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ARTICLES

EDITORIAL

At the outset we would like to express our apology for the delays in publishing this issue due to a variety of reasons. However, we are pleased to share this issue of Social Work Journal, Assam University which includes thirteen contributions from academicians and researchers across different universities in the country. This issue is a generic one and therefore it brings together research papers and articles on a variety of issues. On the one hand, five articles discuss national and international issues that need attention of social workers such as–role of families and other care groups for vulnerable groups, community based environmental activism, inter-relationship between women and water, impact of parental violence on children and distance learning in social work education. On the other hand, one article and seven research papers present region-specific issues such as–situation of homeless population in Mumbai, traditional systems of administration and governance among *Kuki* tribes in Manipur, forced marriages in *Jhajjar* district of Haryana, impact of armed conflict on women in Kashmir, *adivasi* identity and accommodation in Assam, health concerns of truckers in Tughlakabad, Delhi, and health services in Manipur.

In the first article 'Family as a Cradle of Nurturance: Challenges and Ethical Dilemmas for Social Work Profession in India', Neelam Sukhramani and Shweta Verma challenge the movement towards deinstitutionalization which they view as an extension of the philosophy of normalization. They have systematically presented the article in five sections. In the beginning they provide a brief overview of research that has been undertaken to examine the care options for vulnerable groups. Following which they provide a framework to analyze family functioning. This is followed by detailed review of literature specific to the strengths and limitations of Indian families. The challenges and ethical dilemmas which surround the universal conception of family as a cradle of nurturance are examined in the subsequent section. Finally they present the way forward wherein they emphasise on the role of the State in India to provide services that could enable the families to perform their caregiving roles with respect to individual members having specific needs. The authors highlight that while addressing problems of individuals in the families, social workers should ensure that individual ideologies do not interfere with the intervention process. At the

same time it is extremely important to focus on policy interventions so that requisite support services are available for families.

In the second article, 'Fostering Community Based Environmental Activism: Role of Social Capital', Molankal Gangabhushan M. highlights the environmental crisis that is being witnessed around the world today and then makes a case for promoting environmental sustainability through community participation. He argues that environmental activism depends on existing social capital in the communities and strong social capital paves the way towards a symbiotic relationship between people and environment. He further states that strong social capital fostered through environmental activism might develop environmental consciousness which will lead to development of shared interests, common identity and a commitment to the common good. After highlighting the importance of environmental activism, the author outlines the role of social work profession in planning stages of any new environmental state. He critiques social work profession for focussing only on social environment of the people and ignoring the natural environment altogether. He emphasises that protecting people and the natural environment through sustainable development is arguably the fullest realization of the person-in-environment perspective of social work. Finally he delineates the major strategies that have been utilized by practitioners and activists to realize the aim of sustainable development.

The third article, 'Living on the edge: Scoping Study of Homeless in M East Ward, Mumbai', is based on a research study which was conducted with the purpose of building an understanding of the nature and volume of people living on the streets of M-Ward (E), Mumbai. In the beginning, through a brief but in-depth literature review, Roshni Nair and Vijay Raghavan highlight the extent and structural roots of homelessness as well as the problems associated with it. Through a description of the process of data collection, the authors not only highlight the difficulties involved in enumerating homeless population but also the difficult situations in which homeless people sleep at night. The empirical findings of the study describe the extent of homelessness and concur with the literature that documents the problems associated with homelessness. In addition, case studies highlight various issues of health, mental health, lack of access to education, etc. that homeless people have to cope with every day. Finally, the authors make certain recommendations to improve the conditions of homeless population in M-East ward in Mumbai. They argue that although these recommendations have been made based on a survey conducted in a specific area in Mumbai, they might as well be applicable for improving the conditions of homeless population in general.

In the paper, 'Kuki Traditional Institutions and Development: Role of Village Chiefs in Manipur', Khaikhohauh Gangte, Mangcha Touthang and Easwaran Kanagaraj present the findings of a research study aimed at understanding the perception of traditional village chiefs about their roles in village development as well as the role actually played by them in the development of *Kuki* villages. In the process they have critically examined the role of traditional institution of administration called *Housa* (Chieftainship) with regard to *Kuki* tribe of Manipur.

They highlight that the role played by traditional chieftains in day-to-day administration of *Kuki* areas is far from satisfactory. On the basis of their interactions with people in the study area, the authors discuss the problems faced by people such as nepotism and negligence in the functioning of the chieftains. Moreover, they highlight the oppressive nature of the chieftains and the voiceless and powerless situation of the people in this traditional system of governance and administration. On the basis of their findings, the authors make a recommendation for democratizing *Kuki* society by introducing at-least a two-tier *Panchayati Raj System.* Finally, they highlight the importance of generating awareness among the *Kuki* people about democratic decentralization and people's participation in development.

In the next paper, 'We want Daughters-in-Law, not Daughters: Forced Marriages in Jhajjar District of Haryana, India', Pamela Singla, by taking the case of Jhajjar district in Haryana which has the worst sex-ratio in the country, attempts to unknot the multiple interests and circumstances surrounding forced marriages. Using both quantitative data (of a study conducted in 2010) and qualitative data (narratives of forced marriages), the author is able to highlight the draconian situation that exists for females in Haryana. But the most important linkage that the author establishes is between human trafficking and forced marriages which has arisen due to a skewed sex-ratio in Haryana.

In the sixth paper, 'Silent Screams: A Gender Analysis of Kashmir Conflict', Bhat Iqbal Majeed and Yasir Hamid Bhat present the impact of armed violence on women in Kashmir who are usually rather mistakenly considered as only indirect victims. In order to develop an in-depth understanding of the above mentioned impact, authors have aptly considered hermeneutic methodology to capture the lived experiences of women who have been victims of violence in last thirteen years in Anantnag region of Kashmir valley. What is even more striking is that the majority of women whose experiences they have captured are the most vulnerable, that is, they are – women, muslim, kashmiri, illiterate, unemployed and lastly rural. While presenting their analysis, authors have fused the secondary literature explaining impact of violence on women with primary data, that is, narratives of Kashmiri women. In the final discussion the authors argue that the conflict leads to an odd phenomenon for women, exacerbating pre-existing inequality, forced early marriages, financial vulnerability, restriction of their movement, and lack of access to resources, such as health, education and other basic goods and services, and more importantly greater male dominance. Thus, the paper is as attempt to fill a major gap in literature on Kashmir valley (which largely focuses on only economic and political aspects).

In the seventh article, 'Understanding the Issue of Access to Water: Examining the Relationship of Water with Women through Different Disciplinary Lenses', Kopal Chaube Dutta provides an analysis of literature that explores the relationship between women and water. She bases her arguments on feminist economic critique of treating water as an economic good. She argues that issue of access to water becomes problematic if we treat water as an economic good because of negatively skewed presence of women in the market as well as problems of valuation in non market spaces. By examining literature in the fields

of – gender studies, livelihoods approach and geography; the author has identified different themes that explain the issues of access to water as well as the inter-relationship between women and water.

Harsha S. in the article 'Adivasi Identity and Accommodation in Assam' reviews the issues of tribals in Assam who are the tea garden workers; and those who left the tea gardens due to exploitation and neglect by the state and rival ethnic groups of Assam. He argues that to ensure the safety of tribals and representation of their voice, both ST status and accommodating them in the existing institutions through consociational arrangements is essential.

In the paper 'Health Concerns of Truckers in Tughlakabad, Delhi: Need for Social Work Intervention', Ali Azam and Bindya Narang use a cross sectional study design to examine the self-perceived well-being and health concerns of fifteen truck drivers, twenty helpers and allied workers in Tughlakabad Transshipment Location Area, Delhi. The authors report that travelling long distances make the truckers engage in substance abuse and drugs to get relief from anxiety, stress, and tiredness or to enhance sexual stimulation. This makes them a 'high risk group' with regard to HIV/STDs. On the basis of the findings of their research, the authors recommend that more studies on the morbidities of long distance truckers with a larger sample are required for assessing the general health concerns of truckers and to plan health and safety interventions for and with them.

Sword Ronra Shimray and M. Tineshowri Devi in 'Purview of Health Care services in Ukhrul District of Manipur', present the findings of services provided by both government and private hospitals in Ukhrul district of Manipur who have utilized the health services in Women Reproductive Department, TB Department and HIV/AIDS Department. The study findings reveal that there is non-availability of health care services in government hospital due to shortage of medicines, health care providers, technicians, ambulance, and due to geographical terrain and poor road conditions, strikes and bandhs lead to inaccessibility in utilizing the health services. The interviews reveal the significance of traditional and religious practices in addressing the health issues among the tangkhuls in Ukhrul District of Manipur.

Seema Naaz in 'Growing Up with Intra-Parental Violence' illustrates the implications of Intra-Parental Violence/Intimate-Partner violence for both the victims and perpetrators. She further argues that there are devastating effects on emotional, cognitive and physical health of those children who are raised in an environment of conflict and abuse. Finally, the author recommends the role of social workers in educating the public, advocating for stringent laws for protection of the child witnesses and victims of violence, and stronger punishments for the offenders.

In the twelfth article 'The Built Environment and Social Work Intervention with Youth in an Unauthorized Colony of Delhi' Habeebul Rahiman and Ali Azam assess both quantitatively and qualitatively "the built environment and the aspiration of youth" in an unauthorised colony of Abul Fazal Enclave situated in South East district of Delhi. They argue that failure of the administration and government makes the colony vulnerable to survive in poorly built environment

and makes the youth to compromise with inadequate civic amenities. The authors finally delineate the role of social workers in dealing with issues of youth in this unauthorised colony of Delhi.

The last article by Kaushalendra Pratap Singh, 'Programme Delivery System 'In Social Work through Open and Distance Learning (ODL): An IGNOU Model' highlights the various programme delivery systems used in offering social work programme through ODL system. The author posits that the curriculum has been designed to help the learner in gaining knowledge, information and the much needed skills for working with disadvantaged sections in the society. The author emphasizes that quality education in social work through ODL system can be ensured if all the methods are successfully delivered to the learners at their door steps.

M. Tineshowri Devi and Kaivalya T. Desai

Family as a Cradle of Nurturance: Challenges and Ethical Dilemmas for Social Work Profession in India

Neelam Sukhramani & Shweta Verma

The article challenges the philosophy of normalization using the context of India. Emphasis on deinstitutionalization and belief in the family as a cradle of nurturance runs the risk of further marginalization of those already marginalized. Social Workers in the Indian context are posed with ethical dilemmas. On one hand, they are confronted with the challenges that Indian families are facing today. On the other hand, is the practical absence of institutionalized services that would offer support or interim respite to the family! The dilemma is regarding navigating this crossroad so as to secure the best interests of the vulnerable sections.

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Introduction

The philosophy of normalization took firm ground in the 1970's. Even though initially visualized in the context of persons with intellectual impairment, it started gaining credence even with respect to other groups such as the older persons, persons with physical and mental impairments (Sheafor *et al.,* 1997). The attempt was to prevent alienation. The idea was to foster conditions wherein despite any disability, individuals were provided with patterns and conditions of everyday life that are as close as possible to the norms and patterns of mainstream society.

The movement for deinstitutionalization could also be seen as an extension of the philosophy of normalization while there were reasons of cost also associated with it. The States across the world were of the opinion that institutional care of the nature where the person lived 24×7 with all responsibilities assumed by the institutional management was not proving to be an economically viable option. In the Indian context, as well, this trend has been acknowledged and witnessed in respect of persons with disability including persons with mental illness, older

persons and children in need of care and protection. Research world over has also pointed to the benefits of deinstitutionalization.

There are however analysts who through an examination of prior research suggest that despite a lot of research having been undertaken on the detrimental effects of institutional care, there is little evidence which would enable recommendations about what types of children are likely to benefit from what type of residential settings. In the absence of evidence, policies as well as specific decisions are governed by ideology (Little *et al.,* 2005).

It is the above backdrop that prompts the present article. It begins by providing a brief overview of research that has been undertaken to examine the care options for vulnerable groups. This is followed by a framework to analyze the family functioning. Literature that throws light on the strengths and limitations of Indian families is subsequently examined. The challenges and ethical dilemmas which surround the universal conception of family as a cradle of nurturance are examined in the subsequent section. Finally options for future are presented.

Debunking   Institutionalization

It has often been argued that institutional care cannot provide an enabling environment in the same way that a family can. Large institutions have been criticized for not being able to provide individualized services and opportunities that would benefit each individual. In a study that was carried out to assess individual differences among young children raised in institutions and those raised in families in Romania, it was found that children raised in institutions demonstrated marked delays in cognitive development, poorer physical growth and marked deficits in competence (Smyke *et al.,* 2007). These findings suggest that in institutional care, a person is likely to get limited opportunities for development. An institution can become restrictive in the guise of safety. Focus in institutions can often be on administration and management of quantity instead of quality of care. Hence, while an institution may be able to ensure accommodation, food, health services, education (where needed) for everyone, it may not be able to accommodate individualized needs in respect of each of these aspects. Based on all these factors, institutionalization has been criticized and emphasis has been more on deinstitutionalization and linking people back with communities.

People with mental illness have probably been one of the most impacted groups vis-à-vis institutionalization. The concept of institutionalization has often been challenged with the argument that institutions were created to protect the society from certain groups instead of protecting and ensuring rights of these very groups. People with mental illness have been among the common victims of this perspective. However, the adoption of 'Principles for protection of persons with mental illness and the improvement of mental health care' by the United Nations (UN) General Assembly (1991) became a significant milestone emphasizing rights of people with mental illness. These principles included the rights of people with mental illness to live and work in the community and be treated and cared for within their communities as far as possible. On these lines, mental health reforms were carried out in Sweden primarily with the objective of deinstitutionalization of

persons with mental illness. A study was carried out to investigate the changes in the population of people with severe mental illness five years after the reform. The study with the help of a comparison between the pre-reform period and post-reform period found that the group in the post-reform period had fewer unmet needs. There was a significant enhancement in the number of people with severe mental illness living with their domestic partner and children (Arvidsson, 2005).

Another study was conducted in Croatia to compare the life circumstances and behavioral and emotional problems of children (10–16 yrs) in relation to type of out-of-home placement. The sample consisted of residents from all fourteen State run children's homes, seventy-nine foster families, two types of group home placements as well as, for comparative purposes, children living with their biological families. A cross-sectional analysis of results showed that children living in the children's homes manifested more behavioral and emotional problems than did the other groups of children in out of home care. Furthermore, children living in foster families and group homes and integrated in the community did not differ from a comparative group of children living in primary families. Based upon the results, the researchers suggest the need for providing assistance to the families to prevent out of home placement (Ajdukovic and Franz, 2005).

