the 40-60 years age group, from both low and middle income groups, were still menstruating, while 60% of their counterparts in the high income group were not menstruating. Complaints like 'backache', change in vision, pain in joints and limbs, slight memory loss and dizziness were reported mainly by women above 60 years of age which could be associated with ageing. The most commonly reported psychological symptoms reported by 60-80 of the depressed women were 'feeling tired', 'irritation' and 'depression', 'loss of interest in most things', 'isolation', and 'nervousness', which were reported by half the women. The study concluded that depression is not a disease but a serious illness with biological, psychological and social aspects relevant to its cause, symptoms and treatment. The study recommended that research is needed in the use of herbal medicines for the treatment of depression that could show pronounced benefit in improving the health status.


Key Words : 1. WOMEN WELFARE 2. MENTAL HEALTH 3. WORKING WOMEN 4. STRESS 5. WORK ENVIRONMENT 6. FAMILY ENVIRONMENT.

Abstract : The study was conducted by Department of Psychology, Jai Narain Vyas University, Jodhpur to know the unique environmental stress attributes of working women in the public sector as compared to private sector and non-working women; to know the effect of family environment dimensions on the mental health of working women in both the sectors vis-à-vis non-working women; to know what are the changes in mental health status as a result of work environment factors affecting working women in public and private sector and non-working women; and to understand the level of insecurity among women in the private sector. Incidental
purposive sampling technique was used to select the sample. In the present study, 386 working and 193 non-working women were taken as the sample. Findings indicated that the feeling of insecurity, unsafety and lack of self-confidence was more among working women. Family members of working women in the public sector and non-working women were concerned and committed to family affairs, and were found supportive to each other. The family members of private working women encouraged them to be assertive, self-sufficient and to make decisions on their own. They also preferred an achievement oriented or competitive framework than their counterparts. The order and organization level was higher in the families of private women in terms of structuring family activities, financial planning and explicitness and clarity with regard to family rules and responsibilities than the families of women working under public sector and non-working group. Feelings of personal development and growth and the desire to be self sufficient was higher among working women in the public sector. Working environment of the private sector emphasized good planning, efficiency and encouraged the worker to "get that work done", which was different from their counterparts. Private sector working women perceive direct stresses like insecurity of jobs, excess work and less freedom due to which their emotional balance, adjustment process and tolerance level was under great threat which influenced their mental health as compared to women working in public sector and non-working women respectively. The problems faced by private and public sector working women in India are not at all insurmountable. Perceptible changes can definitely be brought about with sincere efforts and proper attention from all concerned. The actual situation must be brought out in the open by conducting more fact oriented studies, and researcher's efforts can create social awareness about their problems among all. Social scientists must realize their responsibilities and work in a more coherent, practical and result oriented manner.


**Key Words**: 1. WOMEN WELFARE  2. STRESS  3. STRESS AMONG WOMEN  4. WOMEN WITH YOUNG CHILDREN  4. HOUSE WIFE  5. HOME MAKER  6. MOTHER  7. STRESS OF MOTHER  8. WORKING MOTHER.

**Abstract**: The study was conducted in Kerala to explore stress situations experienced in the management of young children; to understand the stress symptoms encountered by homemakers; to find out the impact of stress, and strategies adopted to cope with stress situations. Purposive sampling method was used to select 100 homemakers, 50 gainfully employed and 50 full time homemakers,
aged 26-35 years, all having two young children less than 6 years, with one child alone going to school. Direct personal interview method was followed using interview schedules as a tool. The ill health of children was the cause of increased stress for 82% homemakers on an average. The delay of children to return home from school was also felt to be highly stressful. The 'run' below 'job' responsibilities caused higher stress to 84% of the gainfully employed homemakers, followed by not keeping pace with deadlines enforced by officers (80%). Feeling sad, confused state of mind, anxiety, anger, inability to decide and loneliness were seen as major psychological symptoms. When homemakers were under stress they had bouts of crying silently, or scolding their children, etc. Listening to music was the best option for relaxation. Most stressful factors which affected homemakers were family problems and quarreling with parents/parents in-law and spouse. It was recommended that the organization can initiate auxiliary arrangements for working women with young children to have residential arrangements, baby care centers, etc. Home help schemes to care for children or bed-ridden elderly, as well the system of baby sitting can be encouraged. Guidance and counselling centers and religious organizations may extend professional help for identifying and controlling general stress situation. Better interpersonal relationships, strengthening of family ties, and reorienting human values can strengthen families and society in leading a more peaceful life.

Mental health status of working middle-aged women: a study of school teachers of Varanasi City. Varanasi: Banaras Hindu Univ., Faculty of Social Sciences, Centre for Women’s Studies and Development. 68 p.


Abstract: In Indian society, women are the nucleus of a family around which the members live their family life tied with forces of love, affection, and emotion. This study relates to working women who are in their middle age of life. The objectives of the present work were to assess the mental health of working middle aged women; to find out the psychosocial stress in this age group; to know about the general physical problems of women; evaluate the reasons of family tension of these lady teachers; compare the mental health status of women who were in menopausal phase with those who were in post-menopausal phase; and to study whether being a woman these teachers are satisfied with their life or lead a so called “happy life”.  

97
Data was collected on a sample of middle-aged lady school teachers of Varanasi City through interview schedules and questionnaires. About 94% subjects were Hindu and the remaining 4% were Muslims and 2% were Christians. Percentage of married subjects was 82% while 8% were unmarried. During middle age, 38% women reported fat gain; 32% tiredness and 22% weak eye sight as the major physical changes experienced. The reasons given for their mental problems were family (36%); and children's education, employment, demands, marriage, etc (14%). Family income of 46% women was more than Rs. 20,000 p.m., whereas 32% had an income of nearly Rs. 10,000 per month. 82% women were living in nuclear families. 50% women reported their family environment as good; 36% had average family environment, and 14% had bad family environment. It is natural to expect some change in physical beauty with increasing age, and it was seen that 86% subjects had a complex about their physical beauty in middle age, while 14% had no complex about it. 84% of the women studied had mental tension at their work place, while 16% felt no mental tension. 62% subjects were underestimated by the family as well as society. Comparison between coping styles and reasons for family tension revealed that 60% subjects adopted avoidance pattern of coping against family tension; 26% had approach coping, and 14% had cognitive behavioural coping. Nearly 46% teachers did not find any change in their husband's behaviour whereas 30% reported negative change in the behaviour and attitude of their husbands. 66% and 46% women had reported adjustment and insecure feelings at the time of their marriage. About 54% of the women were of the opinion that menopause caused physical problems, but only 24% actually faced any physical problem during menopause. It was interesting to note that 64% of these women were not satisfied being a woman; and only 36% were satisfied as a wife, mother or daughter. Psychosocial Stress Scale showed moderate to high level of stress in 54% subjects, 18% cases had low scores. Anxiety level was found to be low in 64% cases and moderate in 32% cases. Programmed interventions like meditation, relaxation and other sensitization programs, aiming at lifestyle changes and emphasis on wellness as personal choices, will change their attitudes, behaviour, quality of life, etc. Such programme interventions will provide enhancement of positive healthy habits, reduce stress and will add quality of life to their greying years. Essential care and some preventive steps, if not taken in middle age, may result in serious problems with the onset of old age.
Panchayati Raj


Key Words: 1. WOMEN WELFARE  2. PANCHAYATI RAJ INSTITUTIONS  3. WOMEN IN PANCHAYATI RAJ  4. ELECTED WOMEN REPRESENTATIVES  5. EMPOWERMENT WOMEN.

Abstract: This study analyzed issues related to elected women representatives vis-à-vis their male counterparts. It investigated their socio-economic characteristics, tracked their political careers over the past three rounds of election, and examined the quality of their post-election participation in terms of performance of their roles. A total of 23 states, 114 districts, 228 blocks and 1368 gram panchayats were selected for the study. The responsibilities that accompany a higher position in panchayati raj institutions (PRIs) are reflected in the higher proportion of Pradhans, as compared to ward members, spending the greater part of their time in panchayats related works. In case of women representatives, prior association with any form of politics was low, and for most women the act of contesting the first election signalled their entry into active politics. Whatever prior association they had was of a limited nature. Overall, 93% male pradhans reported performing their primary role of organizing and attending gram sabha meetings. Though in smaller numbers than male pradhans, 86% female pradhans reported executing this important role of being a local panchayati raj functionary. However, the participation of women citizens of the village was quite low (less than 25%). The selection of beneficiaries for different schemes is usually done during gram sabha meetings (56%). But at least one-third (31%) of the time, these lists are prepared ahead of the meetings and are present for mere approval by the gram sabhas. Elected representatives (81%) mentioned that most of the time the programme guidelines related to drawing up the list of beneficiaries appear to be adhered to. However, the community’s perception about beneficiary selection for different schemes and its implementation were not that high. Training in ‘Rules and Regulations of Panchayats’ and in ‘Roles and Responsibilities of Panchayats’ are very critical for better performance, but these were attended by only 57% and 43% of the representatives respectively. Irrespective of gender and position, three-fifths apparently felt the need for training on ‘Rules and Regulations of Panchayats’. It was found that overall elected women representatives were functioning within an enabling environment at the level of the village, community and the household. The positive impact of working as a panchayati raj functionary is evident from the fact that a sizeable proportion of women representatives perceive enhancement in their
self-esteem (79%), confidence (81%) and decision making ability (74%). While no gender discrimination in panchayats was mentioned by 60% of the elected women representatives, acceptability in panchayat meetings and enabling them to raise issues freely was mentioned by 94% women members. The performance of women representatives who belonged to the younger age category (21-35 years) was better than those who were above 35 years. Educated women representatives showed a significant positive correlation with better performance than those who were illiterate. It was suggested that younger and educated women should be encouraged to join politics. 43% of the women elected did not receive any training. Hence training should not only be made mandatory for all elected representatives, but it should also be organized regularly. Women can become better performers by virtue of being politically more aware and experienced, thus effort should be made not only to maintain the representation of women in politics in terms of their percentage, but also their ability in politics.


Key Words: 1. WOMEN WELFARE 2. PANCHAYATI RAJ 3. POLITICAL PARTICIPATION OF WOMEN 4. LOCAL GOVERNANCE 5. STATUS OF WOMEN 6. RAJASTHAN

Abstract: Indian Women's life encompasses various dimensions of personal, domestic and community life. One of the most crucial aspects of women's emancipation is their political empowerment. Therefore, the present study investigated the social background of women in Panchayati Raj Institutions (PRIs), awareness about the structure and functions of PRIs and the socio-cultural constraints faced by women. For the study, six districts of Jodhpur division of Rajasthan were covered namely Barmer, Jalore, Jaisalmer, Jodhpur, Pali and Sirohi. Rural population in the area ranged between 65% to 92.72%, and the study included 1579 sarpanchs, 42 pradhans and 6 zila pramukhs. In all 234 women sarpanchs, 14 women pradhans, 2 zila pramukhs were selected as women respondents. 231 men respondents (MR), basically chairpersons, of panchayats and panchayat samitis, were also included. The average age of women respondents was between 43-46 years; 31% respondents were literate and 45% were illiterate; and 32% women respondents were from upper castes. The per capita income ranged between Rs. 501 to Rs. 1,100 in 51% cases, 23% had income between Rs. 1,101 to Rs. 1,500 and the remaining 26% had per capita income of more than Rs. 1,500. The socio-economic background of women respondents has significant bearing on their functioning as village sarpanchs. The awareness level of structure and composition of panchayat samiti was
satisfactory among both men and women respondents. But only 50% knew about the provision of reservation of seats for special categories. The study revealed that activities of male respondents extended to almost all areas like village development, budget, education, etc., but women respondents were still confined to the roles assigned to them through PRIs. Women respondents were of the opinion that if national demands get top priority, there can be no local development. They also felt that there should be consensus in all matters. Men respondents felt that programmes of economic development should be pursued even if it meant hardship to people; this was disapproved of by women respondents. 49% women respondents said that the State should intervene in the sphere of religion. Also 85% women respondents felt that local leaders should chalk out their developmental programmes as per local needs. In terms of freedom of expression, 70% women respondents were of the opinion that they have more freedom as compared to yester years. However, 75% women respondents still observed the custom of purdah (veiling). This showed that Indian women live with several socio-cultural constraints, which have a direct bearing on their status and power. 33% women respondents considered themselves equal to men, but 56% male respondents considered women to be inferior to them. Still 55% male respondents favoured reservation for women in PRIs. They were confident that their participation would contribute to women's development. Panchayati raj represents political power at grass roots level. In the light of findings it was suggested that PRIs should be empowered; Gram Sabhas strengthened by women's participation; men and women should be educated for better understanding of problems and their resolution; free and frank participation of women should be encouraged; and PRI workshops, awareness camps, and counselling camps should be organized.


Key Words: 1. WOMEN WELFARE  2. URBAN LOCAL GOVERNANCE  3. WOMEN COUNCILLORS  4. PANCHAYATI RAJ  5. POLITICAL PARTICIPATION OF WOMEN  6. ROLE CONFLICT  7. MUNICIPAL CORPORATIONS  8. UTTAR PRADESH

Abstract: The case study of Uttar Pradesh was conducted by Indian Council of Social Science Research to trace the background of women entering into politics and their role; to highlight the change that occurs in the status and position of women
representatives; to examine the nature and degree of conflict between various roles; to assess the various forces involved; to assess the long term consequences on family and children; and measure the social benefits to society. Primary data was collected through personal interviews and mailed questionnaires, while secondary data was collected through books, reports and journals. Five Municipal Corporations, 37 Municipal Councils and 45 Nagar Panchayats were selected for the study. About 20% elected women were just literate. The highest number of women representatives were found to be housewives followed by 15% who were full time politicians. A negligible number of women were professionals. About 66% elected women were working for earning additional income for the family, and an equal number wanted to utilize their education. 80% elected women representatives were earning a monthly income of less than Rs. 10,000. About 20% were found to be adding more than Rs. 10,000/- per month to their family income. The traditional system of male dominance prevails even after women earn an independent income and perform a political role. Income of the husband was also an important determinant of the status of the family as well as extent of conflict in role performance of women representatives. With regard to spending of family income, it was observed that husbands spent the maximum part of the family income. A women representative had to meet the expectations and obligations corresponding to her various roles within the family, whether nuclear or joint. The political role compelled the wife to step out of the limited sphere of the house and thereby made her over burdened with work load. Majority of the elected women managed day to day household chores on their own. The major reasons for disputes with husbands were found to be freedom due to new roles (36.25%), modernity (33.75%), social liaisons (26.25%), conflict with family traditions and decorum (12.50%), and their negligence of family (48.75%). Around 35% women joined politics because they wanted a career in politics, and a large number of women (40%) joined politics because of the force imposed by family. It was encouraging to note that women representatives were always encouraged to putting forth their views by female colleagues (62%), male colleagues (56%), President/Mayor (65%), and family members (62.50%). Most of the times female colleagues were found to be cooperative and supportive (79%). They always encouraged (77%) and appreciated (75%) one another, and never passed teasing comments (93%). The relationship between male members and female members are not at all good. Women in general, were found to be enjoying their role despite having a lot of conflicts. Male dominated society needs to change its mindset in tune with the change in times and circumstances.

Key Words: 1. WOMEN WELFARE 2. PANCHAYATI RAJ 3. POLITICAL PARTICIPATION 4. WOMEN EMPOWERMENT 5. EMPOWERMENT WOMEN.

Abstract: This study conducted in 2003 in Haryana, investigated the socio-economic and political background of elected women representatives in Panchayati Raj Institutions, the extent of knowledge and awareness about Panchayati Raj System; and their role in the decision making process. It covered 2 Zila Parishads, namely Jind and Kurukshetra, 4 Panchayat Samitis and 16 Gram Panchayats. Data was collected through questionnaire method. It was found that 63% women representatives were in the age group 21-30 years, 60% were from the upper castes, 21% of them had studied up to primary level, and 17% were educated up to high school. A majority of respondents earned less than Rs.5000 per month. Nearly 71% women were from nuclear families and only 18% had affiliation with a political party in the state. Haryana Government had launched a large-scale training programme for elected representatives, but 97% respondents had not attended any type of training at any level. More than 80% women were not aware of the clause for 33% reservation for women in Panchayat, but all of them were aware of their 5 year term. 61% respondents were not aware of the quorum required for meetings. 80% women members were not aware of the taxes imposed by Panchayats, and 86% was unaware of the schemes implemented by Panchayats. About 80% participants were not aware of rural development schemes like SGRY and the funds received under this scheme. The reasons for their low level of awareness were dependence on their husbands, lack of interest, illiteracy and lack of training, etc. It was suggested that there is a need to train women leaders at regular intervals, and interaction between enlightened rural women and illiterate elected women leaders should be encouraged. There should be chapters on Panchayati Raj and women's empowerment in all classes at school level, and compulsory questions should be set in examinations. The media, both print and electronic, can play an important role in creating awareness in rural society. Women leaders need to be encouraged by publicising their leadership qualities, and giving them honour in public meetings. Different NGOs should undertake the tasks of training, encouraging, organising, mobilizing and guiding elected women representatives.
Sophia Centre for Women’s Studies and Development, Mumbai. (2005).

Key Words: 1.WOMEN WELFARE  2.PANCHAYATI RAJ  3.GRAM PANCHAYAT  4.WOMEN SARPAANCH  5.GRAM SEVAK  6.PANCHAYATI RAJ INSTITUTION (PRI)  7.JAWAHAR ROZGAR YOJANA (JRY)  8.GOOD PRACTICE.

Abstract: In the past, women in Maharashtra have participated in political movements including the freedom struggle and later various protest movements. The percentage of women MLAs in Maharashtra fell from 12.87% in 1957-62 to 2.81% in 1995-2000. To study the performance of women’s participation in panchayats, Jasai village in Raigad district of Maharashtra was studied. The advantage of an all women panchayat was the absence of corruption. The Panchayat constructed a road for Buddha Wada. Certain aspects of development were neglected and those did not seem as urgent to the Sarpanch. There was no female doctor in the village. The female Sarpanch was fearful of talking in front of men who were strangers, but later on her fear disappeared. She got the nominal allowance of Rs. 400 that the Government gave her as a Sarpanch. She expressed a lot of faith in the Gram Sevak (rural development functionary). The questionnaire was administered in Marathi. The total number of responses received back were 62 but only 56 were valid. Very few of the 56 respondents had studied beyond the 7th Standard. 50% of the respondents were married. 44 were unemployed. Almost 90% respondents exercised their right to vote. 15 women said that they did not have time to attend gram sabha (village meetings). The majority were of the opinion that the Sarpanch had not done anything. 14 women were willing to stand for elections. Women in the age group 25-30 years were willing to support females who stood for elections. Government and certain NGOs have developed training programmes for newly elected women representatives to make them aware of their role and responsibilities. Awareness should be created among the electorate at the local level of the aims and objectives of the 73rd Amendment to the Constitution enabling the participation of women in local governance.


Key Words : 1. WOMEN WELFARE 2. PANCHAYATI RAJ 3. WOMEN SARPANCH 4. RAJASTHAN.

Abstract : Women in rural areas have proportionately least possessions, personal wealth, assets, land, skills, education, information, social status, leadership traits and capabilities for mobilization, which determines the degree of decision making and power, and as a result, their dependence on men increases. The Sixth Five Year Plan (1980-1985) was a landmark for the cause of women, wherein the concept of 'women and development' was introduced for the first time. The 73rd Constitutional Amendment providing 33% reservation for women in Panchayati Raj was a step taken to promote their role in decision making process at the grass root level. Rajasthan was the first State in India to inaugurate Panchayati Raj on 2nd October 1959. Four districts of Rajasthan, namely Baran, Sikar, Pali and Alwar were studied to probe the nature of participation of elected women representatives (EWRs) at the gram panchayat level. In this study, the total sample of elected women representatives was 117, among whom 27 were Sarpanches and 90 were ward members. More than half of the EWRs were illiterate, 33 (28%) were functionally literate, approximately 16 (14%) had been to school up to Standard V, and very few (only 8) had studied up to Class X. More than 50% worked in their own fields and very few had to work as labourers in others' fields. Regarding work experience, only 16% had experience of any social activity in the village. About 38% EWRs were aware of the responsibilities associated with their participation in governance. Among the Sarpanches 59% and among ward members almost 33% women were aware of their responsibilities. Half of the EWRs did not have any collaboration with NGOs, and this showed that their relationship with voluntary agencies is an area which needs to be probed and looked into seriously. Panchayats in India suffer from lack of funds for development. As 67% of the funds flow through government schemes like Jawahar Rozgar Yojana, Integrated Rural Development Programme, etc., and 14% of the EWRs did not know about the source of funds, in many Panchayats, the functionaries were not able to manage the fund situation with regard to the Gram Sabha. The power to financially handle and monitor the Panchayat should be transferred to the community. It would give an outlet to Women Panches for redressing grievances against the Panchayat. Government and non-government organizations need to cooperate and collaborate with Panchayati Raj Institutions for offering technical assistance, support services and training to Panches and to the Gram Sabha. Financial rights should be given to people at the PRIs. The participation of common people in panchayats needs to be enhanced. The role of women in Panchayati Raj depends on the power structure in place and the resulting hierarchies which decide the actual space of women, and the facilities/provisions related to nutrition, health, livelihood opportunities, education exposure, decision making, etc. available to them. Constitutional amendments are needed, but more important is the dynamics prevalent at the grass root level. If due space is not made available to women, any provisions are not going to work. Women have to realize their potential as an individual, and people at all levels have to not only accept it, but make efforts to accept that space.
Poverty/ Slum Women

Struggling with destiny: the study of the hapless women of Raja Bazar and Narkeldanga. Kolkata: BSSL. 72 p.

Key Words: 1. WOMEN WELFARE  2. SLUM WOMEN  3. POOR WOMEN  4. POVERTY  5. WOMEN IN POVERTY  6. WEST BENGAL.

Abstract: The origin of slums in Kolkata goes back to the days following the battle of Plassey (1751). Civic facilities were unevenly distributed from the very beginning. The report has been presented in a narrative form so that women and young girls may be viewed within their cultural milieu. The main objectives of the present study were to understand the existing scenario with respect to education and socio-economic conditions of the inhabitants of two slums; to assess the response of the intended beneficiaries and their preferences. Girl children aged 6 to 15 years from each of these 340 households were selected for interview. There were 5 pre-primary schools in the slums with enrolment of 25 preschoolers in each unit. Out of the sample of 340 women, only 27 informants chose their husbands on their own. Only 38.9% women adopted contraceptive measures, while 60.2% did not adopt any such measures. The husbands of 19% women were addicted to alcohol. 158 women responded that their husbands shared nurturing duties. Out of 340 women, 46 women were illiterate; 16 could only read and write; 6 were secondary school dropouts and 2 had higher secondary education. 110 women had acquired skills in some craft, but only 14 women used their skill to generate income. About 82% girls replied in the affirmative that they were interested in music/drama and 73.5% were interested in joining story telling classes. Registration of a society named Raja Bazar Mahila Bahumukhi Shilpa Samity had been applied for. Public water taps were very few in such crowded settlements; and there was one toilet for several hutments. The participants referred to many kinds of taboos and restrictions. One related to menstruation and during that time no woman said prayers, and the other related to child birth when women do not say prayers for 40 days. About 12.1% women were ill treated by their husbands. Nearly 50.2% people had per capita monthly income below Rs.388, and 73.6% had monthly income below Rs.556, that is below the poverty line according to the estimates of NCAER. 22 respondents reported shortage of funds for maintenance, 4 cited disruption of domestic
harmony as a problem, and as many as 13 respondents complained of physical torture by husbands under the influence of liquor. About 58 informants responded positively on being asked if they would utilize educational opportunities. On being asked whether girls were working, 15% replied in the affirmative. The facilities available in the community were youth clubs, Government free primary schools, health centre, one private hospital and two Government hospitals. A few more skill development programmes need to be undertaken. Computer training may be arranged for those women of the locality who have the requisite qualifications. Play grounds should be developed for children. Hygienic conditions should be maintained and for this more hand pumps and toilets should be constructed.


Abstract: The research was conducted collaboratively by Indian Institute of Public Administration, Chronic Poverty Research Centre, and Institute of Social Studies Trust in 2001. The study investigated the factors influencing intra-household discrimination; and to know the relative bargaining power of each member of the household. The study area constituted four slums of east Delhi namely Nehru Camp, Sonia Camp, Ravidas Camp and Rajiv Camp. Data was collected through case studies, interviews and focus group discussions (FGDs). Key informants, such as officials and community leaders, were interviewed. Both, qualitative and quantitative techniques were used to gather information, and a total of 201 households were included in the survey. The male members of households worked as fruit and vegetable vendors, plumbers, casual labour, auto drivers, etc. The women mostly worked as domestic helpers. Some were engaged in sorting of sap while others were construction workers/ labourers. Most of them were wage earners and had odd, irregular jobs. The household size varied between six to twelve members. Around 61.7% households had been using Targetted Public Distribution System (TPDS) card for more than 5 years. A higher proportion of adult women were illiterate than adult men, and a greater proportion of girls were not in school compared to boys. In 47% households, children ate first, while in 25% households, husbands ate first. In around 64% of the households it was the women who ate last. About 75% of those
surveyed (men and women) thought that children had special needs, and about half thought that so did men. 65% men and 80% women felt that women had special needs during pregnancy. A greater number of girls had moderate and severe stunting as compared to boys. Both, male and female respondents in the study sites were more malnourished, as per CED (Chronic Energy Deficiency) levels than the average Delhites. It was believed that if all children attended school regularly, the burden faced by all children, especially girls would reduce. It was suggested that the PDS had played an important part in poverty alleviation. Government hospitals benefit many slum dwellers when they suffer from major illnesses. There is great need for more awareness and information regarding health and reproductive health, targeted both to men and women. Organized and collective action by the community, involving the young and women, should be an important step in trying to change the gender disparities prevalent in households.


Abstract: During the course of the UN Decade for Women, the fact that "70% of the world's poor were women" was widely stated. Chennai is one of the major metropolitan cities in India. Yet, there are 1500 slum areas in Chennai city. Approximately one third (15 lakh) of the city's population live in slums. Tamil Nadu Slum Clearance Board, a quasi Government Organization, has implemented a demonstration project called 'Control of Diarrhoeal Diseases through Water Supply and Sanitation' in five slum areas in association with UNICEF and financial assistance of British Airways. The main objective was to control diarrhoeal diseases adopting CDD WATSAN strategy through an organized community structure. The duration of the project was for three years. In 2000, 48.50% of rural SC/ST households and 56.30% of urban households lived below the poverty line. 80% families with children under five benefited from the interventions. Out of 1698 high risk households, 1543 did not have toilets. Women and girls were forced to wait until dark due to inadequate toilet facilities, and thus became prone to urinary infections and other health related complications. 746 high risk families were falling under the category of households having food insecurity. There were 1002 alcoholic members among 1698 high risk households. In 1698 high risk households, there were 443 child
labourers, of whom 250 (56%) child labourers were streamlined into regular school through transit schools. By being women centered, the CDS (Community Development Society) has generated a remarkable level of enthusiasm and motivation. There are various models of urban poverty alleviation and reduction programmes but there is no comprehensive community based approach to reduce or alleviate poverty in the real sense. Poverty reduction schemes should be closely monitored by various stakeholders to reduce shortcomings and achieve the set goals. Consequently, many National Governments initiated measures to improve the situation of women, by starting several new initiatives.
Riot Affected Women

How has the Gujarat massacre affected minority women? The survivors speak. New Delhi: Nirantar. 60 p.

Key Words: 1. WOMEN WELFARE 2. RIOT AFFECTED WOMEN 3. GUJARAT RIOTS 4. MUSLIM WOMEN 5. VIOLENCE AGAINST WOMEN.

Abstract: A six member team of women from Delhi, Bangalore, Tamil Nadu and Ahmedabad undertook a five day fact-finding mission from March 27 - March 31, 2002, to assess the impact of the continuing violence on minority women in Gujarat. The objectives of the fact-finding mission was to determine the nature and extent of the crimes against women; and find evidence of the role played by the police and other state institutions in protecting women. The team visited seven relief camps in both rural and urban areas (Ahmedabad, Kheda, Vadodara, Sabarkantha and Panchmahals districts). The fact finding team found compelling evidence of the most extreme form of sexual violence against women during the first few days of the carnage in Ahmedabad on February 28 and March 1, 2002. In the beginning there were 625 residents in the camp. About 35 attempted to return home but most of them came back to the camp. With the entire community under threat, women in particular were paying the price with their freedom and mobility being restricted. Mothers feared for the safety of their daughters. In many cases entire families have been killed. Women testified to having witnessed several members of their family dying. They were dealing not only with the trauma of this loss, but facing a future with their life’s savings and livelihood sources destroyed. Adivasis who were involved in the violence were only misguided youth. Usually young boys were members of these groups. However, even in its worst moment, there remained in Gujarat isolated pockets of calm where the police and the administration stood firm, giving lie to the theory that the post-Godhra carnage was an unstoppable case of spontaneous communal combustion. The fact finding team found that the state had failed in its foremost responsibility of implementing International Human Rights norms and instruments. The pattern of violence did not indicate “spontaneous” action. There was pre-planning, organization, and precision in the targeting. There was compelling evidence of sexual violence against women. Among the women
surviving in relief camps, some had suffered the most bestial forms of sexual violence – including rape, gang rape, mass rape, stripping, stuffing of objects into their body, and molestations. There was evidence of State and Police complicity in perpetuating crimes against women. The impact on women had been physical, economic and psychological. On all three fronts there was no evidence of State efforts to help them. Rural women in Gujarat have been affected by communal violence on this scale for the first time. One of the strategies proposed by the State Government to deal with the aftermath of violence in rural areas, is to set up Peace Committees that will engage in confidence building measures. Counselling should be provided immediately, even before registering the case. A comprehensive rehabilitation policy for rape victims and for their families needs to be announced urgently. Wherever necessary, the help of human rights groups, women’s rights groups and relevant UN Special Rapporteurs should be sought to examine the extent of violation of rights.
Sexual Violence/ Rape/ Abuse

Sexual harassment at workplace: sowing seeds of thought. Kolkata: Sanlaap.
60 p.

Key Words: 1. WOMEN WELFARE  2. SEXUAL HARASSMENT AT WORKPLACE  3. GENDER VIOLENCE  4. TORTURE  5. WORKING WOMEN  6. ENFORCEMENT MACHINERY  7. REDRESSAL MECHANISM.

Abstract: The present study aims to explore societal attitudes towards the landmark Supreme Court judgement on the issue of sexual harassment at workplace, and to investigate how the judgement can help women in the work situation. Questionnaire was circulated in Central Government offices and discussions were held with eminent personalities like journalists, writers and novelists, lawyers, theatre workers, film makers, social activists, professors, and IAS and IPS officers. It was found that 100% organizations were aware of the judgement given in August 1997, but the circular had reached only 84% of central government offices as yet. Study revealed that sexual harassment was severe for women in the unorganized sector where jobs were not protected; while in Central Government offices generally these incidents hardly came to the forefront. About 92% organizations stated that no such incident occurred in their offices; 60% organizations declared that they had instituted a complaint committee as directed by the Supreme Court order, while 24% had not formed any such committee. Very few Indian companies had a separate and clear policy on sexual harassment; 8% of them stated that they had other cells, e.g. Women's Cell, Personnel Department, Employees Grievance Cell, etc. to deal with the issue; 4% did not have any information about it, and 4% felt that this sort of committee was not required because they had their own Human Resource Development Departments to resolve such cases without much publicity. Study also found that dress and behavioural characteristics of women were often cited as the cause for sexual harassment. Study suggests that as sexual harassment at workplace is a punishable offence under Indian Penal Code, service conduct rules should be changed so that the problems of sexual harassment get due importance; and strict punishment should be introduced for committing such a crime.


**Abstract** : Sexual harassment can be unwanted and uninvited behaviour, words, gestures, threats or physical contact on a sexual basis that results in physical harm or causes the recipient to feel uncomfortable or threatened. The present study was undertaken at Zakir Husain College as a pilot project. The total sample consisted of 83 students chosen through the process of random sampling. There were 25 males and 58 females in the study. A questionnaire that assessed the prevalence of safety and harassment in Zakir Husain College was given to each respondent. 29% of the girls reported that gender discrimination was present as opposed to 36% of the boys who reported the same. Girls also reported that boys were given more privileges and support as opposed to them. Girls had less decision-making powers about their personal and professional life. 79% of the girls reported presence of harassment in college, but only 48% of the boys believed this to be true. Female respondents cited the effect of media, vacant surroundings, lack of security and lack of sex education as the main reasons for their feelings of fear and unsafety in college. The students feared outsiders the most, followed by non-teaching staff, fellow students and the teaching staff. All kinds of suggestive gestures, verbal attacks, staring and actual physical abuse were seen at the college campus, and more so outside the campus area. 26% girls said that they had confidantes with whom they could share their harassment episodes and 43% gave justified reasons for not reporting such incidents to anyone. Reasons for non-reporting were lack of adequate social support system, non-immediacy of action and humiliation. It has been suggested that media should avoid depicting hot and bold scenes with revealing attitudes. Also, sex education can be included as an integral part of the curriculum to increase awareness. Adequate security arrangements should be made on the campus especially for women.


