# Balkishori

#### THE PREADOLESCENT GIRL

Health and Education Status Of Girls in the age group 9-13 in Municipal schools in Mumbai

A Preliminary Report



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Balkishori Project Team

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Vacha Women's Resource Centre, Mumbai



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Introduction 5

#### Introduction

VACHA, a women's resource centre, is an outcome of women's movement. It established a women's library and cultural centre in 1987. Its areas of activities include research and documentation, training, publications and creation of audiovisual material. Its children's centre prioritises girls. One of Vacha's main focus areas is visibalisation of women in history and status and contribution of marginalized sections of women.

Vacha shifted to its present premises in a Municipal school in 1995. The idea of a resource centre for girl students from poverty affected families evolved from our involvement in women's issues. Empowerment of women had to begin from their girlhood itself. We opened a centre for girls with a special class for them. They initially enrolled because here they got help with their studies, especially in English. This was a subject they found difficult to cope with. At this centre they stayed on because they got story books to read in their own regional languages and got lessons in music, art etc. They went for educational trips to the zoo, the Science Centre etc. Later an introductory course in computers was started. The centre is in its seventh year now.

The idea of the Balkishori project grew from our interaction with these girls. Vacha has worked mainly with the age group 9-13 when they are at the threshold of adolescence, a stage when they are still closer to being *balika*, a girl child but on

way to become young adults. Hence the term Bal - Kishori, the preadolescent (or sometimes early adolescent) girl. This is an interactive research project with 2600 girl students in this age group from 33 Municipal schools in different parts of Mumbai city. The girls covered in the project belonged to 7 different linguistic and 5 religious communities. It has been undertaken in cooperation with the Brihan Mumbai Municipal Corporation (BMC) from 1998.

#### The research & action study

We strongly believe that the harsh reality of life and innate nature of women make them create something even from ashes. But unfortunately today, many women are giving up. Why? Where, when and how did the rebel and the survivor in them get lost? Is there any way to deal with this alarming situation? Just information is not enough for women's empowerment. They need to develop self-esteem. Their self-esteem, low to begin with, is eroded over the years. Where does this process begin?

Our observations during the activities for girl students at Vacha's children's centre made us look for more information on this age group. To our surprise not much was available. A need was felt to document the status of these girls in the multicultural urban situation of Mumbai. There are practically no studies done in India and very few elsewhere on this age group. One interesting study is The Harvard Project on Women's Psychology and Girls' Development which shows that many girls have high self-esteem in the primary grades but there is a severe decline in self-confidence and acceptance of their body image by the age of 12.\*

The age group 9-13, preadolescence and early adolescence stage thus becomes crucial for equipping women to understand their own bodies and to develop a positive self identity.

Health policies cater to women in the reproductive age group. International politics has forced many third world countries

to take up the issue of girl child i.e. from 0 to 6 years. Yet there is hardly any indication that policy makers wish to reach out to girls in the 9 to 13 age group girls. However, immunisation and other facilities are extended equally to girls and boys. There may be discrimination on the part of parents and the society but generally there is no discrimination at policy level. A decade after the SAARC (South Asian Association for Regional Cooperation ) year of the girl child, the sex ratio is adverse for girls in India, and is frightening (917 girls for 1000 boys under 6).

Our findings show that the nutritional inputs for girls are inadequate. Programmes like ICDS (Integrated Child Development Services Scheme) and policies on nutrition should address the growth needs of girls in this age group. Present policies take into account the age group 11-15. However ICDS provisions have failed to implement the adolescent programme.

Nutritional policy also takes cognizance of the high percentage of anemic women but does not consider investing in the age group where stabilization of nutritional intake happens biologically. We feel nutritional support should be given to these girls. It can be organized at local level with community and funding organisations in the area as well as by concerned individuals along with government departments.

The Indian Constitution and government policies have been protective and promote the principle of child rights. eg. Article 39 of the directive principles of state policy and Constitutional provisions like Article 14.15.21. But these provisions lack gender perspective. The oppressive micro and macro level reality of girls have to be offset by special provisions and the policy has to be designed with concrete measures for its implementation. This age forms the basis of future physical and emotional personality of the child. In Indian situation majority of girls are married and reproduce between years 13-19. Violence is reported to be one of the main causes of young women's deaths according to the

state registration system. In such a situation the mental and emotional inputs at preadolescent age group play a vital role.

When our team tried to find out where this preadolescent girl stands in terms of policies and programmes of the government we realized that she was missing from these. The age group 9-14, important for physical and mental growth, is missed out in the nutritional policy. The Education Policy gives free education till 14 years of age. The girl does not get any advantages from general health policy since gender discrimination in society denies easy access to services and care. The nutritional policies ignore the anemia, which sets in from this age onwards. The reproductive health policies do not cover her since she is still a preadolescent and not in the reproductive age group. There is no special provision for girls in this age group who are undergoing, physical mental and emotional growth. It is an age when their worldviews are being formed.

The Vacha team realised that to do anything for them would first require documenting their world, their experiences and their expressions.

Our study undertook looking at the issue comprehensively, their health, education, nutrition, social environment, their dreams, doubts and fears. The concern was to see if the potential of these girls could be realised. Would these formative years, their present exposures and opportunities make them future young women, with a positive self-image and a confident outlook?

#### Objectives of the study:

Documenting health needs of pre and early adolescent girls-

One outcome of globalisation is rapid urbanisation. Mumbai is an industrial and cosmopolitan city. The situation in this commercial capital of the country can be seen as trend setting in many ways.

To study and document multicultural realties and the role of

education on health of this age group.

This can give insights in the lives of girls, who have not figured in most of the policies and documents on women or girl child. This would help us build action programmes and bring positive changes in future generations of our society.

Though a signatory to CEDAW (The Convention on the Elimination of All forms of Discrimination Against Women) document, India has been able to improve the status of women only marginally. Even the ICPD( International Conference on Population and development, Cairo 1994) commitments have not been fulfilled. The processes of women's empowerment through development programmes have barely made a dent in the actual reality of women. If we understand perceptions of girls in this age group and document them, we may be able to explain this failure. This understanding would be of help to policy makers, administrators, community organisations and parents.

#### Reaching out to the Preadolescent girl:

This age group is neglected. It needs support at all levels-

- 1) Nutritional needs for healthy growth.
- 2) Educational needs. They may not able to continue education beyond age 14 i.e. beyond the constitutional commitment. Ability to read and write and opportunity to study may not be possible for various reasons. The development of analytical thinking and important component of learning also remain unattended.
- 3) Emotional needs. Because of the changes happening within, in the perspectives of others, near and close ones, and also of the outside world. Confusions, curiosities and fears abound. In normal circumstances they do not have any space to discuss much with adults or be with them. A sense of individuality and identity is also very important for development, especially because at this age there is a tendency to refuse

to be odd one out.

#### Visibalising this age group and their needs:

This is the main objective of this Study and Action project. It is to share these concerns with parents, community, child rights activists, women's groups, health groups and developing advocacy campaigns.

This report is an outcome of dissemination processes of the findings. This was carried out during the last four months of the project ending with a National Consultation on February 21<sup>st</sup> 2002. It includes some background information about the project.

Through this preliminary report we express our visions and plans for future action.

\*(Orenstein, 1994 quoted from American Association of University Women (AAUW) (1991) Shortchanging girls, Shortchanging America. A Nationwide poll to assist self esteem, educational experiences, interest in Maths and Science, and career aspirations of girls and boys ages 9-15 Washington DC. AAUW ED 340.657. 1991.)(Harvard Project on Women's Psychology and Girls Development.)

The Preadolescent Girl

## Methodology

#### BEING POOR, PREADOLESCENT AND FEMALE

Her eyes haunted me,

With a smile on her face

And pain in her eyes.

Her face remained within me like

Kulkarni and Palekar's Kairee\*

She is standing on threshold

Of adulthood.

She has been pushed, harassed

Forced to stand still.

Punished for violation of norms by

Crossing the threshold on her will and accord,

She has no right to have a wish and a will

She is Balkishori.

(\* Kairee is a film featuring the troubled life of a young girl directed by Amol Palekar. It is based on a story by G.A. Kulkarni).

This research emerged from the position that we need to

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let Balkishoris speak for themselves so that we hear their voices. Why this sample size, why municipal schools, and why a particular method of meeting girls, all these aspects of methodology flowed from this perspective.

Since Mumbai is a large metropolis with people from a variety of language and religious groups, we chose schools teaching through seven regional languages. We chose Municipal school girls because we wanted to study the situation of girls who belong to the underprivileged section of society but are not from special groups like children living on streets, in State custody, orphans, or child labour. In that sense this was a "normal group". The girls covered in this study were from both morning and afternoon school shifts. We covered eleven of the twenty three municipal wards in Mumbai. These covered fishing communities, old mill area, working class areas in central Mumbai, northern suburbs with more recent migrants and others in different parts of Mumbai.

A detailed questionnaire was used as an interview schedule which was finalised after pre-testing. This was developed to document the health status of these girls. We considered health as per WHO definition which is that health is a state of complete physical and mental and social well being and not merely the absence of disease and infirmity. And so the schedule was designed to cover all aspects of their lives and to understand their perceptions. There is always in any questionnaire a risk of limited reliability of response because it depends on how much the respondents know and share. We found that sometimes they shared more because we were outsiders and sometimes, they withdrew because we were outsiders. We did not want others to mediate when we communicated with them.

All the girls from selected classes were interviewed because we did not want any one to feel left out. A team of four to six interviewers would sit in empty classrooms, library, staff room or sometimes in corridors to conduct the interviews. The interviewers spoke directly to the girls. There was no one in between. The team first met an entire class, explained the project to them and then interviewed girls separately and individually. Initially there was some hesitation, but as the interview went on they would become quite relaxed. The Interviewers wrote down what they said, usually in their own words.

The interview schedule had questions seeking personal and family information. The family was explained as sharing the same 'chullah', or stove. In simple language it was living and eating together. There were questions on how many people stay together, the kind of work they do, the type of housing, sanitation, family assets etc. About health there were questions on personal and family health, history of illness and where they went for treatment. Height and weight were measured on the spot. About Nutrition there were questions on what they eat, their nutrition for the day, whether they took tiffin to school, and whether they kept religious fasts.

They were also asked about their likes and dislikes regarding teachers, school subjects and sports. Also on what they wanted to become when they grew up, how far they thought they could study and how much they wanted to study. In terms of gender they were asked their idea of growing up, what they knew about changes in their body, menstruation, and their idea of sexuality.

To learn about socio- cultural milieu there were questions about their neighborhood, violence at home and outside, their friends in school and elsewhere, and subjective questions e.g. about their happiest day, what they feared and so on.

There were some difficulties in administering the schedule. Some terminology had to be explained, for example *kuccha* and *pucca* housing and head of the household. When one of the girls asked about *kuccha/ pucca (mud hut/built with cement)* house, she said, "I don't know what you mean but I live there – pointing to a concrete fencing under a tree. When the interviewers asked some girls who had not eaten before coming

to school, whether they did not feel hungry. They said, "What do you mean by hunger?" We were interested in how the girls perceived family relationships so we let them decide who the head of household was. Their blank faces stopped us at times. We gave them a few hints e.g. in whose name was the Ration Card or the house? Something similar used to happen with questions on mother's occupation. We could not probe beyond a point.