The policy of deinstitutionalization in the United Kingdom has meant that individuals with intellectual disability remain within the family home as long as possible. Definitely caring in the case of persons with intellectual disability continues from childhood and long into adulthood. The UK government was thus trying to identify future housing needs of dependents with intellectual disability residing with older carers. To this effect a qualitative study was commissioned which covered 28 older care givers above the age of 65 years. The responses of the family carers clearly indicate a preference for caring within the family. They despise residential care and there are times when even discussions on the same result in the intellectually disabled person responding with disagreement (Gilbert *et al.,* 2008). In the Indian context, critics of institutionalization refer to the physical environment of the children's institutions as appalling. 'Armed doors and high walls, especially of statutory institutions give the impression of prisons rather than substitute homes' (Nayak, 2012, p. 410).

The Convention on the Rights of the Child (CRC) recognizes that the full and harmonious development of the child's personality can be made possible in a family environment. Institutional Care is considered to be detrimental to the mental, behavioral, emotional and social development of young children. Young children in institutional care are extremely vulnerable to medical and psychological problems (Task force, Non Institutional form for Child Care *et al.,* 2010). UN Convention on the rights of persons with disabilities also states that all persons with disabilities have right 'to live in the community, with choices equal to others'.

A natural offshoot of the above discussion is the need to examine family as an option for individuals in distress. It is worthwhile to look at certain frameworks which operate as lenses to look at families.

Understanding   Families

Weinhold and Weinhold (1993) offer two contrasting models of family life – 'Dominator Families' and 'Partnership Families'. The dominator families present a hierarchical model in which those who are more powerful use violence and threats of violence to exploit, victimize and control those who are weaker. These families are also characterized by rigid and compulsive rules, a resistance to change and no support for feelings. Contrary to this, partnership families exhibit open communication, flexible rules, shared decision making and discipline based on respect and trust. While no family may have all the characteristics of either of these models; the characteristics of the dominator model are far more common in families in most countries of the world than those of the partnership model.

Families have also been classified according to the way they deal with stress**.** McKenry and Price (2005) have mentioned two such classifications discussed by Boss (2002) – families with 'mastery orientation' and families with 'fatalistic orientation'. While the families with 'mastery' orientation believe that they can solve any problem that they face, those with 'fatalistic' orientation are likely to believe that all events are predetermined and controled by the higher power and hence not under their own control.

Another classification of families is offered by Jordan (1972) based upon the nature of emotional ties. Families are classified as 'integrative' and 'centrifugal families'. Emotional patterns of families are related with their broader patterns of social interactions. Jordan relates the patterns of very close emotional ties with integrative families. Pattern of families where members seek to escape from all involvement with each other by fleeing from the family into the outside world is linked with centrifugal families. Hence the integrative families come together at the time of stress and try to create harmony and like thinking while centrifugal families try to move away from the source of difficulties. Integrative families are generally withdrawn from the outside world.

Families in India

Given the diversity of cultures within the Indian society, it may probably be improper to make generalizations about families in India. Nonetheless literature provides us certain glimpses of different shades of families in India. This section would thus attempt to document them keeping in view the impact that they have on the ability of the family to perform their roles of nurturance, care and protection.

One of theme that dominates literature on Indian families is the changes being witnessed by it. The disintegration of the joint household and nuclearisation is one such change that is often talked about. However to conceive of the changes in the joint household as universal may be erroneous. Nonetheless the increased migration from rural to urban areas on account of industrialization resulting in changes within the family is not disputed by many. Migration necessitated on account of economic reasons propels engagement of both the male and the female adult members in pursuits beyond the home. For younger

children the economic engagement of both parents accompanied with limited social networks increases the probability of child neglect. For the children who are not so young, the responsibility of either child rearing or contributing to the income of the family is a common occurrence. M.N. Srinivas (1960) cited in Choudhury (2007) states that girls learn to be mothers even before they are wives. Additionally, economic exploitation and concomitant frustration, at times, becomes a trigger for family violence.

Seasonal migration in lean periods is also a common occurrence. The implications of this for the family are very different. Seasonal migrations usually involve the moving of several families from a same geographical area. While the social support is available in such circumstances (Deshingkar & Start, 2003), the economic compulsions on families are grave. Families may already be indebted and the seasonal migration may be for the purposes of relieving them of the bondage. These economic compulsions also drive the children to work along with the family. While migration is a common phenomenon, policy level measures are inadequate in dealing with issues that arise (ibid.). Hence migrant laborers and their families do not get access to welfare schemes and basic facilities. Seasonal migration also implies that the possibilities for education of children are minimized. Even though certain educational initiatives of the government such as Sarva Shiksha Abhiyan recognize this phenomenon, there is seldom any substantive effort to bridge the gap in education. For seasonal migrants, issues of not being a domicile of that place mean the difficulty in accessing any services such as the public distribution system. Health care needs are also minimally addressed given the economic compulsions coupled with weak functioning of the health system. In a situation where their own basic needs are denied, the issue that arises is the capacity of the family to fulfill the needs of members with special needs.

Transnational families have also now emerged with migration and sometimes settlement of members in a country different from the one of origin. Transnational families have been defined to be those which display 'sustained ties of family members and kinship networks across the borders of multiple nation states' and involves 'the creation and maintenance of a feeling of a belonging across two or more national boundaries, through the long- or short-term migration and settlement of some family members' (McCarthy & Edwards, 2011, p. 187–188). Transnational family system sometimes leaves older people of the family unattended, in India. In such cases, it becomes important to ensure the safety of older people and their access to support systems.

The influences of modernization and westernization also seem to be impacting families who have attained a certain degree of economic stability. Priyabadini (2007) using prior research suggests that exposure to western ideas has brought about a change in the parenting methods of guidance, discipline and rearing. However since the traditional attitudes have not been totally abandoned, parents alternate between permissive and strict authoritarian child rearing techniques. The result is anxiety and confusion in children making them more vulnerable to behavioral and emotional disorders. In economically stable families, Priyabadini comments that childhood is also filled with responsibility and pressure to achieve.

Adams (2004) has written about international family experiences in respect of marriage/divorce/remarriage, fertility, socialization and gender. J.P. Singh's article in the author's edited book on international families is used to present a perspective on Indian families. One of the aspects highlighted is the change being witnessed in marriages in the urban context. Marriages are no longer considered a divine match or a sacred union in the urban Indian context leading to an increase in the divorce rates. The changes in the family economics from being producing and consuming units to only consumers has also resulted in limited reason to tolerate marital relationships that are not working out. Commenting on the dimension of fertility, it is stated that fertility reduction has happened in urban India but not in rural India. India is also an example of extreme differentiation in the nature of socialization provided to girls and boys. Since the preference for sons is very strong, girls are reported to be neglected. Girls may be so neglected that it may affect their feeling of self worth as well. Indian families also offer limited choices on mate selection to young boys and girls in rural areas. Family violence on account of non adherence to gender roles and responsibilities is also common in Indian families.

Hierarchy and differentiation based upon gender and age are also mentioned by other scholars. Kakkar (1978) mentions that elder and male members of the family yield more power as compared to the younger and female members. Menon (2000) states that, the women members of the family are expected to be upholding the moral standards. These moral standards are purportedly rooted in the religious ideology. Raval *et al.,* (2010) reiterate that females are considered to be the harbingers of the family's ethical standards. In their study on adolescent girls who had run away from home with their male friend with the intention of marrying them, an exploration of the life of the girls' prior to running away revealed that their family life prior to fleeing was marked by harsh treatment from family members all through their life. Some of the participants also mentioned their mothers being victims of domestic violence. In another study carried out in Tamil Nadu on 64 women to understand their perceptions of domestic violence as well as their help seeking behavior, it was found that only one woman mentioned not having experiencing domestic violence in one year prior to the study. Only half of the women reported that they would seek help if the abuse occurred. The researchers opine that although women's personal rights to education, employment have been recognized, traditional patriarchal societal standards have not weakened (Tichy *et al.,* 2009). The National Family Health Survey – 3 data reveals that 34% of all women age 15 – 49 years have experienced physical violence at any time since the age of 15 years. 9% of all ever-married women in the age group of 15 – 49 years reported having experienced sexual violence at sometime during their life time. Regarding help seeking behavior, one in four women have sought help to end violence. Further, two out of the three women who have ever experienced violence have not only ever sought help but have never told anyone about violence. 'Life events of an individual born into an Indian family are totally gendered………..The expectation for conformity to social norms (socialization patterns), access to education, role and status in marriage, and family are also gendered. Hence, gender based inequalities permeate the

very fabric of family and cultural life in India' (Choudhury, 2007, p. 18).

Along with prevalence of gender based violence, India also witnesses abuse of children. In a national study on child abuse that was commissioned by the government of India, it was found that approximately two out of every three children in India were victims of physical, emotional or sexual abuse. Alarmingly 89% of the crimes are perpetrated by family members (Ministry of Women and Child Development, Government of India, 2007). Saha *et al,.* (2008) using a specific case of childhood abuse leading to repeated suicidal attempts in an adolescent, also highlight the limitations of parenting skills in India. Parents lack skills of anger management and disciplining children through non physical means. Parents with a prior history of abusing their children find it difficult to control their emotional outbursts.

Using the theoretical frameworks provided by Weinhold and Weinhold (1993), Boss and Jordan, Indian families present a picture of dominator families as opposed to partnership families, families with fatalistic orientation as opposed to families with mastery orientation and integrative families as opposed to centrifugal families. Fatalistic orientation of Indian families is visible in the belief in the theory of Karma, which is one of the key aspects of Indian culture and has sustained negative perceptions about disability (Kumar *et al.,* 2012). The karma philosophy links the quality of a person's present situation with their past deeds. Based on the principle of re-birth, it blames a person's past sins for their impairments in current life. Notwithstanding the general picture of Indian families stated above, it is also critical to mention that there are outliers who do not always conform to this dichotomy. There may be families which situationally choose to be integrative or centrifugal, have a fatalistic or mastery orientation and even may choose to be dominator or partnership in their way of approaching issues. To give an illustration, if there is a reported instance of domestic violence within the family, the families may display the integrative stance by choosing to adopt a reconciliatory stance. On the other hand if any family member were to be diagnosed with a major psychiatric disorder like schizophrenia, the family may display a centrifugal stance and hence look for institutions that provide long term residential care for the affected member.

The above understanding challenges beliefs regarding the ability of the family to be able to absorb stressful events and design their own ways of dealing with them without compromising on the interests of the different members. An elaboration of the ethical concerns in protecting the interests of individuals with specific needs, within the family, is presented in the following section.

Challenges and Ethical Concerns for Social Workers

The above discussion has left us at crossroads as far as implementing the philosophy of normalization is concerned. On the one hand, one is confronted with the challenges that Indian families are facing today. On the other hand is the practical absence of institutionalized services that would offer support or interim respite to the family. The dilemma is regarding navigating this crossroad so as to secure the best interests of the elderly, persons with mental illness, persons with

disability or children in need of care and protection. It is these dilemmas that get elaborated below.

Fulfillment of caregiving roles in the face of structural changes within family

The disintegration/changes that have occurred in the joint household have meant that the support that was unconditionally available to any unit if a disruption was to happen in them is no longer available in the same measure. Earlier, if a child were to lose either one or both parents, the members of the other units within the joint household would take the responsibility upon themselves to bring up the child as their own. If the caregiving responsibilities of one unit were to increase on account of having a person with disability, the responsibilities were either shared by members of the other units or the affected unit was relieved of having to take care of certain responsibilities of the household. Similarly the care of the elderly irrespective of the level of their functionality was considered to be the responsibility of the joint household. The dilemma that thus arises is the ability of the reconfigured households to assume the additional caregiving responsibilities if the need were to so arise.

Migration of the families has also meant a shrinking of the support system. Additionally the struggle for bare survival takes precedence over the care of members with specific needs. 'Can the interests of the other members be compromised for the sake of an individual with specific needs?' is thus the ethical dilemma.

Where the economic struggles are not many, the limited parenting abilities to negotiate between permissive and authoritarian disciplining techniques are coming in the way of offering a conducive environment for child development. In a society where ambivalence in social values is witnessed in various dimensions of life, how should one go about addressing this systemic anomaly?

Fulfillment of care giving roles in the face of risks experienced by primary care givers

The abilities of family members to perform their caregiving roles can be influenced by the risks and vulnerabilities that they face themselves. Some of such risks and vulnerabilities are – violence and other difficulties in marital relationship, untreated mental illness, impact of financial and infrastructural losses incurred in a disaster, loss of a spouse etc. Research has also revealed that wives of alcoholics perceive danger in the marital relationship and experienced apprehensions in relating with their spouses (Stanley, 2008). How ethical would it be to presume normality or egalitarian relationships when one has awareness to the contrary?

Fulfillment of the Rights of Individuals in the face of discrimination and abuse within families

Gender based differentiation affects the opportunities for education for girls within families where the hierarchy is deeply embedded. Gender differences are also manifested in access to health care services. Females with a disability or a mental illness suffer from a double jeopardy. Girls' participation in recreational opportunities is limited by fear regarding lowering of their moral standards since they are regarded as the harbingers of morality within the society. To what extent would the families be willing to reflect upon their existing practices and to what extent would they be able to prevail upon the wider community which exercises a great influence on family functioning in India?

With a very high percentage of children reporting being subjected to abuse within the family, the safety of the child within the family comes into question. With integrative families being the norm which brings within its wake the intense desire to project ignorance when there may be complete awareness, how would a social worker be able to break the cocoon? If the cocoon is not broken, the ethical dilemma is about the appropriateness of the family environment for each child.

Fulfillment of Caregiving Roles in the Face of Lack of Options of External Support and Services

Unlike several developed countries where the philosophy of normalization emerged, there are hardly any/very few models of community health services including community mental health services available in India. The implications of this are that the caregiving role is the exclusive domain of the family members whether it is in respect of members suffering with severe mental illness or in respect of members who may be severely limited in case of self care skills either on account of age or on account of a disability requiring high level of support. In scenarios where family members take on the role of primary caregivers of an individual, a professional working with this family may face challenges in balancing between the two: rights of the individual needing access to quality care and needs of the family to seek respite from the caregivers' burden. Even where trained caregivers are available, there are broadly four kinds of challenges that emerge: demand vs. supply imbalance as the supply of trained caregivers is still very less; ability of families facing poverty to pay for the cost of such trained caregivers; ensuring that dignity and safety of the individuals (for whom a caregiver is being employed) is not harmed; and ensuring that rights of caregivers are also not violated in any manner.

