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Empowering change and harnessing a transformative approach to become invaluable. The Pioneer brings to you our interaction with Seema Bhaskaran, the Lead for Gender at Transform Rural India, who is working towards embracing gender change.

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ender equality is themost coveted state of affairs that our country has long craved. Gender equality is now a social and economic challenge as well as a moral obligation. Despite its many accomplishments, India is still underappreciated when it comes to gender equality. And then there is Seema Bhaskaran, the Lead for Gender at Transform Rural India, whose expertise in gender issues and community development makes her an invaluable resource.

Basically, her initial work with the Centre for Social Studies, where she documented the work of organisations working with women, helped her understand the importance of a multidimensional approach where the perspectives of many stakeholders can converge seamlessly. The leadbegins, "My interactions with

activists and academicians from the women's movement further sharpened my analytical and nuanced understanding of gender equality. Later, I worked on gender and decentralisation with Sakhi and KILA (the Kerala Instituteof Local Administration), I developed modules and manuals and also trained elected representatives and Panchayat officials in areas like status studies of women, gender planning, budgeting, and auditing."

As the state project director of the Mahila Samakhya programme under the erstwhile Ministry of Human Resource Development (MHRD), her work focused on developing federations of women working towards gender equality and gendereducation ofteachers. The work also entailed starting help desks in all schools in Kerala and working on the educational retention of children in difficult circumstances as well as the survivors of child sexu-

"In MHRD, I worked on the implementa-tion of the Right to Education by strengthening educational systems to retain children from marginalised communities in the education stream. As a technical expert on gender and social inclusion in the National Rural Livelihoods Mission, I worked on developing curriculum, modules, manuals, protocols, and advisories for gender and social inclusion and supported all states of India in developing gender operational strategies and implementation, shares Seema, adding that the focus was on the capacity building of staff, cadres, institutional mechanisms, and strengthening institutional mechanisms for action. "Interventions on gender equality and inter- to bring equal opportunities to rural India.





facing with the public system were also part of the process. This journey across the country has been instrumental in shaping my insights on gender equality. Through Transform Rural India (TRI), the endeavour has been to work through a gender transformative lens and a multi-dimensional and multi-sectoral approach towards quality-of-life

The initial eye-opener for her was when she was looking at the lives of women from Safai Sathi communities and fisherfolk communi-ties who faced extreme forms of deprivation. This helped her understand the concept of intersectionality very early in her childhood. And so, "I witnessed inequities and discrimnation experiencedby women from matrilineal communities and the domestic violence they were subjected to despite having land ownership, and this ledme to question, introspect, and analyse the reasons behind these paradoxical situations. Instances of child sexual abuse inmatrilineal homes also ledto questions regarding the safety and security within a homeand the institution of the family, My early association with the womens movement and participation led to a sharper and more nuanced understanding of gender rights, My education at TISS (Tata Institute of Social Sciences) promoted an even deeper academic understanding of gender issues."

Just like many, she too wishes there were a silverbullet to fix gender inequality, but sadly, there is not. That is why the only real solution she feels is a multidimensional approach-a multiplicity of strategies. It is also important

In rural India, thetopic of domestic violence is much easier to talk about than that of sexual health. Public spaces for women to discuss gender issues are extremely limited. Gender ssues ranging from menstruation, reproductive health, control over body and fertility, spacing pregnancies, use of contraception, abortions, domestic violence, and marital rape are aboo subjects. However, she shares, "Due to the growth of SHG-federations, women now have a platform to discuss aspects of financial inclusion. With attempts to integrate gender within the SHG network and develop institutional mechanisms, space has been developed for voicing issues of domestic violence too. Discussion on the Domestic Violence Act has been undertaken through campaigns by the Ministry of Women and Child Development, and women in rural areas have been informed about the One-Stop Centre where they can seek rehabilitative services. Discussions around the body and sexuality are still, however, curtailed by taboos. Efforts to introduce them into the school curriculum have failed, Patriarchy continues to decide on the age of marriage, number, and preferred gender of the child while family planning and spacing are done via the instrumentation of women's bodies."

Irrespective of Janani Janma Suraksha's aim to enhance reproductive health services. women's decision-making power regarding their bodies and fertility remained constrained within the patriarchal family structure. In such cases, "SHG networks and ASHA services have been instrumental in accessing entitlements under the National Food Security Act, the National Social Assistance

ical in enabling access to reproductive health services, especially institutional delivery. Despite awareness, the fear of institutional delivery is high due to the lack of facilities in the labour room and a gender-insensitive envisonment. The behaviour of care providers also restricts women from accessing primary health centres in underserved areas, Social norms stemming from patriarchy have been difficult to change, and decision-making over Ertility can be improved only through womens knowledge enhancement on reproductive health and sexuality. Adolescent education on sexual and reproductive health can be imparted through Anganwadis."

Children, adolescents, and youth are bom-barded with distorted information, often leading to perverse notions and a debilitating escalation in sexual violence and rape. Women and children face the brunt of this and are scarred for life. And so, in such cases, "sex education would, on theother hand, provide adoescents and youth with scientific information. This would lead to enhanced control over the body and fertility and informed choices regarding marriage and contraception. It will also improve health-seeking behaviour and dispel false notions and misconceptions about masculinity and femininity. It will also enhance bodily agency and the understanding of reproductive rights. Very early on in my career, I realised that regressive ideas about women and their bodies are not just rooted in person al prejudices but stem from institutional beliefs thatneed to be addressed—the system needs changing if there is to be change at a macro scale. Young girls can be educated through the school curriculum. Adolescent clubs and the health and nutrition programmes in Anganwadis in rural areas can also be leveraged for sex education. The theme can also be introduced through a life-skill educational module."

The Mahila Samakhya programme under the Ministry of Human Resources Development, which focused on the educational empowerment of women, was a good example of providing sex education. Sex education was provided through Mahila Shikshan Kendras and Kasturba Gandhi Ballika Vidyalayas managed by Mahila Samakhya. Sex education was undertaken in schools among girl children in rural areas as well. It was packaged as part of life skills education and led to enhanced confidenceamong girls. Educational mobility was enhanced, As was the awareness among women to educate children and report violations of rights.