The process of direct interviewing continued for two years. After completing interviews in each school, we had planned interactions with students.

#### Interventions during the Study

Our research has evolved out of our involvement and is committed to action. Thus our activities with girls have been continuously undertaken along with our research. These have emerged from the various needs perceived during the interview schedule. These are:

- 1. Developing self esteem
- 2. Providing them joyful, happy, exciting learning experiences.
- 3. Enriching curriculum and preparing them for lifelong learning.

#### **Kishori Diary**

It was designed by us as a return gift from friends with whom they had shared their experiences and perceptions. Most girls had very little that was their own. We created a small, low-cost diary which would be their personal possession, one that would recognize their individual identity. The Kishori Diary had the girl's date of birth, address, height and weight. In addition, there was health information as well as nutritious recipes, some slogans, poems and space for them to write anything they wanted. It also had a photograph of the recipient on the cover.

Since a majority of the girls had never been photographed

these pictures and diaries became special to them. The first photo sessions were done by professionals. Later the team members took on that role. The teachers and girls noted this with surprise and curiosity. In Urdu schools most of the girls would have their heads covered with *dupattas*, but we found that at photo sessions they would want to uncover their heads. Some of the teachers also encouraged them to show the full face with the comment that they were not praying but only being photographed.

A year after the project the Vacha team met the brother of a girl who was part of the survey. He had come to get the negative of the photograph to enlarge it. The girl had died and the family did not have a single photograph of hers.

The Diaries were distributed to all the 2600 girls interviewed in a special way, at cultural programmes, where we also invited teachers and NGOs. The programmes had songs, and skits. Each girl's name was called out and she was handed the diary. Two years later when the team visited some of these schools in continuation of the project, the girls were still carrying diaries in their bags.

#### Kishori Mela

During the interviews we had asked them about the happiest day in their lives. Most spoke of occasions like festivals but a few could not answer. Some of them anticipated the happiness when a baby brother would be born. The everyday life of these girls seemed to have little place for joy and excitement. We decided to provide them with a happy day and thus emerged the plan for Kishori Mela, a health and education funfair.

Vacha organised a Kishori Mela on the eve of the International Human Rights Day. At first the plan was to invite all the 2600 girls interviewed. Unfortunately the logistics of transport and other things did not allow it. Therefore, it was decided to invite similar girl students from BMC schools in the immediate neighborhood of Vacha's Office. In this school complex one large

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group had already been interviewed.

The Mela became a festival in which 1700 Balkishoris were the most important visitors. There was organised activity but no strict discipline. They were free to roam about and explore things as fancy took them, in a colourful enclosed space specially designed for them.

Vacha together with some organisations arranged stalls, which combined fun and information. For example a stall with an adapted version of the Snakes and Ladders game had messages of gender equality. Another stall was "My Beautiful Dream" in which girls tried on professional outfits of doctors, policewoman, and lawyers. IWID - Initiatives for Women in Development and KEM Municipal Hospital also put up stalls on health and on learning about one's own body. A stall for removing their superstitions was run by the group *Andha Shraddha Nirmulan*.

Songs, dance, sweets, flowers, toys, paper dolls and films were part of the Mela where the girls enjoyed themselves for two to two and a half hours. There was no need for money since we had not kept anything for sale. Each child was given eleven coupons for visiting all the stalls (including food stall that was put up through local support) and the Kishori Health Diary. The children were taught songs that were written on huge scrolls. There was collective singing and raising of girls' slogans. Many teachers also said that they had not expected to enjoy the event but they happily did.

Theatre person and social worker Ratna Pathak and the Chief Education Officer, BMC, Bhau Gavande, were chief guests.

Four mini melas were organised in different schools in the city. They were held indoors in school halls in different areas. They were held in schools where we had interviewed girls. Vacha team arranged with schools to give time to girls to visit the Mela in the school assembly halls. Games and charts were put up and

the hall decorated with symbols, slogans etc. Each mini Mela had 5 or 6 stalls. More girls attended Mini Melas than the number we had interviewed. We gave health diaries without photograph to the girls whom we had not interviewed.

#### **Training Modules**

During various interventions we found most girls ignorant about their own bodies, about growing up and about health matters. They had several queries that went beyond what the textbooks gave. Most of the girls (60%) would drop out of school after class VII. Hence the need for special educational qualitative inputs. We designed three modules that would help to provide or enhance their skills, and help them deal with day-to day life better.

#### Module 1 : Self-Identity:

An address meant knowing one's own identifiable place in the world. 90% of the girls could not tell their own addresses clearly. Generally girls are encouraged to know their identity within family parameters, not beyond it. Vacha tried expanding this identity. So the first module was "Me and My Identity." Their name was in the context of their neighbourhood, town, state and country.

Though the students are meant to start map reading from class IV we found that they did not know even the north – south directions on the map. To orient them about directions in a practical manner, we asked them to draw the route from home to school, with landmarks in between. They enjoyed it because it was like a game and not the way they studied geography/ social studies normally. This exercise was meant to make them more observant of their surroundings.

It was important that they should learn how to write their postal address. It linked up with what they learnt about their identity, home, street, city and country. They moved on to learning more about their city and locating their native place on the map

as well as India on the international map and routes to the outside world.

#### Module 2: Body & Health

How does one communicate with one's own body? What do you know about your body? How would you perceive symptoms of illness? What makes good health? What is the role of nutrition, rest, exercise, etc? These questions were dealt with in the module on body and health. It was important to make girls know their bodies. We hoped to reduce their fear of going to a doctor.

We started this module with yoga exercises because yoga is a very effective means of communication with one's own body. After teaching them simple body and relaxation exercises, the class moved to understanding the functioning of the body with the help of charts.

At first many were hesitant to look at the charts and used to cover their faces. They felt shy to look at the body chart which explained menstruation because it was "dirty". The thrust of this module was to remove this shame and fear of their own body, to consider one's body as a friend, to respect it and to understand the systems within. After explaining the systems the girls were given a jigsaw puzzle with cut outs which, when joined, would make a full body. After the module was completed the girls would go near the charts and touch various organs. They started learning to overcome their shyness.

The feedback was very interesting. The girls not only learnt about menstruation and later talked to their mothers about it but, surprisingly, also to their fathers. The school teachers who attended these sessions said that we should conduct workshops for them as well.

#### Module 3: Language & Communication

The third module was aimed at getting acquainted and becoming comfortable with the language which they fear the most- English, a compulsory subject in schools. It is a language they need to learn for better job opportunities later in life. Women are generally isolated and marginalised due to their inability to communicate and difficulty in accessing systems of communication e.g. Post & Telegraph. Similarly they are unable to identify their own names in lists like the school admission list, telephone directory, railway reservation chart or voters' list. A game was used to teach them the use of dictionary so that they learnt to locate items on such lists.

Many other games helped to emphasise things like talking clearly and loudly, having patience to listen to others and communicating with each other.

This module also emphasised the need to learn and use simple mathematics in day to day life. Importance of savings in piggy banks, micro credit societies, and bank accounts was also emphasised in this session.

To understand their aspirations and dreams of what they want to become, the girls were asked to perform role play. Information was given about the basic requirements to become a teacher, a doctor, a police, a lawyer, a nurse, etc. All these modules established that they are curious and they do want to study and learn more about various things. We spoke of educational opportunities they could pursue further.

#### **Home Visits:**

This was the last phase of the study. By now we had gained some valuable insights and our perceptions had become clearer.

For the training module 10% of the 2600 girls were selected. Similarly we chose 10% of these 250 girls for home visits. We interviewed girls and their family members in their homes. The objective of these visits was basically to get better and more

personal information about them since quantitative findings from the survey naturally would not fully reveal their harsh realities.

Girls who were better known to Vacha team, or who had participated in the training modules, or whom we needed to know better were selected for home interviews. They were informed in advance and their parents' permission was taken. We had many cases where the parents were scared perhaps because they were wondering why we would want to visit them. Thus we selected those girls whose families agreed to our visits. Some families were excited about it, and some girls were ashamed because they felt their homes were not 'up to the mark'. Some homes could not be visited despite planning because of their parents' inability to be available at home. The information was collected with help of a guideline for observations.

We met one family that had come from Rajasthan. The girl was very beautiful and well behaved. When we spoke to her we found that she was married as a child to a totally illiterate shepherd boy. The girl was very worried about her future.

Many families were not ready to continue girls' education after Class VII. If a girl studies more then the family would have to find a husband who is more educated than her and that would mean giving more dowry.

There were a few families where the man had migrated to Mumbai and married again to acquire a parallel wife. For the second marriage, the man was not particular about caste, community or religious taboos. In one family with four girls, the mother has not got her name or her children's name on the ration card, or property. Even after 25 years of marriage she has no legal standing.

Another family type found was the joint family which was continuing mainly due to economic reasons. One family had 53 members and the girl could tell each person's name, age, work, earnings, etc. She wanted us to write down everything. When

we asked her "how do you go out?" She said, "We all go in a tempo." In another joint family, we found that all the girls were studying in Mumbai and all the boys were studying in the village. "All the girls will become smart in Mumbai; they will study till 10<sup>th</sup> and then get married."

The home visits helped us understand socio- economic and cultural background of the girls. In most of the houses we found that the preadolescent girls' needs were overlooked. On the other hand the smallest needs of boys' were taken care of. Money was made available for their medical care and education including private tuitions.

The team observed differences in living conditions, neighborhood, environment, culture and dimensions of the house. Most of the houses in south mumbai as well as in some other parts had very narrow staircases and very steep angles and in most of the cases the household had to fetch water from the ground floors.

The Preadolescent Girl

## Some Findings

The analysis will cover the following data from the survey: Sample census data, nature of family, nature of civic amenities, Health data, nutrition and food intake. Economic data, work, education, violence, their perception of gender difference and discriminations, and growth, personality, choices of programmes on TV, colour, dresses etc. although it is very cursory. The analysis presented here is on the basis of languages.

Total number of girls interviewed- 2600

Religious Background of girls interviewed.

Buddhist - 10%

Christians - 1.18%

Hindus - 64.77%

Jain – 0.63%

Muslims – 23.38%

Caste

In terms of caste the metropolitan environment has made a change. Caste does not matter very much to them whereas, their region does. There are 159 higher caste girls i.e.6%. While the rest 94% were "other than higher castes". (Unspecified number in caste section is mainly in Urdu medium schools where there are no Hindu girls).

#### **Family Information**

#### Marathi medium school girls

47% of girls in the sample were from Marathi medium.

87% of all Scheduled Caste girls in BMC schools are in Marathi medium schools.

80 % of the Marathi medium girls were born in Mumbai.

Family Size is 6.31 persons per family; Sex Ratio is 1: 1.39 females.

Type of Family:

Nuclear: 53.31% Joint: 32.12% Extended: 13.22%

Higher sex ratio of women was common across all communities. This is probably because they are from the underprivileged class where sex determination tests had not reached a decade ago. The families could have kept trying until they got one or two sons. Another factor could be that this is a purposive sample from poor families who send their daughters to Municipal schools. These are the families whose women folk are not left behind in the villages.