**Keywords**: 1. WOMEN WELFARE 2. SEXUAL HARASSMENT AT WORK PLACE 3. WORKING WOMEN.

**Abstract**: Gender specific violence, especially violence against women is a common universal phenomena. Harassment of women is found in every society and at all stages of the development of human civilization. This study attempted to find out whether after passing the judgment in 1997, and placing the Sexual Harassment at Work Place (Prevention) Bill on statute in 2002, whether working women have become aware of the law and how they have utilised it. The objective of the study was to investigate the occurrence of sexual harassment at work place on female workers; and assess working women's awareness about the concerned legislation. From all the working women of Jadavpur University, Government Working Women's Hostel, Gariahat and a private hostel Swastika, who were working in the organized sector, 50 respondents were selected. From the study it emerged that a staggering 30% women have experienced sexual harassment at work places. Out of 50 respondents, only 2 cases were found to be known to the victim's husband. The family members, instead of instigating the victims to take the incidents before the concerned authority, advised them to become cautious. Of the women who shared their experiences of harassment in private, public and government sectors, only 28% lodged official complaints with the management and tried to avail redressal from the state judiciary system. Only 3 victims received justice from the judiciary. Around 34% felt that the concerned authority should be responsible for not providing harassment free working environment. About 60% women mentioned physical contact or advances, and 66% regarded display of pornography at work place as one of the modes of sexual harassment. Around 70% respondents had little knowledge of Sexual Harassment (Prevention) Bill of 2000, but 38% had knowledge of the penal provisions of the Bill. About sufficiency of the legislation and penalties prescribed, 80% felt that only making laws and giving penalties would not solve the problem. There must be one grievance cell particularly dealing with sexual harassment at work place, and a proper way to proceed for getting judicial support. People need to lobby for an organizational policy on sexual harassment at work place in the absence of one.

Key Words: 1. WOMEN WELFARE  2. MARITAL RAPE  3. SEXUAL VIOLENCE  4. VIOLENCE AGAINST WOMEN  5. DOMESTIC VIOLENCE  6. REPRODUCTIVE HEALTH  7. NEED FOR CONTRACEPTION  8. MARITAL CONFLICT.

Abstract: The study was conducted by CORT in two villages in central Uttar Pradesh. It was based on women's decision-making when faced with an unwanted pregnancy, and the factors that influenced their decision-making. Random sampling method was used, and women in every fifth house in the village were selected for the study. Detailed data was collected on unwanted pregnancy, abortion seeking behaviour, contraception and sexual behaviour, including sexual abuse. 122 married women were interviewed and of these, 115 answered questions on sexual behaviour. It was found that all women were married before they attained puberty. In most cases (103 out of 115), gauna (cohabitation) took place only after the women had started menstruating. Most of them knew about menstruation only after they experienced their first period, and few women understood its relevance to marriage and childbirth. At the time of their marriage, most women were ignorant about sex life, pregnancy and delivery. The few who had a vague idea about married life were told by married relatives to fulfill all their husband's demands. For many young girls, the first sexual encounter was frightening and forced. Moreover, due to social pressure to immediately start a family, the young bride is often forced also by her in-laws and relatives. The frequency of intercourse was on an average 3-4 times a week for young women aged 15-20 years. It declined with age as it dropped to 1-2 times a week for women aged 26-30 and 31-35 years, but increased to twice a week for women aged 36 years and more. Probing revealed that older husbands, who are less busy with work, seek sexual relations more frequently. Out of 115 women, 98 answered questions on sexual coercion. Of these 67 (68%) women reported sexual coercion-21% reported physical violence, 14% reported anger, while the remaining 32% did not provide further details. Majority of the women (70%) submitted to their husband's demand for sex. 30% women were able to resist sexual coercion by their husbands. The methods used to resist included a threat to start screaming, "endangering his prestige," threatening suicide, waking up young children who slept with them, and reporting false or prolonged menstrual period. Refusing to yield to husband's coercion was found among younger women who had spent a few years of married life. Women's resistance to sex starts from their fear of an unwanted pregnancy. The most important measure would be to introduce family life education,
and to prepare adolescent boys and girls for married life, reproduction and contraception. There is a need to change the attitudes of communities and families regarding gender and reproductive roles of women and their rights. The study has also highlighted the need for increasing women's access to contraception.


Key Words : 1. WOMEN WELFARE 2. SEXUAL ABUSE 3. YOUNG PEOPLE 4. ADOLESCENT 5. SEXUAL VIOLENCE 6. MARITAL RAPE 7. NON-CONSENSUAL SEX 8. SEXUAL RELATIONSHIP-COERCION 9. COERCION.

Abstract : Non consensual sex is a sensitive subject, which often remains undisclosed because of shame, blame, fear of additional violence or trauma, and other factors. According to some studies, married adolescent girls are at greater risk of non consensual sex within marriage, compared to older women and sexually active unmarried women. An analysis of over fifty population based surveys found that approximately 10-15% of adult women around the world reported having been physically assaulted by an intimate male partner (including their husbands) in their lives, and one-third to one half also reported sexual abuse. In the survey conducted by RAHI, self-administered questionnaires were distributed to 1,000 women but the response rate was only 60%. 457 reported the experience of sexual abuse by age 18; out of these, 181 were sexually abused by a family member, another 144 by individuals they were acquainted with, and 132 by strangers. The majority of women reported that at the time they did not fully understand the abusive incident or articulate their feelings. The experience created an overriding feeling of discomfort, a sense that a wrong act had been committed. A few women reported experiencing sexual stimulation and pleasure during the abuse. This response was itself a source of shame, self blame, conflict and self hatred. Over 33% of all abused women did not disclose the abusive experience to anyone. Non-consensual sexual experiences have a number of adverse health and social outcomes including gynaecological disorders, sexually transmitted infection, unintended pregnancy and also severe mental health problems like anxiety, depression and suicidal tendencies. Under Indian law, the issue of consent to sexual activity is immaterial for persons below the particular age of majority, defined differently under particular laws, while the Indian Penal Code (IPC) punishes non-consensual sexual activity with women, including rape, child prostitution and indecent assault upon women, and all sexual intercourse with girls below the age of 16 years is also criminalized. The Declaration on the Elimination of Violence Against Women (DEVAW) defines violence to include all threats or acts of gender-based violence that result in physical, sexual
or psychological harm. There are innumerable instances of consensual intercourse between adolescents. The law in India does not adequately recognize the issue of non-consensual sexual experiences of young persons, or the special vulnerability that adolescents face by virtue of their age in situations of coercion. A first step in this direction would be the adoption of a comprehensive definition and understanding of both 'sexual violence and coercion' based on the particular experiences of adolescent communities and on developments in international and national law. This understanding of sexual violence must be based on the different fiduciary and non-fiduciary relationships that adolescents experience which involve coercion. Any process of reform must emphasize sensitive and effective procedures that recognize the reality of adolescents' vulnerability and ensure that this vulnerability is not aggravated in courts of law.

Women and health: sexual harassment of women at the workplace: a study.
Mumbai: SCWSD. 20 p.

Key Words: 1. WOMEN WELFARE 2. SEXUAL HARASSMENT 3. GUIDELINES ON SEXUAL HARASSMENT 4. EMOTIONAL EFFECT ON WOMEN 5. WORKPLACE 6. SEXUAL HARASSMENT AT WORKPLACE.

Abstract: Sexual harassment at the workplace is an issue that has slowly come out of the closet. The study was conducted with a sample of 76 working women, of whom 47 were unmarried, while 39 respondents were married. All were of different ages, levels and designations. Most of the respondents (61%) identified 'physical misbehaviour' as sexual harassment. 16% of the women felt that any form of gender discrimination meant sexual harassment, 14% felt non-verbal and physical gestures with sexual overtones was sexual harassment, and about 8% identified demands for sexual favours as sexual harassment. 67% described physical forms of sexual harassment such as physical touch, abuse, molesting, pinching, poking, etc. About 57% respondents identified verbal harassment as verbal abuse, dirty remarks, talks related to sex, slang language; 18% identified demands for sexual favours including blackmailing, sexual favours in exchange for the promise of a permanent job; 41% mentioned non-verbal gestures and actions such as staring, touching or showing one's private parts. 25% said sexual harassment occurred frequently at the workplace, 36% said it occurred sometimes, 30% felt it occurred rarely and 7% said it did not occur. The nature of harassment experienced by 31% women was verbal harassment such as references to sexual intercourse, comments on dress and figure, etc.; 29%
mentioned unwanted physical contacts; 20% had faced demands for sexual favours; 11% non-verbal harassment such as staring, and around 11% found it difficult to share the nature of sexual harassment they experienced. 42% said that the harasser was a senior; in 20% cases it was the immediate boss; and 5% were colleagues. 42% said that they confronted the harasser; 25% complained to the authority; and 22% chose to confide in a colleague. 71% respondents felt angry, 37% experienced embarrassment, 29% had feelings of helplessness, and 11% were frightened. 3% felt bad about the entire episode, 3% lost respect for their boss, and 11% were not affected. 51% women ignored the situation, 34% avoided the harasser, 26% lodged a complaint, and 8% said they would leave the job. 12% respondents said that employees should create awareness about this problem, while 14% felt that severe punishment should be given to the harasser. The study revealed the widespread prevalence of sexual harassment. There is a need for greater awareness and gender sensitization among women. Awareness and implementation of the Supreme Court Guidelines on Sexual Harassment is very low, and in a few cases vague and inadequate.
SHGs/ Cooperative Societies/ Income Generation/ Vocational Training


Key Words: 1. WOMEN WELFARE 2. SELF HELP GROUPS 3. NABARD ASSISTED SELF HELP GROUPS 4. SGSY ASSISTED SELF HELP GROUPS 5. SHGS 6. HARYANA 7. RAJASTHAN 8. UTTAR PRADESH.

Abstract: The Self Help Group (SHG) movement has attained new heights for community banking programmes in India. The present study was done to assess the differential effectiveness of SHGs promoted under the guidelines of NABARD (National Bank for Agriculture and Rural Development) and those promoted by SGSY (Swarnjayanti Gram Swarojgar Yojana); to assess the sufficiency and efficacy of bank linkages provided to SHGs; and assess the socio-economic impact of SHGs. The study was conducted in the states of Uttar Pradesh, Rajasthan and Haryana in 12 selected districts. The total number of SHGs selected was 880. Data was collected by SHG office bearers, official stakeholders of NABARD and SHGs, NGOs and from official documents. Around 65% members in NABARD supported SHGs were found to be landless. In the case of SGSY supported SHGs, about 82% members were found to be landless who met the general criterion of being below the poverty line (BPL). Above 14% members in NABARD supported SHGs and about 9% members in SGSY supported SHGs were found to be matriculates. In the case of NABARD SHGs, about 58% women members were capable of reading and writing as against 67% male members. The study found that a little less than half of NABARD supported SHGs (5 out of 12) and two-thirds of the SGSY supported SHGs (12 out of 18) held less than 48 meetings in a year, which was very few. On the whole, NABARD supported SHGs appeared to be a little better than SGSY supported SHGs in this respect. The situation was not that good in the case of SGSY SHGs in record keeping, and the records available with them varied between 86% to 100%. There were 115 SHGs which did not have one or the other three main registers. However, all the registers which they kept were being maintained by SHG members themselves. Bank linkage was relatively quicker in the case of NABARD supported SHGs than SGSY supported SHGs. It was found that the highest number of SHGs, i.e. 139 (29.57%) in the case of SGSY SHGs, got bank linkage after 18 months of their formation. Men dominated SHGs were able to establish contacts with bank officials earlier than women only SHGs. The study revealed that 19.83% NABARD supported SHGs and SGSY supported SHGs were such in which inter-loan repayment was completely stopped by all the members who received the loans. There were at least 136 out of 291 SHGs (46%) in which all the members were regular in making loan payments. There were a few SHGs in the NABARD group which got their CCL (Cash Credit Limit) sanctioned within 7-10 days, whereas a few others got their CCL sanctioned after 2 months of the application being made. In the SGSY
supported SHGs a greater number of SHGs had not started income generating activities after having received bank loans after CCL was sanctioned, whereas in the case of NABARD supported SHGs, almost all the CCL sanctioned SHGs might have started income generating activities. There is need to expose and be sensitive to the field realities and capacity building issues of SHGs. Also, SHGs should be monitored more rigorously to ensure regular and timely savings and contribution, regular holding of SHG meetings, and members' attendance in them.


Key Words: 1. WOMEN WELFARE 2. VOCATIONAL TRAINING WOMEN 3. SKILL DEVELOPMENT 4. EMPOWERMENT WOMEN 5. ECONOMIC EMPOWERMENT 6. ECONOMIC EMPOWERMENT OF WOMEN 7. EMPLOYMENT WOMEN 8. SELF HELP GROUP 9. SKILL TRAINING 10. SUCCESS STORIES 11. SELF EMPLOYMENT 12. ORISSA.

Abstract: Women are an indispensable part of our society. In spite of the introduction of various programmes, inputs of modern technology, and creation of employment opportunities, women are still chained to problems in our tradition bound society. This study was carried out in rural areas of Khurda district of Orissa to explore the present status of women. The study identified and analyzed the factors responsible for the overlapping of gender and poverty in villages. It also examined the strengths and weaknesses of the vocational and skill development programmes undertaken by various agencies (Government and Non-Government) in different fields of women empowerment. The social factors preventing the access of women to these skill development programmes were also identified. Khurda has the highest literacy rate (80.19%) and also the highest female literacy rate (71.06%) in the state. This district has the lowest sex ratio (901). The sample size was around 587 from four blocks of Khurda district. It was found that the maximum number of respondents trained (34.41%) were in the age group of 26-35 years, and the minimum were in the age group of less than 15 years. Respondents in the age group 16-25 years were 32.71%, 36-45 years were 19.08%, and 12.10% were more than 45 years. A majority of the respondents were married (65.93%), 51.28% were from nuclear families, and 56.50% respondents were from families whose source of income was agriculture or service. 45.66% of the respondents saved their money in banks, whereas 33.73% of the respondents did not save anywhere. Savings in post offices were preferred by a few respondents (3.24%). About 90.97% of the respondents were able to take part in decision making in the family. 79.73% respondents mentioned that women in their families were allowed to go out for work. A majority of the women were very progressive - 93.87% participated in local development activities, 65.93% were members of various groups, and 46.68% of the respondents shared
their views on important events of the locality with their family members. 44.29% respondents got information about the vocational training programme from voluntary organizations. The decision to join the training was taken by the respondent herself in 68.65% cases. Training was given for tailoring, stitching, making wall hangings (chandua), soft toys, embroidery, candles, agarbatti (incense sticks), phenyl, papad, spices, cane, bamboo and jute work, and agriculture and allied activities like fishery, goatery, dairy, plantation, mushroom cultivation, bee keeping, etc. 88.59% respondents found the training to be satisfactory in all aspects. 77.17% women started their own work after training, and 62.38% thought of expanding their business. The agencies that imparted vocational training were Nehru Yuva Kendra, NABARD, Mother Teresa Seva Pratishthan, Sarvodaya Vikas Samiti, Udyog Bikash, CENDERET and District Welfare Organisation. Women were able to earn for themselves, have their own identity, and felt empowered. It was recommended that training needs assessment should be conducted before the selection of the participants; the participants must be selected on the basis of their own interest, capability to learn the skill effectively, and the attitude to start their own project after the training. Placement facilities should be provided to the interested beneficiaries for full time or part time employment available locally or outside.

Decent employment for women: learnings and recommendations from the pilot project. New Delhi: ISST. 40 p.

Key Words: 1. WOMEN WELFARE 2. INCOME GENERATION ACTIVITIES 3. EMPLOYMENT WOMEN 4. ISST PROJECT 5. INCOME GENERATION PROJECTS.

Abstract: International Labour Organization (ILO) funded a project to help poor women living in selected slum clusters in Bangalore and Delhi to acquire decent employment. From 2001 till 2004 a total of 1,600 women had been trained, 300 women in Bangalore and 780 women in Delhi, and 456 were under training. Informal work, gender and poverty generally overlap. According to 2001 Census, the population of Delhi was 13.8 million and the net migration was 1.6 million compared to 0.6 million during 1961-71. In Delhi, though 87% males and 75% females were literate, literacy in slums was much lower. According to 2001 Census, Bangalore is the fourth most populous city in India with a population of 6.52 million. Slum population varies between 20-25% of the city's total population. The literacy rates in Bangalore were 88.36% for males and 78.98% for females. The mean monthly income in slums in Bangalore was found to be Rs. 1325 in 1992, and over 70% people lacked toilets facilities. In the intervention projects, community based activities were conducted and literary classes conducted for the target groups. Many organizations in Delhi and Bangalore volunteered to help these women. In Bangalore, Parinati was working with tribal and non-tribals in Bandipur. Karnataka Kolageri Nivasigala Samyukta Sangatane (KKNSS) raises awareness and mobilizes slum dwellers, especially women. In Delhi, Disha operates in both rural and urban areas, and assists in setting up Self Help Groups (SHGs); Jan Shikshan
Sansthan Prayas is working with slum communities in Jahangirpuri; Bhartiya Parivardhan Sansthan works in East Delhi and their activities include family planning, counseling, awareness on HIV/AIDS and health and legal awareness; and Prerna has designed programmes for growth and development of the marginalized sections of society. Major challenges of this project have been to devise a model which is both flexible and practical. The Project has helped in increasing the earnings of women. Counselling and placements have been a major area of thrust. Non-traditional trades such as bakery, soft toy making, etc. have been initiated in the training programme in both cities. In Delhi, women opted for employment in traditional trades. Periodic skill upgradation should be considered. Training duration requires re-focusing as it was insufficient to develop skills. There is need for coordination and networking between ILO and partner NGOs to provide additional inputs in training for non-traditional trades, such as machine knitting and transformer assembly, etc.


Key Words : 1. WOMEN WELFARE 2. VOCATIONAL TRAINING 3. DIRECTORY VOCATIONAL TRAINING NGOs 4. WOMEN IN DISTRESS 5. INCOME GENERATION 6. REHABILITATION WOMEN IN DIFFICULT CIRCUMSTANCES 7. REHABILITATION WOMEN 8. VOLUNTARY ORGANIZATIONS KOLKATA 9. DIRECTORY WOMEN'S ORGANIZATION 10. KOLKATA 11. WEST BENGAL.

Abstract : There are several government organizations who run vocational training courses for women. The present study was undertaken to list out the prominent NGOs of Kolkata, with the primary focus on vocational training in terms of infrastructure, faculty, training curriculum, information about trainees and post training linkages. Data was collected by interviewing key persons of the NGO, beneficiaries and from other secondary sources. A total of 20 NGOs were visited which were operated by the Kolkata Municipal Development Authority (KMDA). Most of them worked for destitute women in slums, in slum-like areas, and for the lower middle class. Majority of NGOs had their own syllabi, however a few ran courses affiliated/modelled along the lines of technical institutions like George Telegraph and also West Bengal State Council for Technical Education. Most NGOs complained about severe financial crunch impeding the implementation of their programme. Very few organizations imparted need-based training. Most NGOs offered cutting, tailoring, batik/tie and dye, preparation of jam/sauces/pickles, machine knitting, wool knitting, embroidery, computer, doll making, typing, etc. courses, which were based on traditional trades. Don Bosco Self Employment Research Institute was found to be one of the most reputed and well equipped NGOs for women and youth which worked on viable issues for income generation/self independence training programmes such as refrigeration and air conditioning, electric wiring, welding, all types of gadgets repairing, draftsmanship, tailoring and physiotherapy. Most NGOs do not offer post-training linkages, due to which trainees, after passing out, do not get a chance to be linked to industries/institutions. Marketing of
products was a major problem that plagued NGOs. Trainees faced many problems like lack of motivation, lack of formal education, inability to learn, and lack of family support. Almost all NGOs did not organize Self Help Groups (SHGs) of the beneficiaries, due to which they missed out on an important form of linkage offered by the Government through schemes like SJSRY (Swarn Jayanti Swa Rozgar Yojana). Physically handicapped women, who form one of the most vulnerable sections of society, do not attract sufficient attention of NGOs. Most NGOs do not have proper documentation of their programmes, placement records of their trainees, and overall activities. Some of them could not even furnish a copy of their annual report. The study recommended that Government should invigilate all the NGOs and activities performed by them, assess their infrastructure, and provide assistance to NGOs who are engaged in the important task of financially rehabilitating the vulnerable urban poor.


Key Words: 1.WOMEN WELFARE 2.VOCATIONAL TRAINING 3.NEED GAP ANALYSIS 4.GAPS IN TRAINING 5.SLUM DWELLER 6.URBAN POOR 7.SLUM WOMEN 8.VOLUNTARY ORGANIZATIONS KOLKATA 9.INCOME GENERATION 10.POOR WOMEN 11.SELF HELP GROUPS 12.KOLKATA.

Abstract: The slums of Kolkata are living examples of human ignominy and helplessness of the inhabitants. The women of these 24 slums that were studied in Kolkata are from vulnerable and marginalized strata of society, and were earlier employed in the non-formal sector. Tailoring and embroidery were the skills most widely known by women, and a few were engaged in various kinds of income generation activities including knitting, food preservation, putting falls on sarees, packet making, bag making, batik printing, zari work (in muslim majority areas), beautician, etc. Community based organizations (CBOs) were involved in imparting vocational training to women, and other institutions and training schools also organized training courses. In one slum, 22 of the 53 beneficiaries trained (41.5%) were unemployed. In another slum, of the 17 beneficiaries trained, 64.7% were employed. Many women found it difficult to attend classes in training institutions due to the distance. They preferred centres in their own locality, and CBOs provided training in some slums. Distance and family pressure, which did not permit women to stay out for long, were the main causes for dropouts. Financial problem did not seem to deter many, because the courses were offered at a discounted and to some extent minimal rate. Majority of the women (72.17%) were interested in vocational training. The condition of muslim women was more pathetic, their literacy rate was very low, and they had little or no say in family matters. They were living their lives on a pittance. Gender discrimination is deeply entrenched in the minds of slum dwellers. A Women's Cell was set up by the Government of India in the Ministry of Labour, Directorate General of Employment and Training (DGE&T) in 1977 to provide training facilities at regional level all over the country. NORAD
(Norwegian Agency for Development) extends financial assistance to public sector undertakings/ corporations/ autonomous bodies/ voluntary organizations to train women in non-traditional trades and promote employment. Major Government supported programmes/schemes are Mahila Udyam Nidhi, Self Help Groups (SHG) - Bank linkage model, Support to Training and Employment Programme (STEP), Bengal State Aid to Industry, Stree Shakti Projects on jute, Swawlamban, etc. Although several NGOs were providing vocational training to women, but not all women were successful in setting up profit-making ventures. 16.27% of the respondents believed that women do not have the necessary education or expertise to run a venture. This is one of the prime reasons for lack of faith in women's entrepreneurship. Small capital can barely compete with large capital. It is better to bear in mind that micro capital enterprises can be utilized as a feeder to big capital enterprises, rather than being its competitor. Vocational Training Institutes should upgrade their existing vocational training curriculum according to the latest ideas and trends, and seek ways of establishing local presence in slums, particularly muslim dominated slums. Many muslim women do not have the permission to move out of their neighbourhood, and efforts should always be made to involve the male members of the family in the income generation activities of women in order to minimize domestic conflict. As 'work from home' is one of the key decision making factors for women, those trades/products should be identified that enable the women to operate from their homes.


Key Words : 1. WOMEN WELFARE 2. SELF HELP GROUPS 3. KUDUMBASREE 4. GOVERNMENT SUPPORTED SELF HELP GROUPS 5. NGO SUPPORTED SELF HELP GROUPS 6. EMPOWERMENT WOMEN 7. KERALA.

Abstract : Self Help Groups (SHGs) are becoming one of the important means for the empowerment of poor women in almost all developing countries, including India. This study was carried out to examine the functioning of SHGs organized and nurtured by NGOs and Kudumbasree, a Government sponsored NGO run under Poverty Eradication Mission (PEM) of the Local Administration in Kerala. 80 SHGs and a sample of 400 women members were selected for the study. Wide variation was observed among the SHGs managed by NGOs and the SHGs managed by Kudumbasree regarding the constitution and functioning of SHGs.
Majority of the respondents (43.3%) were in the age group 31-40 years. 79.5% of the respondents were married, and 12.8% were either widows or separated women. The average family size of the respondents was 5.12. This was mainly due to the joint family system still found in Northern Kerala. 84.25% of the respondents had their own houses, 8.25% lived in joint family houses, and the rest (7.5%) lived in rented accommodation. 16.8% of the families of respondents were women headed, and there was no significant difference between respondents from NGOs and Kudumbasree. For a majority of the respondents (39%) the motivating factor for joining SHGs was economic, which included inculcating savings habit and getting easy loans at reduced rate of interest. Only 6% of the respondents agreed that there were sub-groups in their SHG system. There were more alcoholics and drug addicts among the family members of respondents from NGOs (36%) than among family members of respondents from the SHGs of Kudumbasree (19.5%). A majority of the respondents (85.2%) had a monthly income of less than Rs. 2000. Most respondents (63.7%) did not have any deposits except the thrift savings. Insurance (24.3%) and chit funds (7.5%) were two methods used by the respondents to create assets and savings. Many respondents (79.88%) had awareness regarding the legal rights of women and children. 12.5% of the knowledge came to women through the SHG system. Majority of the respondents did not have savings account in any bank or post office, and only 20% of the respondents from NGOs and 23% respondents from Kudumbasree SHGs could not save any amount every month. 49% of the respondents still depended on moneylenders, even after they became members of SHGs, as they could not get sufficient money from the SHG for their needs. More women members of Kudumbasree (29%) attended Gram Sabha meetings than those of NGO assisted SHGs (16%). Apart from these, 33.5% respondents from NGOs and 40.5% from Kudumbasree had active membership in one or the other political parties. 82.5% of the respondents participated freely and frankly in SHG meetings. Self esteem, self confidence and fearlessness increased among members of SHGs, and they were seen going to government offices and police stations (64.3%), and talking to officials and policemen (65.5%). Programmes organized by NGOs such as NIDS (Neyyattinkara Integral Development Society) and KAIROS (Kannur Association for Integrated Rural Organisation and Support) were Vocational Training; Awareness Generation regarding health, literacy, management, micro credit, etc.; rallies against liquor and drugs; rallies for reservation for minorities; training on animal husbandry, etc. As women were still not able to influence men in sharing their daily household work, it was suggested that there is need to sensitize men about this aspect. NGOs as well as Kudumbasree should take greater interest in organizing awareness classes regarding Government schemes so that all members of the group, particularly those from poor families, would benefit from these programmes.

Abstract: Orissa is one of the poorest states in India, where people die of starvation. According to latest estimates of the Planning Commission, it has the highest percentage of people below the poverty line, which indicates that the performance of Orissa in eradication of poverty is unsatisfactory. Poverty alleviation has been the central objective of development planning, and micro credit programmes operated through Self Help Groups (SHGs) have been instrumental in elimination of poverty. The present study was carried out in Koraput district. The study investigated the link between micro credit and alleviation of poverty and also examined the sustainability of SHGs. The sample was collected through multi-stage sampling method. In the first stage, five Self Help Group Promoting Institutions (SHGPIs) were selected from state and district level organizations. In the second stage, one successful SHG was selected based on its performance as judged by the promoting institutions. The selected SHGs included Abhilipsa Swasahayak Sangha (ASSS), Noorjahan Swasahayak Dal (NSD), Champa Gulapi Mahila Sangha (CGMS), Budhima Mahila Sanchaya Samiti (BMSS), and Maa Sidheswari (MS). In the third stage, 77 beneficiaries were selected from SHGs, out of whom 6 members were non borrowers, and were taken as control group. Information was collected through questionnaires, discussions and interviews. Among the different SHGs, NSD had the largest poverty impact, followed by CGMS and MS. The poverty gap impact of ASSS and BMSS was lower compared to the other three SHGs. No strong correlation was found between income impact and asset creation, which indicated that an increase in income had not led to any increase in assets. However, the highest positive asset impact was observed in the case of ASSS and lowest in the case of MS. The study rejects the hypotheses that poorest borrowers may tend to have lower levels of asset accumulation. It was found that members got access to loans after formation of SHGs. There was high repayment ratio of the SHG members suggesting that the poor were bankable, and the groups were functioning well. It was observed that the level of empowerment was low except in the case of BMSS which showed moderate impact. Only social empowerment showed moderate improvement while both economic and political empowerment showed low improvement even after women joined SHGs. The long run sustainability of SHGs was assessed on the basis of the strength / quality of social capital. The study showed that though SHG based micro finance had better outreach and positive impact, however, there is a need to improve the process of empowerment and the strength of social capital formation of SHGs so as to make them sustainable in the long run.

**Key Words :** 1.WOMEN WELFARE 2.SELF HELP GROUPS 3.EMPOWERMENT WOMEN 4.ECONOMIC EMPOWERMENT WOMEN 5.ANDHRA PRADESH.

**Abstract :** The Self Help Group (SHG) strategy is one of the instruments for empowerment of women through economic intervention. The study focused on the effect of the SHG strategy on women’s economic activities and possible occupational change, analysed the intervention of SHG strategy in asset creation and owing by the women, and also the level of participation of women in decision-making process in domestic issues and group activities. The study was conducted in Naskal village, Ramayampet Mandal in Medak district of Andhra Pradesh. Four SHGs, one each from SC (n=20), ST (n=15), BC (n=15) and FC (n=9) community were selected and a total of 59 women were interviewed for data collection. The SHGs in Naskal were promoted by an NGO, namely Human Action for Rural Development (HARD). The survey indicated that a majority of women in the sample (68%) were from joint families and mostly the women were married. Nearly 50% women were aged less than 31 years. Most of the women (90%) were illiterates. Majority (74.7%) of the women’s family income was found to be less than Rs. 15000 per annum. Data showed that the majority of women from weaker sections (BC, SC, ST) had individual savings of more than Rs.10,000 with the SHG, whereas the FC women had less savings than other women. While borrowing also, most of the women from weaker sections (BC, SC, ST) had borrowed more than Rs.10,000 from the SHG. Figures showed that majority of women had borrowed money for agriculture operations (86.4%) and for income generating activities (84.7%). The SHG strategy initiated a shift in the occupation of women among the weaker sections (ST, SC, BC), specially ST women, who had done nothing before but after the formation of SHG all the 15 ST women were engaged in farming their own lands. About 94.9% women involved in SHGs had taken the responsibility to decide on the domestic matters of their families. After SHGs had formed, women took part in organizing activities, participated in group discussion and also arranged SHG activities. There is need to focus on other diversified activities for women beyond farming. Focus should also be given on identification of local resource based and need based activities, both production and services, that can support the farming activities.

Problems while organising : drawn from the meeting with co-operative members.
Key Words: 1.WOMEN WELFARE 2.COOPERATIVES; 3.WOMEN'S COOPERATIVES; 4.ORGANISING WOMEN 5.ORGANISING RURAL WOMEN 6.SEWA PROGRAMME

Abstract: Most co-operative movements failed to reach the economically poor in the informal economy. The present study involved 60 cooperatives with a view to understand the problems faced by members while operating a cooperative. The cooperatives faced problems while registration. As per Cooperative Society of Gujarat State Act, if a Primary Milk Cooperative of a village had to register themselves, they would have to collect 80 to 100 litres of milk everyday continuously for 6 to 12 months or else they would be disqualified. Many cooperatives from Rann of Kachh (Gujarat) failed to collect requisite quantity of milk due to consecutive droughts (1999-2003) and migration of live stock herders. Some cooperatives remained defunct even after registration due to lack of proper income and thus were unable to submit lease money to the State Cooperatives Federation. Cooperatives producing goods in rural areas were required to pay octroi tax during transportation of raw material and finished goods (even for National and State level exhibitions) leading to increased cost of production and restrictions in competing with market prices. The cooperatives were unable to obtain Government contracts due to the high tender fees charged while submission of the tenders. Many new acts were added or reformed without prior discussion or intimation to the related cooperatives. These societies were operating from rented rooms and needed more space to build their own centres. Even dais' (midwives) cooperatives needed rooms, as they found delivery rooms in patients' houses to be unhygienic. Health cooperatives were not involved in Government's Revised National Tuberculosis Control Programme (RNTCP) and Aids Awareness Programme. These health cooperatives had a good rapport with villagers, thus could convince them easily. With the advent of globalization and resultant mechanization men were monopolizing all the jobs in the construction industry and women were rendered jobless due to lack of skill training. It was mandatory that all governing bodies of Boards/Nigam of Directorates (Gujarat) should recruit a woman representative. However, most seats reserved for female candidates had been kept vacant. Reliable market information such as colour schemes and designs were not available to handicraft cooperatives, thus they were unable to sustain in competitive markets. Government Departments should be directed to buy goods and services from women's cooperatives. Women Cooperative members should be given mandatory appointments on the Boards of Cooperatives. Also, cooperatives should be exempted from octroi tax, and lease money should not be charged while cooperatives are non-operational. Women workers should be provided with training for up gradation of their skills. Health programmes should be implemented through the existing health cooperatives. Market information such as latest trends about colours and designs should be made available to handicraft workers, so that their products are saleable.