It is ironical that even special schools and/or inclusive schools that could offer ability driven training to family members with disability are not universally accessible to those who need it. In fact majority of such services are available only in the urban areas. Even within the urban areas, the cost of many such services makes them inaccessible to many families. Further even if some services are available at a subsidized cost, physical access to such services may be challenging. At times, facilities even available within vicinity might become

inaccessible. As an example, a facility available on the third floor of a building with no provision for a ramp or a lift is even though being in the physical vicinity of the household inaccessible to an individual with a severe orthopedic impairment. In such a scenario, a professional working with the family would need to address multiple aspects such as isolation and confinement of person with disability within home; feelings of despair within the family; family's belief in evolving capacity of persons with disability etc.

Day care centers for the elderly are also sparsely located and this is also primarily an urban phenomenon. Avenues for parental training may be provided through schools if their children are school going. Unfortunately very few schools have counselors or social workers. In urban areas, schools which are private in nature are beginning to employ them but as far as the schools run by the government are concerned, their appointment seldom takes place.

In respect of existing mental health facilities, India has 43 government mental health facilities though a number of private health facilities known as psychiatric nursing homes have come up. The large majority of India's population relies on the government mental health facilities on account of the sheer unaffordability of private mental health services. India is even otherwise known to have an acute shortage of mental health professionals which include psychiatrists, clinical psychologists and psychiatric social workers.

As far as children in need of care and protection is concerned, even though the Juvenile Justice (Care and Protection of Children) Act, 2000 provides for the institution of services of foster care and sponsorship but this is yet at a very nascent stage. The implications of this are that, even for temporary periods where the family may feel incapacitated to take care of the child, there is hardly any option available to them. Even in instances where the family may face economic compulsions it has few alternatives besides compromising on the needs of the children.

It might be contended that every system suffers from certain limitations and that it does not necessarily become a reason for questioning the ability of the system to fulfil its primary purposes. While this argument is well placed, what also needs consideration is the possibility of offering support to the system to deal with its limitations. The irony in the Indian context is that the family system suffers from severe limitations which have been highlighted above but there is scant support available either from the government or the non-government organizations which would help them to deal with these limitations. It is in the above context that the philosophy of normalization has to be viewed in India.

The Way forward….

Before embarking on the road for future, two submissions are in place. Firstly, undeniably, we have to acknowledge the individual's right to have a family, the rights of individuals within the family and the rights of the family with reference to its environment (Desai, 1994). Secondly, we need to challenge the hegemonic presumption and expectation that the family would be self sufficient and be able to provide for itself in all situations (Jordan, 1972).

Moving on to the determinants of a family's capacity to deal with stressful situations, the ABC-X model initially developed by Reuben Hill (McKenry and Price, 2005) appears to be a useful beginning point. Here, 'A' represents the stressor event, 'B' represents the resources of a family, 'C' represents perception of the event/stressor or the definition or meaning attached to the event by the family, and 'X' represents the degree of stress. According to the ABC-X model, A, B and C interact to produce X. Hence, X factor is understood to be influenced by several other moderating factors. It is 'B' and 'C' that demand greater elaboration in the present context since they are determinants of the ability of the family to deal with the stressful event. Undeniably a family's resources buffer or moderate the impact of stressor events on the family's level of stress. The resources connote both the internal and external resources of the family. McCubbin and Patterson (1986) cited in McKenry and Price (2005, p.12) defines the resources of a family as 'traits, characteristics, or abilities of individual family members, the family system and the community that the family can use to meet the demands of a stressor event'. Family cohesion (Bonds of unity) and adaptability (ability to change) have been recognized as the most critical internal resources of the family that determine its ability to make adjustments to stress (Olson, Russell & Sprenkle, 1979, 1980 cited in McKenry & Price, 2005). Social support is identified as one of the most significant community resources. However, resources are largely 'potential' rather than 'actual' in nature as people with equivalent resources may not be able to use them to the same degree in managing difficulties (Peterson and Hennon, 2005). Economic factors are often considered significant. There has been a significant focus on the link with poverty and the ability to be able to cope with a stressful event. 'The impact of a stressor event on a family's level of stress is also moderated by the definition or meaning the family gives to the event' (McKenry & Price, 2005, p. 12). Families who are able to redefine a stressor event more positively appear to be better able to cope and adapt. On the other hand, families who may respond to an event with learned helplessness, increase their vulnerability through low self esteem and feelings of hopelessness (McKenry & Price, 2005).

While the ABC-X model definitely provides an insight into the determinants of the family to be able to cope up with stressful events, it also raises questions on the unbridled implementation of the policy of deinstitutionalization. What flows concomitantly is that before reposing the family solely with the responsibility for protecting the interests of individuals with specific needs, there is a need to make an assessment of the family's internal and external resources as well as the perceptions of the family about the stressful event. This also challenges the notion that the family has the ability to cushion the effect of any stressful event. Consequentially, family strengthening emerges as a critical area of intervention if the philosophy of normalization and subsequently deinstitutionalization is to be implemented in true earnest.

Dilemmas also arise for social workers while attempting to strengthen the family's capacity to function. Jordan (1972, p.62) shares a dilemma that social workers may face while working with integrative families. Such families may perceive the change as destructive while the social worker may consider

themselves as a catalyst for constructive change and provide support to a dissenting member within the society. As the family seeks refuge in creating harmony through consensus instead of creating many dissenting voices, the social worker may seem forced to choose between being 'an unacceptable outsider or an affable insider; between collusion or damaging conflict'. Jordan also states that one may face dilemma while working with centrifugal families as well. For example, a family with an adolescent child may want to maintain the emotional status quo and ensure that feelings represented by a child's behavior continue to be expressed outside the family and not within it. Hence, this family may see a social worker as a potential threat if their intervention is seen to stir up dangerous feelings in family group.

At times, even the social worker's own predispositions create challenges in working with families. If a social worker has grown up in an integrative family, this might lead to certain presumptions in the mind of the social worker. Additionally even the entire ethos of social work appears to be basically integrative, particularly in relation to family life. *Difficulties should be discussed, ironed out, minimized. Family members should learn to compromise, to give way, to demand less and give more within the family. Everything can be solved by talking it out and reaching a consensus*. These are the kinds of presuppositions that most social workers sometimes work with which might act as a hindrance in the process of accepting and working with families (Jordan, 1972, p. 68).

While residential care or institutionalization may be debunked by the government, it definitely needs to be done with caution so that the affected individuals do not end up into a situation that is even worse. In a bid to cut costs, the Australian government in the 1990s did away with the residential care programmes for children and young people who were exhibiting challenging behavior i.e. aggressive or violent behavior. Alternatively out of home children were placed into foster care. However foster care despite repeated changes did not work out as an option due to the unmanageable behavior of the children. The absence of residential care programmes has led to the children landing up into shelters for the homeless. Accordingly it is suggested that residential education and treatment programmes should definitely be offered as an option (Ainsworth & Hansen, 2005).

The issue of migration also has to be accounted while considering processes of deinstitutionalization. Providing migrants with identity cards that they can use to access services at their destinations such as basic health care, enrolling their children in local school could be one initiative. In addition, ways need to be found to ensure that migrants do not lose their entitlements such as Public Distribution System rations in their native places (Deshingkar & Start, 2003).

The implementation of deinstitutionalization without coupling it with other support services may be erroneous. It is thus incumbent on the State in India to initiate or support the initiation of services that could enable the families in performing their caregiving roles with respect to individual members having specific needs. Group care homes located within the community that offer short term care, foster care, sponsorship, increased coverage of the mental health

programme, day care centers for the older persons and accessible need based services for persons with disability are certain initiatives which need to be taken by the State. Certain international initiatives that have been documented include the Home Hospice Community Mentoring Programme (Australia) and Elder Care Cooperatives (Sweden) (Johansson, Leonard & Noonan, 2012). Full time parental care of children by grandparents as a form of out of home placement for children whose biological parents are unable to care on account of psychiatric problems or drug addiction, is also being practiced as a model with favorable outcomes.

Concluding the above discussion, one can say that the philosophy of normalization leading to deinstitutionalization has its own merits but its context specific application has to be examined in the light of the supports available for the family. In the process of addressing issues and rights of individuals in a family, social workers have to understand the family's abilities, individual's choices and support services available. In making such assessments social workers have to practice the principle of conscious use of self so that the individual ideology does not interfere with the process. Nonetheless individual level interventions have to be accompanied by policy level advocacy. Policies are at times, governed by a wave rather than a realistic assessment of the possible consequences in different contexts and this paper provides an opportunity to reflect upon deinstitutionalization and family based care for individuals with specific vulnerabilities.

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Fostering Community Based Environmental Activism : Role of Social Capital

Molankal Gangabhushan M.

Environmental activism is an important element for promoting a healthy environment through community participation. With the advent of increasing environmental degradation, it is pivotal to create an enabling condition through which community takes the ownership of environmental protection. With the advent of increasing devastating changes, there is an emerging emphasis within the profession to pay more attention to the critical role of social capital in the community. Role of social work has been on emphasising the need for establishing and strengthening interaction between people and their environment focusing more on the significance of human relationships. The paper is an attempt to focus on the significance of social capital in promoting community based environmental activism.

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Introduction

Environmental sustainability has become a prominent global issue with many groups now working to develop plans about the use and preservation of natural resources (Scerri, 2009). The 1992 Rio Earth Summit provided the impetus for the sustainable development paradigm with its three components of environmental, economic and social sustainability. It recognizes not just the environment crisis in its many facets, but how it is embedded in economic and social systems. And it understands that a realistic and long-term solution must deal with both the environment and the development crises simultaneously and in an integrated fashion (Khor, 2007).

Often overshadowed in the current impetus to protect natural systems is the impact of environmental crises on socio/cultural institutions and human populations (Besthorn, 2008). The deterioration of the planet's natural systems is creating an ever increasing population of human refugees attempting to escape their unsafe, threatening, and dangerous natural environments. By 2010, there will be 50 million

environmental refugees — a figure over five times greater than the number of political refugees predicted for the same time period (Moss & Ember, 2006). While it is difficult to calculate the exact number of ecological refugees, it is incumbent on governmental and non-governmental organizations and the helping professions to begin addressing this problem. If global environmental deterioration continues at the current pace the number of displaced persons will grow exponentially (Gorlick, 2007). As Myers (1997, p. 168) suggested, well over a decade ago, we are experiencing an ever increasing number of "marginalized people driven to (and from) marginal environments".

The factors of perpetuation of environmental crisis is also rising which is manifested in the unregulated growth, unfettered market forces and increased 'competitiveness' — which accelerate both resource use and pollution. Sustainable Development will be ensured only when there is proper integration of environmental concerns with poverty and attainment of human needs. The professions concerned with environmental sustainability face challenges in maintaining their relevance as a profession during this time of environmental crisis. The professions need to understand ways in which not only economic but also environmental factors affect the lived reality of the people with whom they work. This will help in strengthening the culture of protecting the environment from its abuse and misuse and enhance environmental justice and sustainability. Environmental activism is one of the ways to address the increasing crisis through community involvement with a view to facilitate the improvement of community livelihoods. Environmental activism largely depends upon the existing social capital prevailing among the communities. The strong social capital will pave a way towards people's symbiotic relationship with environment. Quality relations among the people play an important role and operate as a resource to collective action on different scales (individual, communities and nations) for their wellbeing. Quality relations also give an impetus to the feeling of one for all and all for one. The cohesiveness among the groups increases to the extent that they can easily deal with any crisis.

Social Capital and Environmental Activism

The Organisation for Economic Co-operation and Development (*OECD*) defines social capital as networks together with shared norms, values and understandings that facilitate co-operation within or among groups (Daniere *et al.,* 2002). In general terms, social capital (socio-cultural capital, cultural capital) refers to a society's capability to deal with social, economic and environmental problems and be active in shaping the development of the overall system (Berkes & Folke, 1994). Pretty and Ward (Pretty, 2002) identified that where social capital is well-developed, local groups with locally developed rules and sanctions are able to make more of existing resources than individuals working alone or in competition. Social capital indicates a communities potential for cooperative action to address local problems (Fukuyama, 2001; Pilkington, 2002). As it lowers the costs of working together, social capital facilitates cooperation and voluntary compliance with rules (Pretty & Ward, 2001).

The degree of mutual trust and cooperation prevailing within and among the various groups determine the mutual benefits. Social capital is all about recognizing and respecting the socio-cultural values and norms, learned preferences, human capital and labour force, local knowledge of the environment, social competence and institutions, human health and life expectancy, as well as cultural and social integrity and social cohesion. Environmental consciousness will lead to developing of shared interests and common identity and a commitment to the common good. Eventually this leads to collective action to address the common confronting problems which are going to affect them collectively.

The success of environmental activism largely depends upon the extent of resource management at all layers of society to influence the potential outcome of every attempt to change any groups' relative position. This in turn leads to better methods to reduce poverty, to inform participants through effective educational programs and to narrow discrepancies among groups.

Social capital and Sustainable Development

Sustainability refers to the capacity of socio-ecological systems to persist unimpaired into the future (Raskin *et al.,* 1996). According to World Commission on Environment and Development (WCED), sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs (Brundtland, 1987). Sustainable development is all about promoting community based practices with regards to production and consumption at the micro level and the inter country cooperative initiatives at macro level so that it will enable meeting the needs of current as well as future generations. This leads to regeneration and rejuvenation of the resources that are now being wasted. This stresses the fact that natural resources are used within a social context and that is the rules and values associated with this context that determine the distribution of resources within the present and next generation.

Environmental sustainability refers to the maintenance of ecosystem and natural resource base. Environmental degradation signifies failure in this regard. It takes three forms: Depletion of resources, pollution, or overuse of the waste-absorbing capacity of the environment and reduction in biodiversity-a loss of some types of resources. Social sustainability is the term used to refer to the social conditions necessary to support environmental sustainability (Hardoy *et al.,* 1991).

It has become common to isolate four factors that determine sustainable development: natural capital, physical or produced capital, human capital and more recently, social capital (World Bank, 1997). Development theory has commonly acknowledged that economic and social development is interrelated. Economic growth is desirable because it makes poverty alleviation easier (Joshi, 1996). Growth is a key in providing the means to meet basic needs, to ease poverty and to generate employment. It always reduces absolute poverty, but it can have varied impact on inequality and not everybody benefits from it (Fields, 1999). Economic sustainability in terms of sustained macroeconomic growth is thus a necessary, but not a sufficient condition for sustainable development. An even distribution of growth and of access to resources is equally important. If, on the contrary, there

are strong economic inequalities, growth without development as well as social and political unrest are likely to occur, signifying unsustainable development.