Though the sex ratio in Mumbai is not favourable to women we found a high percentage of female headed families i.e.16.46%. These heads of households were mostly mothers (11%).

#### Hindi medium school girls

20% of the total sample were from Hindi medium.

8. 73 % of these girls were born in Mumbai.

Family Size: 6.95 persons per family. Sex Ratio is 1: 1.10 females.

Type of family

Nuclear: 52.14 % Ioint: 34.01%

Extended: 13.24%.

Hindi medium schools had one of the smallest percentages of female headed Households at 6.68 %.

#### Urdu medium school girls

19% of girls in the sample were from Urdu medium schools. 72.50% were born in Mumbai.

Family size: 7.64 persons per family. Sex Ratio is 1: 1.26 females.

Type of Family: Nuclear: 64.19% Joint: 26.48 % Extended: 8.05%

Here also the female headed households were 13.45 %.

#### Gujarati medium school Girls

7% of the total sample were from Gujarati medium schools. 71.43% were born in Mumbai.

The Family Size is 7.16; The Sex Ratio is 1: 1.43 females.

Type of Family: Nuclear: 50.26% Joint: 34.61

Extended: 14.92%.

Here we found 20.57% female-headed household. This could probably be due to the fact that most girls belonged to families where their mothers were working, in service as sweepers.

#### Tamil medium school girls

4% of the total sample were from Tamil medium schools.

67.89% were born in Mumbai:

Family Size: 5.84. Sex Ratio: 1:1.32 females

Type of Family:

Nuclear: 72.22% Joint: 19.44%

Extended: 8.33 %.

7.48 % Female Headed households:

The area was Dharavi and the number of girls interviewed was 109. That made 4% of the total girls interviewed. 67.89% said they were born in Mumbai and only 25.69 were born in places in southern India. The rest did not answer the query. Here we met Christian as well as Muslim students. They formed 20.18% and 3.67% respectively. 45.87% could not tell their caste. Perhaps this is a good sign and shows the influence of Mumbai's cosmopolitan culture. 44.95% were other backward classes. 7.34 were higher caste students and only one student was Dalit.

#### Telugu medium school Girls

5. 9% of the sample were from Telugu medium schools.

Family Size is 5.95 Sex Ratio is 1: 1.44 Females.

Type of Family:

Nuclear: 66.67% Joint: 26.67% Extended: 6.67.

Head of the Family: 14.06 female-headed households.

#### Kannada medium school girls

Only 1% of the total girls were from Kannada medium out of which 47.06% were born in Mumbai.

Family Size: 6.29 Sex Ratio: 1. 1.18 females

Type of Family:

Nuclear: 56.25% Joint: 31.25 % Extended: 12.50%.

Head of the Family: 5.88 % female-headed households.

Santacruz was the only area where we interviewed Kannada students. These 17 students made 1% of total number of girls in the sample. 100% of them were Hindu. It is interesting to note that none of them have specified the caste.

#### Overall Sex Ratio in Households:

The ratio of young generation males to females was 1.52, Middle generation males to females were 0.92 and older generation males to females were 2.51. The reproductive age group ratio is indicative of the sex ratio of India, which is not favourable to women.

#### Housing, water, toilets: determinants of health.

Mumbai has comparatively better water supply. Only 25% of the sample gets less than 3 hours of water. In the extreme case of Vesave (Versova), an old fishing village recently appropriated by upper class developments, about 27% of the families of the girls interviewed get water for less than one hour.

We have asked questions about *kuccha*, *pucca* houses and ownership. This analysis does not cover the ownership factor. 80% are staying in *pucca* houses in chawls, in bastis and 14% stay in *kuccha* houses.

#### **Toilets**

7.13% use open air space.

10.76% have reported private toilet facilities.

80. 79 % use public toilets.

#### Illnesses

- 62.42 % reported minor illnesses which were cold, cough, stomach upset or digestive tract problems etc.
- 17% reported no illness
- 6. 79%. Reported other illnesses between minor and major (like long term fever, epilepsy)
- We had also asked about parent's illnesses and 1563 were not able to answer this question.
- 16.46% reported minor illness
- 1.43% reported acute illnesses.
- 5.37% reported cases of epilepsy which is serious and should be looked into.

#### Nature of health care system

When we administered the module to ten percent of the sample we found that more than 90% use private medical facilities. However, in the larger sample it was reported that 42.23% were taking modern medicine facilities and 20.32% use public hospitals. 14.13% go to public and private doctors (modern allopathic medicine) and no answers were given by 18.11%; Unani, homeopathy, home based and traditional remedies put together were used by only 0.32%. 1.48% do not use any medicines.

#### **Nutritional** status

This is the most disturbing finding of our data. Severe malnourishment (based on body mass index i.e. height and weight) was found in 1352 girls, i.e. 72%. Arm circumference can be done only up to 6 years. BMI is body weight in Kilograms divided by the square of his / her height in metres. Only 2 girls were overweight. 183 girls were mildly malnourished. This means 82-89% are malnourished which is very alarming.

Nutritional Status	No. of girls	Per cent	BMI
Severe Malnutrition	1,352	72.96	less than 16
Moderate Malnutrition	186	10.04	16 to16.9
Mild Malnutrition	183	9.88	17 to 18.4
Normal	130	7.02	18.5 to 24.9
Overweight	2	0.11	25 to 29.9
Grand Total	1,853	100.00	

73.11% girls (1,857) reported that they often feel hungry (without access to food at the time). We had asked about what food they eat and their regular food intake. One meal that was considered as staple diet was dal—rice as was Sabzi-roti. Average Nutrition Index compares food intake with staple food. It was worked out on the basis of total reported intake, higher weight to more nutritional food and less weight to less nutritional food. Average nutrition index for the total sample is 0.85.

#### **Economic Data:**

Out of 2549 students, 2409 responded to the question on mother's occupation. Of the 46.45% mothers who are homemakers, the maximum number are from Hindi speaking group. 14.74% have been reported not working, although they might either be not working temporarily, or they might be very busy home makers vitally involved in day to day activities. 11.25% mothers are in domestic work; home based work is done by 7.43% and there are 9.38% who are self-employed, (mainly in Versova, here mothers are involved in selling fish).

With regard to father's occupation, 45.67% are salaried, 32.05% are self employed, unspecified work is reported by 11.06% and 4.36% are unemployed.

Regarding girls' knowledge of household income and expenses,

we received responses from only 29. 6%. About 80% of the girls have engaged themselves in carrying out almost all the household activities including shopping for grocery, yet they do not know anything about the income and expenses. Those few, who knew about household income and expenses, said that a substantial amount was spent on brother's educational expenses like private schools, special tuitions etc. which is indicative of gender discrimination.

In 1996 ILO working committee has mentioned about the invisible labour put in by girls. In our study we have found that

- 97.6% reported helping mothers in some activity
- 59.75% do all kinds of house work (cleaning, fetching water, sweeping, washing clothes, utensils, shopping and cooking, looking after siblings generally meant taking them to school and bringing them back.) One of the girls had to drop out of Vacha class because her mother had delivered a baby. Such incidents are likely to be under reported.

#### **Education:**

- 60% will not be able to pursue further education beyond upper primary school. They want to be doctors (29.65%).
   Police was another occupation which they found attractive.
   They will be out of any social institution other than family once they drop out. Equipping them to deal with the harsh reality should become a major social concern.
- 98.11% like school for various reasons.

#### Violence:

It is generally believed that violence takes place in the lower, poor or under privileged classes. As opposed to that our study shows that:

 62.12% have not experienced violence at home. (Beating, raising voice, fights at home). It might be that they do not want to share. When we asked what they feared most, nearly 10% mentioned male members of the household.

Sexual abuse in schools:

During the interviews some of them reported sexual abuse/ harassment of some kind or the other by teachers. One talked of a teacher breaking into the girls' toilet and writing graffiti. Touch, singling out a girl or giving her more attention have also been reported. In Hindi and Urdu medium schools there are more male teachers. During the course of the study there were two reported cases in newspapers about Municipal school teachers who had molested girl students; one had taken her away for three days.

When we brought this to the notice of the headmistress in one school, she refused to acknowledge it. The team was in a dilemma. We did not want the girls to become more vulnerable. What we did do was to introduce sexual harassment in one of our teaching modules where unwanted touch and the right to say NO were discussed. We are sad to report that at this stage we could not do more. With more consciousness about rights of working women against sexual harassment, it is hoped more attention will be focused on such harassment in schools. A major campaign needs to be undertaken on this issue.

#### Knowledge of Menstruation and Sex:

- 58.57% have no knowledge about menstruation. It is possible that they did not want to tell us.
- 38.78% have a little knowledge. Only 4 girls have felt they have proper knowledge of these.
- 64.69% have reported not knowing anything about sexual intimacy.
- 31.75% have reported that they have some knowledge and some 10% have experienced some encounters with boys/ men that include annoying gaze, stalking, verbal teasing and

exhibitionism. This is abusive.

• 87.84% stated that they had no curiosity regarding sex or had any sexual type of experience. Yet when we applied the module they very much wanted to know. Once a team member was pointed out as the woman who asked dirty questions. One girl described how a vegetable vendor touched her while returning change. Another mentioned crude jokes that another vendor made.

#### Games:

Games like cricket and kite flying are meant for boys who also occupy the play grounds. Girls had a few toys sometimes like dolls or baby sets of utensils. At the Vacha funfair they had enjoyed toys put out by Comet Media. 58% girls did say they like outdoor games but 50% have mentioned playing indoor games. 20% mentioned their parents did not like them to spend their time in playing. Girls have very little opportunity for sports and games.

#### Teachers:

20% have said they like teachers who teach well. Sometimes they have even named such teachers. They generally liked teachers who look good, dress well and teach well and who are friendly, impartial and strict. They even like those "who beat us when we make mistakes." 20 % have said they like those who teach well.

There are contradictions. When we asked which teacher they liked best, they would say the one who does not beat them. Yet they would say, "The teacher beats us for our own good." This is internalising a value that can have implications for violence in marriage later.

#### Color, clothes and books:

73.68% girls like to read, though sadly they do not always

Balkishori

have adequate reading ability. 14.88% said they did not have good reading material.

Like most girls of this age group, pink is a favourite colour.

#### TV programmes:

Although 20% have said they fear ghosts most, and they still watch horror programmes. Another 20% liked comedy shows. Only 6% have said they like children's programmes. Either their concerns are not getting reflected in the children's programmes or they might not have control over the choice of programmes. There were very few households that did not have a TV set. They enjoy watching Hindi films on TV.

Quantitative data given above was supplemented with case studies based on in-depth interviews and home visits. The study would have been incomplete without meeting at least some of them in their home surroundings and having a formal meeting with their parents. Since it is not a parent focused study there were very limited home visits.

For dissemination among parents and teachers we had developed an exercise based on the case studies. First a case study was read or narrated, and then a few related questions were asked followed by a discussion.

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#### Dissemination-1

This was the last phase of the action research study. Dissemination and advocacy are both on going processes. We have been sharing the importance of the issues of health, education of preadolescent girls with friends, activists, NGOs, and at various forums from November 1998 continuing to the present. We have disseminated our findings from the study from October 2001 to February 2002 culminating in a National Consultation Meet on Bal-Kishori; the preadolescent girl child.