**Key Words**: 1. WOMEN WELFARE 2. MICRO FINANCE 3. MICRO CREDIT 4. CREDIT FOR WOMEN.

**Abstract**: Poverty and unemployment are major problems in South Asia. The total population of Bangladesh was 133.4 million in 2001 and the rural population was 99.3 million. Infant Mortality Rate (IMR) was very high, 71.66 deaths per 1000 live births. Life expectancy was 61.16 years. Muslim population constituted the majority (88.3%) followed by Hindus (10.5%). Literacy in the age group 15 years and above was 38.1% (male 49.4%, female 26.1%). In India, the total population was 1.028 billion in 2001. The IMR was 61.47 deaths per 1000 live births. Life expectancy at birth was 63.23 years. Population mainly consisted of Hindus (81.3%), Muslims (12%), Christians (2.3%), and Sikhs (1.9%). After Independence, six commercial banks were nationalised and were encouraged to provide loans in rural areas. During 1959-1977, emphasis was laid on democratic decentralization approach, in which Balwantrai Mehta Committee was appointed. 14 major commercial banks were nationalized in July 1969. To improve the condition of the poor, a rural Credit Survey Committee was formed in 1951. Micro-finance is the provision of thrift, savings, credit and other financial services and products. Grameen Bank in Bangladesh was established to provide credit to the rural poor, especially poor women. Grameen Bank model in Bangladesh, is based on the participation of members as share holders of the bank. Association for Social Advancement (ASA) in Bangladesh is one of the largest indigenous NGOs which was established in 1978. The approach of promoting Micro Finance Institutions (MFIs) was based on the premise that Anarde Foundation India AFIs provide bulk lending, soft loans and grants to NGOs, which can act as MFIs and lend to poor people, SHGs, Federations, and smaller NGOs. NABARD Programme in India is based on the linkages of groups with banks for credit and support. Micro-Enterprise Development (MED) approach has emerged as an important strategy for economic development, and LEAD, an NGO working in Tamil Nadu, India since 1987, has emerged as a leading micro finance service delivery organizations in India. Friends of Women World Banking India (FWWBI) established in 1982 in Ahmedabad, initiated a project on Integrated Social Security Project. The total enrolment figure as on 31 March 2002 was 85,552 with five partner organizations. The details are life insurance for members (50,820), life insurance for spouse (18,462), live stock (5507), and health (54). Micro-finance reduces poverty by increasing per capita income among programme participants and their families. Therefore it can be concluded that micro-finance has made an impact on the life of people, strengthened the capabilities of poor people to start income generating activities or micro enterprises. Bangladesh and India, both being poor countries, the entire development strategy should be pro-poor development through micro-finance with the active support of Governments.

Women’s self help groups and managing convergence in Himachal Pradesh (with executive brief). New Delhi: SEDEM. 146 p.


Abstract: Women Self Help Groups (SHGs) have come a long way from its period of inception. SHGs are working well for women, not only in meeting emergency cash needs, but also in women’s empowerment. The major objectives of this study were to understand the working environment of SHGs, performance of SHGs, analyse policies and programmes, and offer policy recommendations. About 200 SHGs having 237 males and 1,997 females were selected from 5 districts of Himachal Pradesh namely Kullu, Kinnaur, Solan and Sirmour. 37 panchayats in 8 blocks were surveyed. Key factors for the success of SHGs depended on endogenous and exogenous factors. Shared goals, common concerns, perseverance, and timely release of funds are some of them. The average membership in SHGs was 11.17 persons. 55.82% SHGs were linked to banks. Also, the average bank loan given was Rs. 17,015 per SHG or Rs. 1,523 for each member. This is an excellent performance, given the fact that banks are cautious with unsecured lending. 46% respondents believed that the major objective of SHGs is to improve the socio-economic status (SES) of members. However, 59% SHGs had no plans to add or diversify themselves into income generation activities. But 50% SHGs believed that they could manage diverse activities, including Government programmes. SHGs are working well for women. However, a few ICDS - SHGs were not doing well because of (i) lack of knowledge, (ii) illiteracy (iii) poor leadership, etc. This could be due to the fact that 31% SHGs had members who had no prior experience. 61% SHG members still believed that they were stuck up and were not moving ahead. ICDS - SHGs had no male members. Even in non-ICDS-SHGs, female members were more -they had 295 men and 831 women. 52% SHG members mentioned economic growth as a benefit of joining SHGs. 32% mentioned loan as the other benefit of joining SHGs. However, in ICDS - SHGs 22% and in non-ICDS-SHGs 39% believed was too early to say anything regarding benefits. But 57% respondents in both groups said that there was an impact on their monthly income. About 96% of the total respondents approached AWWs, but only 35% respondents volunteered to help Anganwadi Workers (AWW). The major recommendations for SHGs working in Himachal Pradesh were that they should be formed through participative consultative process; there should be administrative continuity and continuous supervision for about 1 year; it should be a sustainable enterprise; and cross sectoral coordination, like organic farming with rain water harvesting, should be encouraged. SHGs should be given a transit time of say 24 to 36 months so that SHGs can become a sustainable enterprise from a group setting. Core competency should be developed to
improve the standards of working of both, ICDS - SHGs and non-ICDS-SHGs in Himachal Pradesh.


Key Words : 1.WOMEN WELFARE 2.SELF HELP GROUPS 3.EMPOWERMENT WOMEN 4.MICRO CREDIT 5.CREDIT FOR WOMEN.

Abstract: The objectives of the study were to analyze the functioning of SHGs and their role in different areas concerning women like health, education, local politics, gender sensitization and economic empowerment. It covered 613 SHGs of 12 districts in 4 states, namely Bihar, UP, MP and Chhattisgarh. From each district, 50 SHGs, 250 women members and 20 facilitators were taken. It was found that 25% of the groups earned income through agriculture, 13% groups played a role in the political sphere; 27% in Chhattisgarh and 19% in Bihar. In Bihar 17% and in Chhattisgarh more than 50% of the groups were involved in development/welfare activities. About 25% of the groups worked on gender related issues; in Bihar and MP, about 20% SHGs played a role in civil society. Around 10% of the groups were involved in solving problems, which arose due to government malfunctioning. The participation of women in decision-making regarding girls’ education, marriage, etc, increased from 7% to 25%. 62% SHGs played a role in promoting health activities and 75% SHGs promoted education. On the issues of purdah pratha (veiling), child marriage, child labour, sex discrimination, almost 50% groups reported unchanged behaviour, while 33% reported little change and 10% reported ‘lots of change’. The study recommended that all NGOs working for women and SHGs should form a common platform to work for women’s upliftment. Meetings and workshops should be organized by Government agencies at the state level, if not possible at the district level. Women members of SHGs should take the responsibility of self-production and self-marketing, so that they gain confidence and learn by doing.


Key Words : 1.WOMEN WELFARE 2.INCOME GENERATION 3.INCOME OF WOMEN 4.SAVE THE CHILDREN FUND PROGRAMME 5.EMPOWERMENT WOMEN 6.LADAKH.
Abstract: Study was conducted in Kargil and Leh districts of Ladakh, Kashmir, by Save the Children Fund Northwest India (SCF NWI) to highlight the importance of adopting an integrated approach, and suggest ways for the economic development of women. Data was collected through SCF micro-studies and interviews. Education, which provides avenues to better jobs, was often found interrupted in the case of girls. Higher dropout of girls was noticed after Class 5, mainly due to household work and farming. Educational disparity resulted in a low literacy rate for women, 12.1% in Leh district and 4.1% in Kargil. SCF micro-studies revealed that 65% men went outside the village for labour, resulting in increased workload for women and children. Work analysis showed that women worked twice as much as men. Women had little participation in many household decisions and in village committees. Government and NGOs like Leh Ecological Development Group (LEDeG), Ladakh Environment and Health Organization (LEHO), Mahila Mandal, Social Welfare Department, Ministry of Industry and Commerce, Handicraft Department, etc. provided vocational training to youth and women; and also encouraged income generating programmes namely, Integrated Rural Development Programme (IRDP), Kargil Development Project (KDP), Leh Nutrition Project (LNP), Training of Rural Youth for Self-Employment (TRYSEM), etc. These programmes gave training on tailoring, knitting, weaving, embroidery, carpentry, doll-making, wood carving, painting, etc. and also paid stipend to the trainees. It was found that income generating projects of NGOs, ignored demand of the product in the market, which challenged the stability of an enterprise. Women entrepreneurs, who ventured into creative ideas like Dzomsa laundry, met with little support from the community. Study recommended that vocational training programmes should include computers, and typing and shorthand. Extra-curricular training should be given on business management. When new skills are proposed, the market for them should be assessed thoroughly. Courses should be planned to help graduates turn their skills into income. Women-owned businesses should form a women’s chamber of commerce, so that they could advertise and promote their own products and services, and also support others in need. NGOs should acquire more skills in enterprise development. Social and cultural issues should be addressed alongwith economic development for women. It was also recommended that SCF NWI should generate a report on the status of women in Ladakh, develop an instrument for measuring the impact of women’s development on children, sponsor a forum to exchange information on issues of women’s development, and focus on giving the girl child more exposure to career possibilities beyond traditional areas.

**Key Words**: 1. WOMEN WELFARE 2. SELF HELP GROUPS 3. DWCRA GROUPS 4. GROUP DYNAMICS 5. EMPOWERMENT WOMEN 6. IMPACT OF SELF HELP GROUPS 7. ANDHRA PRADESH.

**Abstract**: The study tries to capture the qualitative changes that SHG and DWCRA groups have brought in the lives of the once passive women recipients of services in rural areas. The twin objectives of the study were to improve the status and quality of life of poor women and children in rural areas, and assess involvement of the community in planning and implementing several other development programmes. Out of the total 1.15 lakh DWCRA groups and 2.19 lakh SHG groups in Andhra Pradesh, a sample of 1.5% groups was taken. A specially designed, pre-tested, partly precoded questionnaire was used. Illiterates formed only 11% of the population while 60% had gone to schools and studied up to secondary level. 150 groups were contacted in Khammam district covering three mahila mandals (women’s groups), while 209 groups were covered in Kurnool district covering 3 mahila mandals, and six mahila mandals were covered in East Godavari district covering 660 groups. About 90% of the sample were hindus, while 7.7% were christians and 2% were muslims. The average annual income per household was around Rs.9000. In Khammam, formal education seemed to be more popular (34%), while primary educated respondents were in a large number in East Godavari district (42%). The overall family size of respondents was observed to be 4.06, while Kurnool recorded the highest family size of 4.86. The average number of literates per family was observed to be 2.9 in each district, which was quite high. Nearly 70% members in Kurnool district were illiterates, while in Khammam district illiterates were only 10%. In 70% households, all men were reported to be working, while only in 50% of the houses all women were working. About 98% respondents in Khammam and 95% in Kurnool were agricultural labourers. No elections took place for Leader I and Leader II in 99% groups in East Godavari, 82% groups in Kurnool and 86% groups in Khammam. In 95% of the groups in each district, monthly contributions were being collected by group leaders, and in a few cases by the members. On an average, each member had borrowed Rs.11,375 to meet their household or business needs. For girl’s education nearly Rs.10,000 were borrowed, while to meet the health needs Rs.8000 were borrowed. More women are now sending their girls to school than in the past. On the aspect of self management, 83% women had a little confidence that the group could manage on their own, whereas now there was a five fold increase in their confidence. Nearly 50% women reported to have been actively involved in development activities, while their husband’s role was more prominent in 63% cases. In Khammam district, nearly 80% women groups could solve their water problem, while 13% could get a school building in their villages. In Kurnool and East Godavari districts also, women’s groups achieved many community related activities with varying degrees of participation. About 80% of land in the well developed regions was wet land, followed by 70% in tribal areas, and 60% in developed regions. In 28% of the tribal groups, considerable amount was locked up leading to non-availability of funds to other genuine members who needed money to meet their emergency expenditure. On important matters like marriage of the child, in tribal areas 44% women took an active role, while it was 87% in well developed areas, and 60% in developed areas. More economically and socially disadvantaged women should be encouraged to form groups. Akshara Sahkranthi Programme should be made more
effective and reoriented to suit the needs of learners. All members of women's groups should be enrolled compulsorily so that they could acquire functional literacy. The small family size norm does not seem to be in operation in mahila mandals. Members should be trained to rotate the money for the benefit of meeting emergencies rather than sharing it equally among themselves. There should be uniform procedure for granting loans from Government assistance or bank loans to all the groups. To minimize irregular repayment or defaulters in a group, peer group pressure should be adopted, rather than going out of the group and involving outsiders.
Situation of Women

Biswal, D. N. et al. (2005).


Abstract: Men of Indian society have been discriminating against women and considering them as a lesser sex since remote times. The aim of the study was to compare the gender discrimination and social status of women between the tribals (16 tribes) and caste Hindus (23 communities) of two districts namely Sundargarh (50.19% tribal population) and Khurda (94.82% non-tribals) of Orissa. 500 households, 250 belonging to different tribal communities and 250 belonging to different caste Hindu communities constituted the sample. Samples were drawn from Begunia, Bhubaneswar, Khurda, Bolagad and Jatni from Khurda district and Rajgangpur, Balisankara, Lephripara, Tangarpali and Sundargarh from Sundargarh district. The women of these tribal communities enjoy better social status than those of Hindu communities because of their higher involvement in the household economy. However, illiteracy among the ST men of Khurda district was 36.90% and 64.23% for females. The corresponding illiteracy figures for scheduled tribes of Sundargarh district were 36.90% and 53.36% for males and females respectively. There were 22.85% illiterate Hindu males and 23.11% females in Khurda. The corresponding illiteracy figures for Hindu communities in Sundargarh were 23.96% for males and 31.01% females. Hindus were engaged in 18 primary occupations, and scheduled tribes were engaged in 14 primary occupations. Occupations were agriculture, carpentry, painting, rickshaw pulling, fishing, weaving cloth, shop keeping, cattle rearing, etc. Most tribal women (37.6%) were also wage earners. They also collect minor forest produce (16.4%), prepare wine and sell it (8.8%), do petty business including shop keeping (6%), provide services (4.4%), practice swidden cultivation (4.4%) and agriculture (1.2%), and herd cattle (0.8%). The rest (19.6%) were housewives. 88% Hindu parents and 75.60% tribal parents desired to have sons. 93.18% Hindus and 80.95% tribals wanted to have a male child for economic reasons. 71% Hindu parents wanted male issues to continue their lineage/generation/vansh; 30% of tribals have also highlighted this. A son (putra) is believed to rescue parents from hell 'narka' after death. Most Hindu parents (48%) felt that a married couple should procreate at least two children, ST parents (50.60%) also believed that a couple should procreate 3 children. 83.75% Hindus and 75% tribal parents said that both the children should be sons, and there was not a single parent who said that both the issues should be female. 46.96% Hindu
parents wanted all the three progenies to be males, followed by 52.17% who wanted at least 2 sons and the rest could be girl children. A reverse trend is observed in the case of ST parents since 65.61% of them say that of the 3 children, 2 should be males and rest (one) could be a girl child. There were 46 caste Hindus and 25 tribal parents who were in favour of 4 children and majority of them preferred sons. About 20.40% Hindu and 2.80% tribal couples had medically determined the sex of their children before birth. 93.8% Hindu and 87.25% tribal families were patrilocal in nature. 30.93% Hindu and 74.50% tribal parents did not give much importance to the education of their female children. 91.60% Hindu and 73.20% tribal family members did not sit together for meals. 48.05% Hindu and 37.50% tribal women were scolded and beaten by their husbands. 64.94% Hindu and 32.64% tribal women gave all their earnings to their husband. 22% Hindu and 31.94% scheduled tribe husbands forcefully took the earnings from their wives. Women’s participation in cooking food was maximum (86.3%). On the basis of the findings it was recommended that female education was the most vital instrument for development. Initiatives should be undertaken to popularize the laws and legal provisions meant for the welfare of women, such as equal wages for equal work, etc. The legal provisions regarding conditions of women workers must be displayed in all offices/ factories.


**Abstract**: Majority of the women in Manipur are the bread earners of their families, many of them the only bread earners. This study was carried out by the team of National Commission for Women at Manipur in 2004 as women in Manipur had been victims of mental, physical and sexual violence. It was estimated that 3-4 out of ten rape cases went unreported. Even the present NGOs who claimed to be fighting for the dignity of women failed to form a pressure group. Issues of domestic violence and gender discrimination were being obscured, sidelined and marginalized for the greater cause of nationhood and self-determination. Being main earners, women had no time to concentrate on their own plight. The Commission visited Manipur from 19th to 21st September 2004, and the NCW Team held an interactive session with NGOs, women activists, lawyers and elected representatives. There were about 150 participants in the interactive meeting. The Team found that Manipur is economically far below on the ladder. There is no major industry. Agriculture is at subsistence level. There is land scarcity due to tremendous rise in the population. There are also long term insurgency problems, and ethnic conflicts are coming to the fore. By the end of 2002, 414,800 had registered themselves in the employment exchange; of these 108,000 were women and 306,700 were men. There are no official statistics available on sex workers. Since women have traditionally taken upon themselves to feed their family, it is difficult for them to meet their needs with their meagre earnings and rising costs. Women

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Research Abstracts on Women's Empowerment, 1998 - 2008
at Ima Keithel are losing their land due to population pressures and are not able to get sufficient produce. There are no cold storage facilities and no schemes like Mahila Kosh for women to get low interest bank loans. The Team observed that women in Manipur seemed to be healthier than their counterparts in the rest of India. Girls seemed to survive more than boys, as expectation of life at birth was 60.40 years and 62.30 years for rural and urban girls respectively, while it was 56.70 years and 60.60 years for boys in rural and urban areas. The social neglect of women and girls is a matter of concern. They are subjected to heavy work both within and outside the home from an early age. They are less likely to receive medical help when they are sick. Further, by the age of five years, female mortality exceeds that of males by 20% in Manipur. HIV/AIDS has emerged as a major public health problem. There are more than 50 NGOs working in this field. Prominent among them are MACS (Manipur AIDS Control Society) and SASO (an organisation of ex-drug addicts). In the age group of 21-30 years people with HIV numbered 320, while there were 193 women. In the age group of 31-40 years, there were 344 men and 99 women. In the hills, much of the work is done by women and there is "iron like grip" rigidity in the division of labour. The women bear, on an average, 6 children, with no health centres near by, and their health deteriorates with every delivery. In the hills of Manipur, which constitute five districts, the health care system is dismal. PHCs are every where, but only on government records. The concerned doctors hardly ever attend their assigned PHCs. The problem gets further compounded because of the inaccessible and difficult hilly terrain. Therefore, women's health suffers the most. They work quietly and are invisible in any decision making bodies. It was recommended that there should be an exclusive government policy to improve women's health. Women are susceptible to illnesses and diseases of the reproductive system such as cancers of breast, uterus, cervix, ovaries, apart from other diseases which are common to both the sexes. There was repeated demand from all the women's NGOs to open separate women's hospitals and have exclusive women's PHCs. But with even the already existing PHCs not functioning, their demand would probably take a very long time to be fulfilled.


Abstract: This study, undertaken by Economic Science Society of Tripura, assessed the situation of women in Tripura in the light of changes that have taken place over the years. Women's access to available health care facilities, existing education system, employment and training for skill formation and political participation were examined on the basis of secondary data. Only 1.05% girls in the 10-14 years age group were married as against 0.06% boys in the same age group. The incidence of child marriage was low in Tripura compared to many states in north India. Medical and Public Health Services started late in
Tripura. The State Government provides health care services through government hospitals, dispensaries, community health centres (CHCs), sub-centres (SCs), and other health facilities. Tertiary medical care is provided by the newly created Super Speciality Block of G.B. Pant Hospital at Agartala in collaboration with Care Foundation, Hyderabad. Medical services are generally provided free of cost to patients including indoor patients. The patient to doctor ratio was 4693:1 in 1999, which needs to be improved. Expenditure on rural health increased over the years Rs. 205 lakh in 1999-2000; Rs. 310 lakh in 2000-01; Rs. 510 lakh in 2001-02. Under Rural Health Mission expenditure on rural health scheme would be increased. Birth rate appears to be lower in Tripura (16.5) due to decline in fertility rate (2.1). Death rate has also been declining (5.4) in Tripura. The couple protection rate was 55.5% in Tripura. The prevalence of Asthma was higher among males (5488) than females (4474) in the year 1999-2000. The prevalence of Tuberculosis was also higher in males (1356) than in females (957). Further, Jaundice was also found to be higher in males (9368) than females (7034). It was observed that infant mortality in Tripura was higher for males (63.7) than females (60.4, NFHS-2). 55% of married women currently use family planning in Tripura. 19% of births in Tripura occurred within 24 months of the earlier birth. The study revealed that only 33% deliveries were assisted by a doctor and 13% deliveries were assisted by a nurse or midwife. 54% babies were still delivered at home. It was found that 70% pregnant women received antenatal care in the state. AIDS is a killer disease. 49.0% females were aware of this disease. The study revealed that pulses (52.7%) and green leafy vegetables (58.1%) were consumed on daily basis. It was also found from the Survey that milk and curd (32.9%) was an important part of the daily diet of most women in Tripura. The study revealed that in Tripura more children are undernourished due to illiteracy or low level of literacy among their mothers. According to NFHS-2, children from low income households were found to be undernourished. The study revealed that 58.8% male children and 64.9% female children aged 6-35 months were anaemic. More than 60% children have anaemia in Tripura which is a matter of great concern. Among ever-married women aged 15-49 years, 43.5% had mild anaemia, 14.0% had moderate anaemia, and 1.4% had severe anaemia. 66% mothers in Tripura received at least two tetanus toxoid injections during pregnancy. According to NFHS-2, 63.0% women received Iron and Folic Acid tablets or syrup. In all, 80% women received IFA tablets for more than 3 months. 69.9% women consumed all the tablets. About 41% children were fully vaccinated. The work participation rate of total workers was lower for women in Tripura in 1991 (13.76%) and it increased in 2001 to 21.1%. The work participation rate for main workers was 10.14% in 1991 and 10.9% in 2001. The work participation rate of marginal workers was very low in 1991 (3.62%) and it increased in 2001 to 10.1%. The proportion of agricultural labourers was much higher for females (34.6%) than males (19.6%). The numbers of both male (2061) and female workers (790) has declined in bidi manufacturing. According to the Labour Department, about 4000 women were engaged in sericulture projects in Tripura. Of these women workers, 15% were scheduled castes and 60% were scheduled tribe women. For economic empowerment of women, 8733 SHGs (66%) have been formed in the state and training is being imparted to them for accessing micro-credit. 202 SHGs have taken up
economic activities in the field of Animal Resources (139), Business sector (12), Agriculture (6), Cane and Bamboo (15), Tailoring (2), Fisheries (16), Handloom (6), and Horticulture (6) sectors. 51,000 women have been participating in economic activities through cooperation among themselves. In the three tier Panchayat election held in 2004, the percentage of elected women representatives out of women contestants at the Gram Panchayat level were 91% for SCs, 85% for STs and 98% for General category. The number of women representatives in the Legislative Assembly of Tripura has been microscopic and it has declined from 2 in 1988 to 1 in 2003. Crime against women was also found to be rising. According to Office of the Superintendent of Police, Government of Tripura, women continue to be victims of various types of crimes (Rape 22.94%, Molestation 20.05%, Kidnapping and abduction 8.08%, Dowry death 3.03%, Torture of Women 44.01%, and Other crimes 1.87%). It was recommended that the reproductive and child health programme needs to focus on informing pregnant mothers about the necessity for consuming IFA tablets. The unmet need for family planning is still substantial. Community participation should be enhanced by giving functional responsibilities and powers to Panchayati Raj Institutions. Emergency services in rural hospitals should be started by putting doctors on rotation duty, and ensuring ambulance services and transport facilities to needy patients. Micro level studies should be undertaken to assess the impact of different development policies and programmes on women and girl child, such as the impact of ‘Mid Day Meals’ on the school attendance of children in the age group 6-14 years. A Women’s Study Centre should be opened in Tripura University under UGC guidelines for facilitating research on women related issues.


Abstract: The study assessed the situation of women and girls in Goa. The most disturbing statistics for women was the declining sex ratio, which decreased from 1091 in 1900 to 960 in 2001. According to Census of India 2001, the total population of Goa was 1,343,998 comprising 687,248 males and 660,420 females. Density of population was found to be 364 per sq. km in 2001. Total literacy rate of Goa was found to be 82.32%. According to Educational Statistics 2001-2002, there were 1037 primary schools, 445 middle schools, and 361 secondary schools. Dropout rate decreased from 8.95% to 5.7% from 1997 to 2002. According to the Statistical Handbook, percentage of female workers to total workers in 2001 was 22.3%. The Infant Mortality Rate (IMR) for 2002 was 17 per 1000 live births.
Planning Commission estimated the poverty ratio for the year 1999-2000 to be 4.4%, which was the second lowest in the country. Poverty ratio of Goa decreased from 44.26% in 1974 to 4.40% in 2000. According to NSS Report No. 455 (1999-2000) unemployed females per 1000 persons were 42 in rural and 69 in urban Goa respectively. According to the NFHS-II (1998-99), domestic violence was fairly common in Goa. Eighteen percent of ever-married women experienced beating or physical mistreatment since the age of 15 years. There were 18 reported rape cases in 1999 which increased to 31 in 2003. Cruelty to married women by husband or their relatives increased from 10 in 1999 to 22 in 2003. Number of cases registered under Immoral Traffic Prevention Act increased from 28 in 1996 to 30 in 2001. Supply of Vitamin A to pregnant women increased from 15,651 in 2000 to 40,235 in 2004. Goa has progressed ahead of other States with regard to the implementation of Children's Act 2003 and with provisions in the Common Civil Code which give women the right to inheritance. To keep up with the times and to ensure gender justice, awareness of the law, amendments to the law and its procedures is essential. Traditional health systems and practices, which are still popular among certain sections of women in Goa, need to be supported by the State Health System. The state health department should consider widening the data that is being generated by them to enumerate other services that have been included in the RCH programme, so that this can be used by policy analysts to further improve the programme.


Abstract: The study assessed the situation of women in Kerala. Kerala has a geographical area of 38,863 sq kms, 1.27% of the total area of India and holds 3.10% of India's population. In 2001 Census, Kerala recorded a population of 31.84 million (15.47 million males and 16.37 million females). In 2001, the Human Development Index (HDI) was found to be 0.638 for Kerala against 0.472 for all India. Kerala was found to have the highest life expectancy, literacy and had lowest infant mortality, though per capita monthly expenditure was not the highest. Per capita net state domestic product of Kerala at constant prices in 2001-02 was Rs 19,803. There has been rapid and significant decline in birth rates in rural and urban areas. Infant Mortality Rate (IMR) in Kerala was strikingly lower (10 per thousand live births) than the all India rate of 63 (SRS 2002). Female Mortality Rate in 1997 was found to be 4.9 per 1,00,000 population based on Sample Registration System (SRS). Death rate in the state had touched a low of 6.0 in 1991 but has slightly risen since as it has a high
proportion of population in the 65+ age group. Life expectancy was highest for males (70.4 years) and females (75.9 years) in 1992-96. Between 1970-75 and 1993-97 there was a gain in life expectancy by more than 11 years for all persons in the state. The effective age of marriage for girls in Kerala was 22 years against 19.5 years for all India. There has been spectacular decline in fertility rate in Kerala from level of 4.2 over the last three decades which amounts to crossing the replacement level of population to 1.8 in 1998. Female sterilization, that accounted for 66% of contraceptive use according to NFHS -I, now accounted for 76%. Female literacy rate increased from 31.41% in 1951 to 87.86% in 2001. In 2001-02, enrolment was down to 5.10 million from 5.91 million in 1992. Between 1991 and 2001, women's work participation rate declined from 15.8% to 15.4%, but that of men increased from 47.6% to 50.2%. According to the state survey, there were 1.72 million families which lived below the poverty line, and about one-fifth of these families belonged to SCs and STs. Atrocities committed against women in Kerala increased from 7306 in 1997 to 7568 in 2001. Although social indicators of Kerala depict a good picture, these indicators do not seem to add up to empowerment. Women are educated, frequently more than men, but are unemployed also more than men. Women lived longer than men. Poor quality of life makes life burdensome and prolongs the burden. Inspite of being more aware, they continued to be abused. This scenario should provide food for thought.

A Situational analysis of women and girls in the union territory of Daman and Diu.


Abstract : After the liberation of Daman and Diu in 1961, people of this union territory have been exposed to the social trends and practices prevailing elsewhere in the country. Nuclear families have emerged, the joint family system is slowly dwindling, and the evils of dowry system are becoming rampant. The migration of men, while enhancing income, has brought in its wake disruption in the family and unheard of traumatic experiences. As per the Census of India 2001, there are 42312 females in Daman and 23269 females in Diu. The 0-6 years child population in 1991 was 15778, that is 15.5% of the total population. It was found that the minimum qualifications for entry in jobs was 12th pass but degree holders had an edge over other candidates. This led to increased enrolment of women students in higher education. This awareness was apparent even among women from scheduled caste (SC) and scheduled tribe (ST) communities. These communities have realized the importance of education and they try to get maximum benefit from the various schemes/ incentives given by the Government. Tribal boys and girls get cash incentives - Rs.30 per
month at primary level, Rs.40 per month at middle level and Rs.50 per month at secondary level. Free books, stationary and uniforms are given to tribal students from Standard I to X. These steps taken by the Government have helped women students to study and become self sufficient. However, SC female teachers were only 2% and ST teachers were 1.02% only. After getting professional degrees like B.Ed., 80% ST females aspired for desk jobs and not teaching. Since 1961, i.e. after formation of U.T. of Goa, Daman & Diu, there was expansion of health services, and special stress was given to setting up of Family Planning Centres, Maternity and Child Welfare Centres, V.D. Control Units and Malaria and Filaria Control Units. Scheduled Caste females were only around 3.6% of the total female population. There were only 476 families below the poverty line in this U.T. Nearly 95% families maintained two wheelers/ four wheelers depending on their financial situation. Daman and Diu are safe territories for women having a low crime rate. Women constitute 50% of the students in higher education institutions. Most young girls were married (97-98%), and getting Government jobs was their maximum ambition, in order to be financially independent or to manage the home front better. Public health was given much importance in the U.T. of Daman and Diu. The total budget for Daman and Diu in 2002-03 was Rs.215.99 crores under non-plan and Rs.44.92 crores under plan. About 95% of the population is non-vegetarian. Only 0.05% Jains and 2.5% high caste Hindus claimed to be vegetarian. In 1971-72 the number of beds available in Government Hospitals per 1000 population was 2.4 while in India it was 0.6 only. The bed strength in Daman was 172 and in Diu 70, that is more than the national average. In the interest of women, there should be a U.T. level Commission for Women to protect and support them. Society has to cast off outdated beliefs and free women from false glorification, and women have to assert themselves and fight for their legitimate rights.


Key Words : 1.WOMEN WELFARE 2.SITUATION OF WOMEN KERALA 3.GENDER PROFILE WOMEN KERALA 4.FEMALE WORK PARTICIPATION RATE 5.KERALA.

Abstract : Gender profile studies have a very short history in Kerala. The present study was conducted taking into account the experience of the earlier studies. The areas covered in the study were demographic factors, educational status, health status and employment details. The available information was compiled from 14 Blocks and comprised 90 Gram Panchayats (10% of the total). The study was carried out in 14 districts of Kerala namely Vanantha Puram, Kollam, Pathanamthitta, Alappuzha, Kottayam, Idukki, Ernakulam, Thrissur, Palakkad, Malappuram, Kozhikode, Wayanad, Kannur, and Kasaragode. The sex ratio of women in Kerala was 1058 females for 1000 males. Kerala has experienced the sharpest fertility decline in India in recent years. There were 14.8 lakh women in Kerala during 1999; 7.32% were 60+, 3.71% were 70+, 1.08% were 80+. Kerala has the lowest infant mortality rate of 15.3 compared to 70.8 in India. Kerala has an exceptionally advanced health care
system in the country, and it has one hospital bed for every 382 persons. There are 3,421 medical officers and 7,800 junior and senior nurses. Also, there is one doctor for every 1806 population. Kerala is the most literate state in the country with a literacy rate of 90.92% as against India’s rate of 65.38% in 2001. Kerala’s female literacy rate is 87.86% while the male literacy rate is 94.20%. The study also mentioned that there were 12,331 schools. There was 18.18% growth in the cases of crime against women. The crimes reported in 2001 were molestation (2,033), rape (550), kidnapping (125), eve teasing (86), marital torture (2,579), etc. Divorce rates are also high in Kerala. Trivandrum district stands first with 1850 divorces during the year 2002. 2,923 females committed suicide in 2001. The total workers in Kerala were 2,500,736 (main workers 1,757,391; marginal workers 743,345). The Work Participation Rate (WPR) of females in Kerala was 15.3% in 2001 compared to 25.7% in India. The WPR of males was 50.4% in Kerala compared to 51.9% for males in India. Although women are educated, have fewer children and live long, their labour in any form, has not been socially used. The profile of women in the Science and Technology sector is very poor. Majority of the students at the post graduate and research level were girls. Girls who had done research were either underemployed or unemployed. Very few women were appointed as teachers/ faculty in departments. There was 1 female teacher in Kannur University, 36 in Kerala University, 17 in Calicut University, and 4 in Mahatma Gandhi University. It was concluded that although empowerment programmes like ‘Kudumbasree’ and other poverty alleviation programmes have been initiated recently, the impact on women is yet to be reflected in society. Efforts should be made to do the same.


Key Words : 1. WOMEN WELFARE 2. SITUATION OF WOMEN MIZORAM 3. SITUATION OF WOMEN 4. DOMESTIC VIOLENCE 5. FEMALE FOETICIDE 6. EDUCATION 7. LITERACY RATE 8. HEALTH AND FAMILY WELFARE 9. CRIME AGAINST WOMEN 10. TRAFFICKING OF WOMEN AND GIRLS 11. MIZORAM.