Furthermore, social development, apart from being an end in itself, is also a means to promote economic growth. Dreze and Sen (1997) have argued that the expansion of social opportunity is a key to development. Extension of basic education, better health care, more effective land reforms and greater access to provisions of social security would enable the marginalized sections of society to lead a less restricted life and, also, to make better use of markets. The expansion of social opportunity calls for public action, both from the state and the civil society. But, lack of economic growth and fiscal crisis often affect the political will of governments to invest in social services such as education and health (Weiner, 1999).

Recently, the importance of social capital, including trust, norms of reciprocity and networks of civic engagement, has been stressed for the success of sustainable development (World Bank, 1997). As a result, social sustainability has received new meaning, building on previous attention to socially negative consequences of development and of environmental conservation. Now, social sustainability includes the strengthening of community-based collective action for achieving the goal of sustainable development. For example, in an environmental context, there is already evidence of local user groups playing a key role in regard to sustainable water and forest management (World Bank, 1997).

A plethora of research has linked social capital to indicators of wellbeing. Social capital manifests in formal bodies such as the core judicial, democratic and governance institutions, to disseminate and reinforce social values and expectations. It is also embodied in the less formal institutions of religion culture, sports and fashion. The partial or complete destruction of social networks and their associated norms significantly undermines the capacity of communities to meet short term basic and complex needs, while the associated loss of culture and identity disrupts the ability of future generations to satisfy their own needs. Social capital is, therefore, a central component of sustainable development.

Enhanced social capital can improve environmental outcomes through decreased costs of collective action, increase in knowledge and information flows, increased cooperation, less resource degradation and depletion, more investment in common lands and water systems, improved monitoring and enforcement (Anderson *et al.*, 2002; Daniere *et al.,* 2002; Koka & John, 2002).

Recent years have seen an extraordinary expansion in collective management programmes throughout the world, described variously by such terms as community management, participatory management, joint management, decentralized management, indigenous management, user-participation and co-management. These advances in social capital creation have been centered on participatory and deliberative learning processes leading to local group formation in different sectors such as: watershed/catchment management, irrigation management, forest management, IPM and wildlife management (Pretty, 2003). The initiatives are with the realization that state alone cannot attain the goals of environmental conservation. Hence, the participation of people and partnership with people has gained prominence in the governments initiatives.

The concept of 'Environment' in Social Work Profession

As a profession with a long-standing declared focus on person-in-environment, social work might be expected to play a leadership role in the planning stages of any new environmental state. Laying the conceptual foundations for the new profession of social work, Mary Richmond (1922) acknowledged the physical environment as an important contextual consideration for practice but perceived its importance in terms of only its social aspects, asserting that the physical environment "becomes part of the social environment" to the extent that it "frequently has its social aspects" (p. 99). From the outset, the profession of social work was more comfortable using social science lenses to view the environment rather than perspectives from the physical or natural sciences.

Developing this ecological perspective into a functional systems approach for social work, Pincus and Minahan (1973) proposed four basic systems for practice, all of which were social (the change agent system; the client system; the target system; and the action system). From this systems perspective, "the focus of social work practice is on the interactions between people and systems in the social environment" (ibid:3) with a goal of restoration of balance or equilibrium within immediate social systems where there had been some disruptions. Considerations of the physical environment were beyond the scope of this approach. Building on these foundations, a pattern was established in the mainstream social work literature whereby the environment would be transformed into the social environment, with the physical environment disappearing altogether. No adequate rationale or explanation would be offered, and the switch was generally unnoticed or unacknowledged.

In 1994, Hoff and McNutt published a book called 'The Global Environmental Crisis: Implications for Social Welfare and Social Work'. Motivated by environmental threats facing humankind, the authors began with the premise that human and environmental welfare are "inextricably linked" (p.2). They argued that social work and other professions will have to move beyond outdated goals of individual well-being and social welfare to adopt new models geared more towards sustainability and protection of the environment. This position received strong support in a subsequent policy statement from the National Association of Social Workers (2000).

Protecting people and the natural environment through sustainable development is arguably the fullest realization of the person-in-environment perspective. The compatibility of sustainable development and the person-in-environment perspective is a firm theoretical foundation from which to apply macro level social work practice to person-natural environment problems

From the field of international social work comes a global concept of environmental citizenship which is "motivated by principles of sustainability and sensitivity to the natural order" (Drover, 2000, p. 33) and serves as a link between social justice and ecology (Latta, 2007). Because protection of the environment requires collective action at the global level, the notion of global environmental citizenship pushes beyond individualism, nationalism, and the rights of one generation. An International Policy Statement on Globalisation and the

Environment from the International Federation of Social Workers (IFSW, 2004) calls on individual social workers and their organizations to recognize the importance of the natural and built environment to the social environment, to develop environmental responsibility and care for the environment in social work practice and management today and for future generations, to work with other professionals to increase our knowledge and with community groups to develop advocacy skills and strategies to work towards a healthier environment and to ensure that environmental issues gain increased presence in social work education.

The social work focus on the social environment has the unintended effect of diminishing the significance of the natural environment on human welfare, especially for the poorest and most vulnerable, which typically inhabit degraded environments and also have less social and political power. United Nations Environment Programme (2000) indicates environmental changes affect human development options, with poor populations disproportionately impacted. The vulnerable sections of the society are more prone and are at the receiving end of environmental degradation. Since social work profession deals with empowerment of the vulnerable sections of the society especially those who are dependent on the environment. It should be noted that environmental inequity also exists within industrialized countries, with poorer segments of the population disproportionately living in environmentally degraded conditions. Therefore, working towards a sustainable future is hampered by the overwhelming influence of economic forces, which puts greater value on profit than on ecological or social well-being.

According to the National Association of Social Workers (2009), concern for the environment is a critical component of the person-in-environment (PIE) perspective. The PIE concept emphasizes the relationship between individuals, their behaviour and the environment, the social ecology. Thus, this perspective begs for a holistic consideration of one's functioning in the environment. Social work must build on its historical roots and, therefore, is a natural advocate of environmental preservation and sustainability. Social work has historically been dedicated to the betterment and preservation of human welfare (Berger & Kelly, 1993). They further identify a new ethic that human societies need, one that is consistent with an emerging awareness of our connectedness to the natural world and our understanding of nature's limits of tolerance. Updated information regarding human connection to the environment crisis will pave a way towards enhancing their interest and eventually realize their responsibility towards addressing this concern.

Sustainability and Social Work Role

Professional social workers are known for taking up challenges on a vital issue with a view to integrate it into its domain and also to come up with viable responses to it in keeping with its goals and philosophy. The issue of sustainable development too has been attended to with all the seriousness it deserves. Social work literature, education, practice and research have started responding to the need of integrating the component of sustainable development in all the social work initiatives.

Sustainable development too, just like the profession of social work, is the basis of a new society that is based on humanistic values, democratic politics and respects for the natural world, human welfare and socio-cultural developmental goals. In order to achieve all the broad goals of sustainable development, diagnosis of the problems, formulating environmentally sound policies and sustained commitment from both the implementators and the people are required. Professional social work with its vast knowledge and skill base, professional networks and genuine commitment to the betterment of human condition has already started responding to the larger issues of global sustainability.

Apart from utilizing the Social Action and Social Work Research as the main methods to ensure the practice of sustainable development initiatives, the professional social workers have been widely using Community Organization to contribute significantly to the realization of the aims of sustainable development. The major strategies utilized under the method of Community Organization are discussed here.

Environment Education

Over the years, professional social workers have been actively engaged in providing environment education in various social work settings. The need of environmental education will be very much indispensable with the advent of increasing realisation of the importance of partnership between the government, civil society organisations and the people. This is needed in order to enable people to respond to new situations, requirements and possibilities with fresh thinking and effective collective action. Whether the issue is the reduction of poverty, the preservation of the environment, the improvement of quality of life or the promotion of the rights of women, education is often a very sizeable part of the answer. It is identified as a key factor in sustainable development. The need of the hour is to influence people to be proactive in making their lives for happier future for humanity. Creating enabling condition will pave a way towards promoting collective actions for a better future.

Capacity Building Initiatives

Capacity development is generally understood to be an endogenous process through which a society changes its rules, institutions and standards of behaviour, increases its level of social capital and enhances its ability to respond, adapt and exert discipline on itself. Thus, 'capacity development' is broad and it attempts to be all-embracive. It deals with entities of different size and scope, and with different stages of the development process. It attempts to link previously isolated approaches, such as organisational development, community development, integrated rural development and sustainable development, into the umbrella concept. The professional social work has been strengthening the possibilities for sustainable development through capacity building initiatives in the following manner. The social workers can work on establishing and strengthening the linkages in the social networks and promote people's capacities to come together,

share, relate and talk about their values and interests. Social networks are pertinent means by which individual community members interrelate and create a sense of community. The capacity to share values and interests allows a community to develop strong bonds and a high level of trust among individuals. When social networks produce lasting ties, creates a sense of ownership and responsibility for the entire group goes beyond individual self interest. This will lead to collective ownership and collective action.

The Livelihoods Approach to Sustainable Development

The livelihoods approach to sustainable development requires identification of the most pressing constraints faced by people as also promising opportunities open to people regardless of where these may occur (i.e. in which sector, geographical space or level, from the local through to the international). It builds upon people's own definitions and understanding of constraints and opportunities and, where feasible, it supports people to overcome constraints and realise the opportunities.

The livelihoods approach enables various factors which constrain or provide opportunities to be organised and their inter-relationships are brought out. It is not intended to be an exact model of the way the world is, nor does it mean to suggest that people as stakeholders themselves have to necessarily adopt a systemic approach to problem solving. Rather, it aspires to provide a way of thinking about livelihoods that is manageable and that helps to improve development effectiveness.

Poverty Reduction Strategies (PRS)

PRS too are utilized by professional social workers in their efforts to ensure sustainable development. There is a definite relationship between poverty, environment and sustainable development. Sustainable development aims at reducing and then eradicating poverty completely. However, the short-term attention to poverty reduction, for example, through debt relief should evolve into longer-term poverty reduction strategies that lead to sustainable development. At present issues around sustainable development and the environment are often ignored in PRSs.

A framework for action has been developed by various international agencies centred on the preparation of poverty reduction strategies by countries, which would then be a basis for external assistance and debt relief. The key principles underlying the framework are that poverty reduction strategies should be country-driven and prepared by national governments in a participatory mode with the civil society and not by external international donors or transnational companies. PRSs should have the following features oriented to achieving concrete results in terms of poverty reduction (a) comprehensive in looking at cross-sectoral determinants of poverty outcomes, (b) informed by a long-term perspective, (c) providing the context for action by various development partners and (d) should be intended to prevent alienation of communities from sustainable modes of life. The success of the PRS will largely depend upon the extent of people's participation and

ownership in the whole process development i.e. planning, implementation and monitoring. Area specific initiatives are to be coined suiting to the needs and aspirations of the people in vicinity. Proactive role of collective innovations will pave a way towards sustainable change in the lives of poor.

Respecting Indigenous Knowledge

Community knowledge refers to the combined traditional and scientific knowledge. It is known that traditional knowledge is sustainable as it has evolved after thousands of years of observation and experience. This form of knowledge interlinks and establishes a holistic relationship between man and nature. It has supported life in a sustained way and continues to do so today. However, with globalisation, this form of knowledge has been ignored completely and is gradually becoming extinct. However, respecting and protecting indigenous knowledge is very essential for sustainable development. Professional social workers can ensure respecting for indigenous knowledge by promoting the effective participation of traditional knowledge holders during all stages of sustainable development policies, plans and programmes, alongside the scientific and technological community. Create a culture where people recognise the rights of traditional people to own, regulate access and share benefits of their unique sets of knowledge, resources and products. They can ensure that traditional knowledge holders are fully informed of potential partnerships.

Participatory Rural/Rapid Appraisal (PRA)

Chambers (1997) developed and popularized Participatory Rural Appraisal (PRA) approach to development initiatives. It evolved from a series of qualitative, multidisciplinary approaches to learning about local-level conditions, environment and local peoples' perspectives, including Rapid Rural Appraisal, and Agro-ecosystem Analysis. The pioneers of PRA development have been NGOs, and agricultural research organisations, and in recent years the World Bank and other donors have begun to adopt PRA methods in their work.

In the recent past, rapid appraisal techniques have gained widespread recognition in development research and in planning and implementation of the development projects. The reason for emphasis on PRA is due to the participation in data collection and development process that approach encourages. This strengthens the process of sustainable development because PRA strive to set right the basic fault in the conventional approaches of development in which the rural poor and other marginalised groups of society are rarely consulted and involved in the development planning. PRA helps the social workers to understand the existing social capital of the community as this will affect whether a community can act as a cohesive unit. It helps the social worker to assess the accessibility of groups with power or resources. It also plays a significant role to understand the existing hierarchical system prevailing within the community, etc. PRA enable people to express and analyse the realities of their lives and conditions, to plan themselves of action to be taken, and to monitor and evaluate

the results. It provides an organisational structure to represent their interests and to protect their rights. Through their participation they develop symbiotic relationship with the environment which is reciprocal in cooperation and contribution.

Good Governance

Good governance is prerequisite for initiating and maintaining sustainable development efforts. Hence, professional social workers are actively engaged in promoting the concept of good governance in their Community Organization initiatives. In good governance people irrespective of their identities get proper access to the structures and processes of governance. Effective participation in the whole process will seek transparency from the governance process and makes the stakeholders more responsible for the implementation. In the absence of which robs them of the means and ability to participate meaningfully in changing the conditions of their own lives and also the environment in their vicinity. Ensuring good governance also depends upon the extent of structural social capital prevailing in the community, which is built through horizontal organizations and networks that have collective and transparent decision making processes, accountable leaders, and practices of collective actions and mutual responsibilities.

Sustainable Development through Cooperatives

Cooperative societies are organisations that connect the people at the grassroots level to the highest level of the government. Therefore, the cooperatives have an extremely important role to play in the process of sustainable development. They can generate awareness among the people and educate and inform them regarding the environmental issues. They can encourage the people to participate to mitigate the problems and establish a sustainable society. These cooperatives can be utilized by professional social workers to play an important role in promoting sustainable development by helping to develop social forestry programmes and management and reclamation of wasteland, participate in community development programmes.

Advocacy for Sustainability

The professional social workers have been joining with other activists and groups through lobbying and advocacy to apply pressure on the governments and international bodies to formulate and execute policies related to environmental issues and sustainable development. They have focused on fighting for various issues like Protection of clean water and air, arable land and food crops, Development of energy and transportation systems that rely on renewable sources and a phase out of the use of fossil fuels, Redesign of the urban areas for sustainability, Reduction of unemployment through strategies and indigenous methods adapted to local culture and environment, Sustainable rural development, etc.