The objectives of this dissemination process were:

- To conduct give & take of experiences about preadolescent girls in areas of education, health and development.
- Sensitise the NGO sector about involving preadolescent girls in their area- specific, issue specific approach
- Reach out to the concerned individuals and media persons
- Advocate policy changes to include preadolescent girls in their various schemes, and programmes.

The dissemination of our concerns and later our findings was in various ways like participation in melas, workshops, papers presented at seminars, conferences at the city, state, national and international levels. We have also published papers and articles in English, Marathi and Gujarati in journals, newspapers, magazines and newsletters. Our work and findings have also been covered

by journalists and activists in various publications. Materials for use in dissemination and training have been created in the project.

#### The Process of Dissemination:

This was an important process for the research and action project which had to be carried out taking into account the complexity and multilayered aspects of the issue. Following programmes were conducted in the process.

- Two workshops inviting NGOs working with children and women and also those working as community development organisations. In this 28 participants from 18 NGOs discussed the issues related to Balkishoris.
- Two workshops for teachers through a philanthropic trust, which works for enrichment of BMC schools and shared our findings with 30 teachers.
- In a Parents Meeting called by an NGO, we could discuss about experiences of girls in this age group with 30 mothers.
- At Gandhi Shikshan Bhavan, a teachers' training college, we presented findings of the study and had a discussion with student - teachers who would be teaching in different medium schools from pre primary to secondary levels.
- At an SNDT University's refresher course on Women's Studies for college teachers in Maharashtra gender discrimination in education was illustrated with case of preadolescent girls in Mumbai.
- At an educational mela, organised by Comet Media Foundation, the Vacha team discussed gender issues and the need for starting programmes for empowerment at the balkishroi age

#### Audio-visual material for wider distribution

 A poster: This was created featuring a photograph of Rita, a shy girl believed to be dull and unattractive by others and

- by herself. The picture was taken when she and her friends were flying kites during a Vacha event. The joy and excitement in her smile made the picture come alive.
- A screen saver. This is in support of preadolescent girls, which can be downloaded from Vacha website vachaforwomen.org.
- An audio- cassette of songs on Balkishoris called Kishori Geet, it was produced with the help of our friends and supporters from the field of music and a group of trained and enthusiastic young singers, themselves kishoris. It contains 8 songs in Hindi. Some of these songs of empowerment were specially written based on the insights gained during the project.
- An Advocacy Note for policy makers and others in a special file.
- A Quiz Sheet on women's issues in Marathi.
- Song sheets in Hindi.
- A short film depicting various aspects of the Research Action project on preadolescent girls.

## Dissemination-2

#### National Cousultation

Challenges posed by the findings about preadolescent girls led to a national consultation. This research and action programme has defined health in its holistic aspect. It was necessary to share the findings with concerned individuals and field experts and find out their views. Panel discussions revolved around the issue of preadolescent girls from the perspective of educationists, women's movement activists, legal experts, doctors, health activists and media practitioners.

The consultation had three main sessions.

Session I : Presentations by Vacha team, on objectives, methodology and findings.

Session II: Panel Discussion I: Education, Law and Pre
Adolescent Girls

Session III: Panel Discussion 2: Media, Nutrition, Women's Health Movement and Preadolescent Girls

This was followed by a function in the evening to release advocacy material on the issue.

Several points were raised about these presentations at 9 and 10 November 2001, at Dissemination Workshops and at

The Preadolescent Girl

the February 21, 2002 Consultation. Explanations were given by Vacha team or by some of the field experts who were participating. Participants gave inputs and raised some points or questions. At times other participants responded to these. The points that came up this way were:

- With house, work and school, girls have hardly any time left to develop friendships.
- State policy on children includes children under 18 years.
  There was then a discussion on how various govt. agencies
  must execute the policy and also how the gender issue is
  not appropriately covered, especially with regard to the
  preadolescent age group.
- Children's health gets stabilized between ages 5-10 years, but this stage is ignored in most policies.
- On the cases presented some asked what the conclusions were and they asked about the outcome of interactions during the project. It had to be explained to some participants that case studies were not case work. The interventions were not planned individually but for the entire group. A broader level intervention is needed and all concerned have to work for changing girls' reality. It was also said that all the plans about what should be done are not necessarily with the team that undertakes documentation. All interested people including the participants will have to think of it collectively and individually.
- An experience of one from their hot line for children was that as many as 1200 phone calls from boys and girls were received. A lot of these are cases of sexual abuse by friends and family members.
- Many Muslim students have been enrolled in religious studies classes where they spend as much as 3 hours a day along with the normal school time table. This leaves no time for anything else.

- Some said that the children do not get enough sleep. Neha Madhiwala from CEHAT noted that there is no place for girls to play. She also said that when the girls are in school, they are considered quite young at first and as soon as they leave school, they are considered old enough to marry.
- Need for gender equality programmes in schools was emphasized. Participant from MELJOL said that, in their programmes, boys and girls all participate in all the activities as opposed to gender distribution of work.
- A member from Janwadi Mahila Sanghatan said they have observed that when girls fail, they are withdrawn from school, where as when the boys fail, they get private tuition and special attention.
- Because of lack of space, some children are exposed to sexual acts of parents or other adult couples early in life.
   One group has found parents - girls' meetings fruitful. Some drop out girls are studying in open schools.
- CEHAT surveyed 300 Households- 500 children from the Jari mari slum, near the airport in Mumbai, in which they found that 25 children are out of school; after they leave school, the boys are encouraged to get some technical / vocational/ earning skill while the girls are not. When the girls are brought together they get a lot of peer support due to which they can also garner more community support for continuing schooling.
- Member from Alert India said the nutritional deprivation is quite commonly noticed. When menstrual cycle is unstable, the families take girls to doctors and often keep changing doctors. There is tension when the girls do not menstruate regularly, when they are married early and they do not conceive after 2-3 years again there is tension. The BMC community workers become more sensitive to the girls around their communities when they receive gender training.

There was some discussion on the size of the sample and findings. A demographer and an economist with women's studies background explained how this is a purposive sample selected with specific objectives and method.

Panel 1: On Education and Law and Preadolescent Girls.

Chairperson: Maithreyi Krishnaraj

Panelists: Anita Rampal and Flavia Agnes.

## Anita Rampal: Education and Preadolescent girls.

Anita has worked with adolescents both in formal and non-formal school systems. Her presentation took into account both these areas. She pointed out that education plays a crucial role in terms of any disadvantage the people have, and in helping people change lives. Unfortunately many children, especially girls in 6-14 age group, are not in school. While we have spent the last decade talking of Education For All or universalisation of primary education, this decade should be devoted to thinking much beyond that. The PROBE Study showed that the demand for education is high. But when children go to school, it also does a lot of harm. It alienates rejects, throws out, and gives a child a sense of disability.

It is a matter of concern that whenever we address 'adolescents' it is either in an instrumental or a negative manner. They are targeted for population control. Health is reduced to reproductive health, without looking at development of human beings as a whole. Often adolescents have often been viewed as a group of people with problems, of disturbances and rebellion. We do not see Rebellion as a part of growing up, in a very positive way.

In reality however, when children at that age are given a chance, they will work till the end, whatever be the problem, whether it is in classroom or outside. They are idealistic.

Whenever a positive stimulus, a congenial environment has been provided, adolescents have risen to the occasion. They yearn to right all wrongs; they fight for justice and they want to do things right. They are keen to be recognised as useful and participating citizens of the society. Their contribution in the struggle for independence, the environment movement, national literacy campaign, and campaigns against plastic bags and firecrackers, are some examples. However where the right environment has not been provided they have taken to violence and drawn into petty and serious crimes.

We must seriously think about providing the right stimulus, role models, and an environment for adolescents in order for them to become assets for the nation. Earlier this thrust was lacking in any policy framework. Now when the Planning Commission has set aside about Rs. 100 crores for programmes on adolescence, it is time to do our bit.

Talking about education and this study specifically, she found the modules really interesting. Such modules, within schools or outside, as in residential camps that people have been using have proved to be extremely effective. Experiments with the girls in the 9-15 age group done by M V Foundation, Mahila Kendra in Rajasthan, and in UP, have shown that girls even if they have been out of school, have a keen desire to learn competencies and skills. This has surprised a lot of people working in education. The main reason for this achievement is that all these experiments have taken into consideration the fact that an older child needs to be treated cognitively with more respect, she knows her life, she knows the world much better. If that is taken into account, one can see a jump in their cognitive experience.

Anita Rampal shared her experience about teaching Mathematics, which is often considered a killer subject. Here they tried to find out from children who are dealing with life, dealing with transactions, who are either engaged in vocation, in selling etc. their understanding of maths, the skills in doing

mental maths. The maths that they have to deal with such as multiplication or division, are foolproof. They do not go wrong and they cannot afford to go wrong. It is important to conside, why we have never used those skills, their strategies when we are actually teaching them maths in formal / non formal situations. This does not deny the need for writing in maths. She referred to a book, Zindagi ka Hisaab which is about maths being part of people's lives, peoples' art, and music. She also talked about Maths Mela where different stalls made these young people feel that they know much more maths in form of measurements, predictions, etc.

Anita Rampal stressed that people who are trying out alternatives should now show that their modules worked. In educational discourse, it is crucial for us that we look for benchmarks, indicators and define change in learning abilities and achievements. Even if it is a six- hour module, we should be able to define what we think they started with and after six-hours what they have achieved. Traditional educationalists do not look at something like confidence. It is never an indicator for learning, whereas we think that for girls, confidence is a basic thing and there is a difference in levels of confidence students have.

The present system of evaluation is also very limited. It limits itself to Minimum Learning Level or some kinds of arithmetic skills, which are again defined within a very orthodox system.

We therefore need new evaluation systems, and equivalency programmes should be worked out. We need many more lateral opportunities and flexible programmes. We need to work out some other models. People also need some kind of certification. But let that certification be different so that it can take into account their own knowledge, their abilities, their thinking that goes much beyond that provided in the school text, and a lot of positive values.

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# Flavia Agnes: Legal issues concerning preadolescent girls.

Flavia spoke from her experience as a lawyer, as an activist and from her experience within the organisation working on issues like marriage, custody, divorce, family courts, sexual abuse etc.

She said that generally women's issues can be categorised in many different ways, like health and law, like married women, married women's rights and law, personal laws, rights within marriage etc. Adolescent girls are one such category. This category of girls has been facing problems like acid throwing, sexual molestation, etc. These are the adolescent girls, who are in the pre- marriage age and who are subjected to these kinds of violations. But the 6-13 age group in fact is an invisible age group. Either you treat them in 0-6 children's group or take them in the adolescent and pre marriage and thereafter in the marriage group.

She appreciated that Vacha's study was situated within this group, which is really lacking in terms of both health and rights. Also, when you look at human rights violations, or issues of child labour etc., girl children are absent from this discourse. When you say 'child' basically what you are talking about is a male child, or when you talk of human rights, violations of men's rights - the women do not figure. Even when you bring women into the discourse, the girl child very often is not there at all. There are no cases at all that say that this is child labour and this is violation of rights of girl child.