Abstract : Mizoram is one of the youngest, smallest and isolated states in India. It has a population of 891,058 (2001 Census) and the population is estimated to be 926,640 by the year 2003. It has a variegated hilly terrain where internal communication is still difficult in most rural areas. The study undertaken by National Commission for Women in 2004 revealed that due to its proximity with Myanmar, the state is host to a large number of Myanmar migrants, many of whom are long term settlers. They are involved in the trade of goods from other Asian Countries and providers of unskilled labour and services. Migrants from other Indian states are largely involved in road construction, trade and other unskilled labour. The state has eight districts, of which five were created in 1997 from a larger erstwhile Aizawl district. The combined population of erstwhile Aizawl district is 620,030 with urbanization being 37.5%. The sex ratio is 944 to 1000 as compared to 938 for the
Mizo society is deeply community oriented in nature, social life is care-free, and men and women mix together freely. Thus there is no rigid distinction between males and females in work areas, which makes outside observers believe that the status of women is in no way inferior to that of men, and hence women do not suffer derogatory or discriminatory treatment. But women in Mizoram, have their own unique problems, and the situation is not satisfactory. Women shoulder most of the family’s burden of work. The status of Mizo women in the past, especially in the pre-christian days was very low both in the family and society. A wife was fully engaged with household duties, but her status was insignificant and always subordinate to men. In case of divorce, Mizo women did not have any legal claim on the family property except a small share decided at the time of marriage, which they carried with them as a sort of dowry. In the absence of a male child, a daughter could not claim, as a matter of right, the family property, but it would normally go to the nearest male relative. The whole management of household affairs was left to women. They had to do everything at home except build a house and repair the tools used for jhumming, etc. In some cases, women also helped their husband in cutting, jhumming, etc. Recognition is not given to women’s hard labour. Mizo women today continue to be the main work force, breadwinners and work in various capacities as government employees, in business and commercial sectors and in religious life. Despite their hard labour, they have no rights of inheritance or ownership, either in their parents’ home or after their marriage. They have no right over their own income, over their children or over their properties. Mizo women are excluded in all decision-making bodies in social, religious and political fields. In social organizations such as YMA (Young Mizo Association) and VDP (Village Defence Party), women are active and important members, and their contribution makes these social organizations successful. But they are seldom given any decision making opportunities. In church activities they are excluded from decision making bodies, ordination and other responsible positions. Women are seldom given membership in the village council or bodies like Legislative Assembly. Although the status of Mizo women has improved significantly, especially after the propagation of Christianity, the stage of gender equality is yet to be reached. It was recommended that the State Government has an important role to play in empowering the developed women of the state. Public opinion should be mobilized to enlighten the state authority. Family institutions have to be changed and re-created so as to create awareness among the women themselves. The monetary value of the work done by women in domestic chores must be worked out, so that the women themselves would be aware of their contribution to the family income. Cooperation among various women’s organizations such as MHIP and women’s wing of various churches is necessary so that all work together to uplift the status of Mizo women. Mizo women are economically empowered, but they should strive more to achieve economic independence. Creating opportunities for women would be a prudent policy, not only for equity but also for economic growth.


Abstract: A study on situational analysis of women and girls in West Bengal (WB) was conducted. The population of West Bengal increased from 68 million in 1991 to 80.2 million in 2001, comprising 41.5 million males and 38.7 million females. The mean age of marriage for women in West Bengal went up from 18 to 19.7 years, while for men it increased from 24.6 to 25.9 years. 45.3% women had at least one reproductive health problem. Mean number of children ever born to women aged 40-49 years were 4.2. About 48.8% children below 3 months were exclusively breast-fed. 41.5% children were under nourished. About 43.8% children had received all vaccinations. HIV/AIDS cases increased from 670 in 2000 to 1131 in 2002-2003. Maternal Mortality Rate was 264. The Infant Mortality Rate (IMR) was 49 in 2002 (SRS Bulletin). Literacy rate for rural men went up from 62% to 74% between 1991 and 2001, while for rural women it rose from 38% to 54%. Urban women’s literacy rate was higher than all India figures of 73%. Dropout rate for girls was 57% as against 46% for boys in class I-V in 2000-01. Rural and urban female work participation rates in West Bengal were 16.8% and 19.1% in 2001. In 1991, 2.7% girls and 5.6% boys in the age group 5-14 years were child workers. Torture/cruelty by husband/relatives increased from 111 in 1995 to 222 in 2003. Kidnapping and abduction cases were 86 in 2003. Sexual harassment/ eve teasing increased from 46 in 2000 to 57 in 2003. There were 36 rape cases in West Bengal in 2003. Introducing target based schemes for promoting literacy and education among children of ST families, especially girl children; and building all weather roads for connecting schools to relatively inaccessible rural pockets are required. NGOs can play a major role in the fight against violence inflicted on women. By imparting awareness, raising self-confidence and providing requisite support, NGOs can make an important contribution to women’s quest for security and justice.


Key Words: 1. WOMEN WELFARE  2. SITUATION OF WOMEN  3. VIOLENCE AGAINST WOMEN  4. GIRLS EDUCATION  5. GIRL CHILD EDUCATION  6. DISCRIMINATION AGAINST WOMEN  7. WOMEN AND HEALTH  8. WOMEN’S HEALTH.

Abstract: This report is a comparison and analysis of data available with National Sample Survey (NSS), Sample Registration Survey (SRS), National Family Health Survey (NFHS), Central Statistical Organisation (CSO), Registrar General’s Office (RGO), and National...
Council for Education, Research and Training (NCERT). It broadly studied differences between men's and women's developmental experiences and their social attitude, it focused on different experiences of women from rural and urban areas belonging to different classes and various educational backgrounds, and how they are affected by the existing developmental policies and practices, and areas of concern outlined in Platform for Action (PFA). It also discussed Government initiatives and actions to enhance women's productivity, sustainability, equality and empowerment. Disaggregated statistics highlighted differences between needs of girls, adolescents and women, and how policies affected their lives. It was found that girls had lesser access to health care and education than boys roles they performed were undervalued at home and at workplaces; and their human rights were violated through sexual abuse, trafficking and prostitution. Social structures determined girls' importance and also their level of education. New Policy on Education (1986) stressed planning for girls and women's education, especially in rural areas. In areas of maternal health, life expectancy had improved but incidence of cancer still poses health challenges for women. Poverty and economic issues were influenced by micro and macro economic policies, and affected women's security in terms of access to resources, such as health and education. Women worked in a number of occupations, in both organized and unorganized sectors, and comparatively women received unequal remuneration for their work. Government and NGOs schemes and programmes attempted to mitigate against the negative impact of structural adjustment and gender biases by creating programmes that increased women's economic options and income security. Changes to the natural environment affected women in rural and urban areas in the same way as changes to the economy affected their sources of income. India's legal mechanisms are a combination of support and neglect for women: on one hand crime against women steadily increased, and on the other, NGOs and Government worked to safeguard women's rights through institutions like National Human Rights Commission (NHRC) and National Commission for Women (NCW). Media played a double role, both a source of leadership for women, and also propagated exploitative images that reinforced unequal power relations between men and women. Government's media policy encouraged active participation of women in various media activities, while NGOs promoted healthy, well-rounded images and roles for women in the media. In terms of political power, women had a very low representation in the National Parliament and State Assemblies. 73rd and 74th Constitutional amendments gave women an opportunity to exercise leadership at local level. State and Central Governments, major NGOs, local action groups, and research and training institutions are all involved in the formulation and implementation of policy that affects women's lives. It was concluded that social structuring and conditions influenced policy, and how women are positioned at the crossroads. It was recommended that NGOs, and Central and State Governments should implement policies and programmes to support rural women, decrease pollution, and promote conservation.


Key Words: 1. WOMEN WELFARE   2. SITUATION OF WOMEN UTTAR PRADESH 3. EMPOWERMENT OF WOMEN   4. VIOLENCE AGAINST WOMEN   5. CRIME AGAINST WOMEN UTTAR PRADESH 6. EDUCATION UTTAR PRADESH 7. UTTAR PRADESH.

Abstract: The status of women in Uttar Pradesh has seen many highs and lows. High population growth rates are constraining development efforts. The population of the state has tripled from 63.2 million in 1951 to 166.1 million in 2001, males being 87.6 million and females being 78.6 million. The poverty ratio has come down from 47.07% in 1983 to 31.5% in 1999-2000. Around one-fourth of India's poor live in Uttar Pradesh. Per capita income in 2001-02 was much lower at Rs 9749 than the National Per Capita Income of Rs 17736. The Decadal Growth rate during 1991-2001 has increased to 25.8 as compared to 25.6 during 1981-1991. Uttar Pradesh ranked 31 on overall literacy in 2001. The literacy rate of the state was 57.36%, being 70.23% for males and 42.98% for females. None of the 70 districts had rural female literacy above 50%. The better off districts were Ghaziabad (40.27%), Mainpuri (40.45%), Etawah (44.47%), Araiya (46.50%), Kanpur Dehat (43.99%) and Kanpur Nagar (47.26%). The literacy rate in Uttar Pradesh has gone up from 12.02% in 1951 to 57.4% in 2001. The illiterate population in 2001 was 57.81 million, of whom 21.31 million were males and 36.50 million were females. The Gross Enrolment ratio for Classes I-V in 2002 was 80.93% for boys and 49.36% for girls. Among SC children this ratio was 91.62% for boys and 52.64% for girls. The State Urban Development Agency (SUDA), Uttar Pradesh has provided training to 35,052 urban poor for self employment. In 2000, 18,920 crimes against women were registered, 31.8% were dowry deaths, 13.2% were cruelty by husband and relatives, 18.3% were cases of kidnapping and abduction, 28.7% were cases of sexual harassment and eve teasing, and 309 cases of rape were reported of girls below 16 years of age. Female life expectancy at birth improved from 48.5 years in 1981-85 to 64.09 years in 2001-06. Maternal Mortality Rate (MMR) was 707 per 1,00,000 live births, which was the highest in the country. The mean age at marriage of girls has gone up from 17.27 years in 1991 to 19.5 years in 2001. Percentage of girls married below 18 years of age ranged from 6% in Kanpur to 35% in Lucknow. Drinking water was available to 45.8% households within their premises, 44.1% had water source nearby, and 10.1% had to fetch water from a distance. Toilet facilities were available to 33.15% households. In 2001 the work participation rate (WPR) for men was 47.26% compared to 16.28% among women. The NGOs set up in these districts were fairly active, but they lacked necessary administrative strength. To reduce MMR, anti-natal coverage should be increased. Couples should be encouraged more to use modern contraceptives or spacing methods of their choice. There is a need to reframe the approach to women's development in accordance with the human rights framework. Prevention of cross border trafficking requires top priority. The State Commission for Women should work for survival and protection of women in a proactive and more professional way.


Key Words: 1. WOMEN WELFARE  2. SITUATION OF WOMEN INDIA  3. SITUATION OF WOMEN  4. STATUS OF WOMEN  5. EMPOWERMENT WOMEN  6. GENDER  7. FEMALE LITERACY  8. EXPLOITATION OF WOMEN  9. CRIME AGAINST WOMEN  10. PROGRAMMES FOR WOMEN II. INDIA.

Abstract: The present study is an empirical investigation into the status of women in India as it obtains today after five decades of planned development. The study had the following objectives: firstly, to observe the implementation of the national and state policies and programmes specifically designed for advancement of women; and secondly, to make suggestions for cohesive and better implementation of development policies and programmes within the framework of gender equality and equity. India's population in 2001 stood at 1,027 million comprising 531.3 million males and 495.7 million females. The highest proportion of rural population was in Himachal Pradesh (90.2%), Bihar (89.53%), Sikkim (88.90%), Assam (87.28%), Orissa (85.03%), Tripura (82.98%), Nagaland (82.26%), and Meghalaya (80.37%). Six states were studied namely Uttar Pradesh, Madhya Pradesh, Maharashtra, Orissa, Tamil Nadu, and Mizoram. Uttar Pradesh had the highest population of 166.1 million followed by Maharashtra 96.8 million. Orissa had highest proportion of population below the poverty line (BPL) (47.18%). Tamil Nadu registered Human Development Index (HDI) of 0.531 (3rd rank), Maharashtra 0.523 (4th rank), Mizoram registered 0.548 (7th rank), Orissa 0.404, Madhya Pradesh 0.394, and Uttar Pradesh 0.388. Life expectancy has gone up from 36.7 years in 1951 to 64.6 in 2000, birth rate has gone down from 40.8 to 25.8 per 1,00,000 population. Birth rate was highest in Uttar Pradesh (32.1) and lowest in Kerala (18.0). Infant Mortality Rate was highest in Orissa (97) and lowest in Kerala (14). Death rate was highest in Orissa (10.6) and lowest in Kerala (6.4). The rural Maternal Mortality Rate (MMR) was higher 619 compared to 267 in urban areas. Female work participation rate (FWPR) in 2001 was highest in Mizoram (47.63%) and lowest in Uttar Pradesh (16.28%). Three of the six states studied have their own state policies, namely, Maharashtra, Madhya Pradesh and Tamil Nadu. Legal awareness is limited to educated urban women especially those who were currently attending higher education institutions and/or are employed. Awareness about all programmes and schemes meant for women's development is fairly high in Tamil Nadu and Maharashtra, namely Bal Vivah Virodh Abhiyan, SHG Groups in Ujjain, Panchayati Raj which is transforming lives, and Bairani Kuldi - a microcredit initiative. Mahila Vikas Samabaya Nigam (Women's Development Corporation), Orissa, the principle agency for economic empowerment programmes for women, is doing tremendous work and implementing several Central Government Schemes in this area. The Tamil Nadu Women's Development Corporation is doing remarkable work for the economic and social empowerment of women. Uttar Pradesh Women Development Corporation, established in 1999, is attempting to rejuvenate local crafts and provide monetary benefits to local craftswomen. The Population Policy of Maharashtra holds both incentives and disincentives. Kishori Shakti scheme needs to be universalized for out of school adolescent girls with
much more stringent inputs. All forms of discrimination against the girl child and violation of her rights should be eliminated by undertaking strong measures, both preventive and punitive, within and outside the family.


Abstract: A study was undertaken to assess the implementation of various programmes and policies in the northern, western, central and eastern regions of India. Field visits were made to six states namely, Madhya Pradesh (MP), Maharashtra, Mizoram, Orissa, Tamil Nadu (TN) and Uttar Pradesh (UP). Madhya Pradesh constituted 9.38% of the country’s total area, and 34.43% of the total population was below the poverty line. The Government of MP formulated a comprehensive Policy for Women in consultation with various concerned departments for the safety and protection of women, women’s autonomy, dignity, empowerment and participation. The state schemes for women and children were Ayushmati Scheme for providing free treatment to landless rural women and girls who fell ill; Vaishyavrati Unmulan ke liye Jabali Yojana for elimination of prostitution; grant-in-aid to orphanages; and legal aid centres for women and children. Some notable state initiatives of MP were decentralization through Gram Swarajya Panchayati Raj transforming lives through initiatives of women members; and Bal Vivodh Virodh Abhiyan (child marriage prevention campaign). Gender and poverty need to be addressed more directly, especially among the non Surena Jaatis the Dalits, and the minorities. Maharashtra is the second largest Indian state in terms of population and the third largest in terms of area. The New Women’s Policy 2001 was a charter for women’s empowerment, which emphasised women focused planning, women’s participation in decision making, health package for women, etc. to further government initiatives. Several NGOs are working collaboratively with the Government to further the cause of women. Annapurna Mahila Mandal (AMM), an NGO in Pune City, works with poor self employed women and men in urban slums. Human development approach is recommended as it offers a comprehensive framework that goes beyond a mere sectional or departmental mode of action. Mizoram does not have a separate Department for Women’s Development. The two schemes for girls were Balika Samridhi Yojana and Kishori Shakti Yojana, and Mizoram has set up State Commission for Women. Position of women in the traditional Mizo family was one of complete subordination and subservience. Government programmes for women and child development are trying to bring a change in
the situation. The Women and Child Development Department, Orissa launched “Mission Shakti” in 2001. Centrally sponsored schemes like Operation Blackboard Scheme, Programme for Massive Orientation of School Teachers (PMOST), Education Television (ETV) Programme, Mid-Day Meal and State Government Programmes for improving School Education were Teachers Training on MLL; competency based, child centered joyful teaching learning; Orientation of Supervising Officers, etc. Awareness about all programmes and schemes meant for women's development was very low. The Tamil Nadu government implements schemes for the overall development of women and girls like Girl Child Protection Scheme, which provides enhanced benefits to girls belonging to poor families; and Cradle Baby Scheme to counter female infanticide. In 2002, Tamil Nadu has formulated a Gender Policy on Women as a follow up of the National Policy on Women's Empowerment 2001. Crimes against women and girls are on the increase. Foeticide and female infanticide continue to plague certain pockets and other crimes against women are also not letting up, despite the establishment of Mahila Thanas (Women Police Stations). In Uttar Pradesh, the programmes under Women's Welfare Directorate were Working Women's Hostels; Swadhar Scheme for Women in Distress; National Social Assistance Programme and other programmes for specific needs of women. The State Department of Women and Child Development does not have its counterparts at the district or at the block level, and all schemes and programmes for women and girls are riding on the back of the ICDS structure, which is detrimental to both.


Key Words: 1. WOMEN WELFARE  2. SITUATION OF WOMEN GUJARAT  3. SITUATION OF WOMEN  4. DEMOGRAPHIC PROFILE OF GUJARAT  5. EDUCATION WOMEN  6. FAMILY WELFARE  7. WOMEN LABOUR  8. CRIME AGAINST WOMEN  9. PROGRAMMES OF DEPARTMENT OF SOCIAL WELFARE  10. POLITICAL EMPOWERMENT  11. EMPOWERMENT WOMEN  12. GUJARAT.

Abstract: The situation of women in Gujarat presents a paradox, as the state is far advanced economically, but the status of women is still low. The present study indicated the situation of women in Gujarat on health and nutrition indicators, and also studied the judicial system and legal rights accorded to women. Data was collected through survey from 25 districts. The sex ratio (female per 1000 males) was 955 in rural Gujarat, 935 in urban areas, and 947 for the state as a whole. The sex ratio reversed in favour of females after the age group of 50-54 years. The young dependency ratio was found to be 54% for the state, which was slightly higher in rural areas (60%) than urban areas. The total dependency ratio was as high as 67%, and was 74% in rural areas, and 59% in urban areas. 54% females were currently married and 35% have never been married. The percentage of never married was higher for males (45%) than females (35%). The incidence of child marriage at ages younger than 15 years has reduced substantially. Maternal mortality was found to be 437
deaths per 1,00,000 live births, during 1992-93 (NFHS-1) which appears to have increased to 540 deaths per 1,00,000 live births during 1998-99, as per the recent NFHS-2 estimate. The proportion of widows among women aged 6 years and above is slightly more than 9%. Women who availed any antenatal care increased from 79% among illiterate women to as high as 99% among women who have high school education and above. The level of infant and child mortality rate sharply declined with increasing education of women, and ranged from a high of 77 infant deaths per 1000 live births for illiterate women to a low of 35 per 1000 for women with at least high school education. Similarly, the risk of children under age five dying before their fifth birthday was found to be highest (117 per 1000 live births) among illiterate mothers as against a low U5MR of 38 among those mothers who had at least high school education. Female literacy rate increased from 48.9% in 1991 to 58.6% in 2001. Gender differences in literacy levels in Gujarat are 22% in favour of males. Gujarat ranks 15th in term of male literacy and 21st in female literacy among all states and union territories of the country. The lower enrolment and retention rate of girls, especially those belonging to scheduled castes and scheduled tribes, in the formal education system has a bearing on their economic status, independence and empowerment. Property inheritance is male oriented and women rarely own or inherit houses. Most women, irrespective of their age, education, class or employment, perform a variety of chores to maintain a household, with no or very little assistance from family members or paid help. According to 2001 Census, (provisional) women’s work participation rate (WPR) in Gujarat was 28%. However, this does not reveal the entire picture, as the household work done by women is not fully enumerated. Women from minority and other disadvantaged groups experience more violence compared to the other groups, though all women are equally vulnerable to violence. The media in Gujarat, be it the press, cinema, television or radio, has by and large, remained conservative and tradition bound, and portrays women in stereo typed and retrogressive roles. Gujarat has initiated innovative programmes such as ‘Mahila Samakhya’ and introduced policies like free education for girls at all levels, and 30% reservation for women in all state government services. Benefits of most of the development and welfare schemes are available only to women between the age of 18 and 60 years and to widows who do not have a son, thus reinforcing the patriarchal attitude. The study recommended that there is a need for multi-disciplinary research, encompassing different facets of women’s lives. More research is needed to assess the quality of life of women, the efficacy of services and programmes and policy formation. Both macro and micro level studies, with focus on gender, would help in understanding the needs of women. Coordinated research, documentation and dissemination of research findings should be the responsibility of academic institutions. This may be made possible by establishing a network of interested academic and research institutions.

Key Words: 1. WOMEN WELFARE 2. MUSLIM WOMEN 3. STATUS OF MUSLIM WOMEN 4. RIGHTS OF MUSLIM WOMEN 5. MUSLIM WOMEN ANDHRA PRADESH 6. ANDHRA PRADESH.

Abstract: According to 2001 Census, Muslim population in India is 138,188,240 constituting 13.40% of the total population of the country. The present study was done to examine the status of Muslim women in terms of impact of education and employment as well as income generating activities, on the direction of change among Muslim Women in Andhra Pradesh. The study was conducted in 3 districts of Andhra Pradesh, i.e. Nizamabad, Kurnool and Guntur. Data was collected through interviews with 825 women. Three categories of women were taken, 1. illiterate Muslim Women (300 respondents), 2. beneficiary Muslim Women (300 respondents), those who had accessed Micro Credit, and 3. educated employed women (225 respondents). It was a comparative study of the status of the above mentioned three groups of women, as perceived by the women themselves. It was observed that girl child marriage in the Muslim community was prevalent in the case of uneducated and other women. The rate of illiteracy among the husbands of educated employed was only 9.73%, while the same for illiterate and beneficiary groups was 38.38% and 40.30% respectively. Educated employed women had fewer numbers of children than the other two groups. In the educated group, though payment of dowry was less, the practice was still prevalent. More than 50% married respondents indicated that the opinion against payment of dowry had not yet taken roots or crystallized among the Muslim community. Awareness about ‘triple talaq’ was very high in all the three groups, but the percentage of disapproval of ‘triple talaq’ was high among educated employed women, while no response was received from more than 50% women among the illiterate. Probably there was fear in this group to respond to the question. As per Muslim Islamic tradition, a divorced women is entitled to maintenance only for 3 months after divorce, but it was found that among all the 3 groups, more than 70% of the respondents felt that maintenance allowance should be given to divorced women till their next marriage, or otherwise till her death. With regard to polygamous marriages, there was high rate of disapproval among the respondents of all the 3 groups. Majority of the respondents used ‘purdah’ (veils) when they went out of the house, and the usage was higher among illiterate women. All 100% respondents from all the 3 groups did not visit mosques because Islam did not permit it, but all the respondents expressed the opinion that they would like to visit the mosque if permitted. With regard to inheritance of property rights, 73.67% respondents reported that they did not inherit any property from their fathers, and all the 300 sample beneficiaries had no idea what Islamic rules say about Muslim women inheriting property from their fathers. 19.33% beneficiaries accessed micro credit from Andhra Pradesh State Minorities Finance Development Corporation. Majority of the beneficiaries (55.33%) accessed credit from District Rural Development Agencies (DRDAs) of their respective district. DRDAs seem to be acting as major facilitators of micro credit among Muslim women. 83% of the total beneficiaries took loans for starting petty business like selling clothes, starting small provision shops, selling eatables, etc. Muslim men’s perception seems to be changing, like that of educated women. Majority of the Muslim men in the sample exhibited modern attitude towards education of their daughters, considered ‘triple talaq’ as a bad tradition, and opposed the payment of dowry. It was
suggested that though there was some change in the status of Muslim women, still, even among the educated women, the aspect of critical consciousness, a necessary requirement to achieve gender equality was only partially present. Gender equality requires attention, which should be taken up by Muslim women’s organizations and other organizations dealing with women’s rights. Micro-credit activities among them should be promoted and rural Muslim women should be encouraged to become members of self help groups, in order to develop their managerial skills, self confidence, and increase their monthly and annual incomes.


**Abstract**: Meghalaya is one of the seven sister states that comprises India’s enchanted North East. The study raises pertinent questions, not only about the position of women and matrineal institutions, but also about the role of the state. In Meghalaya, women are actively engaged in productive activities. According to Census 2001, women’s work participation rates are highest in rural South Garo Hills (45.3%), East Garo Hills (43.5%), West Khasi Hills (42.5%) and Ri-Bhoi (41.6%), and least in the urban areas of West Garo Hills (14.8%) and East Khasi Hills (19.9%). Among the matrineal tribes of Meghalaya, authority lies with the mother’s brother and the father is not devoid of power. The Khasi family stands rather unique in the annals of history in the way in which authority within the household is divided between the dominant males belonging to both sides of the family. In a Khasi family, the youngest daughter inherits the bulk of the family property, along with the ancestral home and other heirlooms. The position of women among the Garos appears to be even harsher although like the Khasis, descent and inheritance among Jaintias is matrilineal and residence is uxorilocal. Data on the enrollment of students in the age group of 11-14 years shows that the ratio of girls who are admitted into schools is higher than boys, but boys have greater chances of remaining in the education system whereas girls tend to drop out more readily. In the years 1998-99, 63.3% women and 67.8% children were reported to be anaemic, with 2.4% and 4.3% respectively, suffering from severe anaemia. Maternal mortality in Meghalaya was found to be high, 450 per 100,000 live births. According to NFHS 2 (1998-99), according to 29.9% mothers received no medical attendance at the time of child birth, 17.3% mothers received government approved doctors' attention, while 13% received other nurse/ midwife's attention, and 3.5% mothers received government approved nurse/ midwife's attention. In 1998-99, 17.5% deliveries took place in medical institutions.
According to Human Development Report (2001) there were 42 rape cases, 12 molestation cases, 16 kidnapping and abduction cases, and 1 dowry death case registered in Meghalaya. A study conducted by Impulse NGO Network, a local NGO working with street children in Shillong, revealed that not only were some street children subjected to sexual exploitation, but also the fact that the North-East has become a transit point for trafficking of women and children. On the political front, women's participation in political bodies is critical for their development, and also necessary to fill the gap between promises made in the Constitution and policy measures, and the actual exercise. Evidence suggests that where women have access to education, sustainable income, health care facilities, and social and political rights, the quality of life is definitely better for all concerned. To achieve this, the state has to ensure greater efficiency of its administrative machinery and be more responsive to the material needs and the social and political rights of women. An integrated approach to women's health should be adopted that goes beyond the limited concern with women's reproductive and nurturing role to include some of the newly emerging diseases which afflict a large segment of women outside the reproductive age such as cancer, tuberculosis, diabetes and the threat of HIV/AIDS.


**Abstract**: A situational analysis of women and girls in Jharkhand was undertaken. According to Census of India 2001, the total population of Jharkhand was 26.9 million, males being 13.8 million and females being 13.4 million. The rural population was 77.75% and urban population was 22.25%. The sex ratio of Jharkhand was 941 females per 1000 males. Literacy rate was 54.13%, being 67.94% among males and 39.38% among females. In rural areas the literacy rate was 30.33% and in urban areas it was 70.71%. Children aged 0-6 years constituted 17.82% of the population. The Infant Mortality Rate (IMR) was 68.4 during 2001-2002. Maternal Mortality Rate (MMR) was 400 per 100,000 live births. Thirty eight percent women in Jharkhand were already married when they were between 15 - 19 years of age. Total fertility rate was 2.76%. According to NFHS II report, 43.1% tribal women did not receive any antenatal check up, 38.7% did not receive tetanus toxoid injections, 90.2% tribal pregnant women delivered at home, and 65.7% of all deliveries were attended by Dais. Total percentage of workers was 37.64, the female work participation being lower (26.40%) than that of males (48.21%). The Family Welfare Programme in India aims to promote contraceptive use among couples. Only 28% of married women were currently using some method of contraception, compared with 48% at the national level.
Contraception prevalence was higher in urban areas (40%) than in rural areas (25%). The average duration of using spacing methods was 14 months and private facilities were the source of obtaining these for 44% of the women, while 26% availed these from the shops. 77% of the women reported spacing of 2-3 years to be ideal, while 6% mentioned more than 3 years. About 6% of the illiterate women and 27% women educated above middle level were using contraceptives. As recommended by the Government of India, that breastfeeding should begin immediately after childbirth, in Jharkhand 56% children under four months of age were exclusively breastfed and only 26% children aged 6-9 months received the recommended combination of breast milk and solid/mushy foods. Based on International Standards, 54% of the children under 3 years of age were underweight, 49% were stunted and 25% were wasted. Women were also under nourished, 73% women had some degree of anaemia, compared with 60% in Bihar. The spread of HIV/AIDS is a major concern in India, but nearly 85% women had not heard of AIDS. The main sources of information about AIDS were TV (83%) and radio (49%). The poverty ratio in the year 1987-88 was 50.03% which increased to 69.83% in 1997-98. Atrocities on women in Jharkhand like rape cases, increased from 553 in 2000 to 679 in 2002. Dowry deaths also increased from 187 in 2000 to 235 in 2002. Domestic violence decreased from 396 in 2000 to 298 in 2002. Many Government and Non Government Organizations (NGOs) were working for the welfare of women in the state, but the path to gender equity in Jharkhand is still a long and arduous journey. Gender sensitization of the functionaries of different departments seems to be the first step in realizing these goals. An appropriate intervention in this direction is likely to prove rewarding.


Key Words: 1. WOMEN WELFARE 2. SITUATION OF WOMEN ORISSA 3. SITUATION OF WOMEN 4. SELF HELP GROUPS 5. TRIBAL WOMEN 6. ANTENATAL CARE 7. CRIME AGAINST WOMEN 8. TRAFFICKING OF WOMEN AND GIRLS 9. FAMILY COURTS 10. UNWED MOTHERS ORISSA.

Abstract: A situational analysis of women and girls in Orissa was undertaken. As per 2001 Census, the population of Orissa was 36.7 million, males being 18.61 million and females being 18.01 million. Population density increased from 203 in 1991 to 236 in 2001. Orissa had 51,349 villages and the number of towns increased from 124 in 1991 to 138 in 2001. A total of 62 tribes resided in Orissa and SCs and STs were 14.22 million comprising 38.74% of the total population of Orissa. Child population aged 0-6 years was 5.18 million and females numbered 2.52 million. The female child population 0-6 years as percentage to total population decreased from 16.85% in 1991 to 13.95% in 2001. Sex ratio of Orissa (972) was better than the national figures (933). Life expectancy for females was 61 years and for males it was 62 years during 1996-2001. The crude birth rate decreased from 33.1 in 1981 to 23.1 in 2002. The crude death rate was 13.1 in 1981 and 9.8 in 2002. Maternal Mortality
Rate (MMR) went up from 361 in 1997 to 367 in 1998, while the MMR of India declined from 408 to 407 in 1998. Infant Mortality Rate (IMR) has steadily declined from 135 in 1981 to 87 in 2002. The gender difference of IMR portrayed a positive picture for the female child, being 94.5 for males as compared to 84.3 for females. According to National Family Health Survey (NFHS), 44.1% male children were fully immunized compared to 43.3% female children. According to Multi Indicator Cluster Survey (MICS), in 2000, female full immunized coverage (FIC) was 42.2% and for males it was 49.1%, while it was 38.5% for males and 37.3% for females in 1999. The total literacy rate has increased from 49.09% in 1991 to 63.61% in 2001. Female literacy rate increased from 35% to 51% between 1991 and 2001. The rural and urban female literacy rates were 47.22% and 72.68% respectively in 2001. The drop out rate decreased over the last two decades, as in 1981 it was 63.3% while in 1999 it was 47.90%. Poverty ratio for rural and urban areas was 48.01% and 42.83% during 1999-2000. The number of females registered with different employment exchanges in the state was 20,487 as against 1,30,586 persons. There were clear signs of rise in crime against women in public and domestic spheres. Number of rape cases increased from 207 in 1989 to 816 in 1999. Women who were employed in the agricultural sector were treated as non workers and their work at home was also ignored. There were not many opportunities for educated and professionally qualified women for employment. Social transformation, gender equity and an enabling environment is required so that women of Orissa can realize their full potential and contribute their mite to the development of the state. Social, cultural, psychological and economic condition of women in Orissa is not up to the desired level. Government should take initiatives at the state level to improve the overall situation of women.


Key Words: 1. WOMEN WELFARE 2. SITUATION OF WOMEN MAHARASHTRA 3. MAHARASHTRA SOCIO ECONOMIC PROFILE 4. HEALTH STATUS OF WOMEN MAHARASHTRA 5. WOMEN PRISONERS 6. ECONOMIC EMPOWERMENT OF WOMEN 7. NGOs 8. VIOLENCE AGAINST WOMEN 9. EDUCATION WOMEN 10. GUIDELINES ON SEXUAL HARASSMENT AT WORKPLACE 11. MAHARASHTRA.