Thus, the professional social workers have been already active in working for sustainable development through various ways. They could augment their efforts towards ensuring the practice of sustainable development by making voices heard by ensuring that the people are consulted and integrally involved in country's decision-making processes which relate to environmental protection, natural resource management, and development. They can encourage policy makers at both regional and national levels to adopt the strategies which are recommended by international, regional and local conferences that offer perspectives on sustainable development. Bridging the gap between the macro level policy change and micro level activism is pertinent in ensuring sustainable development. This can be done by way of networking with people at the grass-roots and activists in the community to exchange information and to strengthen environmental activities at the local level.

Conclusion

Sustainable environmental management can only occur where active local-level support and participation exist. Community participation is believed to be the most effective strategy because people depend directly on their local physical environment and thus have a genuine interest in protecting it (Ghai & Vivian, 1992). Research on indigenous technical knowledge suggests that local communities are keys to finding solutions for environmental problems. Often, local communities developed technologies that are well adapted to local socio-economic and environmental conditions (Gibbon *et al.,* 1995). Such an approach tries to make better use of (renewable) human and social capital than the regulatory and market-based instruments.

The philosophy of professional social work has much in common with the concept of sustainable development. Both, the profession of social work as well as the concept of sustainable development look at human society as an integrated, holistic system and respect the right of the vulnerable and deprived sections of society for information, participation and due share in the fruits of development. The profession of social work, with its vast repository of knowledge, skills and well-equipped band of professionals and associations has been gearing up to contribute its best to sustainable development. However, a lot remains to be done on the part of professional social workers to bring the concept of sustainable development into its mainstream education, practice, and research.

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Living on the edge: Scoping Study of Homeless Population in M East Ward, Mumbai

Roshni Nair & Vijay Raghavan

The understanding of homelessness in an urban context is crucial for various stakeholders and is of significance for policy makers, academicians and civil society organisations. This article is based on a study conducted in one Municipal ward of Mumbai city, to get a deeper insight into the nature and volume of people living on the streets. The focus of the study was to look at various aspects like location and type of homelessness, present situational context, work related information, family profile and connection and access to services. The study was able to capture people's perception of homelessness and exclusion and their experiences of interaction with the legal system. It also raised challenges in terms of methods and strategies for conducting such studies on mobile populations. The study has highlighted many aspects of the situation and needs of the homeless and the structural and personal factors leading to homelessness. The article discusses how social protection measures initiated by the government have failed to trickle down to the homeless population as they are secluded from these structured service delivery mechanisms. That they remain disconnected from these responses and find no representation within them, gives various stakeholders the impetus to review how to further engage with this population meaningfully.

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About   homelessness

The term homelessness refers to a state where an individual lacks a fixed, regular and adequate night-time residence or who uses a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation. The United Nations, in the 'Compendium of Human Settlement Statistics', defines a "homeless household" as "…households without a shelter that would fall within the scope of living quarters. They carry their few possessions with them, sleeping in the streets, in doorways or on piers, or in any other space, on a more or less

random basis" (UN, 2004, p.23).

Most empirical research defines homelessness as the condition of people who are without a permanent place to live. Homeless people come from diverse backgrounds although majority of them are young and single. They are known to be associated with problems such as mental illness, alcoholism, physical disabilities, poor health, economic deprivation and long-term unemployment. The situation of homelessness could be led by the convergence of factors such as housing and welfare policy, economic restructuring and the labour market conditions, and individual situations of homeless people (Shlay & Rossi, 1992).

However, the phenomenon of homelessness is not just about lack of housing or accommodation. It is not a purely housing based concept but has significant emotional, social and psychological dimensions as well. Thus, loss of family and community bonds might be central to homelessness. It is this feeling of being 'not wanted' that might go unattended even when the measures are taken to address the problem. Carlen's (1996) study of the causes and consequences of youth homelessness in Great Britain emphasises that youth homelessness is a twentieth century phenomenon, which is an outcome of dynamics between a shrinking welfare state, identity politics, and fears about nomadism.

The number of homeless people worldwide has grown steadily in recent years. In developing nations such as Brazil, India, Nigeria and South Africa, homelessness is rampant, with millions of people living and working on streets. Homelessness has been a problem in big cities despite their growing prosperity, owing to migrant workers who have trouble finding decent housing and to rising income inequality between social classes (www.nationalhomeless.com).

Houseless households are defined by the Census of India (2011) as 'households which do not live in buildings or Census houses but live in the open or roadside, pavements, in *hume* pipes, under fly-overs and staircases, or in the open in places of worship, *mandaps,* railway platforms, etc., are to be treated as Houseless households' (p. 9). A census house is defined as 'a building or part of a building used or recognized as a separate unit because of having a separate main entrance from the road or common courtyard or staircase etc. It may be occupied or vacant. It may be used for a residential or non-residential purpose or both' (p. 8).

The Census in 2001 enumerated 1.94 million homeless people in India, out of which 0.77 million lived in cities and towns. However, as per the Report on Urban Homeless by the National Advisor on Homeless to the Commissioners of the Supreme Court (2011), these numbers are likely to be gross underestimates as homeless populations tend to be highly invisible. One headcount conducted by Ashray Adhikar Abhiyan in the year 2000, found 52,765 homeless people in Delhi, and it estimated that for every one they could count there were 1 or 2 that escaped their enumerators.

The research

The homeless are one of the most marginalised communities lacking citizenship identity, shelter and basic amenities, let alone access to utilities. As part of the M

East Ward survey that was carried out by TISS in 2011, the Centre for Criminology and Justice (CCJ), School of Social Work and Koshish (a field action project of TISS) undertook the task of doing a survey of homeless people in the M East Ward. Faculty members from CCJ, the Koshish team and student volunteers from across the Institute took part in the survey. The purpose of this study was to also build an understanding of the nature and volume of people living on the streets in this ward. The study involved mapping of areas where the homeless population can be found, designing the tool for conducting interviews, field testing of the tools and data collection, within a period of ten days.

The process of data collection

A mapping exercise carried out was done over three days across the M East Ward. The team divided the M East Ward into pockets and carried out night rounds between 9.00 pm to 3.00 am, in order to do a head count of persons sleeping on the streets in the Ward. About 1400 homeless people were enumerated in the M-Ward (E) area during the three-day period. This process involved scanning every street and corner, construction sites, abandoned sheds, and having to walk long and wide stretches to locate homeless people and different categories of the homeless. It was rare that a cluster of homeless persons would be found. Most of them were found sleeping in quadruples, some in groups of five, but not more. Walking in the dead of the night, through alleys and empty market places, answering the questions and 'enquiries' by the police, and asking questions to people who were awaken and responding to their curiosity made one realise that the city truly changes its colour in the night.

It was important to first map a particular area to get an approximate head count of the number of homeless persons. Every afternoon, the team would meet for a debriefing session about the previous night and planning for the coming night. These deliberations led to a deeper understanding of homelessness as an issue. The plan evolved on a day-to-day basis with the sole objective of mapping and surveying as many homeless people as we could.

The mapping and the survey would typically start at 9.30 pm, covering individuals after 12.00 midnight and families before 10.30 pm. For the purpose of this survey, keeping the time limit in mind, it was decided that to cover the destitute and people sleeping on the pavements as a starting point. It needs to be mentioned that due to time constraints, certain categories such as zari workers, people sleeping inside eateries, auto-rickshaws and taxi drivers sleeping inside the vehicle, etc. have not been counted. Some descriptions or narratives of these groups have been documented to get an understanding of their profiles.

The data collection was done in two phases - the first phase between November 26 and December 3, 2011 and the second phase between January 25 and February 2, 2012. From the 26th to the 28th of November 2011, mapping and head count was done across 6 locations within M East Ward. While it helped to get an idea of numbers, it also familiarised the team with the areas and strategies of approaching people. In the initial mapping, 1400 persons - individuals and families were identified. The interview schedule was piloted on November 30, 2011. Within

a period of 4 nights, 3 teams of about 10 members each worked daily to capture more numbers. It was decided to do a 20 per cent sample of the headcount for the interviews but eventually, one managed to get about 12 per cent due to limitations of time, student volunteers getting busy with their semester work and losing the rhythm and rigour of Phase I.

It was also decided that any cases that need immediate attention would be identified for intervention and subsequent follow up. A total of 163 schedules were filled in Phase I and 14 in Phase II; thus, a total of 177 interviews, 3 FGDs and 33 cases were identified. The break-up of the cases that needed intervention were: physical health problems - 5, mental health problems - 3, need for immediate medical aid - 4, need for shelter - 6, education and training needs - 3, disability issues - 6, eviction issue - 2 and employment and livelihood needs - 4. These cases were followed up with the help of students placed in related agencies for their field work, field work supervisors, Koshish and TANDA team (TISS FAPs working in M Ward) and an M Ward Project Officer.

During data collection, volunteers felt unsafe in certain areas during the night. Decisions about whether to continue data collection in these areas were taken collectively. Identifying contact persons in each area was a useful strategy as they introduced locals and were aware about the dynamics of the area.

Defining homelessness in the field

In the first orientation of the team, it was decided to include the following categories in the homeless population to be covered during the survey. Working males; the aged, the abandoned and/or the sick; single women; persons with mental illness, disability, leprosy or addictions; transgenders; children, youth and families – in short, individuals or families, living/sleeping in public places, places of worship, footpaths, pavements, under the flyovers, construction sites, handcarts, etc.

The team came across the following categories during the survey:

- Mentally Ill women living alone on the streets. People in the area gave them food and provided information about them.
- People working and sleeping in eateries, bakeries, restaurants, bars, etc.
- People sleeping inside trucks, taxis and auto-rickshaws. Auto-rickshaw drivers could be further sub-divided into those with or without a family in Mumbai (even though some of them reported that they had a family in Mumbai, they preferred to sleep in the night in their vehicles as it was too late to go home).
- Families of construction workers living in groups, like a colony (needed the permission of the contractor to talk to them).
- People sleeping outside shops and under bus stops.
- People living in shanties.
- People living in abandoned buildings.
- People living on construction plots.
- Rag-pickers sleeping outside scrap dealers shops.

- People sleeping on carts.
- People sleeping on road dividers.
- People sleeping inside temples/mosques.

The interview schedule was divided into the following sections: location and type of homelessness, present situational content, work related information, personal information, family profile and connection, access to services, access to government or NGO services, proof of identity, savings behaviour, perception of homelessness and exclusion, interaction with the legal system, disability and exploring possibilities.

Major findings
Areas

The survey of the homeless population was done in the Mumbai M East Ward. Cluster I comprising geographically contiguous areas of Deonar, Govandi and Panjrapol had the highest number at 25.4 per cent, followed by Cluster II comprising Anushakti and Cheetah Camp at 23.2 per cent. Cluster I has a large number of small scale units (*zari* units, leather units, bakeries, etc.) which requires a substantive labour force who reside in these units. Many of them sleep in the open as these spaces are too cramped to accommodate all of them inside the units. There are also a large number of eateries which cater to this population, in which again a substantial number of men and boys work and live (many of whom may be sleeping outside). Cluster II comprises of middle, lower-middle and working class populations and there is substantive construction activity going on in these areas, thus leading to a demand for migrant causal labour. These people (individuals and families) live near the construction sites in the open or in temporary shelters. Cluster III comprising of Shivaji Nagar and Cluster IV comprising Chembur area had an equal population of 16.9 per cent each. Cluster III is contiguous with Cluster I. The Deonar Dumping Ground is situated in this area, thus adding to the population of the homeless (consisting of rag- pickers and waste workers).

Cluster IV is the largest market area for M East Ward comprising of vegetable and fruit vendors, small shops selling clothes, shoes, groceries, hardware and all other household needs. It also has a large number of restaurants and eateries along with construction activity going on in many areas. This makes it an ideal space for inflow of migrant labour (largely individuals) as well as hawkers, vendors and even beggars who sleep in the open in the night.

Profile of the homeless

Categories of the homeless: About 80.2 per cent of the respondents were living on the roadside or on the pavements. This is the most vulnerable category with nothing to protect themselves and sleeping 'under the sky'. This group also may be more mobile and not have many belongings. Most people lived along the roadside or on pavements, ranging from 70 per cent to 93.3 per cent in all the clusters.

About 5.6 per cent were in the above 65 years, i.e. the elderly category. If one adds those in the age group of 56-65 years, about 15 per cent need additional supports (in terms of medical or emotional needs), especially since this group may largely comprise of those who may be unable to find work and may have to resort to begging or charity. Of the total respondents, 69.5 per cent were male and 29.9 per cent were females. About 57.1 per cent of the respondents were illiterate. Hindi at 55.9 per cent is the most common language spoken followed by Marathi at 31.1 per cent. About 55.9 per cent of the respondents were Hindus followed by 22 per cent who were Muslims.

State that they belong to : About 41.2 respondents per cent are from Maharashtra. As far as those from outside Maharashtra are concerned, Uttar Pradesh, Bihar and Andhra Pradesh account for 19.2 per cent 7.3 per cent and 5.6 per cent respectively.

Living conditions

Type of dwelling: A majority of them i.e. 55.9 per cent live under the open skies. A total of 49 per cent of the respondents have been staying continuously in these locations for 3 years and above thus having made the place their 'home' and indicative of a way of living. A total of 41 per cent of the respondents have been staying in Mumbai since more than 15 years, making them eligible for a domicile status.

Basic facilities: About 59 per cent of the respondents' source water was from a public tap. About 41 per cent respondents use a paid public toilet, while 17.5 per cent use a free facility. It is important to note that 24.3 per cent respondents do not use any toilet facility and defecate in the open. Around 50 per cent respondents sleep on the footpath and 32.2 per cent of them sleep under some temporary structure. About 39.5 per cent respondents cook their own food, while 24.9 per cent respondents buy food from roadside eateries and in 17.5 per cent depend either on charity, begging or *wardi* (food given as organised charity). It emerged that 45.8 per cent respondents go to government hospitals when they fall ill. Private hospitals are accessed by 32.8 per cent and 5.6 per cent go to local healers.

Family composition and connection

Nearly 68 per cent respondents were married. However, 69.5 per cent of respondents lived by themselves, indicating movement away from the home or familial relations. However, the study revealed that 79.1 per cent had families and 61.6 per cent had children. It also showed 53 per cent respondents were in touch with their families. This presents a mixed picture about the family situation of the respondents, whereby majority of them lived by themselves in the city and yet many of them had some form of contact with their families back home.