Flavia looked at the linkages with children's health and women's health and violence. Children's health becomes important for the survival of the woman. If the children do not survive or they are sick, her role as a woman, as a mother, as a wife gets questioned. If the woman or any member of the family is sick, then it leads to violence. This is where there is a strong co-relationship between the health of the child and status of marriage for many people and is an issue on which many people

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have not focused.

An important issue concerning these pre- teen girls and adolescents is the whole question of the validity of Hindu marriage in our society. She gave several instances to show that few people knew that Hindu marriage does not have a valid registration procedure. Nowadays there is only a notion of marriage popularised from Hindi films, where the boy and girl go to a temple and exchange garlands put a 'tilak' on forehead and declare that you are married. The exploitative use of a Stamp Paper has only given the lawyers opportunities to find loopholes within the law and to make money. The stamp paper only gives a Memorandum of marriage, with a seal of the registrar, a state official. The girl who believes that she is legally married, or who might have had this kind of marriage in order to legitimise her attraction to the opposite sex, a curiosity about sex, a desire to have a sexual experience, is likely to get exploited by the males. The marriage certificate can be and is used to blackmail the girl later. The Jalgaon sex scandal case was one such incident. The certificate becomes a weapon for the boy who can then make her do whatever he wants her to do. Most of the times. such a marriage would be inter community, inter caste, inter religious, inter class and there will always be pressure from either of their parents to terminate the relationship.

Therefore it is very important to talk about all these issues in the school; to tell the girls first and foremost about menstruation and sex. This can be taken further to discuss their attitude to marriage, notion of family, of marriage, of sexual experience and how these are interconnected as well as sometimes not interconnected. This should be built into pre- adolescent and adolescent girls education.

In the end she focused on the legal issues revolving round the preadolescent girls:

1. One aspect is the custody issue. If they are very small they will usually be with their mother. If they are above their teens,

then their wishes will be ascertained. Generally girls and boys in the 6-13 age group get caught in long drawn and complex custody battles. One parent will have custody and the other will have access. The children who get caught in custody battles learn to manage living and adjusting to both their parents.

- "Wishes of the children will be ascertained as to what is good for the child." Wishes of the child are tutored wishes.
   Often the mother's family is not ready to look after the child, which is very unfortunate for the child who has opted to live with mother.
- In single woman households, it is important to see whether the woman is separated and how the child has adjusted and coped with this kind of trauma.
- 4. Sexual abuse of girls in this age group when in custody is quite noticeable. However the courts refuse to listen and recognise it and continue to keep the paradigm of access and custody. She gave a few examples to show this.

Drawing from her earlier work with women migrants to Mumbai who are roadside hawkers, she said the women who migrated learnt a lot of new things in Mumbai. They had adapted to a lot of changes, and faced many hardships. They managed their lives at home and in the market place and learnt practical maths. This was not so with their daughters who went to school, then dropped out but could not do their mothers' work nor understand the outside world as their mothers did. Girls should be taught something beyond the school subjects to cope with life.

#### Chairperson, Maithreyi Krishnaraj's remarks -

Maithreyi Krishnaraj noted that what had been said repeatedly was the failure of the school system and the question was how do we really reinvigorate it. This would be possible not by having parallel interventions but within the schools, to make schools

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work better. She emphasized the need to redefine education, evaluate learning in terms of promotion of real capacities, life skills and creativity rather than rote learning. She expressed concern that we are not tapping this and instead dulling it and said that the legal issues that may arise in regard to this age group would have to be handled.

Panel Discussion II: -Media, Nutrition and Women's health; Women's Movement and Preadolescent girls:

Chairperson: Sabala

Panelists: Ammu Joseph, Kamaxi Bhate and

N.B. Sarojini.

## Ammu Joseph: Media

Ammu Joseph journalist and media researcher began her presentation by taking note of the influence of media on girls and how it has given them a popular 'notion of marriage'. She however explained that she would focus on print media and she did not want to talk about media in general terms.

She focused specifically on the issue of adolescent girls when she spoke to girls in three southern states – much before adolescents had become the flavour of the decade. Talking about her relationship with children through media Ammu mentioned how she had done a column for young children called "Young World", for 8 years in the nineties. She wrote about social and current affairs for children. The question generally asked was whether children could really be concerned about these issues? Why should children be bothered about all these? The impression is that they like to have only fun and puzzles and jokes. But her column received a good response from children. Thus it was a very satisfying experience for her.

She found that children have a strong sense of Right and Wrong. They express outrage if they feel there is something not right or just. It did not matter how serious and complicated the 46 Balkishori

issue, they would work on the problem and respond to it. This is a positive thing that we need to build on.

Contextualising the issue she said the media scene is very depressing. There is shrinkage of space in media for social issues, due to the market driven infrastructure and perspective in the media world. The shift in media has intensified in the 90s and is visible in print and TV. There are still many possibilities in radio, however, its listenership has reduced. So, on the whole it is difficult to say what kind of role media can play for coverage of social issues. She hoped that this would be a passing phase in the media scenario.

In a world where every thing is decided by the market, children are also seen as 'market'. That is why media focuses on children. Media for the most part covers those children who form part of the market and can buy things. If we look at the age group that is covered by media today, it is children and youth. This can be seen from the emergence of young people in the advertisements and TV programmes.

However she said that in India today there are books for children and books for adults. But what about children who are just going to be adults who are facing all kinds of issues? She recounted how the western media had written short stories, comics for children to understand issues like divorce and abuse. There was nothing like this for our children. Unfortunately, the general feeling among publishing houses in India is that publishing for adolescents is like "a graveyard of publishing". These arguments are based on the premise that nobody is interested and that no one is bothered.

Keeping the market in mind the media does cover this age group in a small and divisive manner. Some of the marketable issues are child sexual abuse, violence, trafficking in women, and child labour, etc. All of it is in a tear jerking approach. Thus they do not cover the whole gamut of adolescents' world. But then this is no different from their warped coverage of say, health,

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where it is the fitness programmes that take the chunk of the coverage.

She then reflected on some positive trends. There is a concern about the change in media among media persons. There is an undercurrent of unhappiness on what is happening to the print media. There was a time when journalists and activists would work together on important issues. She said, "perhaps the time has come for that kind of change."

Ammu Joseph mentioned some experiments done by groups in Karnataka, for example the CWC Bangalore, who have worked with the radio. They have taped progammes and played them for children and sought their responses. They have received good response from the children. Radio still leaves some space for social issues to be taken up. One of the experiments was that of inviting child labourers to speak about their feelings. Some groups have tried bringing out wall papers written by children, and this can be an interactive media.

She ended her presentation on this encouraging note.

The discussions from the participants enriched the presentation. Following points were made:

- When children are becoming adults, they are both introverted but also have a way of expressing themselves. Both these emotions are sharp and if media gives the kind of attention that they really need, they react positively.
- 2. Why are the children not watching TV programmes for them? Does it have to do with the content? Is it that they do not want to be seen as children- especially the adolescents?
- 3. Abhivyakti, an NGO focusing on media is educating young children about media so that they look at media critically. Even if you switch off the TV, the children view at least 30 posters on their way to school. So they try to teach them how to look at the advertisements, how the publications are made, those kind of things.

- Children are not watching programmes for them but cartoon network catches their attention they are glued to it. Even before they start talking they start identifying cartoon characters.
- 5. There is very little children's programming apart from Cartoon Network. The choice is between cartoons and Animal Planet and National Geographic, which we assume that children are watching. One does not see too many children watching those. But we can do some media awareness and critiquing and probably this is the only effective way of countering media messages and not have censorship for children.
- The experience shows that whether TV or Radio, discussion group or study circles around media, the collective discussion of what you get from any media is very enriching.
- In Marathi there is Bal- Chitravani, in which the participation for children is quite high. It is interactive and often done through schools.
- 8. TV is a different and difficult medium. Television collapses worlds; it is very difficult to be selective that children should watch this and that. Earlier when we used to go to theaters we could choose children's films since they were not allowed in adult films. This is no longer true. It is possible to have adult world and children's worlds in print material, children's books etc., because schools are organised that way, age wise. While critiquing we should consider that there is a basic difficulty with the medium itself and its accessibility to all age groups, it is right there in the drawing room where you cannot do much.
- An educational channel called Zed TV had been focusing on interactive educational programmes for children. It had a lot of programmes and puzzles for children's entertainment. They had to close down because it was not viable financially.

10. Internet is a powerful but double edged medium. There can be no control over what it makes accessible to boys and girls of all ages.

# 2. Kamaxi Bhate: On Nutritional Needs of preadolescent girls.

Kamakshi Bhate, doctor and health activist shared her experience of working with adolescent groups (boys and girls) in BMC. In this training the focus was on sex education, while nutrition was considered a passing topic. The morning's presentation had shown that malnutrition is rampant among the pre- adolescent girls. Yet they are being left out from most national and nutritional programmes.

Her presentation was based on the idea that we should critique present programmes and see where we can fit in preadolescent girls in them. This is because one can no longer think
of starting new programmes and even old programmes are being
shut down or are being given off to NGOs. Since we are thinking
of talking to BMC and all those who are going to take up these
programmes, we will have to give them some concrete suggestions.

She stressed on the most common factors for good nutrition. This also meant that the nutritional problems could be solved keeping these factors in view.

- External factors- food production/ distribution and availability of food.
- 2. Economic factor purchasing power.
- Unsafe drinking water- merely making water safe for drinking can reduce nutritional deficiencies. It can improve the protein level and hemoglobin level of the body just by improving water quality.
- Unhygienic conditions are another important cause for nutritional problems. While it might be difficult to change their home conditions, there is scope for improving the hygiene

- in their schools where they spend several hours a day.
- 5. Cultural factors- girls are encouraged to follow the footsteps of the women of the house so they eat less, last, leftovers and stale food. All these have led to reduced amounts of protein and B-complex.
- 6. Traditionally followed methods of cooking lead to reduction in whatever nutritional value the food might have by overcooking and using certain condiments. Talking of food taboos and traditions, she gave example about poor people in some regions not eating pumpkin although it is grown there because it is a cash crop.
- 7. Nutritional leakage can happen due to recurring infections, or if immunisations are not complete. Nutritional leakage can happen even when nutrition is okay. But non-availability of safe drinking water and unhygienic conditions of surroundings can aggravate nutritional leakage.
- 8. Low birth weight babies grow up to have low BMI unless they are looked after well. But the looking after of girls with Low Birth Weight (LBW) is missing.
  - She stressed that all these factors are interdependent. She focused briefly on the nutritional status in India.
- LBW i.e. Less than 2500gms. is 30%.
- Only 50% of the babies are getting exclusive breast feeding.
- 80% of the babies are not given the right kind of complementary feeds for one year. Mortality rate in girls' (especially 0-6 years) is 20% higher than boys in India.
- There are 540 mothers who die in every lakh live births. That is one lakh women die every year in child birth.
- Anemia from 15-45 years is 50% and 0-3 year is 80%.
- 16% of maternal deaths are due to anemia.
   Post –independence India has had various approaches to

control anemia. First, it was thought of as a purely clinical / medical problem, (nutritional diseases), which could be controlled by giving some tablets and medicines. In the 60s came the agricultural approach. But it was realised that despite good food production there was malnutrition. Then during the Green Revolution, the applied nutritional programme was implemented. It meant providing good seeds, water supply, other requirements to people who have small back yards or small piece of land near the house etc. However, this also failed because it was planned and implemented in a centralised manner. The next approach considered mal-distribution as the problem. That is why they started feeding programmes for those who needed the most. Then came the food processing programme- this was the American way of thinking that we needed more proteins. So processed food fortified with extra proteins and vitamins were promoted. The fallacy in this approach was that if the calorie requirements are met then one does not need extra proteins.