Abstract: The study assessed the situation of women and girls in Maharashtra. As per 2001 Census, the population of Maharashtra was 96.9 million, of whom 50.4 million were males and 46.5 million were females. Maharashtra is the third largest state of India in terms of area (308,000 sq. km) and second in terms of population. By September 2002, the population had crossed 100 million mark. Life expectancy for males and females was 63 and 65.4 years respectively. 42.4% of the State's population lived in urban areas and 57.6% in rural areas. Females per thousand males declined from 934 in 1991 to 922 in 2001, while sex
ratio in the age group 0-6 years declined from 946 in 1991 to 917 in 2001. Among the major states of India, Maharashtra ranked second with respect to literacy (77.3%) after Kerala (90.9%). Enrolment in higher secondary schools increased by 9.2% in 2002-2003. In 2000-2001, the drop out rates for boys and girls declined by 15% and 19% respectively from 53% and 63% in 1980-1981. To promote girls education, the State Government launched Ahilyabai Holkar Scheme from 1996-1997. Infant Mortality Rate (IMR) decreased from 105 in 1991 to 48 in 2002. The mean age at marriage for females was 17.6 years in 1971 which increased to 19.8 years in 1999 (NFHS II). As per the 55th Round of National Sample Survey (NSS) (July 1999- June 2000), 25.02% of the population was below the poverty line, the incidence of poverty being 26.81% in urban areas and 23.72%, in rural areas. Only 1-2% women aged 35 years participated in decision making compared with 25% women in the age group 15-19 years. 18% of the women in Maharashtra had experienced violence since the early age of 15 years and of the women who experienced violence 92% have been beaten by their husbands. Urban women (17%) were slightly less likely than rural women (19%) to have experienced violence. Women from nuclear families experienced more violence than women from non-nuclear families. The number of rape victims in 2002 was 1277; abduction cases increased from 662 in 2000 to 782 in 2002; dowry deaths recorded were 242; sexual harassment increased from 930 in 2000 to 1349 in 2002; while domestic violence decreased from 6768 in 2000 to 5065 in 2002. Maharashatra Protection of Women Bill 2001 was passed which defined violence and abuse. Many organizations like NABARD, SIDBI, UTI, Mutual Funds, Mumbai Port Trust, etc. have worked for the protection of women's rights. The Maharashtra Government has taken up several special schemes for the empowerment of women and girls, such as rehabilitation of devdasis, financial aid to widows and victimized women for self-employment programme, scheme for marriage of daughters of destitutes and widows, Savitribai Phule multipurpose women's centre, Kamadenu Yojana to provide employment to home based women workers, insurance scheme for women, provision of cycles for school going girls, educational and play material for balwadis, providing uniform to school girls and sarees to poor women, providing household articles to needy women, etc. In 2001-2002, there were 2055 primary schools, 856 secondary schools and 256 higher secondary institutions exclusively for girls. Gender gaps, however, still exist in health, education, equality and work participation. The current downsizing of the economy has led to reduced State spending on the social security sector.

Rajput, Pam. (2005).

Key Words: 1. WOMEN WELFARE 2. SITUATION OF WOMEN HARYANA 3. WOMEN'S EDUCATION 4. EDUCATION WOMEN 5. WOMEN AND DECISION MAKING 6. POLICY FOR
Abstract: The study assessed the situation of women and girls in Haryana. The total population of Haryana in 2001 was 21.083 million, comprising 11.36 million males and 9.78 million females. Sex ratio has shown a continuous declined in India from 972 females per thousand males in 1901 to 933 in 2001 for all ages, and in Haryana it declined from 865 in 1991 to 861 in 2001. Highest improvement was visible in Jind with the sex ratio rising from 838 in 1991 to 853 in 2001. Sex ratio in the 0-6 years age group in Haryana was 820 in 2001, and it was highest in Gurgaon (863) and lowest in Kurukshetra (770). The percentage of people who wanted more sons than daughters were 42.2% in rural areas and 25.9% in urban areas. The life expectancy of males was 64.64 years and that of females was 69.30 years. The mean age of marriage has risen from 17.7 years in 1971 to 18.9 years in 1991. Female literacy rate in Haryana increased from 40.5% in 1991 to 55.8% in 2001, and male literacy increased from 69.1% in 1991 to 78.5% in 2001. The gross drop out rate from Classes I-X in 2000-2001 was 31.37% for boys and 42.65% for girls. Total fertility rate declined from 3.99 in 1990-1992 to 3.42 in 1997. About 55.5% pregnant women were anaemic in 1998-99 (NFHS II). In 1998, Maternal Mortality Rate (MMR) was 103 per 100,000 live births in Haryana compared to 408 per 100,000 live births in India. 36.9% women availed medical help from the private medical sector while 12.2% availed help from the public medical sector. The Work Participation Rate of males was 50.5% and of females was 27.3% in 2001. In Haryana 3.4% women were not involved in any decision making. According to WHO, 16.52% of women all over the world experienced violence in intimate relations. In Haryana, the rate of total crimes against women compared to all cognizable crimes was 16.1% as against the all India rate of 14%. The largest percentage of women were beaten by husbands (10.8%), followed by other relatives. Government has started many programmes for women like Swarn Jayanti Gram Swarozgar Yojana (SGSY), Sampurna Gramin Rozgar Yojana (SGRY), ICDS, Kishori Shakti Yojana, etc. Education Policy for the State of Haryana was adopted in 2000. At the moment, women continued to be discriminated against over the entire life cycle, be it in the field of sex ratio, education, health, work participation, decision making or simple everyday routine. The traditional household bias and focus on women’s traditional roles in matters of policy making needs to be changed, and their concerns and issues should be integrated into mainstream policies.

Situation of Women

Key Words: 1. WOMEN WELFARE   2. SITUATION OF WOMEN PUNJAB   3. WOMEN IN DECISION MAKING   4. VIOLENCE AGAINST WOMEN   5. GOVERNMENT PROGRAMMES AND POLICIES   6. STATUS OF WOMEN IN PUNJAB   7. EDUCATION WOMEN   8. WOMEN’S EDUCATION   9. WOMEN’S HEALTH   10. EMPLOYMENT WOMEN   11. PUNJAB

Abstract: A study was conducted in Punjab to assess the status of women and girls. Human Development Index increased from 0.411 in 1981 to 0.537 in 2001. Punjab has a total population of 24,289,296, of whom 12,963,362 (53.37%) were males and 11,325,934 (46.63%) were females. The sex ratio in Punjab increased from 832 in 1901 to 874 in 2001. Sex ratio in 0-6 years age group were found to be highest in Moga (819) and Firozpur (819), and lowest in Patiala (770) and FG Sahib (754). Infant Mortality Rate in Punjab was 51, IMR of males was 38 and of females was 66 (SRS 2002). Life expectancy of females was 71.4 years while that of males was 68.4 years. Female literacy rate increased from 24.65% in 1971 to 63.55% in 2001. Low enrolment of girls was compounded by higher dropout rates. Corresponding to the decline in birth rates, fertility rates too have come down from 5.2 in 1971 to 2.7 in 1997. The decline was slightly higher in rural areas (2.6) compared to urban areas (2.2). About 41.4% women suffered from anaemia (NFHS II): 28.4% were mildly anaemic, 12.3% had moderate anaemia, and 0.7% were severely anaemic. Work Participation Rate of females increased from 5.5% in 1961 to 19.1% in 2001. Women’s representation in the Lok Sabha from Punjab revealed a few disturbing features. Firstly, the number of women contestants was very low, not exceeding 8 until 1996, when surprisingly 16 women contested the elections. Secondly, the number of women winners was insignificant. Only two women contestants (12.5%) emerged successful in 1996. Incidence of crime against women was 2295 (National Crime Records Bureau 2002), and reported dowry death cases were 166 in 2002. On the whole, Punjab continues to be steeped in a patriarchal ethos, which binds women, and keeps them confined like birds in a cage. Fifty years after independence, Punjabi women continue to bear the burden of womanhood; deprived not only of access to basic facilities but even the very basic right to be born. Thus, Punjabi women continue to be shackled by their womanhood, and their situation remains one of the bleakest faced by women anywhere in India. Gender sensitization campaigns need to be launched for both, men and women. The need for family courts in Punjab was emphasized.


Key Words: 1. WOMEN WELFARE   2. SITUATION OF WOMEN MADHYA PRADESH   3. SITUATION OF WOMEN   4. POPULATION   5. SEX RATIO   6. BIRTH RATE   7. LIFE EXPECTANCY
Abstract: A situational analysis of women and girls in Madhya Pradesh, undertaken by the National Commission for Women, found that about 6% of the country’s total population resided in Madhya Pradesh. According to the 2001 Census, the population of Madhya Pradesh has grown by 24.34%. During 1991-2001 the female population growth rate was 1.97% as compared to 1.90% growth rate of the male population, and 1.93% for combined growth rate. The sex ratio in Madhya Pradesh according to the 2001 Census was 920 females for 1000 males, which reflected the poor status of females as compared to males. Madhya Pradesh had 10,600,796 children in the age group 0 to 7 years. According to district statistics for 2002, percentage of female live births to total births was 45.35% in rural areas and percentage of female deaths to total deaths was 42.54% in rural areas. The birth rate was 30.8 for the year 2001. The death rate in the State is estimated to have come down to 10.1 in 2001 according to the Sample Registration System. According to the 1991 Census, the female mean age at marriage was 16.6 years in undivided Madhya Pradesh which was well below the female legal minimum age at marriage of 18 years, and a recent rapid household survey NFHS II, 1998-99 suggested that more than 51% females were married before 18 years. Female life expectancy between 1961-70 and 1993-97 increased by more than 10 years, while the corresponding gain for males was about 9 years. Female literacy rate rose from 29.35% in 1991 to 50.55% in 2001. Gross Enrolment Ratio (GER) rose from 76.5% in 1996 to 96.2% in 2000-01 and 101.7 in 2002-03. Total Fertility Rate (TFR) according to SRS 1999 was 3.3. Mean birth weight of babies born to poor women was 2.7 kg as against 3.2 kg for children born to women from higher income group. Women’s role in decision making was limited. About 81.7% women decided what to cook in the household, while only 44.3% women decided about purchasing jewellery, etc. The occupation of women contestants in politics indicates that contestants were mainly from agriculture backgrounds (27.64%), housewives (22.64%) and social or political activists (14.57%). The remaining 35.18% were in service, teachers, business, contractors or lawyers. During 1998, torture (41375) and molestation (30959) topped the list of crimes against women, contributing to about 31.09% and 23.26% of all crimes respectively.


Key Words: 1. WOMEN WELFARE   2. SITUATION OF WOMEN DADRA AND NAGAR HAVELI 3. SITUATION OF WOMEN  4. DOMESTIC VIOLENCE  5. FEMALE FOETICIDE  6. EDUCATION 7. LITERACY RATE  8. DISABILITY  9. HEALTH AND FAMILY WELFARE  10. FAMILY
Situation of Women

Abstract: Independent India proclaimed equality of the sexes as a Fundamental Right under the Constitution and directed state policy towards removing the various disabilities that prevent women from realizing their potential. The present study was a situational analysis of women and girls in the Union Territory of Dadra and Nagar Haveli which focused on socio-economic conditions, education and literacy, health, crime against women, traditional practices and Panchayati Raj indicators. Data was collected through field surveys and from secondary sources. Dadra and Nagar Haveli was a tribal dominant small Union Territory, and as per 2001 Census the total population was 220,451 (males 121,731; females 98,720). The tribal population of DNH was 1,37,208 and was divided into 3 major groups namely Varlis, Dhodias and Kokanas. Literacy rate was 40.70% in 1991 which had risen to 60.03% as per survey of 2001. Female literacy rate was 42.9%. There were 17,235 families below the poverty line (BPL), and a Survey by Planning Commission (2001) had estimated that 6000 more families were BPL. It was found that beneficiaries covered under various agricultural schemes were about 12,000 every year, out of whom 3500 to 4000 were women, which was 30% approximately. In 2000, the sterilization method was used by 704 people, which increased to 785 in 2004; c-c (condom) users increased from 1245 in 2000 to 3604 in 2004, and oral pill users increased from 1171 to 4188 in 2004. The number of pregnant women receiving Tetanus injections was 6775 in 2001 which increased to 7682 in 2004. Vaccines received by children were DPT (7080 in 2001 and 7582 in 2004), and B.C.G. (6998 in 2001 and 7904 in 2004). According to the Census of India 2001, total number of disabled persons was 1257 males and 761 females. Several schemes were implemented by the Department of Rural Development and these were Swarna Jayanti Gram Swarozgar Yojna (SGSY), Swayamsidha, Indira Awas Yojana, Indira Mahila Yojana, Balika Samridhi Yojana, National Family Benefit Scheme (NFBS), and Total Literacy Campaign. Under the SGSY scheme, 40% beneficiaries were women, and 18 women’s Self Help Groups (SHGs) were formed during 2003-04. Under the Swayamsidha scheme, 90 SHGs were formed and 246 benefited from the scheme. The girl child covered under Balika Samridhi Yojana (BSY) was entitled to post-birth grant of Rs. 500/- annually when the girl started attending school. She became entitled to the annual scholarship and there were 32 girl beneficiaries during 2003-04. Under National Family Benefit Scheme there were 1132 persons in 2003-04, of whom 789 were female beneficiaries. Under the Total Literacy Campaign Scheme, special emphasis was given to girls’ education. The U.T. administration had one tribal ICDS block under which 138 Anganwadi Centres and 40 wheat based centres were functioning. The total number of women beneficiaries who received supplementary nutrition and wheat based nutrition were 3099 in 2004-05. Of these, 1123 were pregnant mothers, 1535 were nursing mothers and 441 were adolescent girls. The total number of crimes against women reported in 1999 was 19 which decreased to 11 in the year 2004 and constituted 4.5% of the total crimes. Crime rate in the U.T. was much lower than the overall crime rate of India. In 1995-96, there were 4 female inmates lodged in the Sub Jail of the U.T., in 2002-03 there were only 2 female inmates, and in 2003-04 there was no
female inmate lodged in the Sub Jail. The study suggested that various schemes related to education, health, nutrition, personal laws, etc. should be implementing by the Government of India to address women's problems in Dadra and Nagar Haveli.


**Key Words**: 1. WOMEN WELFARE 2. SITUATION OF WOMEN ASSAM 3. SITUATION OF WOMEN 4. SELF HELP GROUPS 5. TRIBAL WOMEN 6. WOMEN IN DECISION MAKING 7. POLITICAL PARTICIPATION OF WOMEN 8. CRIME AGAINST WOMEN 9. WOMEN EMPOWERMENT 10. EMPOWERMENT WOMEN 11. WOMEN'S DEVELOPMENT PROGRAMME 12. BUDGETARY SUPPORT FOR WOMEN 13. ASSAM.

**Abstract**: The study was undertaken to assess the situation of women and girls in Assam. The Assam economy represents a unique example of poverty amidst plenty. Inspite of being richly endowed with natural resources, the state lags behind the rest of India in many aspects. According to Census of India 2001, the state's population was 26.6 million, comprising 13,787,799 males and 12,850,608 females. About 70% of the total population depended on agriculture. The state produces about 15.6% of the world's tea and 55% of India's tea. In 1999-2000, Planning Commission estimated that 26.10% people were living below the poverty line in India and in Assam 36.09% people were living below the poverty line. As per National Sample Survey Organization (NSSO) 58th Round figures, the food availability status in rural Assam was the lowest among all states, with only 943 households per thousand getting enough food throughout the year. Female headed households in Assam were 12.1% (NFHS-II). In 2001, the sex ratio in Assam was 932 against the all India average of 933. In 1991, the child sex ratio for Assam was 975, which decreased to 964 in 2001. The death rate in Assam was 10.2 in 1993 but decreased to 9.5 in 2001. SRS data for 1998-2001 confirmed that birth rates in rural Assam continued to be higher than the corresponding all India rates, whereas for urban areas, it was the reverse. The total, rural, and urban Infant Mortality Rate (IMR) of Assam was 70, 73, 38 in 2002 compared to the all India figures of 63, 69, and 40 respectively. According to NFHS-II, the neonatal and postnatal mortality rates in Assam were 44.6 and 24.9 respectively. In 2001, the male female gap in literacy was only 15.9% against the national average of 21.70%. Female work participation rate (FWPR) was 20.7% in 2001 compared to 21.6% in 1991. In 2000, Assam had only 10 lady IAS compared to 216 male IAS officers. In 1997, there were 1113 cases of kidnapping, 717 rapes, 686 molestations, 775 cruelty by husbands, 22 dowry deaths and 10 immoral trafficking cases, which increased respectively to 1229, 884, 754, 1560, 62 and 20 in 2002. There were 197 ICDS projects operational in Assam including 89 newly created projects. Social sector received around 35-40% of the total planned expenditure of the state. Women had very low representation in decision-making bodies, and did not even have complete freedom in household decision making. In many insurgency-affected areas, women
were victims of different forms of crime. Very little effort has been made to address the problems of these women in difficult situations. To address all these problems in their true perspective, a State Policy Action Plan for empowerment of women of Assam is urgently required.


**Key Words**: 1. WOMEN WELFARE  2. STATUS OF WOMEN  3. CHILD MARRIAGE  4. EDUCATION WOMEN  5. EARLY MARRIAGE  6. DOMESTIC VIOLENCE  7. NAAI COMMUNITY.

**Abstract**: The study on the status of women among the Naais (barbers), a backward (OBC) community of Uttar Pradesh, was based on a survey conducted in April 2002 in Tharauli village of Siddharthnagar district situated on the Northeastern border of Uttar Pradesh. The sex ratio among Naais was 843 compared to 933 for India. Data on the status of women was collected through unstructured interviews. Only 36% women were literate compared to 84% males. None of the women were graduates. Women had hardly any role in the economy. 74% of the women were only housewives. 11.4% were pursuing their traditional occupation of nauns (who play a major role in arranging marriages, and take care of the mother and the new born child), and 5.6% were working as school attendants or wage labourers. The mobility of women was very restricted. Daughters and sisters were given more freedom to move about in the village, but the mobility of daughters-in-law was strictly prohibited, due to the prevailing purdah (veiling) system. Women engaged in some economic activity had greater freedom to move about in the village. Deep rooted faith in traditional healing, low education status and poor health posed barriers in moving to hospitals and consulting doctors. In 'Naai' community, husbands had a socially accepted right to beat their wives, especially when the husband was drunk. Data revealed that the husband was the dominant decision-maker. Even in matters related to the household, only 19% women took independent decisions. Regarding decisions related to marital relationship, like the use of contraceptives and decisions related to family size, men had more of a say (81%). Men took decisions related to consultation with doctors for any type of health problems of women. Child marriage was also prevalent in this community, the average age at marriage for women being 11 years. The 'gauna ceremony' (wife moving to husband's house) occurred after 3 to 5 years of marriage. Child marriage adversely affected the health of the young mother. The number of stillbirths and infant deaths was also high. Low educational and occupational status of women, and purdah system hampered overall development of women. The majority of these women were ignorant of their rights, and social resistance also prevented them from getting their legitimate due share. The women of this community confined themselves within the boundaries of the family, and were not allowed to evolve or have access to the modern world.
Situation of Women

Tinnari, Third World Centre for Comparative Studies, New Delhi. (2003).

Key Words: 1. WOMEN WELFARE 2. SITUATION OF WOMEN ORISSA 3. GIRLS EDUCATION.

Abstract: The study assessed the life situation of women in Orissa. Total population of Orissa was 36,804,660 as per Census 2001 comprising 18,660,570 males and 18,144,090 females. Orissa had the highest IMR of 87 per one thousand live births in 2002, in the country. The maternal mortality rate (MMR) was 367 in 1998. The sex ratio in Orissa has come down from 1037 in 1901 to 972 in 2001. The sex ratio in the age group 0-6 years for the state as a whole declined from 967 in 1991 to 950 in 2001. Certain urban areas were emerging as the 'epi-centres' of female deficit due to availability of female foeticide service providers. Orissa has a large presence of ST and SC populations amongst whom gender discrimination does not exist very prominently. Women in Orissa tend to marry relatively late. There is one trained dai for 743 persons (per 1.3 villages). 34% households in Orissa had electricity and 9% had piped drinking water. Exposure to media is low in Orissa. Almost half (48%) of the women in Orissa are undernourished. About 28% married women in Orissa had some reproductive health problem but 75% had not sought any advice or treatment. Only 33.5% births were attended by a health professional (NFHS II, 1998-99). Mothers of 80% of the children born received at least one antenatal check-up and mothers of 47% children received at least three antenatal check-ups. Fertility continues to decline in Orissa. 98% women knew at least one modern family planning method. Women who had one or more sons were more likely to use contraception than women who had only daughters. 61% women had never heard of AIDS. In Orissa, 89% women were involved in decision making, but usually husbands and male family members influenced the decisions. Female literacy rate had increased from 25.14% in 1981 to 50.97% in 2001, and girls had made substantial progress in school and higher education. There are still 12855 habitations/villages not served by any primary education facility within 1 km. distance. Female work participation rate in Orissa was 24.62%, 27.10% in rural areas and 9.76% in urban areas. 29% of the women had experienced domestic violence. Results suggest a need to expand reproductive health services and information programmes that encourage women to discuss their problems with a health care provider. All the Central Government schemes are largely aimed at the poorer half of the population, and are not managed very professionally. Poor women have no bargaining power and are not literate enough to handle the intricacies of planning and budgeting. Most options under the Central schemes of Central Social Welfare Board (CSWB), such as Socio Economic Programme (SEP) and Support to Training and Employment Programme (STEP), are limited to traditional stereotyped courses. Awareness about all programmes and schemes meant for women's development was very low. Legal awareness was limited to educated urban women. Gender role perception was more egalitarian among the ST/SC groups in the tribal belt.


164
Women’s development in India: comparative analysis of policy and performance.
New Delhi: Tinnari. 41 p.


Abstract: The present study was conducted by TINNARI to assess the status of women in India. Six states namely Madhya Pradesh, Maharashtra, Mizoram, Orissa, Tamil Nadu and Uttar Pradesh were selected for field visits. At the state and district level an attempt was made to interact with senior officers in the concerned departments with regard to the position of different programmes and schemes for women’s development. At the ground level, interviews, informal discussions and focus group discussions were carried out with women and men to ascertain the general problems faced by them, their level of awareness about the programmes and schemes, and the policy and laws that exist for advancing the interests of women. Three of the states had their own state policies, namely Maharashtra, M.P., and Tamil Nadu. Mizoram, Orissa and U.P. continued to work within the framework of the National Policy for Empowerment of Women (NPEW) 2001. The most commonly operational central schemes for women and girls were Swayamsidha; Swa Shakti, Support to Training and Employment Programme for Women (STEP); Swawlamban, Distance Education for Women’s Development and Empowerment; ICDS, Kishori Shakti Yojana for Adolescent Girls, Balika Samriddhi Yojana, Hostels for Working Women, Swadhar for women in difficult circumstances, Short Stay Homes for women in distress, Protection Homes for girls rescued from prostitution, Mahila Mandal, Socio-Economic Programme, Production Units, Agro based units, Self Employment Schemes, Awareness Generation Camps, Condensed Courses of Education for Women aged 15+ to pass matric/secondary/middle and primary level exams and the scheme of Vocational Training for Women, Creches for Children of Working/Ailing Mothers, and Sarva Shiksha Abhiyan. There is a need to move to more participatory formulation of policies and programmes/schemes in consultation with the concerned states. The foremost action required is the implementation of the National Policy for Empowerment for Women 2001 in letter and spirit. Awareness about all the programmes and schemes meant for women’s development needs to be widely propagated. There is a need for separate Ministry for Women’s Development and Empowerment. Schemes like Kishori Shakti Yojana and Balika Samriddhi Yojana need to be universalized. Professionalisation of social sector management is the crying need of the hour. Sufficient time should be given to organizations for implementation of programmes and schemes. The State Commissions for women are mostly under staffed and need to be strengthened, on the same lines as National Commission for Women (NCW).

**Key Words**: 1. WOMEN WELFARE   2. SITUATION OF WOMEN HIMACHAL PRADESH

**Abstract**: A situational analysis of women and girls in Himachal Pradesh (HP) was undertaken by National Commission for Women (NCW). It was found that HP has no state policy for women. According to 2001 Census, population of Himachal Pradesh is 6,077,248 comprising 3,085,256 males and 2,991,992 females. About 90% population of Himachal Pradesh lives in rural areas. There was a slight decrease in sex ratio from 856 in 1991 to 851 in 2001. The total fertility rate for Himachal declined sharply from 1991 to 1999 compared to the declined in the TFR of India, and the decline was more in rural areas than urban areas. According to SRS estimates for the year 2002, the crude birth rate was 20.7, while that of India was 25.0. According to SRS 2002, infant mortality rate (IMR) was 52 in HP, being 28 in urban areas and 53 in rural areas. According to the study, major causes for premature mortality are diarrhoeal diseases, lower respiratory tract infections, other maternal conditions, infectious diseases and perinatal conditions, which account for almost 48% of all premature mortality. Iron deficiency anaemia was prevalent among women. In rural areas, median age for marriage for the age group 25-29 was recorded to be 19.6 years, while for women in 45-49 years age group it was 20.4 years. NFHS-II survey found that contraceptive prevalence rate in Himachal Pradesh was quite high, with 68% married women using some form of contraception against the national figure of 48%. Despite having a high proportion of women receiving antenatal care (87.2%), institutional deliveries were low at 31.7%. Himachal Pradesh has a higher female literacy rate compared to the rest of the country, as per the 2001 Census, but the sex ratio in the 0-6 years age group is extremely low. Literacy increased to 84.57% in 2001. Between 1981 and 1998, the enrolment level in schools increased by three times in Himachal Pradesh. There has been gradual increase in the proportion of women to the total work force, and gender disparity has reduced over the decades. Work Participation Rate (WPR) for women in 2001 was 43.66%. Presently out of 68 seats in the State assembly, only 4 are held by women. In 2003, there were 126 rapes, 250 molestations, 96 kidnappings, 31 cases of murder, and a few dowry deaths. Females constitute 0.07% of the total police workforce, a number almost negligible. There is need for a state policy for women with the framework in place. Himachal Pradesh State Commission for Women should have a wider and proactive role. Gender sensitization is also required. Active dissemination of the findings of the studies carried out by the State, research scholars, NGOs and research institutions is needed for creating awareness about issues, avoiding duplication, and bringing evidence based advocacy into the picture. Gender budgeting is required to create gender responsive governance. There should be proper documentation of records and creation of central databases. Most of the times it is not
absence of information, but unavailability of information which impedes empowerment of women.


Key Words: 1. WOMEN WELFARE 2. SITUATION OF WOMEN RAJASTHAN 3. SITUATION OF WOMEN 4. DEMOGRAPHIC PROFILE OF RAJASTHAN 5. EDUCATION WOMEN 6. FAMILY WELFARE 7. WOMEN LABOUR 8. CRIME AGAINST WOMEN 9. PROGRAMMES OF DEPARTMENT OF SOCIAL WELFARE 10. POLITICAL EMPOWERMENT 11. EMPOWERMENT WOMEN 12. RAJASTHAN.

Abstract: Rajasthan is the largest state in India after Chhattisgarh with a population of 56.5 million in 2001. The State has 5.5% of the country's population, but only 1% of its water resources. There was an increase in literacy rate from 38.55% in 1991 to 61.03% in 2001, with male literacy being 76.46% and female literacy being 44.34%. 49% of women in the age group 15-19 years were already married, of whom 57% were rural girls and 27% were urban girls. Some women became mothers of 3 children by 19 years of age. 14% second births occurred within 18 months of the previous birth, and 30% second births occurred within 24 months. Infant Mortality Rate (IMR), which was 108 in 1985, declined to 78 in 2002. The number of hospitals in urban areas was 205, and in rural areas there were only 14 hospitals. 49% of the women were anaemic, and anaemia was highest (53.9%) in the age group of 15-19 years. Only 20% deliveries took place in health facilities, 66.6% at women’s homes, and 10% at parents’ homes. There were 57,781 cases of full blown AIDS, and 15,219 women were infected. Female Work Participation (FWP) rates were higher in Chittorgarh (46.32%), Jalore (46.24%), Dungarpur (45.02%), Bikaner (27.48%) and lowest in Kota (19.14%). Rural Poverty Alleviation programmes being implemented in Rajasthan were Swarn Jayanti Gram Swarozgar Yojana (SGSY) started in 1999, Indira Aavaas Yojana started in 1985, etc. The number of dowry deaths increased from 349 in 1996 to 399 in 2002, rape cases decreased from 1062 in 1996 to 1051 in 2002, eve teasing increased drastically from 44 in 1996 to 2730 in 2002, and abduction/kidnapping decreased from 2485 in 1996 to 2022 in 2002. A total of 49145 Self Help Groups (SHGs) were functioning in Rajasthan by January 2003. Women above 35 years of age were more enthusiastic to vote than the younger generation. 2891 girls above 17 years of age were involved in the sex trade, and 1197 girls aged 10-16 years were working. The fundamental objectives of the State Plan of Action for Children were to improve child health, maternal health, nutrition, education, safe water supply, environmental sanitation, HIV/AIDS control and provide services for disabled children. Rajasthan State Commission for Women was set up on 28 April 1999. Only 18% women were using a proper health facility for safe delivery. Health is still a sensitive area and women were not using the facilities. The Tenth Plan has provided a separate component for women. Empowerment of women would be possible only when successive governments
start owning responsibility for the poor women of Rajasthan, and implement into the policies which were enunciated in the 1990s.
Swa-Shakti Project


Abstract : The Swa-Shakti (RWDEP) Project in Karnataka aims at promoting 1,200 Self Help Groups, in the four selected districts namely Kolar, Chitradurga, Tumkur and Bellary. The goal of SHG formation is to bring about social and economic advancement among poor women. The base-line survey was conducted in Kolar district during Jan-Mar 2000. The survey sample comprised women from 368 households selected from 16 project villages spread over 2 blocks of Kolar district. The sample had 70.0% scheduled castes, 8.0% scheduled tribes and 22.0% general category. The sample comprised landless women (53.0%), marginal farmers (45.0%), small farmers (3.0%) and others (~1.0%). The average size of household was 4 in Gowribidanur block and 5 in Malur block, and the sex ratio was 967 females per 1000 males. Women headed households comprised 20.0% of the sample. 70.0% of both boys and girls were attending school. Of the remaining 30.0%, 23.0% were drop outs and 5.0% wage earners. Reasons stated for drop-outs varied from the need to work for a living, child not interested, parents not interested in children's education and child helping the mother / taking care of siblings. Literacy among the female members was 32.0%. Awareness about gender rights such as minimum wages act, equal wage for equal work, prohibition of bigamy, etc. was noticed among 4.0 to 6.0% of the members. 94.0% of the sample were aware of government development programmes. Regarding voting behaviour, 82.0% of the women stated that they could decide on their own, about 13.0% women said they were influenced by other household members especially husbands, and 5.0% of the respondents did not vote. Women faced problems like dowry, harassment by in-laws, desertion by husbands for not having children, and restrictions on their movement. Only 4.0% possessed some skill. Among female labour force, around 85.0% were employed. Both the sample blocks faced acute water shortage. Use of gas or bio-gas was totally absent among the sample households. Less than 1.0% of the sample households had sanitary toilets. Cough, cold and fever followed by T.B., diarrhoea, typhoid and skin disease were the common diseases in the villages. Major source of income of the households was from labour, wage labour and cultivation. The women respondent's share in the total annual family income was 29.0%. Women's say in decision - making was found to be minimum. In the sale and purchase of immovable or moveable assets, women were rarely consulted. Only 43.0% women were able to influence decision-making regarding spacing of children. In case of deciding their children's marriage, the opinion of only 63.0% women was considered. 64.0% households stated that they fell prey to money lenders during emergencies. There was low incidence of migration as there were ample job opportunities in the village.

Key Words: 1. WOMEN WELFARE  2. TRAINING IMPACT  3. EMPOWERMENT WOMEN  4. SELF HELP GROUPS  5. IMPACT OF TRAINING  6. KNOWLEDGE LEVEL.

Abstract: Swa-Shakti Project creates opportunities for achieving more stability in women’s lives through various training programs in fields such as women’s empowerment and self reliance. The Swa-Shakti Project commenced from April 2002 and was implemented in 14 blocks of three districts of Almora, Pithoragarh and Tehri Garhwal in Uttaranchal. The specific objectives were to establish women’s Self Help Groups (SHGs), which build self-reliance and self confidence and provide them greater access to and control over resources; sensitize and strengthen the institutional capacity of support agencies, Government, NGOs and banks to proactively address women’s needs; increase the incomes of poor women through their involvement in income generating activities; to develop linkages between SHGs and lending institutions to ensure women’s access to credit financing; and to improve access to better health care, education and drudgery reduction facilities. To conduct this study, 10 SHGs with 106 respondents were randomly selected in 3 blocks of the project area of Almora District. Concept and promotion of SHGs brought a positive change in social dynamics of the group members. A few SHG members expressed the view that SHGs were a platform for women to interact and led to empowerment. Empowerment of women was observed in the form of participation in making financial decisions for the family. The groups were also found to be influential in the community with some women becoming members of Panchayati Raj Institutions (PRIs). Swa-Shakti Project emphasized on formation and strengthening of women SHGs in its project area. The main two or three Income Generating Activities (IGA) were seen in sample SHGs, and they were using these activities as a source of income. Promotion of SHGs under Swa-Shakti has influenced the political scenario in the sampled villages. SHG members have become more aware about the role and responsibilities of various Government departments. SHG members in some study villages have become aware of reservation for women in panchayats, participated in Gram Sabha Meetings and tried to solve community problems regarding basic amenities, irrigation, drinking water, sanitation, etc.
Terrorist Violence Victims


Key Words: 1. WOMEN WELFARE 2. TERRORIST VIOLENCE VICTIMS 3. VICTIMS 4. MILITANCY 5. VIOLENCE AFFECTED WOMEN 6. PUNJAB.