Work situation

The study revealed that wage worker were the highest at 23.7 per cent followed by the self-employed and those into begging who constituted 14.1 per cent of the respondents each. The unemployed constituted 13.6 per cent while 11.9 per cent were into rag picking. In terms of earnings, 30.5 per cent respondents earned between INR 2001/- to 5000/- p.m. It needs to be noted that 11 per cent earned less than INR. 2000/- p.m. indicating the marginality of their lives. The data shows that most homeless people earn enough to barely eat two square meals a day but not enough to educate their children, attend to their health needs or afford a roof over their heads. Between 33 to 50 per cent of those were employed, self-employed or were skilled workers had some formal/informal training; the rest were untrained. It was also seen that 58.2 per cent respondents did not save any money. Survival for them was a daily struggle and thus there may not be enough money left to be able to save.

Vocational training skills: A majority of the respondents i.e. 94.9 per cent stated that they had not received any vocational training whether formal or informal, meaning that had never attended any training program or learnt any skill on-the-job as an apprentice. This also means that this group has virtually no skills that may lead to being employed in the organized sector. Only 15.8 per cent possess any traditional or specialized skills.

Information and support: It emerged that 88.7 per cent respondents were not aware of any government schemes. The study showed that 91 per cent respondents had not received any support from any organisation, thus indicating the poor outreach of government and NGO services for the marginalised. About 55.4 per cent respondents did not have any citizenship documents. This has major implications in terms of their citizenship proof, and access to basic services and government schemes. It was seen that 9 per cent respondents had some disability among the family members. About 58.2 per cent either gave no response or had no information about facilities with regard to shelter, livelihood and education support for children, thus indicating the fatalistic or cynical attitude of the respondents.

Interaction with systems

It emerged that 37 per cent respondents said that people avoided contact with them, were indifferent or showed disrespect towards them. The issue of social stigma and discrimination against the homeless clearly emerged from this data. About 35 per cent respondents have witnessed some form of violence on the street. However, 74.6 per cent respondents said that they had not had any interaction with the legal system. This could be because of the invisibility of their existence vis a vis the criminal justice system or due to the fact that respondents did not want to reveal about this aspect of their lives to the researchers due to lack of faith in them. With regard to legal action by the municipal authorities against them, 64.4 per cent respondents revealed that they did not face any action against them. This could imply that they had not fallen under the radar of the municipal

authorities due to the 'temporariness' of their daily existence.

The survey revealed different categories within the homeless populations. There were families and individuals who lived in some form of temporary shelter and had a comparatively stable source of income. On the other hand, there were families who slept under the open skies and had no source of income. They earned their daily bread by begging and on days when they are not able to get anything, the family went hungry. Yet, almost all respondents said that that no one ever came forward to provide them with any assistance. The police and the municipal authorities visited them only to demolish their shelters or to take away their belongings. The law enforcement machinery viewed these individuals as delinquent and deviant.

During the course of the study the team came across 33 cases that were identified for interventions. The break-up of the interventions required were: physical health problems - 5, mental health problems - 3, need for immediate medical aid - 4, need for shelter - 6, education and training needs - 3, disability support - 6, eviction issue - 2 and employment and livelihood needs - 4. Health needs whether physical or mental emerged as the highest priority.

Case studies

Mentally challenged girl and vulnerability of living on the street: Near the Trombay Police Station area, a Tamil speaking woman was found living on the pavement with her two daughters, one of whom was about 12-14 years and mentally challenged. The mother was worried about the safety of the girls especially the one who was mentally challenged, as she had crossed puberty. She was tense about leaving her alone and going to work or get food. She wanted institutional care, especially for her mentally challenged daughter.

Young boy in need of immediate medical surgery: A nine-year old boy was found living with his grandmother in a small plastic shed next to Lallu Bhai Compound. He had lost his parents when he was very young. He is suffering from Hemangioma, an abnormal build-up of blood vessels in the skin surrounding the lower lip. The child needs to undergo a complicated surgery. The case was referred to an NGO and they agreed to take it up. Before the surgery, the child needed to undergo some pre-operative medical interventions. The child was taken to KEM hospital and the senior doctor there was of the opinion he would need to undergo many tests to even determine if he is a potential case for this complicated surgery. The surgery itself will take a whole day, and there is a 10-20 per cent risk to life. Meanwhile the child has to be careful of not injuring himself as that would also cause complications. Since the grandmother is elderly, a volunteer and donor needs to be identified to further work on this case.

Youth with mental illness after family tracing is handed over to family: A boy of about 17 years with a mental health problem was found living near a medical store opposite the TISS campus since the last five months. Even after being constantly probed in an empathetic manner, he was unable to disclose basic

personal information such as his name and address. The information provided by him was not enough to trace his family. After engaging for more than two hours to procure personal details of him and his family, he disclosed his name and named a few villages and multiple names of his family members. One village was named repeatedly and it was finally traced to a district in Maharashtra. Contact with the district police was established and the family was traced. The family immediately came to Mumbai to take him back. They shared that they had searched for him in Gujarat, Karnataka and Maharashtra and had spent more than Rs. 70,000 trying to find him. They were very emotional and were grateful for this reunification.

Destitute unwell woman: A fifty-five year old woman living on the pavement was in need of shelter and medical help. She was suffering from severe cough and was also injured. A few visits were made to build rapport with her. She was reluctant to go to the shelter home as well as to a doctor, as she did not seem to trust us. She was given time and space to develop trust. She needed a blanket and later it was provided to her as the pain in her hip bone was getting worst in the cold. Gradually, she agreed to move to a shelter home in Chembur. After a few days, she said that she did not like living in the shelter home and wanted to go back to the place from where she was brought. She was taken back as per her wishes and the people in the area were told to get back to us if any help was needed.

Children of construction workers: In the defence ground, many young children of families working at nearby construction sites were not attending any school. They were in the age group of 4 to 8 years.

Youth living on the street: A group of four boys, all having turned 18 years of age, were found living with no support outside the gate of the institution they had previously lived in.

Each of these cases also highlights various issues of health, mental health, no access to education and various vulnerabilities that people with no support systems and no resources face.

Recommendations

Keeping in mind the significant findings from this study and even though it is based on a particular geographical area, a few recommendations can be made that are generic enough to be applicable to the category of homeless people.

Shelter: There is a need to build shelters for homeless populations. A majority of the homeless sleep in the open with minimal protection. They would much rather continue to live in the open rather than lose their autonomy and possibly livelihood options. This has major implications in terms of the type of shelter that needs to be created for the homeless if we want them to live in a safer and healthier environment. The shelters should be made available at multiple locations, instead of large shelters in one or two locations; with bedding, locker, drinking water, toilet, washing and bathing facilities. There should be provision to facilitate access to medical aid and health facilities, banking, legal aid, counselling services, and

access to citizenship documents and government schemes. The shelters should be open from evening to morning but should allow people in need to avail it during the day too, especially in case of illness or emergencies.

*Vocational training***:** In the light of the fact that this group has virtually no skills that may lead to being employed in the semi-organized or organized sector. Arrangements should be made for relevant vocational training courses which can upgrade their skills and income avenues. This can be dove-tailed with the night shelters by enrolling those staying in these shelters regularly in courses based on their education, work background and interest area.

*Toilet facilities***:** About 24.3 per cent respondents do not use any toilet facility and defecate in the open. This could be due to reasons of accessibility and affordability, thus implying the need to construct free toilets in these areas. Free or affordable toilet facilities should be set up at multiple locations at the earliest, including exploring the possibility of starting mobile toilets.

Health facilities: A large percentage of the homeless not going to government hospitals despite their poor income levels is a cause for concern. It may be linked to the type of response they get at these hospitals, red-tape as well as distance from their location of residence. Special efforts should be undertaken with the help of medical social workers attached to hospitals to reach out to the homeless and by organising health camps in locations with a high concentration of homeless populations.

Outreach of government services: A large proportion of persons do not know what facilities or entitlements they may be able to access. This also indicates the poor outreach of government policies and schemes which are meant for marginalised sections. Awareness camps should be organised along with regular one-to-one counselling and information sharing about government schemes and programmes. This should be accompanied with advocacy efforts with government departments and officials highlighting the need to reach out to the homeless populations and relaxing the eligibility criteria and documents to avail the schemes.

Facilities for children of construction workers: Special efforts should be made to educate children construction workers by tying up with NGOs like Mobile Crèches and Pratham and advocacy efforts with the ICDS to start *anganwadis* in these areas. Efforts should also be made to admit such children to BMC run schools and run tuition classes for them.

Facilities for the elderly: There should be a special focus on the elderly, as 15 per cent of this group comprise of those who may be unable to find work and may have to resort to begging or charity. There should be an attempt to link these people with government social assistance and pension schemes, old age homes and medical check-up facilities through the outreach services of nearby hospitals.

Conclusion

The study has highlighted many aspects of the needs of the homeless. Even though it was a rapid assessment of the homeless population in one municipal ward of the city, the study gives a glimpse into the life and living conditions of the

homeless. It brings out the structural and personal factors leading to homelessness. Social protection measures initiated by the government have failed to trickle down to the homeless. One reason why interventions have failed to deliver is that the homeless are a mobile population while most government and civil society interventions operate through institutional structures like schools, hospitals, communities and families. The homeless population get secluded from these structures. They remain disconnected from these responses and find no representation within them.

It is important to realize that urban homelessness is not just the result of the 'culture of poverty' as highlighted in Bassuk and Rosenberg (1988), but a complex interplay of factors that drives individuals and families to the streets. The study revealed that individuals end up on the streets owing to a host of economic, social and political reasons. We need to address the issue of homelessness at the curative level through the creation of night shelters, soup kitchens, bathing and toilet facilities and deaddiction centres, along with addressing the structural factors such as addressing agrarian distress and creating a robust social protection policy framework. Life on the streets is tough and it is imperative that the State and civil society rose to the challenge of creating inclusive cities where the most marginalised can contribute to the urban economy while being able to live in the city with dignity.

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Kuki traditional institutions and development: Role of village chiefs in Manipur

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'Housa' (Chieftainship) is the oldest form of tribal administration that still works among the Kuki tribes of Manipur. Though in many tribal areas of Northeast it was abolished and replaced by Village Council, Chieftainship still functions as the system of local self government in the Kuki villages of Manipur. The present study attempts to assess the role of Kuki institution of chieftainship in development from the perspective of the chiefs themselves. The present study probes into the role perceived and played by the chiefs. As a prelude, it tries to present the demographic, social and economic structural bases of the chiefs. In addition, the present study tries to identify the major institutional constraints to chieftainship in achieving development. The study is cross sectional in nature and exploratory in design and based on the primary data collected through structured questionnaire. The chiefs of villages in the most developed and least developed blocks in the Kuki areas of Manipur constitute the respondents of the study. The results of study indicate the resilience of the traditional Kuki institution of 'Housa'. The village chiefs perceived both the traditional and developmental roles both in the most and least developed blocks invariably. The chiefs' socio economic structural bases as well as their exposure to development functionaries have not influenced their role perceptions. To deal with them effectively they suggest strengthening and empowering chief system, allocation of more funds for development of Kuki areas, special financial assistance for the chief and inclusion of chiefs in the district and state administration. However, it is argued that this system needs to be replaced with more democratic and responsible local governance system similar to that of the panchayati raj institutions functioning in the rural India.

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Introduction

'Housa' (Chieftainship) is the oldest form of tribal administration known to have stood the test of time which still functions among the Kuki tribes of Manipur.

Though in many tribal areas of North East Chieftainship was abolished and replaced by the Village Council System, chieftainship still remains the only mode of village administration among the Kukis of Manipur.

Recently, some scholars have argued that the hereditary chief system is neither authoritative nor despotic. A deeper study of the history of these tribes shows a very clear role of the chiefs in ensuring the development of the poor, the weak and vulnerable sections of the village communities. However, the traditional institution of chieftainship deteriorated after the British occupation of the tribal areas. In the post independence period, it did not show any signs of improvement due to various social, economic and political structural factors.

As regards the literature, the role of chieftainship in governing the tribal communities is a recurrent feature of tribal studies in the Northeast India. The Kuki chieftainship system has been described in a number of works (Gangte, 2003; Shaw, 1929; Soppitt, 1893). The chieftainship and its role among the Naga tribes, (Majumdar & Madan 1980; Chib 1984), tribes of Tripura (Sengupta, 1994; Baveja, 1982), Meghalaya (Das & Basu, 2005; Momin & Mawlong 2004; Roy & Majumdar, 1981), and Mizoram (Sangkima, 2004; Parry, 1922; Thangchungnunga, 1997) had been described.

Though these studies provide useful information, there are a few research gaps could be noted. Firstly, the demographic, socio economic or political profile of the chieftains is hardly described in any study. Secondly, the role of the chiefs perceived by the chiefs themselves has not been assessed. Thirdly, the achievements and contributions of the chiefs to the development of the tribal people are hardly probed into. Fourthly, the constraints in the functioning of the chieftainship are hardly explored into. The present study attempts to fill these gaps in the study.

The present paper is presented in three sections. The first section outlines the research problem and methodology. In the second section, the results and discussion are presented while in the last section the concluding observations are presented.

The Problem and Methodology

In this section, the research problem and the methodological aspects of the present study are presented.

The Problem

The purpose of the present study is to understand the role perceived and played by the chiefs. In addition to these, the study tries to understand the major institutional constraints linked with chieftainship in achieving tribal development. This study also presents the demographic, social, economic, political structural bases of the chieftains. In the light of the findings, a few measures for policymaking and social work intervention are also suggested. The results of this study on these aspects will be useful for policy makers and social workers to enhance the quality of tribal life in the Northeast region.

Methodology

The present study is cross sectional in nature and exploratory in design. It is based on the primary data collected through structured questionnaire from the chiefs of villages in the Kuki areas of Manipur. The survey was conducted during December 2006 to February 2007.

By using stratified random sampling, data were collected where different blocks in two tribal districts viz., Churachandpur and Tamenglong of Manipur were classified into most developed and least developed. In these blocks, one most developed block and one least developed block were selected at random. All the village chiefs in the 4 selected blocks were distributed a structured questionnaire. 103 Questionnaires were distributed to the chieftains, of which only 37 filled in questionnaires were returned after 2 visits by the investigator. SPSS package was used to process and analyse the data. Cross tabulation, averages, percentages and proportions were used in analysis of data. Apart from these Karl Pearson's product moment correlation coefficients have been used for analysis.

Results and Discussion

The present section is devoted to present the results of statistical analysis of the primary data collected. This section has been presented with two sub sections viz., profile of chiefs, and institution of chieftainship at work.

Social Structural Bases of Chiefs

The profile of the chiefs presented in the present section covers the demographic, social, economic and political structural bases of the chiefs surveyed.