Her contention was that the approach needed was an integrated approach, a primary health care approach whereby if the child needs treatment for any disease, the child should be able to have it. The child should receive clean drinking water in school, because you are looking at the pre- adolescent age group children who are going to school. An integrated approach will work best with primary health care approach where the nutrition can be taken care of along with water supply, treatment of local endemic diseases, immunisation, and vitamin A supplementation.

Finally she looked at the programmes, which had scope for including the preadolescent girls. One is the ICDS programme where this child between 6- 15 years is missing. The ICDS is looking into the needs for pregnant women, and now into adolescents needs as well. But 6- 11 years are missing, so we can include this age group in ICDS. There is scope for including the preadolescent girls in Mid- day Meal, National Nutrition Anemia control Programme, Vitamin A programme and so on.

Lastly, it is important to give nutrition education in the school along with the necessary environment, safe water available, hygienic conditions etc.

# 3. N.B.Sarojini: - Preadolescent health in the context of women's health

Sarojini, who has worked mainly with women and to some extent with adolescent girls in Madhya Pradesh, Uttar Pradesh and Andhra Pradesh, shared whatever is important as an issue in adolescent health from women's perspective/ point of view. All the issues that surround women's health actually affect them from the time they are preadolescents and even before birth.

Her experience shows that people perceive good health as the ability to bear hardship, do physical work and hard work. This is basic not only for health of women's and adolescent girls but for the entire arena of human rights and social justice, since women and underprivileged sections as a whole have very little choice other than hard physical labour in order to exist.

Her experiences from various training programmes showed that poverty denied women access to schooling. Women talked about their experiences of sexual abuse. This is quite common, cutting across castes, class and rural and urban areas. She also referred to child marriage or early marriage and early pregnancy. Often girls who are married do not get to know enough about their body or their sexuality. She narrated cases where many girls expressed the fear of being abused by the husbands and the aggressive sexual advances from the usually much older husband. This led to a fearful tendency, which is clearly linked to mental health in later stages of adulthood. Early pregnancy contributed a lot of mental stress to some of the girls. Another important issue is "lack of primary health care". Many women said that they have lost some near and dear ones due to some illness, epidemic or due to TB which is very rampant in the area. The other reason they gave is that giving birth to six-seven

children while only two survived. Girls see such instances in their own family. Thus it is an important aspect that should be looked into when we talk about woman and preadolescent health.

The issue of discrimination runs parallel to all this. It is seen in food distribution. Girls and women eat last in the family and the quantity of food decreases serially. Most household work is done by the girls, while the parents are busy in the fields, or have gone out in search of work. Often schooling was denied because there was resistance not only from the family but also from the village. The other aspect of discrimination is that of the negligence of girl's health. Like the women in the family, the health of the girl child is often not the priority. Her health like her mother's is taken for granted.

N. B. Sarojini then discussed the aspect of 'restrictions', which is linked to sexuality, and violence against adolescents and women. She narrated instances from Uttar Pradesh and east Godavari district of Andhra Pradesh. The community has certain phrases, which they use for adolescent girls. Usually when the girls start growing, when the physical signs are visible, they use phrases like, "When is this mud pot going to crack". Adolescent girls attaining menarche is like an "explosion". Probably it gets accepted in their own cultural situations but there is also a possibility that she might feel embarrassed, or undermined, or looked at from a sexual point of view. These are the messages being sent to girls. There is also the anxiety that the girl is growing older and looking so, and they have practices, which force the girl's body to look younger. She described some horrendous examples of forcing the breasts to remain small or for the vaginal area to have no hair. All these practices lead to health problems.

She emphasised that anemia is very clearly an important concern for women's health. Other such concerns are tuberculosis, communicable diseases, reproductive health problems, mental health problems, low self-esteem and lack of self-confidence.

#### Chairperson Sabala's concluding remarks

Sabala focused on the complexity of issues which she said made everyone speak and participate raising many interesting points to look into the issue of preadolescent girls.

#### Release of Advocacy Material

After the welcome, there was a brief introduction about Vacha and the Balkishori project for those who had come only in the evening. Dr. Maithreyi Krishnaraj presided over the evening function.

Maithreyi Krishnaraj said that Vacha had pointed out the need to focus on the preadolescent girls who are left out from policies and programmes. Girls from underprivileged groups have become invisible. Vacha's efforts have given a positive message: 'Bring back playfulness and joy into the life of this age group'. She also referred to the unique efforts of Vacha to resignify what has always been thought of in a negative manner. Vardhana, the first ever national consultation on the issue of older women by naming them Vardhana –women of age or grown and growing women and thus gave a different meaning to what was earlier referred to as old people, elderly people in a somewhat negative way.

She said that Vacha has made useful and creative efforts to work with the government. Public institutions are our institutions, they represent us and they are accountable to us. To make them accountable to us is our first duty in spite of all the hassles and frustrations that it might bring. This is a very good example. The message one got from all the distinguished speakers today was that these efforts do make an impact on the system, may be not as much as we would like to make; nevertheless it reaches people.

She stressed that all reports have been pointing to the great hunger for learning among our people. The schools have failed them and there is a need to revitalize those schools, so that they answer the needs of the people. She said that Vacha has made efforts to focus on this particular age group in terms of their health requirements, nutritional needs, education and development, building of self confidence and esteem.

She expressed unhappiness that nationalism no longer means national regeneration; it only means guarding territories, and arming ourselves. Defense expenditure is going to be Rs. 8000 crores and what could happen if the money was put in schools, health system. What transformation could this country not achieve, she wondered.

Quoting Amartya Sen she said, freedom of every human being to survive, grow and flourish is what we need to ensure. She added that the main message that came all through the day was that, "there is a need to come together and to be able to participate in each other's endeavors and build solidarity; to really move our public institutions that have deteriorated, to make them more transparent and accountable in the real sense."

**DR. Alka Karande**, Chief Health Officer, BMC, released the MULTI- MEDIA KIT which contained a poster, an audio cassette, and an Advocacy Note.

She spoke about BMC's efforts at providing health care. The latest development was the inclusion of violence centers where they would begin with police help, legal advice, and counseling. She also shared their plans to reach as many needy women and children as possible with the help of NGOs.

FARIDA LAMBAY, the Vice Principal of Nirmala Niketan College of Social Work and an important part of Pratham, the well known NGO in the field of education for the poor, spoke from her experience of working with Mumbai Municipal Corporation for almost 30 years. She said that it is one of the most progressive corporations as well as one of the richest in India (although now it has a resource crunch), and that it gives a backdrop and a kind of a place from where we can all work

together.

As people involved in working with organizations focusing on education, ICDS scheme is something that we should capitalize on. It will also help us to work with young mothers. They might not be adolescents in the strict sense. We have many young mothers in rural areas who need a lot of guidance.

One non-negotiable thing she said she believes in is that education should be an equalizer and not a divider. If we believe that then one must look at steps that can make it equal. She said that there are two parallel streams of education as far as our city is concerned. One is the private school and the other is the government schools. All of us who have the purchasing power today put our children in private schools. This works against the equalizing concept. She stressed the need to make the system work. We cannot just critycize but also should offer to work towards solution.

Advocacy material was disseminated at the function and later. The computer screen saver highlighting the issue can be accessed from Vacha's website.

# Towards a Better Future

It is obvious that status of women in India will remain low if the alarming situation of girls in formative years is not rectified. Glimpses into the life of Balkishoris have confirmed this. As things are, little girls are seen as women in making and often denied right to their own childhood. This becomes more clear when a girl is about to enter puberty stage, a time when her own self concepts are being crystalised. For instance, she begins to keep fasts from this stage to find a good husband, to seek blessings for her family or to confirm her piety. She is taught to give a priority to cook and serve food over her own desire to eat. She begins to worry about her looks and the market forces make her feel inadequate about her appearance. The direct and indirect messages she gets create a low self esteem in her leading to low expectations in life and even tolerance of violence.

One of the reasons for the low status of preadolescent girl is that she is not part of the visible work force. Our study with Balkishoris in Mumbai shows that she does about sixty per cent of the household work that includes fetching water, sweeping, washing, child care, helping in preparing meals and shopping for daily requirements. She spends sixteen hours in school and in housework, leaving hardly any time for rest, recreation or study. In this cosmopolitan city she still drops out of school and awaits an early marriage. Mumbai was the first among industrial cities

in India and there is no reason to believe things are different in other towns and cities.

As Amartya Sen has said, gender inequality is not one phenomenon but many, which will have many and complex solutions. Thus the issue of pre and early adolescent girls is also complex and cannot be handled by covering only one or two aspects. There will have to be policy changes and a multi pronged approach involving all the grassroot level NGOs, academic organizations, children's commission, women's commission, various government departments, people's movement groups, teachers, parents and other concerned individuals. These girls seem to be on nobody's agenda specifically. And their probems are many. Municipal corporations and other state level bodies provide education only up to Class VII. In this terminal system girls would naturally lose hope, interest and drive to study. Parents do not like to invest in time as also in the bus fare and other expenses for sending girls to far away high schools. With the state abdicating its many free facilities for the poor it is unlikely to start high schools in new areas. In Mumbai, girls often find that either there are no high schools teaching through their own languages or they are too far away. Private schools teaching through regional languages have switched over to English medium in a big way. Our study shows that sixty per cent of the girls will drop out after Class VII.

Dissemination materials created in the Balkishori project include an advocacy kit that suggests various initiatives that can be taken at local level by officials and the community. These include providing them nutritional inputs in schools, better health check ups and hygiene, organizing parents-teachers association (these barely exist in State schools), providing help with studies and designing and undertaking studies on the status of Bal kishoris and their needs.

Though needy and deprived, the Balkishoris we met still had spirit and hopes in some ways. They will respond positively to efforts for improving their health and education status.

Among the suggestions that came during the dissemination process was the need to sensitise men and make them active on this issue and to network further with NGOs in organizing health and education fairs, developing co-curricular modules and the Kishori diaries further and continuing dissemination through different programmes.

It is hoped that all concerned will make preadolescent girls's issue their own and all of us will work together for a better future for girls and for the society.

## Vacha's immediate future plans are:

- Evolving a mobile resource centre for girls in the age group 10 -15.
- 2. Enriching the co-curricular modules further.
- Continued advocacy and networking in cooperation with other groups.
- 4. Creating a new diary based on the new insights gained.
- Organising a series of health fairs and other activities for Kishoris in Mumbai and outside.
- 6. Detailed analysis of data and completing and disseminating the final report of the action research project Bal kishori with inclusion of findings from current work on the mobile resource centre for girls from poverty affected families.

We thank all those who have given us support and cooperation at different stages in our work and seek such creative relationships and mutuality in our future work.