Abstract: The ruthless violence of the 1980s fractured the social fabric of Punjabi society. The present study aimed to understand the impact of violence on victims in terms of somatic effects like psychological disturbances, physical disabilities, withdrawal symptoms, revenge addiction, reliving experience, and also effects like break in education, dropouts, loss of jobs and incomes, and disintegration of family. The study also attempted to identify response of the community towards victims, especially vis-à-vis gender, whereby male victims were glorified and female victims were stigmatized. A representative sample of 200 women and 200 children was taken from 3 cultural zones of Punjab, namely Malwa, Majha and Doaba. Data was collected through interview schedules, group discussion and case study method. The sample was divided into 2 classification systems based on victimization (victim survivors, victim-dependents, handicap survivors, and witnesses), and affiliation (militant-affiliates, state affiliates, and other affected survivors or OAS). Most victims were from militant affiliate category (30%). Most respondents in this category were financially affected as they were given no compensation from the State and had no personal assets to fall back on. Most women were affected through the loss of spouse, with 59% becoming widows. 37% women suffered as mothers of victims. In the militant affiliate category, 75% women had been harassed, beaten, and taken to police thanas (stations) in the capacity of mothers and wives of militants. Some women were half-widows as they were not sure whether their husbands were dead or alive. The militant affiliate group was not eligible for Government pension or compensation. Militant affiliate category was constantly harassed by the police and remained socially isolated in the community. Till the time of the study, these families continued to be harassed by police. Thus, continued harassment and fear of recurring torture or humiliation existed. Nearly 97.5% victims lost their family members, underwent torture and lived in conditions of fear, insecurity, and financial deprivation. Episodes of violence left them psychologically disturbed and socially isolated from their support structures. Police would take away and abuse young girls from militant affiliate category, and pass foul remarks with sexual connotations at them. During the post-militancy phase, women victims were neglected socially, were vulnerable to sexual abuse, and were without material sustenance. They had to find employment avenues for
survival, but these roles were alien to the socio-cultural psyche of women who were integrated in typed role functions. High suicidal impulses were found among militant affiliate group. Many had psychosomatic problems. 14% girls had to drop out of schools due to financial and security concerns. A re-integration cell should be created in each district to help with health, education and recreation needs of victims. Victims should be provided with medical allowance and employment. Efforts should be made to mobilize the community to re-integrate the victims of violence. Panchayats (village elders) and mahila mandals (women's groups) should be given training and sensitized about victimization.


Key Words : 1.WOMEN WELFARE 2.TERRORIST VIOLENCE CRIME 3.WOMEN IN ARMED CONFLICT 4.AGAINST WOMEN 5.ARMED CONFLICT 6.WOMEN IN DIFFICULT CIRCUMSTANCES 7.VICTIMS OF VIOLENCE 8.JAMMU AND KASHMIR.

Abstract : The silent victims of war are women who are most vulnerable in situations of armed conflict. Women are often singled out for human rights violations which are not inflicted on men, and assault on a woman's body is used as a weapon of war. Women are victims of gender discrimination and violence. It was very difficult to collect data in Kashmir. The following study was conducted with the help of documented cases, interviews with the victims or relatives of victims like parents, etc., interviews with medical specialists and others. Women are viewed as commodities and subject to a schism that divides them into the categories of usefulness and exchange value, to be exploited in conditions of conflict and considered the spoils of war. Jammu and Kashmir is no exception to the situation. The generation of Kashmir women found themselves sandwiched between the violence of militants and the atrocities of security personnel. It has been observed that in situations of armed conflict often the security forces are violators of the law, becoming perpetrators of sexual violence against women. It has been observed that security forces have perpetrated crimes of gender violence, and the courts in India have time and again taken cognizance of the same. Rape is used as a means of targeting women whom the security forces accuse of being militant sympathizers. Often gender violence remains hidden behind the veil, and the family of the victim never makes a complaint. Courts observed that crime against women in general, and rape in particular, is on the increase. In Kashmir, medical specialists in hospitals in Srinagar claim that the number of neurological disorders among women is on the rise. The number of abortions has also increased. Women gangraped by militants or security forces were severely traumatized. The militants also took away young girls, married them, raped them, and when they were tired of the girls, they abandoned them. A new phenomena emerging in Kashmir is the problem of half widows, women who do not know whether their husbands are alive or their whereabouts. In the early years of insurgency, reports of rape by militant groups were rare, but since 1991 their
number has increased. Official sources say that women militants have become more active and dangerous, particularly with the induction of the women fidayeen squads (suicide squads). Rape as a gender specific form of abuse in Kashmir must be understood in the context of the subordinate status of women generally in South Asia. Even within the rules protecting civilians, there is no equality in the treatment of men and women. There is requirement for a new protocol, and the protocol should include the many other aspects of women's experiences of sexual violence in armed conflict situations on which the present law is silent. Every state should implement the UNHCR guidelines on the protection of refugee women, and every state should recognize the critical role Non Government Organizations (NGOs) and domestic groups can play in challenging human rights abuses in their countries.
Violence/ Crime Against Women


Key Words: 1. WOMEN WELFARE 2. VIOLENCE AGAINST WOMEN 3. AGGRESSION IN WOMEN 4. GUJARAT RIOTS 5. MUMBAI RIOTS 6. PSYCHOLOGICAL PERSPECTIVE OF WOMEN 7. RASHTRIYA SWAYAM SEVIKA SAMITI (RSS) 8. RIOT VICTIMS 9. AGGRESSIVE WOMEN 10. RIOT AFFECTED WOMEN.

Abstract: A widespread belief is that men are more aggressive than women. This study investigated the involvement of women in riots and incidents of communal violence in Gujarat and Maharashtra. In 95% cases, women murdered strangers, and in 60% cases women slayed relatives and friends. In a study of 460 female murderers, it was found that women were becoming more stereotypically male in their reasons for murdering. The differences in physical aggression of Hindu and Muslim women were significant. The Rashtriya Swayamsevak Sangh (RSS), the most effective organizer and bearer of the political ideology feels that India has been a Hindu rashtra since many millenniums, and the interests of Hindus should not be compromised in India. The wide range of data collected by fact finding teams of the People’s Union for Civil Liberties, Vadodara and Vadodara Shanti Abhiyan (May 31, 2002) revealed that women from communities were affected by the fear and terror promoted by hooligans, the State and the police. One of the most disturbing features of the Mumbai riots in 1992-93 was the large scale participation of women and young girls in acts of violence. In the domain of public violence, a large number of women have been extremely active and visible in attacks against each others’ castes. The Gujarat Genocide 2002 also saw wide scale participation of women. The insecurity of Hindu women is, in many ways, a product of Hindutva ideology that set them up as being vulnerable to sexual attacks by Muslim men. Generally women did not applaud rape, but during and after the carnage, many Hindu women were openly justifying the rape of Muslim women. Some organizations are organizing training camps in places like Rajasthan, Uttar Pradesh (Lucknow), Ayodhya, etc. and after attending one such camp, women trained in these skills stated that they ‘felt empowered’. Women who engaged in violence were often in violent relationships themselves. They lived in such unbearable tension that when they abused others, it gave them a sense of control and power. Hope lies in the fact that Hindutva is not a general tendency in India. Hindutva women need to be provided a platform to come together and interact with other Hindu and non-Hindu women. The need of the hour is for women to unite and fight this move to divide Indian people along lines of religion and caste.
A Study on special arrangements to combat violence and crime against women in the States of Punjab and Haryana. New Delhi: CSR. ~200 p.

**Key Words**: 1. WOMEN WELFARE  2. VIOLENCE AGAINST WOMEN  3. CRIME AGAINST WOMEN  4. COMBATING VIOLENCE  5. CRIME AGAINST WOMEN CELL  6. WOMEN POLICE STATIONS  7. PUNJAB  8. HARYANA.

**Abstract**: Domestic violence is one of the most poignant forms of betrayal. Dowry still remains a major cause for violence within the private domain. The study assessed the effectiveness of Crime Against Women Cells (CAWC) in addressing domestic violence with the major objectives to examine the nature of assistance and support services to victims; the role of Crime Against Women Cells and other agencies in redressal of domestic violence; assess the effectiveness of CAWCs; and suggest ways and means to strengthen CAWCs for the effective combating and redressal of domestic violence. The study was conducted in Amritsar, Patiala, Moga and Mohali districts of Punjab and Ambala, Karnal, Gurgaon and Jhind districts of Haryana. According to the functionaries of the Cell, 20% cases were solved by Community Resource Policing Centre (CRPC). CRPC in Amritsar was found to be particularly effective in cases where families belonged to low economic background. It was observed by an NGO ‘Shakti’ that cases can be settled in CRPC only if a person has political or high bureaucratic connections. The Cell worked in close relationship with Nari Niketan, a shelter home for women. CRPC are extremely important as they deal with not only incidents of violence, but they save the Courts time in dealing the cases, and are convenient for people. The police along with the community have tried to reform traditional institutions in dealing with domestic violence as in Community Policing Resource Centres in which Women Cell is a part. About 50% respondents were satisfied with the functioning of the Cell, while 26.9% could not say anything. Hindus form an overwhelming majority of about 90% of the state population in Haryana. The responses revealed that despite its positive intentions, the Cell in Gurgaon had limitations. In Jind, of the solved cases, 10% were divorce cases and the rest 10% cases were referred to the Court. In Jind, the victims were not vociferous regarding the functioning of the Cell. Some respondents stated that Cell officials were corrupt and they tried to extract money. The number of cases of this nature which used to come to Courts earlier came down, as 25% cases were solved by the Cell. There existed a sharp difference in the opinion and experiences of victims and the accused. In Karnal, CAW Cell was established in 1995. It was found that 70% cases were fake and the rest 30% cases were registered under the Dowry Act. However in both the states and both the institutions under study, the respondents were appreciative of the fact that these institutions had friendly and cooperative environment, and reassured victims rather than being hostile and cold.
Abstract: The ongoing armed conflict situation prevalent in North-East India has led to violence against women in the form of sexual, mental and physical abuse. Even domestic violence has been on the rise in the region. The study was conducted in the states of Assam and Manipur and data was collected through verbal interviews and questionnaires. Both primary and secondary data were collected. Police records revealed an increase in the cases of domestic violence. Most women felt that it was legitimate for their husbands to beat them, and to reprimand their husbands for the same would be a sin. Many dowry deaths were also reported in predominantly Bengali areas. 19.83% of the parents had taken loans to bear the intense pressure of giving dowry. Women were also forced out of their marital homes for dowry. Women were most vulnerable to armed conflict due to their restricted mobility, limited access to health care, and the lack of opportunities for education, employment, and even leisure. Many women's groups had not been able to fight violence and articulate their rights because they did not know their rights. These women who lived under conflict situations suffered from acute mental health problems. Their psychological trauma was associated with sexual rights violation and with disappearance of their family members. Conflict in north-eastern region has resulted in increase in the number of female headed households. No avenues of employment were made available to these women. These women had to resort to selling liquor and drugs or have entered prostitution to run their households. Sexual violence has been used as a means of spreading terror in the north-east region. If an unmarried girl was raped, there was even more pressure on the family to keep quiet. However, the mental health needs of the rape victims were not even recognized. In some cases the rape victims were so traumatized that they would not leave their home for months. Witch-hunting was also prevalent in Assam. Women who were branded as witches were physically and mentally tortured, and even buried or burnt alive. Factors responsible for witch-hunting were personal enmity, control over resources and superstitious beliefs. Armed conflict also resulted in displacement of families, who were forced to live in refugee camps. Health risks were highest to pregnant women and children in these camps. There is a need to provide women with skills that would generate self-employment. Women's groups need to obtain more information on legal safeguards, rights and support services, and then disseminate this information to the local women. Counselling centres need to be set up to combat the rising mental health problems among these women.


Abstract: The objective of the present study was to locate Violence Against Women (VAW) in various spheres of the society and to devise effective strategies to ensure a peaceful existence for women. Statistics on VAW have been collected from various sources. Recent statistics were collected from 8 newspapers (4 English, 4 Hindi) of Delhi by a research team at Jagori, an NGO working for women. These statistics were broad indicators of the cases reported and were not the actual cases. A rape occurred every 36 minutes. The conviction rate of the offenders was dismally low in proportion to the number of cases that were reported. Mostly, the victims were too scared to report the cases due to loss of honour/reputation, fear of reprisal, depression, etc. At Government hospitals, the victims were treated with great insensitivity. They were not given information about the prolonged and intensive examination that occurred during the Forensic Medical Examination (FME). Most women were subjected to long waits and they withdrew their complaints at this stage only. These women had to undergo repeated tests at the hospital to rule out the possibility of pregnancies or HIV infections. HIV brought additional stigma and trauma for some women. Also, the victims had to tell their stories many times and were made to recall every gruesome detail. In 84% of the cases the offenders were known to the victims. The offenders were either neighbours (32%) or relatives (6.3%). The rapists who were arrested could be released on bail and it took up to 7 years for the sentence to be passed. Meanwhile, the perpetrators intimidated the victims and pressurized them to withdraw their cases. Gang rapists were used to humiliate dalits (scheduled castes), tribal women and minority communities. About 1000 cases of rapes were annually reported by the women of disadvantaged communities (dalits, tribal women) and these were only the official figures. Apart from caste and communal violence, the security forces in Jammu and Kashmir and police were also implicated in some cases. In prostitution, some groups advocated abolition whereas some commercial sex workers (CSWs) were fighting for their rights. Most prostitutes distrusted regulations and licensing as it gave excessive powers to the police. All prostitution was not forced and all CSWs did not wish to quit. Most CSWs were not able to use condoms or advice given by NGO activists, as the clients demanded unprotected sex. Domestic violence (DV) constituted about 32.3% of the total crime against women. There were no distinctions vis-à-vis DV between joint - nuclear, working class - business class, love - arranged marriages, etc. Women asked for help only when violence went on for many years (usually the 8th year), or when violence threatened their or their children's safety, or when confronted with loss of children's custody. Rate of convictions in cases of DV were low due to delayed investigations, lack of sufficient evidence, etc. Moreover there was always pressure on the women to reconcile. Active networking between prosecution, police and
NGOs along with greater protection for victims is called for. Counselling centres are needed to help victims recover from their traumas. Alternative legal structures like 'Nari Adalats' (women's courts) and 'Mahila Panchi' (women village leaders) should be set up to deal with violence against women.


Key Words: 1. WOMEN WELFARE 2. VIOLENCE AGAINST WOMEN 3. CRIME AGAINST WOMEN 4. FAMILY VIOLENCE 5. DOMESTIC VIOLENCE 6. MARITAL RAPE 6. WIFE ABUSE 7. WIFE BATTERING.

Abstract: The present study, conducted in Mysore district of Karnataka, identified different forms of violence against women and their extent; the agencies perpetuating the violence; the impact of violence on the victim; and the action taken by law enforcement authorities to deal with the problem. The study, covering 250 cases of violence against women, found that women of all ages were vulnerable to violence, however, the majority (82%) of them were found to be below 30 years of age. The age at which women were most vulnerable to violence was around 25 years. Around 76.4% victims were married. The study showed that violence in rural areas was higher than in urban areas. Women with low education attainments were more susceptible to violence than those with higher education. Women who were unemployed or those who were employed in unskilled occupation faced more violence than women in skilled employment. About 47% of the victims of violence had no income, 50.4% had a monthly income of Rs 300/- or less, and 2.4% earned between Rs 500/- to 2000 per month. All the victims included in this study faced physical violence in some form or the other. Around 59% of the cases of marital cruelty were because of dowry, followed by 41% cases of husband’s addiction to alcohol. 87% of intra family violence occurred in arranged marriages. Around 87% of rape victims had been victimized by persons who were familiar to them. The most common reaction of victims to violence was to cry. Most rape victims were not sure as to how they had to react because, often the assailants were persons known to them. More studies analysing different aspects of violence against women need to be undertaken. Surveys that assess the actual extent of the problem need to be undertaken. Priority must be given to education of women. Programmes to spread awareness about violence, and knowledge about methods fighting violence need to be undertaken.
Widows


Key Words : 1.WOMEN WELFARE 2.WIDOWS 3.VRINDAVAN 4.REHABILITATION WIDOWS 5.MATHURA 6.UTTAR PRADESH.

Abstract : Widowhood is a curse in India. When there is no respite from the family or society, widows throng to holy places like Varanasi, Haridwar, etc. The present study aimed to identify specific recommendations and rehabilitation plan for widows in Vrindavan. The present study consisted of a sample of over 1000 widows. Data was collected through informal interviews. Widows had been abandoned by their families, and they had no financial, social or emotional support. Many young widows and women had been lured out of their hometowns by unscrupulous people under the pretext of marriage or lucrative jobs, and then sold to people who indulged in flesh trade. Most widows had just one piece of clothing to cover themselves. If any blanket or sari came their way from charity, they promptly sold it off to meet the rent of their rooms. These widows had tiny rooms that stank due to lack of sanitation in surrounding areas. Old and sick widows would just lie around with no one to care for or look after them. Most of the widows were found begging outside temples or river-ghats (steps leading to the river), fighting with each other for small coins or morsels of food. Most widows worked as helping hands in households and ashrams as they were illiterate and did not have any particular skills. The main occupation of most of these women was to sing bhajans (devotional songs) in Bhajanashrams run by rich patrons. However, old and sick widows were turned away from this job as well. Bhajanashrams were found to provide food and clothing to widows. However, these Bhajanashrams had been commercialized. The staff reflected false figures to hoodwink local authorities and patrons, whereas in reality they deprived these women of their rightful share of rice and clothing. Some widows received financial assistance from their relatives, and saved this money to make their funeral arrangements. However, many of them died without withdrawing the money that lay in their accounts. Younger widows suffered from sexual harassment, molestation and physical assault. Flesh trade flourished in Vrindavan and Mathura with full knowledge of Police, administrative authorities, holy men and politicians. In many ashrams, flesh trade flourished under the garb of religious activities. Many widows suffered from T.B., asthma, and various skin diseases due to their unhygienic living conditions. When these widows got pregnant they had to go to quacks as Government hospitals were uncooperative and good medical doctors inaccessible. Thus, these women ended up with many kind of gynaecological disorders as well. Even though some of them knew a few skills like making mats, kanthimalas, embroidery and crochet, etc. no decent jobs were available to them as they were looked down upon. Many widows were not aware of the...
schemes run for their benefit by the Social Welfare Board. Also, many voluntary organizations received grants and donations to help these widows, but relief did not reach them. Government should make arrangements for night shelters (rain basera) for women who have no place to live in. Training-cum-production centres for imparting training in skills like tailoring, embroidery, midwifery, nursing, etc. should be started. Women police officers should be employed to attend to women who wish to lodge complaints. There is need to provide mobile health care units for widows. NGOs should monitor the welfare schemes available for women and widows, and help them in getting their rightful benefits.


Key Words : 1. WOMEN WELFARE 2. WIDOWS 3. PILGRIMAGE CENTRES 4. PROBLEMS OF WIDOWS 5. MATHURA 6. VRINDAVAN 7. VARANASI 8. HARIDWAR 9. UTTAR PRADESH.

Abstract : In India, a pre-dominantly patriarchal society, loss of a husband brings a number of drastic changes in the economic and social status and often in personal self-identity of widows. There are around 260 lakh widows in India. The study was conducted during May to December 1999 in four pilgrimage centres of Uttar Pradesh, namely Vrindavan, Mathura, Varanasi and Haridwar. 1030 widows were interviewed and in-depth discussions were held with 40 widows. In Vrindavan, downtrodden ladies were given Rs. 2.00, 250 gm of rice and 50 gm of dal (lentils) for singing bhajans during mornings and evenings. Two rehabilitation centres were built for aged women. In one old age home, a television was installed in the centre of the courtyard for the entertainment of widows. Bhajan Ashrams existed in many places including Mathura. Widows did not get any pension, but they also did not pay any rent for their accommodation. In Haridwar, throughout the day widows lined up on the many steps of the river. Indra Basti Colony in Haridwar was populated by Bengalis, but in other colonies mostly women from Bihar and Uttar Pradesh lived. Widows from Bihar sustained themselves by begging. There was no organization to cater to their needs. In Malgodam, widows sold items like bangles, bindis, etc. Varanasi was heavily populated with Bengali widows from the upper castes. In Kashi (Varanasi), widows/ old couples could rent a room and stay there till their death. Rama Krishna Hospital provided board and lodging to Bengali widows, who came from Belur Math of Calcutta. The overall scenario in Varanasi, compared to other pilgrimage cities, seemed much better. Three fourths of the widows in the four pilgrimage cities were Bengalis, in Mathura (87%), Vrindavan (82%), Varanasi (65%) and Haridwar (43%). 81% were illiterate and 11% had studied up to primary school. Illiteracy was highest among widows of Haridwar (94%). Marwadi Seva Sangh Ashram had around 300 rooms for yatris (tourists). Few other places for widows were Moksha Bhawan, Rajkiya Vridh Graha, Rama Krishna Seva Ashram, Mother Teresa Hospital, and Leper Home. There was uniformity in the life styles of widows irrespective of the place. 17% lost their husbands at a very young age, i.e. below 25 years, 19% between 25 and 35 years, and 28% lost their

Research Abstracts on Women's Empowerment, 1998 - 2008
husbands when they were 50 years or above. In 88% cases, remarriage of widows was not customary in their castes. 69% widows had children to look after, but still they left them for pilgrimage places. 15% widows had dependent children living with them. 30% widows left their homes as there was nobody to look after them. In Haridwar and Mathura, the major source of awareness was information gathered from other widows. 84% stated that they did not get enough money to save. 44% widows in Mathura, 42% in Varanasi, 18% in Vrindavan and 17% in Haridwar were getting pension regularly. 23% widows reported that their last rites were performed by fellow widows. Some basic education should be imparted to make widows less vulnerable to exploitation by unscrupulous people. They should be made aware of their rights. The Government should provide hostels with basic amenities for widows, and a minimum sum of Rs. 500 p.m. for their sustenance. Widows should be taught certain crafts, and these items should be marketed by NGOs.


Key Words: 1. WOMEN WELFARE  2. WIDOWS  3. AGED WIDOWS  4. TRIBAL WOMEN  5. BHIL WOMEN  6. TRIBAL WIDOWS  7. RAJASTHAN.

Abstract: In India, the population of old people is increasing at a much faster rate as compared to the general population. The objective of the study was to assess the socio-economic and psychological problems and identify the traditional support system available for care of the aged, particularly women. The study was carried out on the Bhils tribals of two tehsils, Dhariwad (high tribal concentration) and Jhadol (low tribal concentration) of Udaipur district, Rajasthan. Data was collected from 300 persons in the working age group, 210 aged males and 233 aged females from 300 sample households through interviews. Around 60% respondents belonged to nuclear families and most of them were small land owners. 58.9% old persons were looked after by their sons, 33.8% by their daughters-in-law, and only 6.7% were looked after by their daughters. Health care emerged as the area where services were most frequently received by old people, whereas sympathy, empathy and respect was the most neglected area. Most of the old persons (52.6%) considered themselves partially able to perform physical work, and most of them were involved more in household activities. Barring a few cases (3.3%), all old persons received financial as well as material help from their families. Regarding the social contribution of old people, 40% caregivers felt that match-making was the most important social activity, whereas 60% reported helping neighbours in difficulty was an important activity. While assessing the impact of widowhood, increased dependency was ranked as the first problem. Caregivers mentioned that ageing widows were fault finding (79.8%), domineering (79.78%), had behaviour problems, and others problems like obsession (52.8%). It was noted that respect towards elders was positively associated with education, and income level was positively
associated with most dimensions of age care. Panchayati raj institutions and NGOs should focus on developing viable and suitable programmes of economic security, income generation, and skills development programmes, which help old persons in reducing their dependence and loneliness, and increase their feelings of usefulness. Also, opportunities should be provided to both rural and tribal populations to preserve their traditional skills, and the health policy for older persons should include provision of proper medical staff and facilities.


Key Words: 1. WOMEN WELFARE 2. WIDOWS 3. VRINDAVAN 4. VARANASI 5. UTTAR PRADESH.

Abstract: Widowhood is a great calamity in a patriarchal and traditional society like India. The present study aimed to assess the extent of economic, social, psychological and cultural deprivation faced by widows. Incidental sampling was used to obtain a total sample of 324 widows from Vrindavan (240 widows) and Varanasi (84 widows). An interview schedule was designed to obtain information from respondents. Varanasi had more widows living on the streets than in rehabilitation centres or boarding homes, than Vrindavan. Most widows had been abandoned by their relatives and children. In Varanasi, even widows with children were left to fend for themselves, contradicting the belief that family takes care of widows. Most of the widows were married at the age of 15 years to men who were much older than them, knowing fully well that in the eventuality of the husband’s death she would live in the status accorded to widows. 81% of the widows in rehabilitation homes of Vrindavan were widowed before the age of 19 years but were not given the option of remarriage by society. They were uneducated thus could not support themselves financially. 42% of the widows, despite being literate, were found begging on the streets. A large number of women were also engaged in exploitative professions to support themselves. Widows were considered inauspicious, thus were discouraged from attending social functions. They were encouraged to attend religious functions and most of them gave religion as the reason for their migration to Vrindavan and Varanasi. Most widows wore simple clothes because of economic deprivation and not because they had no worldly desires left subsequent to widowhood. They also cut their hair so that they could obtain support from ashrams (monasteries), which advocated age-old patriarchal norms. Widows should be provided with adequate pension benefits, access to fair price shops and vocational training. Efforts should be made to provide sound education to women to empower them. Child marriages need to be prevented. NGOs should advocate the practice of widow remarriage.

**Key Words**: 1. WOMEN WELFARE 2. WIDOWS 3. HINDU WIDOWS 4. PROBLEMS OF WIDOWS 5. BENGALI WIDOWS 6. HISTORICAL PERSPECTIVE WIDOWS 7. CUSTOMS WIDOW 8. WEST BENGAL.

**Abstract**: Widows are viewed as objects of pity, sad, unfortunate women, destined to suffer for the rest of their lives. Objectives of the present study were to understand the perception of their status as a widow, and identify the cultural and social sanctions imposed on widows. A sample of 22 respondents were selected from Birbhum district of West Bengal, and data was collected through interview schedule. It was found that about 22.72% of the respondents took only one meal consisting mainly of rice, a day after they became widows, while 77.27% respondents took 2 meals a day. None of respondents took part in any rituals of marriage as they were considered to be inauspicious or ashubh. About 59% widows were found in white sarees, 27.27% in light coloured sarees, and 13.6% in coloured sarees, which were part of the rigid restrictive dress code prescribed by society. Majority of the respondents went to Government hospitals during illness as they faced shortage of funds. In 59% cases, the medicines respondents took during illness were financed by their children. 77.27% respondents suffered from chronic illnesses. About 27.3% respondents did not share this problem with anyone. Only 13.6% respondents reported that the property left by their husbands was adequate for their sustenance, and the remaining 86.3% reported that the property left was inadequate even for their basic sustenance. Sanctions on food were imposed on widows of upper castes only. Widows need to be informed about their legal rights. Also, Government should undertake supplementary nutrition programmes for widows to help maintain their health and nutritional status, and self employment schemes need to be started for financial empowerment of widows.


**Key Words**: 1. WOMEN WELFARE 2. WIDOWS 3. WAR WIDOWS 4. ECONOMIC DEPRIVATION 5. EMOTIONAL DEPRIVATION 6. KARGIL WAR 7. PROBLEMS OF WIDOWS.

**Abstract**: The transition from being a married woman to a state of widowhood is often tumultuous and painful. 5 northern states of India, namely Delhi, Haryana, Punjab, Rajasthan and Western Uttar Pradesh were selected for the study. A total of 40 respondents (8 respondents from each state) were covered from the 1971 war and the Kargil War (1999). Interview schedule and observation technique were used for the study. Majority of the war widows were illiterate. Only 7% of the entire sample were graduates. The number of widows in the age-group of 15-20 years was highest in Delhi. The age of marriage was closely related to the literacy level and thus the independence of a woman. Most of the widows who were married before 18 years of age were either illiterate or had studied up to primary level. These widows were largely dependent on their in-laws and were often not respected.
Only 29% of the respondents had remarried. Most of them had married their brothers-in-law and the decision was taken by their parents-in-law. There was discrepancy in the compensation received by a 1971 war widow and a Kargil war widow. The benefits offered to widows were allotment of petrol pumps/gas agency or agricultural land. In addition, counselling on running petrol pumps or gas agency, concessions for telephone facilities, air and rail travel, and free medical facilities in army hospitals were provided. In many cases, benefits provided to widows were utilized by in-laws on the pretext of being their well wishers. Many widows also declined the offer for employment, as they did not want to work outside their houses. The other reasons for refusing employment were widow’s illiteracy, pressure from in-laws, responsibility of young children, etc. Education of women and prevention of child marriages would lead to empowerment of women. It should be ensured that the benefits reserved for war widows are utilized exclusively by them or their children, to prevent in-laws from misusing these schemes.

National Commission for Women, New Delhi.

**Key Words**: 1. WOMEN WELFARE 2. WIDOW 3. WAR WIDOWS 4. SAINIK WELFARE BOARDS 5. WOMEN IN DIFFICULT CIRCUMSTANCES.

**Abstract**: The present study aimed to understand the status and resettlement needs of war widows. A total of 596 families of martyrs and 500 war widows were covered through survey method for the study. 6 States, namely, Uttar Pradesh with Uttranchal, Punjab, Bihar, West-Bengal, Rajasthan and Karnataka were selected and all 27 wars or conflicts fought between 1947 to 2000 were a criterion for selection of the sample. Nearly 33% of the war widows were solely dependent on the family pension. The average monthly income of each war widow from the family pension was Rs.4514. There was also disparity in the pension amounts received by widows based on the time period of death of the soldiers and the orders prevailing then. Also, the family pension was not adequate to make both ends meet. A lot of physical efforts needed to be put in to actually draw the amount of pension, especially by the war widows staying in far away hilly areas who travelled for 2 days to reach the places where pension was paid. Many of the war widows were uneducated and could not conduct any transactions required to obtain the pensions. Some widows were also ignorant about the financial assistance they should receive, thus head of the families such as father-in-law, etc. conducted all the transactions. 85% of the widows who remarried, were forced to marry their younger brothers-in-law as a compromise. It was difficult for them to mentally accept this change of roles from 'sister' to wives. Widows were ill-treated by their in-laws and the root cause for this was the money that they received from the Government. Only 64% war widows actually received the benefits of schemes, such as allotment of petrol pumps that were supposed to help them earn their living. It is imperative to update the details of families of martyrs and the schemes meant for their benefit by the Sainik Welfare Boards. This would ensure that these families received the benefits meant for
them. Families should be provided with guidance as to how to invest the money they received, for maximum gains. The performance of Sainik Welfare Boards needs to be evaluated regularly to make them more responsive to the needs of the target population.


**Abstract**: Widowhood brings about several kinds of social, economic, cultural, emotional and psychological deprivation. In Tamil Nadu, both in urban and rural areas, widows have to undergo all the customs of yester years, which are very unpleasant. The objectives of the present study were to find out the socio-economic background of widows before and after widowhood, and to study the problems of widows that hinder their personality development. Snowball sampling was used to select 600 widows in different age groups from both, rural and urban areas of districts of Tamil Nadu. Interview schedule was used to collect data. A significant finding was that the number of widows among scheduled castes was considerably lower than forward castes. Rigid beliefs were not present among scheduled castes, thus the tendency to remain a widow was more among upper class than scheduled castes. 14.8% of the widows were in the age group of 26-35 years, which was considered marriageable. 75% of the girls got married at a very early age in villages of Tamil Nadu. When informed that it was punishable if the girls were married before the age of 18 years parents of the girls strongly opposed the law. Most widows were not happy with their present stage of life, but did not want to openly say that they would like to marry again. Illiterate widows did not take any steps to enhance their qualification. However, those who had higher secondary education before the death of their husbands attained graduate or post graduate degree. Irrespective of the economic background, most widows had taken up jobs after becoming widows. Working women were happy that they were able to make both ends meet in an efficient manner, unlike their husbands, who gave very little money for household expenses. However, most widows were afraid to face life alone and many did not have an independent dwelling place or were not confident of the support of their kin. Counselling was an alien concept and only 3.5% widows went for counselling. In Tamil Nadu, counselling centres were only available in cities and were not functioning properly. After the husband's death, working women were negatively differentiated against due to the fact that they were earning and were more independent. 27% widows were ill-treated in their own houses, either by negligence or indifference of the family. Widows were isolated from auspicious functions and ceremonies. 6.5% said that they were looked at with suspicion for want of money, companionship or sex. 18.5% widows were aware of concessions available for them as widows, and these included even rural and illiterate women. However, very few knew that they were entitled to their husband's savings, and official processes were also a hurdle to overcome.
27% widows found it difficult to collect assets due to difficulties experienced in various formalities such as getting death certificate, etc. Working women faced more problems than non-working women, and rural non-working women had more problems than urban non-working women. However, 81.5% respondents had become more empowered after their husband’s demise. There should be strict implementation of laws regarding appropriate age of marriage. Efforts should be made to generate self-employment among widows. Counselling centres for women should be opened. Media should spread awareness, and help in removing prejudices against widows.


**Key Words**: 1. WOMEN WELFARE 2. WIDOWS 3. STATUS OF WIDOW 4. PROBLEMS OF WIDOWS 5. WORKING WIDOWS.

**Abstract**: Widowhood is a stressful situation which brings about socio-economic, cultural, emotional and psychological deprivation. The objectives of the present study were to study the problems of widows that hinder their personality development, and to understand the status of women in their respective families. A total of 600 widows were selected from the state of Tamil Nadu through snowball sampling technique. An interview schedule was drafted to obtain information from the respondents. Widows reported that none of their families wanted to keep them due to overdependence. About 70.5% of them were not ready to take up life without their husbands and reported feelings of fear and helplessness immediately after their husband’s death. Working women and older women were more courageous than their younger counterparts when faced with widowhood. Most of the widows who reported feelings of fear did not have an independent dwelling place. Widows in both rural and urban areas reported that they were treated as unwanted elements by members of their family. They were also isolated from auspicious functions and ceremonies. 83.5% widows reported that they had removed their marriage symbols, such as kumkum (vermilion) after the death of their husband. Majority of them followed these customs because society insisted on it and not out of their own free will. Most widows were not aware of the schemes run for their benefit by the Government and NGOs. Government and NGOs should organize a few courses for widows to generate self-employment. Counselling centres for widows should be set up to help them work through their feelings of fear and helplessness, and to empower them. NGOs should work at the grass roots level in society to root out prejudices against widows, and change the mindsets of people towards them.