1. Demographic Bases

The demographic bases of the chief include the structural characteristics such as gender, age group, marital status, education status, type and size of family (see table 1).

As regards gender most of the chiefs are male and the women had the least chances to hold the position of Chieftainship because the traditional institution of Chief is patrilineal and also patriarchal. Out of the total 37 respondents, only 1of the chiefs are female. This shows the low representation of women in community power structure in most tribal areas.

As regards age most of the chiefs are middle aged (35-60 years). More than three fourth of the chiefs in most developed blocks(67%) and more than one half of them in least developed blocks(58%) are of middle age. The mean years of age worked out also indicates similar picture of age. The average age of a chief in both the blocks respectively was worked out to 57 years. All the chiefs were married. Interestingly, there are no unmarried chief.

As regards education most of the chief had high school education in both the most and least developed blocks. More than one half of the chiefs in the least

developed blocks (58%) and more than three fourth of them in the most developed blocks (78%) had high school education. Interestingly, a notable proportion of the chiefs in both the types of blocks had education above higher secondary school. Over one fourth of the chiefs in least developed blocks (26%) and one tenth of them in the most developed blocks (11%) had education above the higher secondary level. The mean years of education of the chiefs in the most developed blocks was worked out at 10 years while that of the least developed blocks is worked out to be 9 years.

As regards type of family, joint family is found to be predominant type among the chiefs in both types of blocks. More than four fifth of the chiefs in least developed blocks(84 %) and most of the chiefs in most developed block(94%) reportedly lived in joint families.

Though the family size of the chiefs is predominantly large in both the types of blocks it is more prominent in most developed blocks. A little more than 83 percent of the chiefs in the most developed blocks and 68 percent of the chiefs in the least developed blocks had large families. The mean size of family is worked out at a tag more than 8 for least developed blocks while the same is close to 9 in most developed blocks.

2. Social Structural Bases

Social Structural bases of Chiefs discussed as under are tribe, religion and denomination. These characteristics are observed and discussed as under (see table 2).

The chiefs belong to five different Kuki tribes residing in the study area. They are Thadou, Vaiphei, Gangte, Zou and Aimol. Chiefs belonging to Thadou tribe are majority in both the types of blocks while a significant proportion of them belong to Gangte and Vaiphei tribes. This representation reflects the population composition of the Kuki tribes in the study area. More than one half of the chiefs in least developed blocks(63%) and half of them in most developed blocks(50%) belong to the Thadou tribe. Vaiphei and Gangte are the other tribes which have significant representation among the chiefs. Chiefs belonging to Vaiphei constitute one third of the chiefs in the most developed blocks (33%) while Gangte constitutes over one fourth of the chiefs in the least developed blocks (26%).

There are two religions practiced among the chiefs in the surveyed area. They are Christianity and Judaism. All of the chiefs of the least developed blocks belonged to Christianity while over one tenth of the chiefs in most developed blocks practice Judaism. The presence of Judaism can be attributed to the belief among the Kukis of Manipur and Mizos of Mizoram that they are one of the lost tribes of Israel. Kukis initially embraced Christianity and some of them had further converted to Judaism believing that they were one of the lost tribes of Jews.

The different denominations found in the present study area were Evangelical Churches Association, Baptist, Presbyterian, Roman Catholic, Pentecostal, Messianic, Judaism and local denominations. Evangelical church is found to be predominant among the chiefs in most developed blocks (39%) while Baptist church is found to be highest among the least developed blocks (47%). Nearly one

fifth of the chiefs in most developed block belonged to Presbyterian denomination (17%).

3. Economic Structural Bases

The economic structural bases of the chiefs are discussed in terms of the main occupation, subsidiary occupation and their level of household income (see table 3).

The chiefs subsist on cultivation, government employment, government pension, petty businessmen or public service. The chiefs were by and large cultivators in both the types of blocks. The occupational structure of the chiefs in most developed blocks was more diversified than that of the least developed blocks. Over four fifth the chiefs in least developed blocks (84%) and more than one half of them in the most developed blocks (61%) were cultivators. Interestingly, over one tenth of the chiefs (16 %) in both the blocks were in various government services.

As regards subsidiary occupation for over one third of the chiefs there was no such occupation. More than one third of the chiefs in least developed blocks (42%) and in the most developed blocks (39%) had no subsidiary occupation at all. But agriculture and horticulture are the significant subsidiary occupations among the chiefs in both the blocks. One fourth of the chiefs in least developed blocks (26%) and more than one fourth in the most developed blocks (39%) had agriculture as subsidiary occupation.

The annual household income of the chiefs was classified into four levels viz., Below Rs 30000, Rs 30000 to 60000, Rs 60000 – 100000, Above Rs 100000. Most of the chiefs in both the blocks had annual income between Rs. 30,000 – Rs. 60,000 in the most developed (56%) as well as least developed blocks (42%). The mean annual income of the chiefs indicates that the chiefs in the most developed blocks had better living conditions over their counterparts in the least developed blocks (see table 3). It seems from the above observations that the chiefs in spite of controlling large area of land were not very rich though they cannot be exactly labelled as poor either.

4. Political Affiliation of the Chiefs

The chiefs are usually active in politics, as they are typically the most influential persons in their respective villages. They are found to usually affiliate to some political parties and even hold important positions in them. The political affiliations of the chiefs and   parties they are affiliated are described as under (see table 4).

Majority of the chiefs in both types of blocks are supporters of one political party or the other rather than being members. More than one half of the chiefs in the least developed blocks(53%) and half of the chiefs in most developed blocks(50%) were reportedly the supporters of a particular political party.

The political parties found to have supporters among the chiefs in the study area include Indian National Congress (INC), Communist Party of India (CPI), Lok Jansakthi Party (LJP), Samajwadi Party (SP), Nationalist Congress Party

(NCP), and Rashtriya Janada Dal (RJD) though half of the chiefs kept them aloof from politics. Interestingly, all these are national political parties operating in various states of India. Most of the chiefs reportedly are supporters of Indian National Congress (INC), which is at the time of the survey the ruling party at both state and central levels. INC is reportedly supported by nearly one third of the chiefs in the least developed blocks (32%), and one third of chiefs in the most developed blocks (33%). Strikingly, the Nationalist Congress Party (NCP), Rashtriya Janada Dal (RJD) and Lok Jansakthi Party (LJP) are supported by a few of the chiefs in both the blocks.

Institution of Chieftainship at Work

The previous sub section described the structural bases of the chief. With that backdrop the profile of chieftainship, pattern of consultation in decision-making, exposure to development functionaries, chiefs' role perception, achievements and correlates of role perception and achievement in this section.

1. Profile of Chieftainship

The profile of the Chieftainship is discussed in terms of the duration of chieftainship, number of generation as chief, mode of acquisition of chieftainship and generations expected (see table 5).

The duration of Chieftainship or years of acting as chief is categorized into three groups viz., less than 15 years, 15-35 years and 35 years above. The greatest proportion of chiefs had 15 to 35 years duration of chieftainship in both least developed (42%) and   most developed blocks (39%). Nearly one third of the chiefs in the least developed blocks and most developed blocks had more than 15 years duration of service while more than one fourth of the chiefs in both the types of blocks had less than 15 years in office as chief. The mean duration of chieftainship in the least developed blocks is computed to be 27 years and   the same is 28 years for the chiefs in the most developed blocks.

As regards the number of generations acting as chiefs, the results indicate that mostly the chieftainship has been occupied for about two generations in both the types of blocks. One half of the chiefs in the most developed blocks and nearly one third of the chiefs in the least developed blocks reportedly had acted as chiefs for two generations. Nearly one third of the chiefs in the least developed blocks and more than one fifth of them in the most developed blocks reported had only one generation of chieftainship. The mean number of generation acting as chieftainship is computed at 2 in the least developed blocks and 2 in the most developed blocks.

Modes of acquisition of chieftainship observed in the study area include elders' choice, King/British appointment and purchase. Among these, the elders' choice and purchase are the prominent modes of acquisition in both the types of blocks. The elders reportedly chose 42 percent of the chiefs in least developed and 33 percent of them in developed blocks. One third of the chieftainships in most developed blocks (33%) while in least developed blocks (32%) are reportedly

acquired by purchase. King's appointment is also a significant mode in both the types of blocks. More than one fifth of the chieftainships are acquired by the chiefs' families by King's /British appointment in both the blocks.

As regards the number of generations, most of the chiefs in both the blocks are expected to be in office so long as the customary laws and practices continue to be relevant or as long as their lineage continues. More than one third of the chiefs in both the types of blocks expected the office would continue with their heirs so long as their lineage exists. Interestingly, over one tenth of the chiefs in both the types of blocks reported to continue in office of chief so long as the customary law exists (see table 5).

2. Pattern of Consultation in Decision Making

Decision-making is one of the important aspects of the governance at any level. In decision making, traditionally chiefs used to consult the elders in the past. Here in this section, an attempt has been made to assess the frequency of consultation by the chiefs in decision making with various groups in their villages. Consultation in decision making was in fact measured in terms frequency of chiefs' consultation with village elders, youth leaders, church leaders, own family members, knowledgeable persons, relatives, friends and school teachers. The frequency of consultation with each of the categories is measure with a four-point scale always (4), sometimes (3), rarely (2) and never (1). The mean consultation scores of each of these are presented in table 6.

There are significant differences between the most and least developed blocks in terms of the pattern of chiefs' consultation in decision-making. Interestingly, the chiefs of the villages in the most developed blocks had greater frequency of consultation in most of the categories in decision making as compared to their counterparts in the least developed blocks.

Majority of the chiefs reported to have 'always' consulted Village Elders (3.9), Youth Leaders (3.6), and Church Leaders (3.7) in the case of most developed blocks while in case of least developed blocks they 'always' consulted youth leaders (3.6) only while making decisions. The chiefs in most developed blocks 'sometimes' consulted their own Family Members (3.39), Knowledgeable Persons (3.39), Relatives (3.17), Friends (3.00), and School Teachers (2.89) in decision-making. On the other hand, the chiefs in least developed blocks 'sometimes' consulted village elders (3.4), Church Leaders (3.21), Own Family Members (3.47), Knowledgeable Persons (3.37), and Relatives (3.05) and they 'rarely' consulted friends (2.47) and school teachers (2.16).

3. Exposure to Developmental Functionaries

Development by and large is determined by the degree of exposure of the village leaders with the official and non-official development functionaries. The present sub section assesses the links between various development functionaries with the chiefs. The development functionaries include Member of Parliament (MP), Member of State Assembly (MLA), State Ministers, Deputy Commissioner (DC),

District Deputy Collector (DDC), Block Development Officer (BDO), Extension Officer (EO), Police Officer, Bank Manager, School Headmaster, Health Worker, and Agriculture Worker. The exposure of the chiefs has been measured in terms of 'yes' or 'no' type of close ended questions. The results are presented in table 7.

There is marginal difference between the chiefs of the two types of blocks. The mean index of exposure to development functionaries for the chiefs of least developed blocks is worked out at 0.67 while that of those of most developed blocks is 0.63.

Interestingly, a majority of the chiefs in both the types of blocks had exposure to MLA, BDO, DDC, Extension Officer (EO), Village Agriculture Worker (VAW), Deputy Commissioner (DC), Primary School Headmaster, Village Health Workers (Nurse) and any police officer. On the other hand Bank Managers, State Ministers, and Member of Parliament (MP) are known to only some of the chiefs.

4. Chiefs Role Perception: Traditional and Developmental

The performance of the chief in tribal development is expected to be influenced by the role perception of the chief. Role perception of chiefs has been conceptualised into two components viz., traditional role and developmental role. Traditional role perception of the chief is assessed in terms of the chiefs' traditional functions such as monitoring and deciding the dates for forest clearance, distribution of land, deciding land site for cultivation, protecting the village, ensuring order and justice, promoting hard work, integration, religiosity and spirituality, and honesty while promoting self-help, promotion of education, improving living condition, and preventing spread of disease are the functions considered for assessment of developmental role perception of the chief. These are measured in terms of a four-point scale with Strongly Agree (4) Agree (3) Disagree (2) Strongly Disagree (1). The simple average of all the functions in each of the dimension is considered as role perception score (see table 8).

As compared to traditional role, the developmental role is perceived more by the chiefs in both the types of blocks. The chiefs strongly agree with the developmental role of their institution in both the most developed blocks (3.7) and least developed blocks (3.8) while agreeing with their traditional roles as well. The traditional role perception score of the chiefs in least developed blocks is worked out to 3.5 and that of most developed block is 3.2. Indeed, the traditional institution of chieftainship seems to be resilient and do accommodate the modern challenges of improving the quality of life, education, health care etc.

5. Chiefs Achievements: Traditional and Developmental

Achievements of the Chiefs had been conceptualised into two dimensions - traditional and developmental. Developmental achievement is assessed in terms of social and physical infrastructure development and economic development. Settlement of disputes and justice, implementation of customary law and administrative development are considered as indicators of traditional achievement. Each of these indicators is measured by binary (yes 1 no =0)

variables. Simple average of all the indicators in each dimension is considered as indices of them (see table 9).

The chiefs by and large report developmental achievement to a greater extent as compared to their traditional achievement invariably in both the types of blocks. On an average 68 percent of the chiefs in least developed blocks and 69 percent of them in the most developed blocks report developmental achievement. On the other hand 26 percent of the chiefs in the former and 31 percent of them in the latter report traditional achievement.

The achievements of the chiefs in both the types of blocks is found to be highest in physical infrastructure development, which account for 74 per cent in least developed blocks and 84 percent in most developed blocks. Implementation of customary law as an achievement is found to be the lowest in the block in least developed block (5%) and in most developed block (11%). Economic development was found to be higher in least developed block (63%) than in most developed block (44%). Settlement of dispute and promotion of justice too is higher in least developed block (58%) than in most developed block (56%) while social infrastructure development is found to be higher in most developed block (78%) than in least developed block (68%). In the same way administrative development too is found to be higher in most developed block (28%) than in least developed block (16%). This shows that the common achievement of the Kuki chiefs in Manipur is in the field of physical and social infrastructure. Moreover, it can be inferred from the study that implementation of customary law is diminishing and the concern for it is very less (see table 9).

6. Correlates of Role Perception and Achievements of Chief

To identify the factors related to the role perception and achievements of the surveyed chiefs, a correlation analysis was conducted between background variables viz., types of blocks, age group, education status, level of income, duration of chieftainship, number of generation as chief, and exposure to development functionaries, traditional functions, developmental functions, traditional achievement, and developmental achievements. Karl Pearson's coefficients are also computed among the variables of exposure to development functionaries, traditional functions, developmental functions, traditional achievements, and developmental achievements (see table 10).