# Appendix-1

#### Four Case Studies

#### Kavita

Kavita's father has two wives. Kavita is the fifth daughter. Three daughters are married after studying up to 10th standard. Kavita and two of her unmarried sisters, do not seem to be interested in education. We met Kavita on our first visit to the school, and remembered her because she had expressed the desire to marry after seventh standard. Smart, outspoken but not very popular. It seemed as if her classmates were keeping a distance from her. Why?

During the interview, Kavita had boldly revealed that she wanted to marry early. This was probably because she was more grown up than her classmates. She seemed better off than the others. Her father owns a small ice shop in the vicinity, He migrated to Mumbai after studying up to Xth. Std. Kavita's mother has studied up to Vth. She belongs to a shepherd community from Parbhani district. This is her second marriage. She had one daughter from her earlier marriage. Her first husband died of TB. From her second marriage, she had seven daughters, but only four have survived. She had to delay her sterilization operation because her husband would not agree to it. Finally she took a male family friend and got his signature for the

operation. (We do not understand why the signature was required). During the interview Kavita said, 'Boys hit girls and girls work'. Did Kavita's perception of sex difference reflect her parents' life?

Kavita's school in N ward south, is 'A' grade. One of the teachers with twenty years teaching experience, has won the best teacher award. In this school we came across girls complaining about the peculiar behavior of their teachers. In the same school some boys and girls would sit together and kiss. We found that the older boys in municipal schools are generally drop outs from private schools and are much older than girls.

When we asked the 'award winning teacher' to clarify, she said, 'It is not possible, these girls are so small', she had never heard of this happening.

Of course, this needs to be explored further. We could not take a stand on the issue, because we were there as researchers, and we did not want the girls who had expressed it openly to feel vulnerable. This experience encouraged us to include in our module some basic input for enhancing self-esteem.

Kavita's interesting, spontaneous and intriguing responses during training made us decide to visit her family. Her home is located in the eastern suburb where most people are economically marginalised. They are either self-employed or have varied jobs, while women are busy in some home based industry. Most of the parents are newly settled in this locality after being shunted away from the main city.

Her home is a one 7 x 10 ft. room in a state of disrepair. The only asset in the house was a fan. Her father does not want to spend any money on the house. Her mother works in her husband's shop. She has no say in money matters nor does she get any salary, but gets Rs. 1200/- for monthly household expenses. Kavita's father has a wife in the village. Although Kavita's family has been staying in this house for last 24 years,

her father has not included the names of his wife or daughters in the ration card. A few years back, he brought a boy, who he claimed was his brother's son, and registered his name on the ration card. Kavita's mother thinks that he is his own son. The son is studying in fourth standard and looks after the business accounts for the father. Kavita's mother is trying to get her name included in the ration card.

They cook two kinds of rice, good quality for father and son and coarse variety for mother and daughters. The three older daughters married outside caste and religion of either of their parents. Kavita wants to marry as soon as possible. She fasts every week so that she can get married. She feels that once she gets married her parents would have fewer troubles. This is very much like the other girls in her school who feel sorry for their parents because they perceive that their parents have to sacrifice a lot to send them to school.

Kavita generally has no appetite but "feels very thirsty". She gets chest pain and back pain very often. Like many school children in municipal schools, Kavita does not carry tiffin box but gets Rs. 5/-, which is much more than many of her classmates. Some time back she had an accident; She jammed her fingers in a door. Generally they go to public hospitals but this time Kavita was taken to a private doctor and had to stay for four days in the private nursing home. It cost the family Rs. 1000/- and her father makes an issue of this expenditure, adding to the burden of guilt.

Kavita and her mother are typical of this city. They work hard and get a raw deal in the family, yet their feeling of obligation to the "provider" does not end. The mother feels obliged because it is her second marriage and she has only borne daughters. There is a sense of humiliation and utter helplessness due to lack of support and advice. Her mother feels that Kavita should study because education is an important tool, which she herself has missed.

The Preadolescent Girl

On the other hand, Kavita wants to get married soon. Is she ready for marriage? Has education so far made any sense to her? She looks upon marriage as an escape from her present life despite being witness to her mother's marital plight. It is surprising and disturbing! Can we do something to change her future? Can we give her a different option?

#### Shabana

Displacement due to riots and development projects is part of city life. Communal tension over last few years has disrupted the city. The general belief is that the Muslim people should study in Urdu. We noticed Shabana and decided to visit her home because she studied in Hindi medium school. Her two younger sisters are studying in Urdu medium and her brother, looked upon as the future bread earner, is attending English medium school. A lot of money is spent on the son's education.

Shabana was shifted to Hindi medium due to the riots. She and her family had rushed to the native place during riots and after returning, Shabana was shifted to Hindi medium. After returning to the city her family has shifted house a number of times. They have been able to keep the ration card at one place. They get ration from the old Ration Shop since the owner knows them. This is mainly because changing address on the Ration Card involves a lot of administrative hassles and procedures, loss of time and earning.

Shabana's father drives a rickshaw and also teaches in a driving school. He generally gives Rs. 50/- every day in the house. When more things are required, he gives Rs. 100/-. He visits his native village quite often.

Her mother helps Shabana in her studies. Shabana is observant, receptive, neat and talks very mildly. She is active in most school activities and likes her studies. She appeared well assimilated in the classroom. She wants to work as a teacher or as an office clerk. She likes languages. Being the eldest in

the house, she has to help her mother. They buy wheat flour from the market because her mother has no strength to clean the wheat and go to the *chakki*. Shabana attends morning school and cannot carry a tiffin box. She gets one rupee to buy lunch. What can she get to eat with that rupee? Shabana says she was healthy and chubby as a child. Then she had an accident and burnt her hands. She was treated at a public hospital. The first doctor was very good but not the second. Hence, her fingers are disfigured. She hates her hands. She gets an occasional cold and cough. Her mother has told Shabana about menstruation. At the same time, she hopes that Shabana's menstruation gets delayed by a few years.

Shabana was eager to take us home. Her mother had made special arrangements like painting the fan and making the entrance door colourful. When we went to her house her mother was still in the process of painting. It was very touching. Her house is a 7'x7' size room, congested, dark, with very little ventilation. They have to put on the light even during the day. The house is located in a small lane running parallel to the graveyard. They pay Rs. 800/- as rent and Rs. 200/- for electricity. They get water from a common water tap. The common toilet is dark and dirty. This house is also likely to be demolished like many other houses that the family has lived in. It means one more move in the near future!

Shabana studies in an 'A' Grade school, in the western suburb. The school has 11 teachers, 10 male and 1 female teacher. The children are afraid of the male teachers because they hit very hard. The school has many NGOs and agencies extending support in various ways. Like many municipal schools, it is clean, well maintained, has a water cooler and many flowerpots. Shabana seemed very attentive and responsible. Her idea of fun is taking her brothers and sisters for an outing. Some of her happy days are when her father used to take them out to their grandmother's house. She fears fights in the neighborhood.

The Preadolescent Girl

There is a Club in the *basti* where people become drunk and fight.

Shabana belongs to the city where life is on the move. We lost track of Shabana when she stopped coming for the vacation class. Then she informed us that she would not be able to come because her mother had delivered a baby girl who died soon after birth.

At the age of ten she has lost her childhood and has to work next to her mother. Where will she go? What will she study? Will she get her desired job? Will she become a teacher who beats the erring child? Shabana is scared of beating and violent acts but she accepts teachers who beat students. This is common among the girls we studied. They feel it is acceptable and just for teachers to beat those who have committed mistakes. They do not question whether there are any other ways to improve on mistakes. There is total submissiveness to authority. Is this the start of being passive and docile to husbands? It is important to study these issues in depth and to understand the psychology of these girls, and their concepts of 'right and wrong, just and unjust, punishment and correction".

#### Rosy

Dharavi in 'G North' ward in Mumbai is Asia's largest slum. It was important to select a school from this locality, otherwise the study of the preadolescent girls would have been incomplete. We were also keen to have one representative from a religious and linguistic minority from this locality.

The name Dharavi conjures up images of overcrowded locality, mafia, representation from every part of the country, all sorts of commercial enterprises, vast labyrinth of lanes and bylanes; water shortage, inadequate toilet facilities, overflowing garbage dumps and many leather works and hide cleaning activities. It is a very productive area manufacturing a variety of products including export quality goods. The 1992 communal

riots and globalisation have left an impact on the dynamics of the productive activities, by making them more decentralized.

The family- parents, Rosy, her two brothers and sister, live in a rented house that is a loft in a small hut with a tiled floor. It has a separate entrance from outside via a narrow staircase. The rent is Rs. 500/- and the deposit was Rs.10,000/-. We could smell fish being fried when we entered the room, which was neat, but poorly ventilated. It was divided into two parts a living area, and a kitchen and makeshift bathroom. There were clothes neatly stacked. Rosy's mother does cutting work for tailoring. She earns Rs.10/- to Rs.40/ - daily from stitching clothes, with a supplementary income from her brother. Rosy's mother is more or less house bound since she had fractured her leg.

They are Nadar Tamil Christians. Rosy's father's village is Gangaikondan in Thirunaveli district. Rosy's mother, Teresa was born in Dharavi and has studied till class Xth. Her father David, a daily wage earner, has studied till class V<sup>th</sup> but is currently unemployed. He came here from Tamil Nadu to work. Earlier they lived in her mother's house but when he did not get any job, they sold the house and have been staying in rented places ever since. They have to move every eleven months.

Rosy, the youngest is eleven years old. Her brothers are seventeen and fifteen and her sister is thirteen. The eldest brother works with the local video cablewallah. He studied in SIES School till class X. Earlier he was working as a mechanic in the native place. The second brother studied in Dharavi English School till class V and then learned tailoring but has now run away from home. They have filed a police complaint. Rosy mentioned in the interview that her brother used to sell imported goods and would come home late. This would anger her father and he would become violent. The parents feared that their sons were getting spoilt. Because the area is bad the sisters do not go out except to school. Rosy's sister, Mary who used to study in the same school discontinued studies after class VII because

her mother fractured her leg. The area is cosmopolitan but Rosy has friends only from her own community. We found several cases where boys had run away from home.

Rosy is studying in the local Municipal Tamil School. She is good in her studies and is going to appear for middle school scholarship examinations. There are very few Christian children in Municipal schools. The building, constructed about a year ago, had a huge crack running from top to bottom. Was it safe to be in the building we wondered? This is an obvious sign of apathy in the civil department.

We found the schoolgirls very friendly and frank. Many revealed that their fathers were addicted to alcohol. The parents were involved in various activities like professional ear cleaning, to cutting threads, to selling 'country liquor' and making mobile covers.

We asked why Rosy was not put in a convent school. Her mother gave us several reasons – besides they are Protestant Christians, the Convent School is only till class V, later private schools would charge donation varying from Rs. 500/- to Rs. 8000/-, and the father was keen that the girls study in Tamil. Rosy's mother wants to send Rosy to L K Waghji School, an English Medium with Tamil as a subject. It is difficult for children to cope in English medium schools but parents were usually prepared that children repeat a year. They did not consider it a waste. Rosy's mother was confident that she would pick up within a year. It was nice to see so much confidence in the child. We also felt good that there was so much clarity that the present education which Rosy was getting was not of good quality.