**Key Words**: 1. WOMEN WELFARE 2. WIDOWS 3. RURAL AREAS 4. WIDOWS RURAL AREAS.
Abstract: An overwhelming majority of women in rural areas are engaged in the unorganized sector. Among women, the incidence of widowhood is much higher compared to that of men (widowers). In this study, special attention was focussed on the issue of social security available to widows from Government Schemes, familial and other informal sources. The primary aim of this study was to examine the socio-psychological, economic and social network aspects. Education is an important factor determining the status of women in society. The study was conducted in rural areas of Andhra Pradesh. About 56.4% respondents were illiterates and 16% could read and write. Present study indicates that almost all women had left their parental home, and even after they lost their husbands, a majority still lived in their husband’s home. About 26.2% households were headed by widows themselves. Majority of respondents (82.7%) got married at the age of 20-39 years. 52.9% widows were of the opinion that widows should not remarry and in this category, majority (53.7%) were from the upper castes. About 32% were sending their children to school before their husband’s demise, and only 22.7% reported that their children’s education was not disturbed. Nearly 32.9% were engaged as wage labourers in agricultural work, and 20.4% in waged non-agricultural work; 10.2% were self employed and only 4% were working as domestic help. Out of the total sample, 66.6% had an income below Rs. 3,000 per year and 6.2% were earning more than Rs. 3000 per year. About 27.2% were not having any income. Only 38.9% widows said that they got their deceased husband’s share of assets. About 70.7% settled the issue of sharing assets with the help of Caste Council or elders of the village, and 25.9% approached the Courts to get their entitlement. Around 92.9% widows encountered economic problems: 24% were getting help in the form of kind; 2.7% received cash, and 15.1% received both, kind and cash. Only 18.2% widows were getting regular help. Though a majority of the widows were aware of development programmes, only 34.7% applied for aid under the different programmes. 30.2% widows were having a ration card in their name. About 92% widows were aware of Widow Pension Scheme and 65.7% had applied for it. In some cases, money lenders started harassing the widows to either repay the loan immediately or to handover the land they possessed. As a social security measure, the State must take necessary steps to protect the ‘living standards’ of widows. A separate legal cell should be established with certain constitutional privileges to look into the specific issues related to widows. To start their own business, financial and technical assistance must be routed to widows through rural banks. All widows should be educated so that they can think critically and fight for their rights. Involvement of women in Panchayati Raj system will help in improving their socio-economic status. While implementing welfare measures and social security packages for widows, it is better to adopt a decentralized system by identifying the local conditions.
Witches

Barman, Mita. (2002).

Key Words: 1. WOMEN WELFARE 2. WITCHES; 3. WIDOWS 4. EXPLOITATION OF WOMEN 5. PERSECUTION OF WOMEN 6. WEST BENGAL.

Abstract: Bengal had the highest proportion of widows according to the Census of India. In West Bengal, 59% females in the age group 70-79 years and 72% females in the 80+ age group were widows according to Registrar General and Census Commissioner of India (1998). The present study covered women who were widows and were without protection, and women who were prosecuted as witches in regions of West Bengal. The objectives of the study were to assess the conditions of Bengali Hindu widows; to examine the beliefs associated with witches and witchcraft among the Santhal tribal community in West Bengal, and to study the use of gender as a regulatory mechanism in society. It was estimated that the population of Bengali widows was about 3000 in Vrindavan after a number of widows were sent there due to the natural calamity of floods in Bengal in 2000. It was found that the Dayabhaga laws of inheritance prevalent in Bengal gave limited rights to a widow in her husband's property. Rich and elite widows stayed at home, while the poor widows were sent to pilgrimage towns. In the early 20th Century in Bengal, it was observed that women from zamindar (land owning) families controlled the assets from andar mahal (inner palace) in the absence of a male heir or if the heir was minor. Female labour work force participation in West Bengal was found to be one of the lowest in the country. In India, after the Bhils and Gonds, Santhals were the third largest tribal group. The practice of witch hunting was considered essential among them, especially to identify the root cause of ill health or misfortune, and the victims were generally women and mainly widows. Widows were alone without the support of a husband, family and sometimes even children. In Santhal society, widows had land rights so the exclusion or elimination of single women, mainly widows, resulted in direct material gain and inheritance of property. During 1991-2000, witchcraft related violence was found to be highest in Jalpaiguri and 33% victims were males. Many acts of violence caused by factors like rivalry or drunkenness were passed off as witch killing. After Jalpaiguri (70 cases), the other districts where witch killing was reported were Malda (29 cases), Purulia (21 cases), Dinajpur South (10 cases), Dinajpur North (9 cases), Hooghly (7 cases), Darjeeling (7 cases), and the lowest numbers were in Burdwan (3 cases) and Midnapur (3 cases). It was found that lack of employment and other related problems were the complementary features responsible for continuance of the witch killing practice. Therefore it is recommended that education programmes should be started to reduce the level of ignorance and eradicate unscientific superstitions and myths. It was also suggested that avenues for income generation should be started in tribal areas so that people have alternative means of earning and livelihood.
Mathur, Kanchan et al. (2006).

Key Words: 1. WOMEN WELFARE  2. WITCHES  3. CUSTOMS  4. CUSTOMARY PRACTICES  5. BELIEFS  6. DAKAN  7. DAYAN  8. VIOLENCE AGAINST WOMEN  9. STATUS OF WOMEN  10. RAJASTHAN

Abstract: In Rajasthan, violence against women constitutes a legitimized and routinised aspect of prevailing cultural definitions of gender. It is also used as a tool to ensure that women remain within socially defined boundaries of behaviour and space. The present study was done to understand the phenomena of naming/labeling women as witches (dakan/dayan), and also analyzed the cause, nature and forms of violence meted out to women. The study was conducted in 6 districts of Rajasthan namely Tonk, Bhilwara, Ajmer, and Kota (plains region), Jodhpur (desert region) and Udaipur (tribal region). Data was collected through field visits, interviews and from secondary sources. The study covered 63 women aged 25 years to 70 years of whom 8 women were no longer alive, 7 had been victims of violence (murder), and only one had a natural death. A large majority of women (55.6%) were dependent on agriculture and animal husbandry and this dependence declined to 41.3% after they were labelled as dayans by the community people. This was because either people grabbed their land or they were not being allowed to cultivate their fields on account of being labeled as dayans. The second largest category (28.6%) were women engaged in traditional occupations such as sweeping and petty trade; making pots and lamps for festivals; performing certain rituals on death, birth and marriage functions; selling flowers, fruits and vegetables; selling bangles; conducting prayers and other religious ceremonies at the village temples, etc. The percentage of these women engaged in traditional occupations had declined from 28.6% to 4.8% as a result of labelling. The study found that widows or separated women alone were more likely to be labelled as dayans and a large majority (44.4%) of the women were married. More than 50% of the women stated that they had been suffering physical and mental violence for 20 years or more. Superstition was a prime reason for accusing women as dayan/dakan. Besides superstition, other reasons behind branding/naming women were land/property disputes, infertility and childlessness, deformities and challenges (low intelligence levels), fear of ignominy or disgrace, personal and caste rivalry, and often the assertive nature of women. Women once labelled were subjected to various forms of mental and physical violence including immolation, hair being
cut off, heads shaved, branded with iron rods, raped, and made to eat animal excreta, hurting genitals, murdered or even forced to commit suicide. As a consequence of this, labelled women lost their reputation in their families and community. Apart from creating feelings of helplessness, fear and powerlessness, labelling and consequent violence impacts their lives in several ways. These women often experienced severe depression and low self-esteem. The state machinery such as police, judiciary, PRIs, NGOs, media and caste panchayat had been largely ineffective in preventing this practice, the prime reason being the absence of an Anti-Witchcraft Act in the state. Women did not have easy accessibility to these institutions as these were patriarchal in nature and approaching them required a lot of courage on the part of women. Most women were illiterate also. Interventions have to be planned, both in terms of countering the violence meted out to women survivors and also towards preventing it from happening in the future. One main step that needs to be taken is changing the mindsets of people to remove myths, beliefs and superstitions.
Women in Media


Key Words: 1. WOMEN WELFARE 2. PORTRAYAL OF WOMEN IN MEDIA 3. WOMEN AND MEDIA 4. MEDIA AND WOMEN 5. COMMUNICATION 6. PRINT MEDIA 7. MEDIA LAWS 8. DISADVANTAGED WOMEN 9. LEGISLATION ON MEDIA 10. PRASAR BHARTI ACT.

Abstract: The study, conducted jointly by Samatvam and Joint Women's Programme for the National Commission for Women, was an overview of the portrayal of women in media. The study aimed to make media managers aware of their responsibilities towards women, sensitize active media persons about gender issues, and planned to involve men in the cause. Media projected two extreme characters of women, one being traditional (submissive) and the other modern and liberal (aggressive). The second image was driven by market forces and was an offshoot of the consumerist society. Media gave very little coverage to women who stepped out of their traditional roles and resisted atrocities against them. But reports of violence against them were covered widely. Glossy supplements of newspapers prefer to use women as commodities to increase their circulation. Television channels, particularly entertainment channels, showed women as subdued characters. Media's depiction of violence against women had an impact on society, especially on children. Television, in particular, did foster the spread of the liberation movement through progressive talk shows, discussions, debate and detailed news reports based on women. In television serials, there was a clear departure from the earlier serials, which dealt with social issues and assertive women. Films seldom showed strong female characters. Many of the old stereotype roles like housewife or mother had been modified and replaced by new stereotypes which emerged due to the changed social economic political scenario in India, due to globalization in the 1990s and parallel developments in the media. Legal framework was important for the reportage of women's issues in media. Media played an important role in strengthening the women's empowerment movement. Government was forced to enact anti-sati law. Media's role has changed from being a 'social institution' into a 'trader' or 'businessman' which treats 'citizens' as 'customers'. Advertising departments of newspapers, magazines and news channels acquired more clout than their editorial sections. Some newspapers and television channels carried stories in a balanced way without giving communal colour to incidents. Findings indicate that the number of women journalists is increasing. Except the mainstream media companies, most women working in newspapers and magazines were working in low paying positions. Most women in journalism are sub-editors,
who have limited responsibility, and women reporters are often given 'soft' or development beats, not political or important beats. An advocacy campaign needs to be started, besides training programmes, for the orientation of media managers and professionals to make them aware of their social responsibilities, and convince them to portray women and gender related issues in a right manner. Students of journalism should be sensitized about social issues, including gender. Advertising agencies should be convinced to portray women in the changing scenario, and not in stereotype roles. The Community radio concept should be introduced in remote areas to sensitize people, and women in particular, about their rights and new developments. Media profession should be made more appealing to women, and women should be introduced at all levels. A legal framework should be provided for a gender-sensitive media.


Key Words: 1. WOMEN WELFARE  2. ELECTRONIC MEDIA  3. TELEVISION AND WOMEN  4. PORTRAYAL OF WOMEN IN MEDIA  5. CULTURAL INVASION  6. GIRL CHILD  7. INDIAN WOMEN  8. GLOBALIZATION.

Abstract: Globalization involves economic internationalization leading to inter-linkages of independent national economics, and the electronic media also has acquired worldwide access. The objective of the study was to enable Ministry of Women and Child Development and particularly National Commission for Women to evolve strategies to counter the cultural invasion through television and to discourage the mindless westernization of Indian women and girls, men and boys. The study covered 1600 respondents, 1021 females and 579 males, residing in the city of Chandigarh and two satellite towns, Mohali and Panchkula. Data was collected through interview schedules. The study pointed out the role of television in spreading consumerist culture, and we have to recognize the significant challenge from video and cable operators. Bombay had the highest cable market share of the Indian market (22.6%), followed by Madras (7%) and Delhi (6%). In the age group 10-20 years 18.24%, and in 21-40 years age group 17.30% respondents showed more interest in watching advertisements featuring women; 41.11% respondents preferred women models; and 37.15% preferred girls for advertising various products. On the choice of women as models, difference between the opinion of male and female respondents was 18.85% and 22.26% respectively, which was not glaring. 48.68% respondents had developed an incessant craving for buying the latest products due to their regular exposure to commercial slots; 62.23% respondents had desire for more possessions, and exhibitionism was the compelling motive for 24.90% respondents to buy more products. 37.28% respondents in the age group 10-20 years appreciated the importance of friendly and harmonious relationships from watching serials on broken families. About 39.83% females described the role of T.V. as positive, 19.62% viewers picked negative messages, 5.62% females felt that T.V. characters provided...
models to defiant teenagers. Regarding impact of T.V. viewing on conjugal relations, 65.23% females felt that negative T.V. images of conjugal relations were likely to sharpen tension and clashes. 43.75% respondents blamed T.V. viewing for increase in divorce cases. 57.30% young respondents tended to regard promiscuous sex lives of glamorous pop singers and film stars as their role models. 31.48% regarded the influence of extra marital affairs on the small screen as unhealthy, and 88.80% blamed T.V. for the rising number of divorced couples. Nearly 24.93% respondents attributed increase in juvenile delinquency to exposure to T.V. images of violence. 17.66% mentioned that the world of horror and crime created a sense of insecurity among children. Popular television should be brought into the school curriculum, both to acknowledge children's out of school activities, and to explore their environment in the learning process. The underlying objective is to help children read and interpret the visual text of advertisements and cartoons, and to train them as discriminating viewers of programmes for children. Integration of new technologies with indigenous models of knowledge is extremely relevant. Guidelines for media owners, makers of advertisements having images of women and children, and producers of TV programmes should be formulated after intensive discussions.

Sophia Centre for Women's Studies and Development, Mumbai. (2005).
Misrepresentation of women in advertising: a study: women and environment.
Mumbai: SCWSD. 49 p.

Key Words: 1.COMMUNICATION 2.PORTRAYAL OF WOMEN.

Abstract: The roles and portrayal of women in media over the years have not transcended gender stereotypes. Mulvey stated that the woman displayed in a film or an advertisement, functioned on two levels, as an erotic object for the characters, and as an erotic object for the spectator. People are often unaware of the powerful effects that cultural stereotypes have on them. 80 people were interviewed, 20 men and 20 women each from Upper Middle Class (UMC) and Lower Income Group (LIG) respectively. One of the most valuable assets of advertising was the Indian woman. Women have always been represented through the eyes of men. Photographers and advertisers started pushing boundaries and utilized more nudity on their images. Women were displayed in provocative poses in order to appeal to consumers. The custom of 'Pati Vrata,' is still followed through the Whirlpool mom as a supermom. The Sony ad for audio system signified that if a man bought this piece of equipment, chances were that he might have the woman as well. A man's presence was a promise of power, whereas a woman's presence implied self-conscious display. Apart from being used as sex objects, a woman being used in relation to negative products such as alcohol and drugs has become accepted by our culture. What do they sell at the end of the day? Is it women, sex or sexuality? Women are placed in such provocative and alluring positions, that society is forced to see them as objects of sexual desire. Sexuality was the focal point in Axe deodorant commercial. Stereotypes ranged from believing that if a woman is fairer, she is more intelligent, beautiful and able to snag a good looking husband. 85% men from the upper
middle class were not subjected to any kind of discrimination on the basis of their looks. 55% men did believe that a woman with fair skin was more privileged. 55% women felt that fair women were not more beautiful but definitely more privileged than darker women. 75% men from LIG believed that social stereotypes have to be imitated by the media for consumers to identify with the product. 100% women from LIG argued that fairness craze was because people perceived them in a different light. Logically, an advertisement should showcase the product describing its features and price, but other publicity gimmicks are used. Society as a whole needs to overcome the normalizing power of cultural images, and the continuing social realities of dominance and subordination.
Working Women

Socio-economic impact of role conflict of working women in urban western Maharashtra (with summary). Kolhapur : Chhatrapati Shahu Central Institute of Business Education and Research. ~240 p.

Key Words : 1. WOMEN WELFARE 2. WORKING WOMEN 3. ROLE CONFLICT 4. WORKING MOTHER 5. CHANGING FAMILY 6. PROBLEMS OF WORKING WOMEN 7. FAMILY RELATIONSHIP 8. HOUSE WORK 9. MAHARASHTRA.

Abstract : India is progressing and so are the women of India. With more and more women working today, role conflict has emerged as the new age working women's problem. The study aimed to find out the socio-economic impact of role conflict of working women. 300 women working in government, semi-government and private institutions were selected from district headquarters of Western Maharashtra namely Ahmednagar, Kolhapur, Pune, Sangli, Satara and Solapur. 85% of the sampled working women (SWW) had higher qualifications in general and technical education. More than half of the SWW were in age group of 20-35 years. The survey revealed that the number of married working women was 6 times higher than that of unmarried women. 65% respondents had taken up jobs to fulfill family needs, 23% took jobs to prove their talent, and 8% joined service for personal freedom. Among 300 respondents 10% were bread earners and home makers, and 90% SWW were secondary bread earners. 5% of the total respondents felt role conflict (RC). Respondents above 45 years of age managed the two different roles successfully. Role conflict (RC) was more common among women in younger age groups and 76% SWW suffered from RC. There were different reasons for role conflicts among women. 23% worked for more than 9 hours a day and 100% of them suffered from RC. RC was also high in 80% SWW who had night duties. 59% SWW faced difficulty in getting leave, which increased RC tremendously in 37% respondents, and 41% suffered from partial RC. About 29% SWW were reaching home late, which increased RC in them. 61% SWW had both male and female co-workers. 72.26% had a good relationship with their male colleagues, but 21% experienced inappropriate behaviour from their male counterparts. 76% respondents felt no discrimination between male and female workers. 49% of respondents were doing all the domestic work, 31% were only preparing meals, and only 14% were taking full help of servants. 45% respondents expressed that their job was affecting the health of their children, hence 40% were in full RC and 41% had RC to some extent. 47% SWW felt that they were unable to give proper attention to their children's education. Other trivial issues that came forward as RC situations were special occasions and dual roles. 81% found it difficult to be present on special occasions. Due to dual roles (job and home) 52% SWW found a change in their temperament. More than 50% SWW felt that they had higher status among relatives. Also 72% believed that the extra income helped them in becoming economically well off. It was suggested that
special leave should be given to young working women, girl child education should be encouraged, salary in the private sector should be supervised by government bodies, the joint family system should be encouraged, flexible working hours and campus housing facilities should be given specially for those working in night shifts, and separate and better transportation system should be provided for women. Improving security of women in offices, providing good community child care centres and nurseries, awareness about legal rights, provision of good quality food for school lunch, health care facilities at school for children, and employment after break are the other measures suggested to reduce stress among working women.


**Key Words**: 1. WOMEN WELFARE   2. WORKING WOMEN   3. WORK ROLES   4. ECONOMIC AUTONOMY 5. ROLE CONFLICT 6. ECONOMIC INDEPENDENCE 7. WOMEN CLERKS 8. DELHI.

**Abstract**: The presence of women in paid employment outside the home is not a new phenomenon. Dual earner households have become a salient feature of contemporary life. The present study adopted a different approach and examined the two roles in terms of their independence as well as joint contributions to the Quality of Life of working women. It focused on women's lives at home and in the office, and attempted to understand the possible linkages, compatibilities and conflicts between these two spheres. For a working individual, Quality of Life cannot be separated from the quality of work. A preliminary survey of women clerks in Delhi City, showed that they faced many problems in their daily lives including transportation, long working hours, worry about children, etc. A stratified random sample of 100 married women clerks working in Central Government departments in Delhi was chosen for the study. Women clerks in the sample belonged to Haryana, Punjab and Uttar Pradesh. Interview methods were used for collecting data. Data showed that 64% respondents had to part with their entire salary for the family. In most cases, women were given a specific amount of money to manage kitchen expenses and all other household income rested with their husbands. The study did not support the view that working women control the income earned by them and in turn it enhanced their participation in financial decision making of the household. About 50% respondents served food to other family members and they ate last. A nutritional analysis of the women sampled showed that protein and calorie intakes of respondents were not very significantly different from the Recommended Dietary Allowances (RDA). About 90% respondents availed institutionalised medical care for minor ailments and the remaining took recourse to self-medication at home. At office, respondents were seated in small, overcrowded and ill-maintained rooms with very little space to move around. Holding a job had a positive effect on other aspects like age at marriage, as getting a permanent Central Government job enabled them to get married easily. Recreational and social life of respondents showed that social aspects of their well
being were taken care of more in the office than at home. They found office tasks monotonous and boring. Respondents had adopted the 'easy going' and 'relaxed' work culture which is characteristic of Government offices all over the country. Respondents' routines showed the existence of a considerable amount of drudgery in their lives. Most of them reported that running between office and home, traveling by irregular and crowded city transport, and endless household chores caused them physical and mental fatigue. The husband's participation in household tasks was seen to be very marginal. The fact that women, like men, held full time office jobs, in no way helped to change the traditional pattern of sharing the intra-household tasks among males and females. The study showed insignificant impact on the social and economic position of these women within the family. Women's needs arising from their dual domestic and occupational roles require serious attention of the household and society.


**Key Words**: 1.WOMEN WELFARE 2.WORKING WOMEN 3.INFORMATION TECHNOLOGY 4.PROBLEMS OF WORKING WOMEN 5.WOMEN IN INFORMATION TECHNOLOGY 6.ROLE CONFLICT 7.WORKING MOTHERS.

**Abstract**: The status of women has changed considerably. Women have made significant strides in all fields, although their number remains insignificant. The present study was carried out to understand the role and contribution of women in the Information Technology (IT) field. 229 women and 104 men across 20 companies were selected for the study. A group of respondents assembled in a discussion room for about 45 to 60 minutes and were asked to fill up the questionnaire. An analysis showed that the percentage of women employees to the total employee strength was on an average 15%. The age profile of women respondents ranged from 21 to 53 years, with a median age of 27 years, and 87.4% women were below 35 years. 70% women were below 30 years compared to 43% men. Out of 229 women respondents, 52% were at junior level and 47.6% were at the middle level. 86% of the women professionals had less than 10 years of work experience, and 55% of the women had up to five years experience. 41.04% of the women were engineers, an equal percentage of them were graduates, and four women were Ph.Ds. In comparison, 62.5% men were engineers and one was Ph.D. Reason for getting attracted to the IT industry were challenging profession (78% women); compensation and benefits (46.7%); work climate (45.4%); and freedom of action (38.9%). The IT industry also gives immense satisfaction, a sense of achievement, tremendous opportunity for creative freedom, and independence for women (38.9%). When asked about their aspiration for ten years, some of them were not sure of themselves (17%). 33 women positioned themselves at the business head level, 38 of them at senior levels of management, 34 of them aspired to become entrepreneurs, and 35 women planned to retire, stay at home, and look after their children. An overwhelming majority of women (98.7%) listed family, health and maternity aspects as the most
important reasons why women did not advance in careers at the same rate as men. 90.4% women and 81% men agreed that women work beyond office hours. 91% male respondents were of the opinion that women got opportunities to travel for on-site assignments, but only 37.5% of the women respondents replied positively to this question. 62.5% women mentioned that they did not travel. Long hours of work topped the list of constraints in the organization for effective job performance. IT policy must take gender into account to provide an enabling environment for women, and gender policy must take into account the opportunities that IT can bring to women. Flexible working hours, especially during child bearing and rearing years may be allowed to meet the family needs, whenever it is possible to do so, without compromising the organisation's goals. A compressed work week allows full time employees to work longer days for the week or pay period. With the upsurge of IT, working from home is an accepted practice in many countries, although in India, it is in practice in a few organizations only. Creches should be provided for small children.


Key Words: 1. WOMEN WELFARE 2. WOMEN WORKERS 3. WOMEN IN INDUSTRY 4. WOMEN IN GARMENT INDUSTRY 5. LABOUR MARKET 6. WOMEN LABOUR.

Abstract: This study aims to understand women's relative position within a firm in the garment manufacturing industry, in the context of expanding market opportunities in India. Study covers Hyderabad and surrounding areas. It analysed eight firms during the period of 1999 to 2001 on the basis of number of workers (1390), percentage of women workers (524); percentage of exports in total sales (350); level of technology modernization, and its performance. The study found that the employment percentage of women declined in firms A and C, but firms D and B showed a constant female percentage share at two points of time. The decline in firm A was as high as 80%, but the total number of women working in the three firms A, B and C had not declined. The study revealed that the percentage decline in women's employment was much sharper in the case of technologically advanced firms than in the technologically backward ones. In firms considered as practicing continuous process production, or those which employed three shift for production, the total earnings and monthly wage rates for male and female workers did not differ. For all other firms (A, C, D, E, F, G) except firms B and H, irrespective of market orientation and technological status, male worker's monthly earnings were more than those of female workers. The study revealed two important facts. Firstly, women workers were concentrated in low categories as helpers and Grade C tailors, as well as designers and supervisors, except in firm E, where they were in higher positions. Secondly, higher posts went mainly to male workers. The percentage of male helpers varied between 30 and 50 in all the firms. In 2002-03, study marked a significant improvement in the percentage share of women in the upper categories of tailoring, while only the lowest category showed a 15%
decline. The same is true for the category of helpers, where the percentage of women has
gone down to 72% in 2002-03 from 86% at inception. The managements of firms felt that
it was extremely difficult to find adequately educated young women with experience and
because of this specific reason, they decided to give training to the most efficient women
workers, so that they could replace at least some of the male supervisors with female ones.
The study suggests that discrimination against women is not taking place within the labour
market; it is mainly due to the lack of education in general, and technical education in
particular, that makes women less endowed and bars their entry into the industrial labour
market.

Migrant women and wage employment : exploring issues of work and identity among
health care professionals. NOIDA : V.V. Giri National Labour Institute. 50 p.

Key Words : 1.WOMEN WELFARE  2.NURSES HEALTH CARE PROFESSIONAL  3.WORKING
WOMEN  4.HEALTH PROFESSIONALS.

Abstract : Women's movements world over have been concerned with questions of women's
participation or non-participation in paid work and employment. The present study looks at
the lives, work and struggles of women from Kerala working in Delhi as health care
professionals, more specifically as nurses. A large proportion of nurses in Delhi are migrant
Malayalee women. The migration of nurses from Kerala and a preponderance of Malayalees
among nurses in most parts of the country are a phenomena that raise interesting issues on
the relationship between gender, work and migration. The first set of issues relate to
demand and supply factors. This study was carried out in two major public hospitals, AIIMS
and Safdarjung in South Delhi, one major private hospital (Mool Chand), and one small
hospital, Red Cross. 70 nurses and 10 private nurses were selected for the study. 25 nurses
were in the age group of 20-25 years, 35 nurses were between 25-40 years and 10 nurses
were between 40-60 years. Many Malayalee women have joined the nursing profession and
constitute trained health manpower, which has resul ted in continuous employment
opportunities for nurses from Kerala in different parts of Delhi and the world. The demand
for nursing personnel is on the rise, commensurate with the growth in health care
institutions. However, even though trained nurses number around 700,000 or so in the late
nineties, hospitals function with nurse - patient ratios of 1:70, or even more, which is
considered grossly insufficient by international standards, which prescribe the nurse -
patient ratio to be 1:5. Further, state governments and private hospitals are faced with
perpetual shortages and are unable to fill vacant positions for nurses. The severe shortage
of nursing personnel in advanced countries is due to a variety of reasons. One, the culture
of nursing has becoming less appealing to the local population; and secondly, increasing
demands on nurses, partially as a result of the shortage of nurses, has led to early career
burnout. Thirdly, the nursing staff shortage is accompanied by high and rising costs of
health care in all advanced countries, making the recruitment of local nurses an expensive

Research Abstracts on Women's Empowerment, 1998 - 2008
affair. A major trend observed in India was that nurses apply for positions in advanced countries from a very early stage in their careers. Out of 25 nurses interviewed, 8 had been educated in Kerala, 4 in other states of India, and the remaining 13 in Delhi. Nurses usually stayed together in groups in available rented accommodation. When they lived with relatives, including families of siblings, they moved out with their friends after they got used to the city. Women who had been in the city for more than five years were the primary breadwinners of their family. The nurses who migrated from Kerala reported low salaries, low nurse - patient ratios, and more difficult working conditions as the reasons for moving away from Kerala. Those who got government jobs in Delhi, found conditions of employment highly satisfactory in terms of remuneration. All the respondents felt their situation was good compared to the private sector, but were on the look out to migrate to western countries. The nurses interviewed distinguished themselves from non-Malayalee nurses on one hand, and from non-nurses on the other. Nurses had fairly strong perceptions of their identity, both as women and as migrants. Even in the case of long term migration, the migrants' sense of identification with the city was minimal. The study found that migrant communities tend to reinforce and reconstitute family and gender relations through a relatively greater emphasis on ethnic identities. Their identity as Malayalees appeared to dominate their identity as women, and the need to emphasise the former tended to circumscribe the possibilities of introspection regarding the latter.


**Key Words**: 1.WOMEN WELFARE  2.WORKING WOMEN  3.GENDER DIVISION OF LABOUR  4.GENDER DISCRIMINATION  5.GENDER ROLES  6.ROLE OF WOMEN  7.KERALA

**Abstract**: The present paper attempted to raise the issue of sex segregation of jobs and its perpetuation over time to the disadvantage of women workers, in the context of the nineties, the period of globalization in India. Attention was also drawn to the female work participation rates in Kerala. Data showed that horizontal segregation indicated by the index of dissimilarity had declined during the period 1987-88 and 1993-94 in urban areas, but had increased slightly in rural areas. Findings showed that only 3-4% of women workers were in regular/salaried employment in rural areas, whereas women of urban areas in regular employment were about 29% in 1993-94. In terms of establishments, the gender disparity was negligible in urban areas but much higher in rural areas. With an overall context of low work participation rates, higher levels of literacy in Kerala had certainly enabled women to procure a higher share of regular employment due to its much higher share in rural areas compared to all-India levels. The larger proportion of women in Kerala continued as agricultural labourers, plantation workers in rural areas and as production workers in urban areas. According to Time Utilisation Survey (TUS), the combined estimates for states showed that for rural Indian women the work participation rates were
almost double at 50% compared to 25% as found by the NSSO, and even more than double for a state like Haryana, as it increased from about 18% to 38%. It was found that women in Kerala enjoyed higher wage rate (casual) in both rural and urban areas than in other parts of the country, and hence their annual earnings may be still higher. Kerala had highest female literacy rates among all states of India, yet it scored poorly in non-conventional indicators, attempting to capture power and subordination. A strong ground must be made in which ‘appropriate’ work for women, their own job preferences and opportunities are shaped.

George, Alex. (2004).
Globalization and loss of employment of women: a case study of Nellore.
Secunderabad: Centre for Health and Social Sector Studies. 34 p.

Key Words: 1. WOMEN WELFARE 2. EMPLOYMENT WOMEN 3. GLOBALIZATION 4. WOMEN LABOUR 5. AGRICULTURE AND WOMEN.

Abstract: A shift from the cultivation of rice and cereals to commercial crops and aquaculture aimed at the global market, and to some extent the internal market, is taking place in various parts of Andhra Pradesh. Nellore district presents a typical case, where all these different but related shifts can be studied. The objective was to study the impact of commercial cultivation for the global market on women. This survey was conducted in six mandals of Nellore district, where the shift in cultivation from paddy to aquaculture, horticulture and floriculture was being experienced. The study covered 100 women labourers in each of the 12 villages in six mandals. Thus 1200 women labourers aged 15-60 years were taken and data was collected through interviews. In Nellore district, women on an average got only 3.29 days of work in a week and 10.85 days of work in a month. 53% women worked as rice labourers and 13% women worked in aqua farms during the reference week of the study. The number of days women were employed in aqua farms in the reference week was only 3.58 and just 9.65 during the reference month. The daily wage for women in rice cultivation was Rs.30.27, in aqua culture Rs.28.92 and Rs.26.49 in horticulture. The mean daily wage in floriculture was extremely low at just Rs.18.43 per day. The sample also consisted of SCs (45%), BCs (29%) and STs (24%). 89% (1067) women informed that they got an average of 22 days of employment in rice cultivation in a month in the corresponding crop season prior to the shift cultivation. 13% (157) women got employment in aquafarms, with an average of 3.58 days per week and the wage earned by an aqua labourer was Rs.28.92, which was less than the wages earned in rice cultivation. 15% (178) women got employment in horticulture during the reference week, the mean number of working days were 3.36 per week with an average wage of Rs.26.49 per day. Horticulture included lemon, chilli, groundnut, mango, sapota and vegetables which are crops of commercial nature. These crops gave a few days employment to the women labourers. Only 6% (74) women got work in horticulture, the mean number of work days available was 5.04 per week and the mean wage reported was Rs.18.43 per day, far less than the wage in
other crops. 9% (109) labourers were engaged in other agricultural work, with 2.87 days of work per week and wages of Rs. 28.44. Other agricultural work included work in cotton, tobacco, sugar cane and sunflower farms. These crops gave employment to women labourers on irregular basis of 3-4 months per year. Shift in cultivation from paddy to aquaculture, horticulture and floriculture, and the introduction of harvesting machines in some villages has virtually replaced human hands from harvesting. New crops not only reduced employment but had in no way helped in pushing up wages, and women were the main sufferers. State and district level workshops of officials from departments of rural development, women and child development, labour, agriculture and environment, and activists, farmers, labour union leaders, labourers, human rights activists, members of women's groups, literary writers and media persons should be conducted as part of the advocacy efforts in this direction.


Key Words: 1. WOMEN WELFARE 2. WOMEN SCIENTISTS 3. SCIENTISTS 4. GENDER DISCRIMINATION 5. PATRIARCHY.

Abstract: In the present study an attempt was made to explore the perceptions of society about women in science; to examine the social matrix of women scientists before and after marriage; and to assess the significance of patrifocal concerns in the lives of women scientists. Samples were selected from IIT Delhi, IIT Kharagpur, Jadavpur University and University of Roorkee. Data was collected by using a combination of methods: a questionnaire, an interview schedule, case study and observation. The sample size of the study was 82 women scientists. About 73% respondents agreed that women cannot be successful in science or mathematics. About 74% women reported that women can do less science and engineering. A woman has less analytical ability than a man according to 71% respondents. About 61% women respondents agreed with the statement that "inability to solve a problem is ascribed to the quality of being a woman." A comparison between educational achievement of brothers and sisters of respondents indicated that more brothers than sisters were engineers, but sisters outnumber brothers in obtaining P.G. degrees, diplomas, etc. In most cases, the difference in age between husband and wife was found to be 3-6 years. About 92% of the women felt that they had a dual burden of employment and household work. The participation of women scientist in seminars and conferences was hampered by family constraints. Majority of respondents (66%) received some sort of help from their husband in household chores. Compared to colonial times, higher education for women has become much more acceptable, yet women in science particularly in engineering, is a rarity. Respondents represented a highly mobile group with respect to educational achievements. They were much more qualified than their parents.
siblings and husbands. The spouses of one third of the respondents helped them in all activities, enabling research productivity among married women to be higher than among single women. The career of women scientists received a setback at certain ages due to family constraints. A dual burden and a high value attached to the traditional gender role pattern leaves only one option for women academic scientist in dealing with their multiple roles, i.e. placing their career second in order of priorities.

Women academic scientists: a study of social and work environment of women academic scientists at institutes of higher learning in science and technology in India. Kanpur: Indian Institute of Technology Kanpur, Dept of Humanities and Social Sciences. 224 p.

Key Words: 1.WOMEN WELFARE 2.WOMEN SCIENTISTS 3.SCIENTISTS 4.WORK ENVIRONMENT 5.SCIENCE AND TECHNOLOGY 6.GENDER DISCRIMINATION 7.DRIMINATION AGAINST WOMEN.

Abstract: The present study was conducted to study the background of women academic scientists in selected institutes of higher learning and research; to explore the formal environment of work and its impact on women academic scientists; study the importance of and participation in informal activities, contacts and networking by women in academic study; the presence of gender related stress on women academic scientists; and the impact of multiple roles, on their career. Triangulation method was used to collecting quantitative and qualitative data. Four institutes, namely IIT Delhi, IIT Kharagpur, Jadavpur University and University of Roorkee were selected. The respondents belonged to science and engineering disciplines; and were mainly upper caste, middle class Hindus. The academic science career of 39% respondents began after marriage. In some cases, respondents had to settle for pure sciences or mathematics, and were discouraged from pursuing engineering disciplines, since engineering was not found 'suitable' for women. The pressure of a joint family and the burden of managing both home and career fell disproportionately on women. Women were discouraged by academic institutions from pursuing certain branches of engineering, such as mining and mechanical engineering. Visibility and contacts with those in important positions mattered a great deal. Women scientists suffered from lack of contacts and visibility due to lack of informal interactions. Gender related issues were raised in interview committees for appointments and promotions, directly or indirectly. Women were almost absent at the higher levels of administration in the institutes. Women faculty constituted only about 7% of the total faculty in science and engineering. Within institutes, the clerical staff, though courteous, were usually less willing to take orders from women than from men. Female students often chose women faculty as their advisors. Respondents agreed that marriage and motherhood was a woman's 'dharma', and women academic scientists considered success futile if career and family could not be balanced. An increase in the number of women faculty could help in improving the work environment.
Moreover, quota systems in appointment and promotion may not be the best solution for attaining critical mass, since it may perpetuate differences and strengthen prejudices. Unless conscious efforts are made to raise the ratio of women in science and engineering, their proportion will continue to be low. Women faculty members could form groups to solve their mutual problems. There is a need to realize that women's experiences are dissimilar to men's experiences, even in institutes of higher learning and in professional sciences.


Key Words: 1. WOMEN WELFARE 2. WOMEN SCIENTISTS 3. SCIENTISTS 4. WORKING WOMEN.

Abstract: The objectives of this study were to analyse the experiences of women faculty members in institutes of science and technology, to understand the nature of the dual burden faced by women, and to study their coping strategies. Four institutes, namely the Indian Institute of Technology (IIT), Delhi; the Indian Institute of Technology (IIT), Kharagpur; Jadavpur University (JU); and the University of Roorkee (UOR) were covered. Data was collected using triangulation method, i.e. a combination of questionnaires, interviews, case studies and unobtrusive methods. Three major problems faced by women academic scientists were general male dominance in the work environment, feeling of isolation and experience of conflict between being a woman and a scientist. Patrifocal ideology prevails at the workplace and in the family. Women academics in the four institutes constituted only 7% of the total faculty. Mechanical Engineering branch did not have any women faculty members. Women’s capabilities are doubted in the initial stage of their career. There were no women Deans in any institute, and the idea of a woman Director was almost unthinkable. Women faculty members were quite isolated in their work environment due to lack of informal interaction and networks. Women were expected to reconcile their gender role with their professional role. There was a dual burden on women due to family and work. Pregnancy and motherhood led to a break in their career. Findings indicated that single women, or divorced or widowed women did not necessarily perform better professionally. Though a majority of women had the support of their spouses, yet they had to shoulder a large share of domestic responsibilities. The strategies adopted by women academic scientists to cope with gender-related stress at work and dual burden included compromise with career, postponing research, and finding satisfaction through a re-definition of 'success'. This resulted in women being exhausted physically, emotionally and mentally. There is a need for women scientists to realize that their individual problems are in fact a product of the social and work environment. A concerted effort is required to analyse the experience of women scientists so that collective efforts can be made to solve their problems.
Abstract: Study reviewed the national policy framework, and analysed and reviewed the existing trends, policies, provisions, and practices among female teachers of rural areas in different parts of India. Detailed analysis of status and trends were made for Uttar Pradesh and Karnataka. Data was collected through focus group discussions and interviews. It was found that there was an increase in the number of women teachers in the country. 24.5% of the total number of women teachers was found in rural areas compared to 60.25% in urban areas. Kerala had the highest number of women teachers with the least rural-urban difference, followed by Punjab and Haryana. Bihar, Rajasthan, West Bengal, Orissa, Madhya Pradesh, and Uttar Pradesh had less than 30% women teachers. Some states had developed a policy in terms of qualifications required, and reservation for appointment of women teachers, but no policy existed in many states. More than 30% women teachers in urban areas were better qualified compared to rural areas (13%), and 87.4% rural women teachers were trained compared to urban teachers (80%). But nature and content of training rarely emphasized on the real problems and challenges faced in rural areas. Though professional development opportunities had increased, hardly any effort was made to solve the practical problems of women teachers. Insufficient transport facilities, long distances, and a sense of insecurity resulted in shortage of women teachers in rural areas. Poor facilities in schools like separate toilets for girls and drinking water facilities were also major areas of concern. Many teachers faced problems from their supervisors and administrators with regard to attendance, increment, and pension matters. Women's representation was also found to be low in Cluster Resource Centres (CRCs), and Block Resource Centres (BRCs) as more than 95% coordinators were male. Hiring locally educated women in place of urban women with some relaxation in eligibility criteria proved to be successful, but they lacked commitment and competence. Study recommended that recruitment or appointment of teachers should be decentralized to the block level, so that availability of female teachers can be ensured for the block, from the same block. The process of selection, placement, and transfer of teachers should be made more objective and transparent so that accountability can be demanded. Relaxation in qualifications for women candidates should depend on the specific situation in the state. Training should focus on the challenging nature of the job, and attitudinal aspects. Women candidates should be trained in self-defense techniques and cycling, apart from regular course content for an empowering impact. Special long duration training should be given to rural girls to prepare them to become teachers. Facilities of separate toilets and drinking water should be considered essential for women teachers, and arrangements should be made at schools and training centres. Adequate promotional opportunities should be built in the system for
women teachers. Management and academic processes should be made more women friendly and gender sensitive, by ensuring participation and involvement of women teachers in training programmes and institutions. Better linkage between women teachers of primary and pre-primary schools should be facilitated for mutual sharing and learning. A separate forum should be formed to address issues and problems specific to women teachers, which would help them to function better.


Abstract: Women constitute 48% of the Indian population. The mandate for equal rights for men and women is embedded in India’s Constitution. Inequalities between girls and boys in access to schooling or adequate health care are more acute among the poor than those with higher incomes. A Women’s Component Plan and a separate sector on ‘Gender balance’ has been included in the Draft Approach Paper to the 11th Five Year Plan for the first time. This report deals with the different areas of work in which women are engaged. In the agriculture sector, 40% of women are engaged. The Ministry of Agriculture is now moving to a ‘women only’ approach from a gender mainstreaming approach spread across the entire establishment. There are 370 million unorganized workers in India, of whom substantial numbers are women. This sector contributes 65% of GDP. Women are also engaged in unpaid economic and non-economic work. Non recognition of this fact is a major obstacle to their empowerment, and their access to newly emerging development opportunities. Many programmes are already being run by various departments/ministries for poverty alleviation like Swarnajayanti Gram Swarojgar Yojana, Sampoorna Grameen Rozgar Yojana, National Food for Work Programme, Indira Awas Yojana, National Rural Employment Guarantee Act/Scheme, etc. Violence against women is another important issue which affects the empowerment of women. To effectively deal with the problem of violence against women efforts are being made to strength the existing legislation through review and amendments and developing institutional mechanisms. Despite these numerous efforts, crimes against women in the country continue to rise. As per the latest data, there were 1.51 lakh cases of violence against women in 2005. In 2004, 19.7% rape cases were tried in courts, and out of the total 71,620 cases for trial, conviction was made only in 25.2% cases. Women’s increased political participation has fielded positive results. Women have shown that they have critical information about community resources, are adept at managing funds, their
participation in Panchayati Raj Institutions (PRIs) has resulted in more inclusive governance, and they learn quickly how to lead effective community centred development. It was recommended that Public investment in agriculture should be 10% of GDP, with a stipulation that 50% of the new investment be made in rural activities directly benefiting women. Women friendly technologies should be designed. Comprehensive legislation for the unorganized sector is needed, with provisions relating to Employees State Insurance (ESI), leaves, pension, housing and child care, and a Complaints Committee should look into sexual harassment, regulation of employment, wages and conditions of work, work records, dispute resolution bodies at district level, and an Appellate Body is required at the State level. A policy of equal opportunity should be formulated to encourage women’s increased participation within a time bound frame. The approach of the schemes should be expanded to include an empowerment and right based agenda. Health policies and plans should promote strategies that empower adolescent girls through information about health, community activism roles and increase awareness about how to negotiate power with families, future partners and at the workplace.


Key Words : 1.WOMEN WELFARE 2.HOUSEHOLD WORK 3.STATISTICS 4.MARGINAL WORKERS 5.HOUSEWIVES 6.NSSO REPORT 7.NSS 61ST ROUND.

Abstract : The present study deals with participation of women in domestic chores and other specified domestic activities that provide economic benefits to their households. When the participation is very nominal or is a borderline activity, it is not always reflected in the usual indicators of employment. This report is the fourth in the series and is based on the employment and unemployment survey of the 61st Round of the NSS. The survey covered the whole of India except (i) Leh and Kargil districts of Jammu and Kashmir (ii) interior villages of Nagaland situated beyond 5 kilometers of the bus route, and (iii) villages of Andaman and Nicobar islands which remained inaccessible throughout the year. Of the total 12,788 First Stage Units (FSUs) selected, only 12,601 FSUs (7999 villages and 4,602 urban blocks) could be surveyed. 35% rural and 46% urban women were engaged in domestic duties as per their usual principal status. Over the years (1993-94, 1999, and 2004-05), a consistent declining trend was observed in the participation of women in household duties in all age groups in rural areas. In urban areas, however, a somewhat rising domestic participation trend was noted during 1999-2000 to 2004-05 for the age groups 45-49 years and 60 years and above. Among the different age groups, the participation of women in domestic activities was highest in the age group 15-29 years in rural areas during the years 1993-94, 1999-00 and 2004-05. In urban areas, women’s engagement in domestic duties was
highest in the age group 30-44 years during 1993-94 and 1999, and in the age group 45-49 years in 2004-05. The various other activities performed by women were agricultural production, maintenance of kitchen garden, and looking after poultry and milch animals, etc. and collection of agricultural products for household consumption. Most women in rural and urban areas (93%) spent most of their days on domestic duties during the last 365 days. There was no other member to carry out domestic duties in the case of 54% women in rural areas and 58% in urban areas. The study found that 54% rural and 10% urban women pursued one or more economic activity along with domestic duties. About 48% rural and 35% urban women were willing to accept work on household premises, either if they received initial finance/working finance facility, or loans on easy terms, and training to take up their desired activity.


Key Words: 1. WOMEN WELFARE 2. CALL CENTRE 3. BPO COMPANY 4. WORKING WOMEN 5. OUT SOURCING 6. CALL CENTRE WORKER.

Abstract: This study provided a perspective of outsourcing services from the point of view of the South, and from the women involved. It evaluated and assessed the benefits and threats that offshore outsourcing of Information Technology Enabled Services (ITES) jobs brought to women in the south: the informalization of employment that these new jobs implied; the possibilities of extending the benefits of these jobs to under-privileged women of the south; and the roles that policy makers can play. A number of these new jobs were exported to low wage countries as the average annual wage of an employee in a call centre in the U.K was £ 12,500, while that of an Indian was £ 1,200 (BBC, 2003). Prospects for women workers looked good in this sector. After recruitment, employees were provided with training for a period of 80 days on language, accent and the culture of different countries, and about their work product. There were adequate breaks, and parents were reassured that though their daughters might be working unconventional hours, including night shifts, but they were doing a perfectly safe, decent and socially accepted job. A serious problem in the export-oriented segment of the business was that employees had to pretend to be European or American. According to McKinsey, IT enabled services can generate substantial revenue and employment for India over the next four years. Cheaper labour cost was only one reason for choosing India as a place to relocate services. 160,000 men and women were on the payroll of Indian call centres; and approximately 45% of them were women. Despite stress, women employees appreciated the benefits of this job. Call centre jobs might disappear as technology keeps changing and it might be supported by fast data communication linkages. Skills and expertise acquired through call centre jobs could also be used to promote self-employment. Benefits that globalization has brought is likely to bring issues of education and life chances among poor or under privileged women and men of India.
In India, it is the lack of literacy, particularly in English which acts as the real obstacle and prevents children from slums being connected to the networked world. Institute of Social Studies Trust (ISST) opened an institute for slum children and computers were supplied by the Habitat Learning Centre. But children in slums were not able to fully utilize the facility due to poor literacy and lack of knowledge of English. Policy makers need to raise the general level of literacy and take gender disparity into account while formulating measures which deal with the benefits and costs of ITES jobs.


Key Words: 1. WOMEN WELFARE 2. WORKING WOMEN 3. NIGHT SHIFT 4. CALL CENTRE 5. BUSINESS PROCESS OUTSOURCING 6. DOCTORS 8. NURSES 9. NIGHT WORK WOMEN 10. NIGHT WORK

Abstract: Women are the backbone of any economy and shape the future of the country. Night shifts have been in existence for a long time; and employment of women by top employers increases their productivity, quality and international competitiveness. The present study was carried out to study the role of women in the present economic and business environment in India. The sample consisted of 272 participants, including 216 women doing night shift work at least for the past 6 months, 56 employers and supervisors, and various key persons of leading organizations like universities, police authorities, law enforcing agencies, hospitals, industrialists, etc. The age of participants ranged from 20 to 50 years; and they were randomly chosen from different BPOs, hospitals, textiles, garments and leather units from 9 different cities. Findings revealed that 28.9% women employees felt insecure in night shift work, the rest 71.1% did not feel insecure. Bangalore and Ludhiana were found to be highly insecure zones, where 44% and 45% women felt insecure. 83% of the population was satisfied with duration of night shift work. 13% of the respondents faced difficulties during commuting, while 87% were satisfied with the arrangements made by their employers. Commuting problems were faced more by women of Kolkata (18%), Mumbai (17%) and Pune (17%). Only 8.6% respondents were satisfied and got child care facilities within company premises. In metropolitan cities, percentage of nuclear families working in night shifts is higher (24%) than in other cities like Ludhiana (13%), Pune (14%), Hyderabad (14%) and Chennai (14%), and in Delhi and Mumbai the percentage of nuclear families was found to be higher. 13.3% of women employees faced many problems resulting in mental tension, if they had to work night shifts. This response came in mainly from workers in textile and leather industry units. Mental harassment was more in Ludhiana (27%), Kolkata (19%), Pune (17%) and Delhi (14%), whereas it was less in Mumbai (9%).
Hyderabad (8%) Chennai (7%) and Bangalore (6%). Majority of the employees (96.2%) were satisfied with the number of women employees working in one shift at a time. About 13.5% night shift working women faced social problems. There was no in-house training on self-defence, security, safety and health related issues in Ludhiana and Pune. In Chennai, Kolkata, Hyderabad and Bangalore only 2% respondents, and in Mumbai only 5% respondents received in-house training. Insecurity was more in leather (45%) and textiles units (34%), in hospitals (14%) and least in BPOs (only 8%). The level of satisfaction was 84% in BPOs, 78% in leather units and 75% in textile industry units. Less commuting problems were faced by BPOs (4%) and hospital employees (6%). Insecurity was high in small scale firms (45%), but lower in medium scale firms (26.4%) and large scale firms (13%). 96% employees in large scale firms, 84.7% employees in medium scale firms and 76.3% employees of small scale firms reported the duration of night shifts to be appropriate. Insecurity was observed to be high among low skilled women (34%), 8% among highly skilled women, and 29% among moderately skilled women. 93.1% highly skilled women were satisfied with their employers as compared to their low skilled counterparts (78%). Low skilled women also tend to feel maximum mental harassment (18.9%), and it was least among highly skilled workers (4.5%). 95.7% of the employers perceived the environment to be safe for female employees unlike 28.9% of the employees who felt insecure while working in night shifts. There was a consensus among employers (85.4%) and employees (83%) that the length of night shifts was satisfactory. 93.6% of the employers felt that commuting facilities being provided to their women employees at night were satisfactory, but only 87% of the employees agreed. 23.4% of the employers felt that the child care facilities provided, in-house training and pay packages provided were adequate. The study recommended that night shift work for women should be facilitated. The Factories Act should be amended to allow women workers in night shifts. This is a progressive step and women should be safe during night shifts. If the rules and conditions regarding women working in night shifts are strictly enforced, this could be a success story and bring economic prosperity to the nation.


Key Words: 1. WOMEN WELFARE 2. WORKING WOMEN 3. CALL CENTRES 4. BUSINESS PROCESS OUTSOURCING 5. NIGHT WORK 6. NIGHT SHIFT 7. NIGHT WORK WOMEN.

Abstract: The growth of employment in call centres has been phenomenal in the recent past and a large number of women are employed in call centres. The protection and safety issues of women employees require immediate attention. The present study was carried out to assess what measures could provide a safe and secure working environment to women working in call centres. India has the second highest growth rate of call centres at 86%, next only to Philippines where the growth is a staggering 100% according to 2003 statistics. According to NASSOM the number of people employed in call centres is expected to touch...
The industry employs around 40,000 women in Haryana alone. It was found that Mumbai based business process outsourcing (BPO) Company Trace Mail employs 2,000 people at its Navi Mumbai Office. Roughly 45% of them are women who work 8.5 hour shifts, attending calls from clients across the world. About 45 to 50% women are in non-technical jobs and about 25-30% women handle technical functions. At INFOWAVZ International, another BPO company, 33% of its 800 employees are women. The number of female employees had shown a 10% increase from 25% to the current 35%. The women employees in 24x7, a customer care company based in Bangalore, has also increased from 25% to 40% in the last two years. ICCI located at Mumbai’s Bandra - Kurla complex, employs 2,400 people, of whom over 60% are women in the age group 22 to 27 years. The average strength of female staff in India’s $1.4 billion (Rs. 6,650 crore) call centre industry ranges between 30 and 60%. Software analysis of women employees in the information technology industry reveals that more women employees are visible at call centres in north and western India, while the trend is yet to catch on in the South, except for Bangalore. The number of women employed at the agent level and the middle management level was high. While women seem to predominate customer support services, few women are to be found at the department head level. Sleeping disorders were observed among 83% women and voice loss was reported by 8.5% women. Other health problems found were ear problems (8.5%), digestive disorders (14.9%) and eye-sight problems (10.6%). Call centre employees were under constant stress because of their workload, competitive pressure and surveillance. Workers are monitored for the number of calls, the average call time and the time between calls. Night shift work has also been cited as one of the major reasons for women leaving their jobs along with high stress levels and long working hours. Public transport service facilities during night hours are minimal, and normally call centre employees are provided company contract transport that allows them to travel to and from their work place. Safety of the transportation provided by employers is an emerging concern. National legislations that exist today do address the issue of women working in night shifts and to an extent protection is also provided. However, keeping in view the peculiar nature of call centre work, which is invariably at night, these protective provisions may not be useful. Working conditions, environment and policies across call centres vary to a large degree. There is no uniform legislation or guideline that enables their monitoring and supervision. The study recommended that no women should be denied employment in BPOs/call centres on the ground that the employment entails working night shifts. Contrary clauses in various existing legislations should be suitably amended. Women workers should not be dismissed for reasons connected with pregnancy or child birth. Employers should ensure that adequate facilities are provided from the place of work to the nearest point of their residence. Call centres should also ensure that a security guard escorts women in official transport.


**Key Words**: 1. WOMEN WELFARE 2. WORKING WOMEN 3. NON-WORKING WOMEN 4. SELF-EFFICACY 5. EMPOWERMENT WOMEN 6. SELF ESTEEM.

**Abstract**: The purpose of the present investigation was to examine the perceived self-efficacy of working and non-working women in the context of involvement with work and family environment. It examined the association between self-efficacy and well-being. The study divided the women into four groups, working and non-working, and involved and less involved. The study covered a total of 240 women, 120 working and 120 non-working, from urban areas of Orissa. The non-working women were categorized into involved and less involved sub-groups on the basis of the median split of their scores on family involvement. However, working women were categorized into similar sub-groups on the basis of combined scores of their family and work involvements. The present study indicated that involved women showed much higher level of self-efficacy than less involved women. It was revealed that there is a strong association between self-efficacy and well-being. Self-efficacious women believed that they could take actions to solve problems instrumentally. They felt more committed to their decision. Efficient women set higher goals and commitment to these goals becomes firmer. A strong sense of personal efficacy was related to better health, higher achievement, control and more social integration. The study offers some implications in the form of possible intervention. Since non-working women lagged behind working women with respect to self-efficacy, some productive source of self-efficacy, other than work, can be generated for non-working women. Non-working women could be counselled to undertake productive leisure activities, meaningful social services and other such activity can be identified, so that their self-efficacy and feeling of mental well-being can improve.


**Key Words**: 1. WOMEN WELFARE 2. WORKING WOMEN 3. EMPOWERMENT OF WOMEN 4. NON WORKING WOMEN.

**Abstract**: The study was carried out in Hyderabad and Secunderabad to find out the determinants for the empowerment of working and non-working women. A sample of 75 working and 75 non-working women, from large middle class colonies were taken. Interview schedules and empowerment scale was used to collect the data. Results showed that the stronger determinants of power of working women were education, spousal occupation,
spousal income, natal family support and favourable intrinsic personality traits of spouse. It was also found that the factors for empowerment of non-working women were house type (own or rented), spousal income, natal family support, in-laws family support, etc. For both groups - working and non-working women, the variables were age, education, form of house, size of family, spousal education and his income, etc. So it can be concluded that the result of this study reflected on patriarchal ideologies of women in present day society.


Key Words: 1. WOMEN WELFARE 2. POLICE WOMEN 3. WORKING WOMEN 4. CONSTRAINTS WORKING WOMEN 5. MALE DOMINATED PROFESSION.

Abstract: Sex discrimination still persists in the police force and status of women is not very high. The study tried to fill this information gap and scale the status, role and role conflict of police women in Delhi. In 1972, Ms Kiran Bedi joined the IPS and after her, 103 women had been recruited till 1997. In 1991, Delhi's population had gone up to 9,420,644 with density of 6,352 per sq km. Anti Eve-Teasing Squad established in 1978, generally caught 14-15 eve-teasers in nearly 3 hours. In 1992, out of total 1381 women police, 0.15% were DCP, 0.22% were ACSP, 2.17% were Inspector, 6.01% were Sub-Inspector, 11.88% were technical staff, and only 0.94% were stenographers. Out of a total strength of 40,066 executive staff in Delhi Police (DP), only 2.42% were women while 97.58% were men, which indicated gender discrimination. Stratified random sampling procedure was used to select 138 police women, who constituted 10% of the universe. 46.38% were in the age group 30-34 years and 5.08% were in the age group 35-39 years. More than 56.53% of the police women were married, 36.96% were unmarried, and 3.62% were widows. 33% women had husbands in policing professions, 20.99% had their own business, and 18.52% husbands were in police profession. 11.11% were educated upto secondary and higher secondary, 44.45% were graduates, and 33.33% were post graduates. 86.23% police women were Hindus, 5.80% each were Sikhs and Christians, and Muslims and Jains were 1.45% and 0.72% respectively. 74.79% Hindus belonged to upper castes and the rest were from other castes. Monthly income of 6.52% police women in Delhi was upto Rs 2,500, 24.65% police women earned between Rs 5001-7500, and 15.94% police women earned between Rs 7501-10,000. 57.3% of the police women joined DP out of choice and attraction, 42.7% were compelled to join. 79.41% of the Head Constables (HCs) faced no problems, but 14.71% faced problems during training under male police instructors. 66.67% inspectors felt that the general public's attitude was indifferent and 33.33% felt that it was not so good. As their work kept them busy, 34.78% police women did not take decisions regarding food requirements at home, 52.18% took clothing requirement decisions jointly. Savings and investments were an area of joint decisions made by 48.55% women, while 14.49% took independent decisions. 38.41%
women found policing a very satisfactory career, 36.23% found policing not so satisfactory, 14.49% found it extremely satisfactory, and 10.87% found it unsatisfactory. Only 32.60% had plans to continue in policing until their retirement. Police women lost feminine traits due to their profession such as shyness, politeness, sensitivity, tenderness, etc. and developed boyish temperament (8%). Being a part of the police force, they became bolder. More studies on women in professions are the need of the hour. Since DP is a very big force divided in 9 ranks, it would be worthwhile to study units and districts separately to have a detailed and clear picture. Women in Delhi Police need a better working environment and basic amenities, and regular workshops and meetings to hear their problems would help a lot.


**Key Words**: 1. WOMEN WELFARE  2. WORKING WOMEN  3. EMPLOYMENT WOMEN  4. ORGANIZED SECTOR  5. WORKING MOTHER.

**Abstract**: The present study examined the trends of female employment in the organized sector of Kerala and assessed the working conditions in this sector. Primary data was collected from 495 women (292 from rural areas and 203 from urban areas) employees in the organized (Public and Private) sector through a questionnaire. Secondary data was collected from publications of the Department of Economics and Statistics, State and District Planning Boards, Department of Census and Reports of National Sample Survey Records. Female employment was highest in schools and in the Health Departments, and their lowest participation was in the Police Departments. In the health profession, female nurses superceded males, but there were very few female doctors. Female participation was high in clerical and last grade jobs in the banking sector. No female was employed in a high cadre job in the Police Department. Socio-economic conditions of women in the public sector were better than those in the private sector. 42% public sector employees earned between Rs. 5000-7000 per month, whereas 39.3% private sector employees earned below Rs. 1000 per month. A majority of women in the private sector spent their income mainly on food followed by clothing, medicines, etc. Most of the college lecturers spent their income on purchase of gold and clothing. 75% of the public sector employees had the habit of saving, whereas 50% of the private sector respondents did not save owing to low level of income and number of family dependents. Due to increase in cost of living and inflation, both public (66.8%) and private sector (69.6%) respondents preferred nuclear families. However, there was greater need for women to work in the nuclear family set-up, in order to meet the family expenses. Employment also gave women more decision-making powers and an improved status at home. However, public sector women had more decision-making powers than private sector women. 73.2% private sector employees were from OBC and SC/ST category, and a significant chi-square value proved the association between caste and occupational
status. Most of the organized sector employees were from rural background, but more urban respondents were found in high category posts (managers, lecturers, etc.) owing to better educational backgrounds. Most respondents were married, and as marriage entailed greater financial burden respondents had to work. Parental education influenced the education as well as occupational career of their children. The fathers of employees in high cadre jobs were better educated than the fathers of lower cadre employees. Mother’s education and parents’ occupation had a positive impact on female employment. Most employees with high cadre jobs worked for professional growth, whereas school teachers, nurses, clerical workers worked for economic necessity. In the private sector, promotions in administrative posts were based on gender-based favouritism and influence. Industrial workers (52%) and last grade employees (23.3%) lacked maternity benefit schemes at their workplace. In the public sector, women in police, nursing profession and managerial posts had to work for longer hours than others, whereas in the private sector nurses, clerks, managers and last grade employees had to work for more than 8 hours a day. Also, salaries of private sector employees were not in tune with their qualifications and working hours, and a majority of industrial workers (private) did not get any benefit for their overtime work. 1.4% of the organized sector employees faced verbal sexual harassment at their workplace from their colleagues and employers. Some lower category employees (private sector) were reluctant to respond about harassment due to fear of losing their jobs. Separate and adequate basic facilities were not provided at work in both sectors. Care should be taken to provide employees with basic facilities and maternity benefits. Promotions should be based on seniority and merit. Steps should be taken to prevent sexual harassment at work. Employee work hours should either be reduced or they should be duly compensated for the same.


Abstract: Study examined the socio-cultural determinants of the low representation of women in top managerial positions in Asian Organizations, and also studied the issues from individual and organizational perspective. 129 male and 71 female managers working in South-East Asian Countries participated in the study, of whom 32 were from Sri Lanka, 20 each from Nepal and Bangladesh, 15 from Korea, and 113 from India. Efforts were made to get responses from a wide range of organizations ranging from IT Consultancy, Financial Consultancy, Banking and hard-core manufacturing. Data was collected using structured interviews and questionnaires. Findings revealed that both male and female respondents perceived that societal culture has an important bearing on our thought processes and
Managers reported organizational culture to be favourable to men. Male respondents believed more in hierarchical relationships, which support the notion that Asian Societies are hierarchical in nature, and affects interpersonal relationships of people. In Asian Society, men are perceived to be assertive and commanding, whereas women are expected to comply, obey and be submissive and docile. Males and females perceive themselves to have different roles in the social space. Men were expected to maintain external contacts, whereas women were expected to fulfill their family responsibilities. Women gave quarter importance to self-actualisation, and men to happiness as values they wanted to realize in their workplace. Women managers reported family to be central in their lives, whereas male managers mentioned it was work. Often it was women who sacrificed promotions for family commitments. It was revealed that male managers from nuclear families participated in household chores, and seemed to believe in hierarchical relationships. They perceived international companies should recruit women managers for overseas assignments, while women managers felt that women were often offered such assignments. It was concluded that if effective work-life policies are adopted, which support dual-earner couples, employers would get benefited in turn. In the Asian context, maternal leave is the only effective work-life policy widely in use. Study indicated that economic expansion that generates a tight labour market could get women managers more job opportunities. Varied societal and workplace policies can support the integration of family and work activities, and can constitute varying levels of family-friendly employment. Enterprises, institutions and Government should take steps to ensure that employees are aware of their rights and related legal requirements. Clearly defined job descriptions should be established, free of gender bias. An objective system of job evaluation and a well-structured management performance appraisal system should be in place to monitor progress. Women should be given more opportunities for strategic assignments and job rotation to improve their promotion prospects. Recognition of best practices through awards can act as an important incentive in promoting women.


Key Words: 1. WOMEN LABOUR 2. UNORGANIZED SECTOR 3. UNORGANIZED LABOUR 4. INCOME 5. INSECURITY 6. FOOD INSECURITY 7. TEXTILE WORKER 8. AHMEDABAD 9. SEWA PROGRAMMES 10. FEMALE HEADED HOUSEHOLDS.

Abstract: This study focused on poor informal workers and their insecurities and vulnerability. Globalization and flexibilization process has changed the structure of employment the world over. The study was conducted in Ahmedabad city. Of a total labor force of 1.5 million workers, over 75 percent about 1.15 million worked in the informal sector. Insecurities faced by women workers, both within and outside the home due to their dual responsibilities, were empirically analyzed. The decline in work force participation of women from 34.0% in 1983 to 29.9% in 1999-2000 could be due to discouraged worker effect. The work force participation in rural and urban areas of Ahmedabad district was
higher (58.61%) compared to the national average. The percentage of female headed households was higher in urban areas (19.2%) compared to rural areas (9.4%). About 19% workers reported open unemployment and a higher proportion of women workers faced difficulty. Casual workers reported 137 days of unemployment, and seasonal nature of agricultural activity had 134 days of unemployment, but self employed agricultural women had less open unemployment (91%). The quality of employment in their informal economy could be judged by the income earned. The annual individual income of women workers was Rs 12,912/-, and it was lower compared to men's annual income Rs 16,704/-. The literacy rate among male and female workers had wide disparity. The male literacy rate was 84.2% and female literacy rate was 38.2%. The percentage of school going children who were not going to school was comparatively higher among male headed household (24%) as compared to female headed households (17%). Overall, 10% households had children 6-14 years who assisted parents at work. About 50% self employed in rural areas and urban areas reported lack of access to capital to expand their business. About 10% household members of women respondents went hungry over the last 12 months, compared to 8% among male respondents. Female headed households faced greater food insecurity (16.9%) in both rural (12.8%) and urban (23.0%) areas. Regarding health insecurity, 12% to 15% of men and women reported deterioration in their health status over the last year. 48% workers felt that work had an adverse effect on their health. About 19% households did not have access to public health care facilities. Around 30.6% women did not receive any medical benefits. The analysis shows that women with their dual burden, low levels of education, skills and access to capital, found it difficult to cope with their responsibilities. The pressure of earning an income, along with the house responsibility, affected their health. There is a need to reform the social security system to recognize the value of women's labor at home.