Rosy herself wants to study till class X and then take up tailoring. Rosy seemed a shy girl but popular in her class. She usually watches Tamil TV programmes. She enjoys school but hates the bad words used in school. She was mortally afraid of her father as he was very violent towards all of them. He beats them, kicks them and hits them with footwear. One could

see how the violence has affected Rosy. She is mild and shy and detests violent aggressive acts and words by other classmates

Rosy and her sister have both had a simplified version of the 'Chadang' ceremony in the house. This is a ceremony that Tamils observe on menarche. They just poured water on the heads as they have no place and money to have an elaborate ceremony in Mumbai. These ceremonies require privacy which is not available here. It was surprising that in spite of living in the city for quite some years they carry on such traditions. They have evolved a short cut but it seemed that this ceremony is a must. The Tamil girls in the locality were very aware about menstruation because of the chadang ceremony. They loved attending when other girls' had the ceremony, but hated their own. It must be confusing to live in an urban environment and yet observe the customs of rural life. Are such traditions especially related to menstruation being exploited to keep the girls timid and to make them conscious of becoming women? It seems unbelievable that such situations exist in this era and in Mumbai, which is one of the most cosmopolitan cities of India.

Rosy's idea of fun is dressing up and having fun with others. She loves Christmas and says she was happiest when her father had stopped drinking and beating them for a few months. She quite often mentioned her father's violent behavior in the house.

#### Nisha

Mumbai was originally a city of seven islands, and fisher folk were one of the original inhabitants of this city. Some small villages still exist and have retained their original identity. In a western suburb this school is near one such village.

We were told that one Municipal school that we visited had only one shift because the children go to work. This is questionable because the older school in the locality does have double shifts. In this Municipal school several girls are working in one or the other aspect of fishing trade such as sorting, drying, selling or working in cold storage plants. Some of them start work as early as 4 in the morning. This school has a lot of Muslim students. They live in apartments in a large fortress like colony. They face a lot of restrictions on their mobility, from parents at home. At school the teachers have taken on the onus of controlling their actions and movements. These girls are not allowed to go down during the recess. During one of our sessions, we witnessed the humiliation of one girl who was scolded by the teacher because a boy of her community complained that she was seen downstairs.

We decided to visit Nisha because she seemed so disinterested in everything. She was one girl who could not give any details of her address. This was very unusual. We expected girls to know their addresses since they were from a fishing village defined by boundaries. We also wondered how the postman delivered letters. Just by name? However Nisha was able to take us to her house very easily.

Nisha comes from the Kharva caste (fisher folk) of Gujarat. This makeshift house on the sea front made us think about many aspects of life of these girls and their health. Is it possible to have a good healthy life in the midst of seawater and salty air? The house does not have a good roof, and it is damp and musty. The salt in the air was making our eyes sting and we felt itchy.

On a tour of this village at first we were surprised to see groups of women playing cards in the afternoon. After all the women get to handle money as they are the ones who sell fish. We had visited a temple, which was the boundary of the residential area. Nisha's house was beyond that temple but tangential to it almost in the sea and so technically our information that this temple is the boundary of the village is true. Does that mean Nisha's family does not belong to the village?

Nisha's family is involved in drying and then selling the dry fish. Nisha has three sisters and a brother. Nisha's mother does all the work of drying and selling as well as of looking after the household chores. Elder sister shares mother's responsibilities. This home visit has affected us the most. We had gone to many households but this type of family remained with us in our hearts.

The house was half built. The walls were made of mud and jute, and the floor of chips of tiles. Dampness seeped through. A half wall separated the kitchen and bathroom. There were two mattresses and the few utensils that they had were placed wherever there was space. Nisha's house had a small black and white TV. There were two lights, which had to be on all through the day. We wondered where in such a situation they could dry fish.

The economics was more shocking. The rent of the house was Rs. 700/-. For the illegal electricity connection they paid Rs. 300/- on the first of every month. Their shelter cost them Rs.1000/-. During the rainy season the family is forced to go to their native place in Saurashtra where they stay in rented accommodation. It is cheaper to stay there but there is no means of livelihood there. After five months they come back to Mumbai. This kind of seasonal migration from Mumbai is not very common. Especially as at this time the dry fish business would fetch a better income. In her interview Nisha had said she did not remember her native place. Why did she say so? We have no answer.

Nisha is studying in class VII. She is not keen to study. There is hardly any atmosphere to study or to retain any interest in studies. Her elder sister, one year older to Nisha helps her mother. We had interviewed her last year. Nisha also may leave the school next year, especially when there is not going to be a secondary section in the present school. The secondary Gujarati medium school is far from their residence, and it would involve a lot of expense to travel everyday by bus. This situation is not conducive to continuing education. We did ask about Nisha's plan for the next year. They replied with a question: what would be the effect of leaving studies? It means share some work and roam around the place. We were shocked to learn that they

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had been living in this house on rent for the last forty years, with the rent escalating every year. The rental accommodation has remained permanent because of an old contract that is before the Rent Act came into the picture. While narrating the economics of the family we came to know that the land used for drying the fish is also rented and is shared by three families. It costs Rs. 1000/- per year.

Nisha's mother is illiterate. She is the one responsible for the household. She looks after the children and manages the expenses. She is capable of doing all this though she lacks formal education. She does not understand even the numbers on currency notes, which she recognises by their colour. Her argument was touching. She has done well all these years. She feels that there are good people with whom she has worked and managed the money all through her life. We did not ask her about the studies of the children and how she manages that aspect of their lives. She has only one serious worry, how to make two ends meet.

There was no obvious illness in the house. But the atmosphere looked like a breeding ground of illness. Nisha's elder sister wore a lot of artificial jewelry. The dampness and salt air has affected her skin. Her mother, who works most of the time with water, has developed a fungal infection. All the brothers and sisters look sick. They go to a private clinic for treatment. We were supposed to discuss health with them but we could not find a moment to ask all those details.

Her mother said she had not told Nisha about menstruation. The elder daughter gets it and Nisha had some knowledge because of that. The brother gets preferential treatment like other households. The father is least concerned about studies or household. Mother is interested in marrying the daughter as soon as she finds an appropriate match.

# Appendix II

Some participants could not reach the venue due to a major derailment. Following is the list of participants who attended the National Consultation, February 2002.

- Ammu Joseph: Journalist
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- Anita Rampal:
   National Literacy Resource Centre,
   LBS National Academy of Administration,
   Mussorie, Uttaranchal Pradesh, 248179
- Asha Khanvilkar:
   Avehi Audio-Visual Education Resource Centre
   Raoli Camp, Sardar Nagar 4, Sion Koliwada,
   Mumbai 400037
- Bela Vaghela:

   Olakh 24, Jalaram Park,
   Harani Rd., Vadodara
- Chetna Desai:
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   Rd. No. 86, Off Gokhale Rd.,
   Dadar (W), Mumbai 400028

#### 6. Flavia Agnes:

Majlis,

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#### 7. Farida Lambay:

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- Geeta Seshu: Journalist
   Varun, Carter Road, Mumbai 400050
- Jaya Velankar: Social Activist
   A 201 Govind Gopal Soc, Ashok Nagar Cross Rd., Kandivili (E), Mumbai 101
- Jyoti Punwani: Journalist
   A/63 Flower Queen, Veera Desai Rd.,
   Andheri (W) Mumbai 400058
- Kamakshi Bhate: Health Activist Karmashetra, 135, B/2, Sion-Koliwada, Near Shanmukhanada Hall, Mumbai 22

#### 12. Lata Desai:

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#### 13. Maithreyi Krishnaraj:

Women's Studies Scholar Grover Soc. A6/3, Jeevan Bima Nagar, Borivli (W), Mumbai 103

#### 14. Madhuri Rao:

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#### 15. Mamta Baxi:

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#### 16. Mamata Dash:

Action India. 5/24 Jangapura B, New Delhi 110014

#### 17. Malini Karkal:

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#### 18. Mansoor:

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#### 19. Medha S. S .:

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#### 20. Meena Gopal:

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# Meena Menon: Journalist Madhyam Soc., M. G. Rd., Goregaon (W), Mumbai 400058

#### 22. Meera Limaye:

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#### 23. Neha Madhiwala:

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   navtej@vsnl.com
- 25. Pramod Majumdar: Journalist Bhagyalaxmi Co-op Housing Soc., Pt. Deendayal Marg, Ramnagar, Dombivili (E), Dist.: Thane
- 26. Pratibha Bapat: Bailancho Saad C/o 304 Prema Bldg., Rua De Qurem, Panaji, 403001 Tel. (0832) 432 460 E-Mail: addressalal@goatelecom.com
- 27 Preeti Bhat:
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- 28. Rekha Lele:
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  Goregaon, (W), mumbai 62 tel. 8720638
- 29. Sabla: Health & Gender Activist A/201 Vasant View, D'Monte Lane, Orlem, Malad (W) Mumbai 400064
- 30. N. B. Sarojini:SAMAJ- 59, 2<sup>nd</sup> Floor, Saket, New Delhi, 110017
- Savita Nimkar:
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   Pandita Ramabai Marg, Chowpatty,
   Mumbai 400007

#### 32. Seemantini Dhuru:

Avehi-Abacus Project, Filmmaker K. K. Marg, Municipal School, Jacob Circle, Mahalakshmi, Mumbai 400011

#### 33. Sushmita Mukherjee:

Action India 5/24 Jangapura B, New Delhi 110014

#### 34. Vibhuti Patel

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#### 35. Vijaya Rajwade: Social Activist B 302, Amisha Apts., Laxman Mhatre Road, Navgaon, Dahisar, Mumbai 400068

#### 36. Vimla Nadkarni:

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#### 37. Vimal Shahapurkar:

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#### 38. Yasmeen Aga:

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# Appendix-III

#### List of Vacha Publications and Resource Production

- Vardhana/The Woman of Age Report of a national consultation on the status of women and ageing in India.
- · Rebecca Reuben (1889-1957), a scholar, educationist and community leader (a biography)
- On Being Jewish, Indian and Women, a set of documents.
- Women's Question, a Quiz Book with 350 questions on women in different spheres.
- Geet Vacha (Multilingual), a song book for women and young adults
- Apani Behenoke Saath (Hindi), audio cassette documenting documenting songs from Women's Movement
- Sarkhi Saheli (Gujarati), audio cassette of songs for women's empowerment in folk style
- · Kishori Geet (Hindi), songs of girlhood
- Bheetar Bahe Muktidhara/The Stream Within (Hindi, Marathi, Guj. And with English subtitles), Video documentary on forgotten women leaders from

- Independence struggle.
- Safia Khan ki Talaashme/In Search of Safia Khan (Hindi/English), a video documentary on the head of the women's volunteer corps of Indian National Congress in Mumbai.
- · A short documentary on Project Kishori
- · A Poster on empowerment of girls
- A Computer Screen Saver to support girls from disadvantaged family
- Kishori Diary for girls

## **Forthcoming:**

- · A training Manual for Health Workers (Hindi)
- Jewish, Indian and Women (documents to come in book form, English
- · A set of articles on women's issues (Guj.)
- Illustrated material for gender and health training (Marathi and Hindi)
- A cassette of songs on gender, peace and environment
- A collection of women's narratives on their political participation in India's freedom struggle and their withdrawal from public life later (Eng./Guj.)
- A book on traditional games played by women (Marathi)