Exposure to development functionaries has no significant relationship with the types of blocks (-0.09), age group (-0.23), education status (0.05), level of income (-0.03), duration of chieftainship (0.02), and number of generation as chief (0.06).

Similarly, traditional role perception of the chiefs was not significantly related to type of blocks (-0.30), age group (-0.14), education status (0.16), level of income (-0.23), duration of chieftainship (0.05), number of generation as chief (0.12), and exposure to development functionaries (0.23).

Interestingly, developmental role perception had significant and positive relationship with traditional role perception (0.66). But it has no significant relationship with type of blocks (-0.14), age group (-0.11), education status (0.14), level of income (-0.15), duration of chieftainship (0.04), number of generation as

chief (-0.05), and exposure to development functionaries (0.03).

Traditional achievement of the chiefs had significant and positive relationship with age group (0.38). It seems as the age increases the perceived traditional achievement score of the chiefs also increases. But variables such as types of blocks (0.12), education status (0.10), level of income (0.28), duration of chieftainship (0.24), number of generation as chief (-0.02) had no significant association with traditional achievement of the chiefs. Strikingly, traditional achievements of the chiefs had no significant association with exposure to development functionaries (0.13), traditional role perception (-0.05) or developmental role perception (-0.21).

Developmental achievements of the chiefs is not significantly related to any of the variables viz., types of blocks (0.00), age group (-0.09), education status (-0.07), level of income (-0.05), duration of chieftainship (-0.04), number of generation as chiefs (0.04), exposure to development functionaries (0.31), traditional role (0.15), developmental role (-0.09), and traditional achievements (0.11)

Institutional Constraints and Suggestions

In this last section, the constraints perceived to affect the working of the chiefs in development and suggestions for their improvement are presented in two subsections.

1. Constraints to Effective Functioning of Chiefs

Constraints are those factors that obstruct the effective and smooth functioning of the chiefs in achieving the goals of development. The constraints according to the chiefs are related to factors like dealing with insurgent groups, poverty and illiteracy, lack of unity among villagers, and lack of infrastructure development. The study shows that insurgent organisations operating in Manipur as perceived as the major constraint to the effective functioning of the chiefs in most developed (56%) and in the least developed blocks (58%).

Poverty and illiteracy accounted for 53 percent in least developed block and 44 percent in most developed block. Lack of unity is another factor that vexes the chief in effective functioning, where it accounts for 47 percent and 39 percent in least developed block and most developed block respectively. Lack of infrastructure development seems to be arrived at as the least constraint to the effective functioning of chiefs (see table 11).

2. Suggestions for Effective Functioning of Chiefs

The chiefs were asked to suggest measures for their effective functioning. The suggestions are grouped into 11 major classes. They were strengthening and empowering chief system, release of more funds for development, special financial assistance for the chief, inclusion of chief in development bodies, construction of village court building, reduction of corruption, employment

generation for the villagers, establishment of village market, empowering youth & women, development of social infrastructure, and development of physical infrastructure (see table 12).

The results indicated that strengthening and empowering of chief system in Manipur is found to be the most prominent suggestion for enhancing the effectiveness of the functioning of the chieftainship by the chiefs themselves. Over three fourth of the chiefs in most developed blocks(78%) and more than one half of them in least developed blocks(58) suggested strengthening and empowering of chief system.

The development of physical infrastructure (58%) and release of more funds for development (53%) were the other two suggestions put forward by the majority of chiefs in the least developed blocks. Special financial assistance for the chief and inclusion of chief in development bodies of the state are the other significant suggestions made by the chiefs. More than one third of the chiefs of least developed blocks(47%) recommended special financial assistance for the chief and inclusion of chief in development bodies of the state while one half of the chiefs recommended the former and another one half of them recommended the latter.

Concluding   Observations

Panchayati Raj Institutions (PRIs) do not exist in most of the Tribal Areas of North East India. The PRIs have not been introduced in the Tribal Areas of North East to respect the self-governing traditional institutions of tribal people by the constitution of India. In the Kuki areas of Manipur, there is a "*Semang Pachong*" (Elders Council which gives advice to the chief), which is also similar to the Village Council but the real authority and ultimate discretionary execution power of decisions are vested on the traditional chief.   The traditional institution of chieftainship has already been abolished in Mizoram as well as the Naga areas of Manipur and Nagaland states. In these areas, democratically elected chief has already replaced hereditary chiefs periodically though PRIs had yet to be introduced.

In this context, the present study assessed the role of traditional institution of chieftainship in the Kuki areas of Manipur. In infrastructure development, the most developed blocks were better performing as compared to the least developed blocks. In spite of this the social and physical infrastructure development situation in the tribal areas is far from satisfactory. Roads, transport, communication, primary healthcare and education need much more advancement.

The chieftains run the day today administration of the villages of Kuki tribes. They broadly represent the social composition of these tribes in terms of sub tribe and denomination. In economic structural terms, they depend upon agriculture as most of the people of Kuki communities. But in terms of education and income they are slightly better off than the general populace of the villages they administer. The Chiefs belonging to the most developed area were having significantly higher income and greater level of education as expected. The chiefs in both the most developed and least developed blocks perceive the developmental

role very much and report developmental achievements. However, their virtual role in development is far from satisfactory. It could be observed during the field survey that most of the chiefs live in their respective district headquarters or in nearby towns and the people report that their chiefs rarely visit their villages. There is no democratic control over them from below and they are neither responsible for people nor state government. Brief interactions with the village people revealed number problems in the actual working of the institution of chieftainship. The people suffer from nepotism and negligence in the functioning of the chiefs. As the entire village including the land is technically owned by the chiefs, the people are voiceless and powerless. They cannot afford to challenge the chief as he has the power to evict the complainant and seize the house and other properties owned by his or her household. Another serious problem reported by the people was that until recently the chiefs did not allow the people to vote in the general and assembly elections at their will but rather dictated the people to vote to a particular candidate or casted the votes themselves forcefully.

With due regard and respect for Kuki tradition and culture, it could be argued that the institution of the chieftainship in its present form is in a state of decadence and has become obsolete. Today, the institution of the chief functions to fulfill the personal ambitions of the chiefs themselves rather than working towards the collective goals of tribal welfare, development and empowerment.

Therefore, the Sixth Schedule of the Constitution of India should be reviewed at the earliest and the traditional institution of chieftainship should be restricted to ceremonial purposes and to democratize the Kuki society Panchayati Raj institutions with at least a two tier system needs to be introduced. All the efforts should be made to promote awareness among the Kuki people on democratic decentralisation and people's participation in development.

Table 1 Demographic Bases of Chiefs

Sl.No	Characteristic	Type of Blocks		Total N =37
		Least Developed n=19	Most Developed n=18	
I	Gender			
	Male	19 (100.00)	17 (94.44)	36 (97.30)
	Female	0 (0.00)	1 (5.56)	1 (2.70)
II	Age Group			
	Young (Below 35)	1 (5.26)	0 (0.00)	1 (2.70)
	Middle (35-60)	11 (57.89)	12 (66.67)	23 (62.16)
	Old (60 and Above)	7 (36.84)	6 (33.33)	13 (35.14)

Sl.No	Characteristic	Least Developed n=19	Most Developed n=18	Total N=37
	Mean Years of Age	57.1 ± 16.4	57.3 ± 12.5	57.2 ± 14.5
III	Marital Status			
	Married	19 (100)	18 (100)	37 (100)
IV	Education Status			
	Illiterate	0 (0.00)	1 (5.56)	1 (2.70)
	Primary (1-4)	0 (0.00)	1 (5.56)	1 (2.70)
	Middle (5-7)	3 (15.79)	0 (0.00)	3 (8.11)
	High School (8-10)	11 (57.89)	14 (77.78)	25 (67.57)
	Higher Secondary and Above	5 (26.32)	2 (11.11)	7 (18.92)
	Mean Years of Education	10.00 ± 3.40	9.17 ± 3.78	9.59 ± 3.56
V	Type of Family			
	Nuclear	3 (15.79)	1 (5.56)	4 (10.81)
	Joint	16 (84.21)	17 (94.44)	33 (89.19)
VI	Size of Family			
	Medium (4-6)	6 (31.58)	3 (16.67)	9 (24.32)

Source: Computed   Figures in parentheses are percentages

Table 2 Social Structural Bases of Chiefs

Sl.No	Characteristic	Type of Blocks		Total N =37
		Least Developed n =19	Most Developed n =18	
I	**Tribe**			
	Thado	12 (63.16)	9 (50.00)	21 (56.76)
	Vaiphei	1 (5.26)	6 (33.33)	7 (18.92)
	Gangte	5 (26.32)	2 (11.11)	7 (18.92)
	Zo	0 (0.00)	1 (5.56)	1 (2.70)

		Least Developed n=19	Most Developed n=18	Total N=37
	Aimol	1 (5.26)	0 (0.00)	1 (2.70)
II	**Religion**			
	Christianity	19 (100.00)	16 (88.89)	35 (94.59)
	Judaism	0 (0.00)	2 (11.11)	2 (5.41)
III	**Denomination**			
	Evangelical	6 (31.58)	7 (38.89)	13 (35.14)
	Baptist	9 (47.37)	2 (11.11)	11 (29.73)
	Presbyterian	1 (5.26)	3 (16.67)	4 (10.81)
	Roman Catholic	1 (5.26)	1 (5.56)	2 (5.41)
	Pentecostal	1 (5.26)	0 (0.00)	1 (2.70)
	Messianic	0 (0.00)	1 (5.56)	1 (2.70)
	Judaism	0 (0.00)	1 (5.56)	1 (2.70)
	Others	1 (5.26)	3 (16.67)	4 (10.81)

Source: Computed   Figures in parentheses are percentages

Table 3 Economic Structural Bases of Chiefs

Sl.No	Characteristic	Type of Blocks		Total N =37
		Least Developed n =19	Most Developed n =18	
I	**Main Occupation**			
	Cultivation	16 (84.21)	11 (61.11)	27 (72.97)
	Government Service	3 (15.79)	3 (16.67)	6 (16.22)
	Pension	0 (0.00)	2 (11.11)	2 (5.41)
	Business	0 (0.00)	1 (5.56)	1 (2.70)
	Social Service	0 (0.00)	1 (5.56)	1 (2.70)

II	Subsidiary Occupation			
	None	8 (42.11)	7 (38.89)	15 (40.54)
	Agriculture	5 (26.32)	7 (38.89)	12 (32.43)
	Horticulture	3 (15.79)	1 (5.56)	4 (10.81)
	Business	2 (10.53)	0 (0.00)	2 (5.41)
	Pensioner	0 (0.00)	1 (5.56)	1 (2.70)
	Cottage Industry	0 (0.00)	2 (11.11)	2 (5.41)
	Pharmacy	1 (5.26)	0 (0.00)	1 (2.70)
III	Level of Annual Household Income			
	Below Rs 30000	7 (36.84)	1 (5.56)	8 (21.62)
	Rs 30000 to 60000	8 (42.11)	10 (55.56)	18 (48.65)
	Rs 60000 – 100000	3 (15.79)	3 (16.67)	6 (16.22)
	Above Rs 100000	1 (5.26)	4 (22.22)	5 (13.51)
	Mean Annual Household Income	50421.05 ± 27586.86	76722.22 ± 59541.19	63216.22 ± 47246.48

Source: Computed   Figures in parentheses are percentages

Mean ± S.D

Table 4 Political Affiliation of Chiefs

Sl.No	Characteristic	Type of Blocks		Total N =37
		Least Developed n =19	Most Developed n =18	
I	**Political Affiliation**			
	None	9(47.37)	8(44.44)	17(45.95)
	Supporter	10(52.63)	9(50.00)	19(51.35)
	Member	0(0.00)	1(5.56)	1(2.70)
II	**Political Party**			
	None	9(47.37)	8(44.44)	17(45.95)
	Indian National Congress (INC)	6 (31.58)	6 (33.33)	12 (32.43)
	Rashtriya Janada Dal (RJD)	2 (10.53)	0(0.00)	2(5.41)
	Nationalist Congress Party (NCP)	0(0.00)	2(11.11)	2(5.41)
	Lok Jansakthi Party (LJP)	1(5.26)	1(5.56)	2(5.41)
	Samajwadi Party (SP)	0(0.00)	1(5.56)	1(2.70)

Source: Computed   Figures in parentheses are percentages

Table 5 Details of Chieftainship: Duration, Generation, and Modes of Acquisition

Sl.No	Details	Type of Blocks		Total
		Least Developed n =19	Most Developed n =18	N =37
I	**Duration of Chieftainship**			
	Less than 15 Years	5(26.32)	5(27.78)	10(27.03)
	15 – 35 Years	8 (42.11)	7 (38.89)	15 (40.54)
	35 Years and Above	6 (31.58)	6 (33.33)	12 (32.43)
	Mean Years of Acting as Chief	26.74 ± 16.14	28.44 ±18.60	27.57 ± 17.16
II	**Number of Generations as Chief**			
	1	6 (31.58)	4 (22.22)	10 (27.03)
	2	6 (31.58)	9 (50.00)	15 (40.54)
	3	3 (15.79)	3 (16.67)	6 (16.22)
	4	1 (5.26)	2 (11.11)	3 (8.11)
	5	3 (15.79)	0 (0.00)	3 (8.11)
	Mean Number of Generations	2.42 ± 1.43	2.17 ± 0.92	2.30 ± 1.20
III	**Mode of Acquisition of Chieftainship**			
	Elders' Choice	8 (42.11)	6 (33.33)	14 (37.84)
	Purchase	6 (31.58)	6 (33.33)	12 (32.43)
	King/British Appointment	4 (21.05)	4 (22.22)	8 (21.62)
	Others	1 (5.26)	2 (11.11)	3 (8.11)
IV	**Generations Expected**			
	One Generation	9 (47.37)	9 (50.00)	18 (48.65)
	As Long as Customary Law continued	2 (10.53)	3 (16.67)	5 (13.51)
	So Long as the Lineage Continued	8 (42.11)	6 (33.33)	14 (37.84)

Source: Computed   Figures in parentheses are percentages

Mean ± S.D

Table 6 Pattern of Consultation in Decision Making

Sl.No	Agency	Type of Blocks				Total N = 37	
		Least Developed n =19		Most Developed n =18			
		Mean	S.D	Mean	S.D	Mean	S.D
1	Village Elders	3.42	0.69	3.94	0.24	3.68	0.58
2	Youth Leaders	3.63	0.76	3.56	0.78	3.59	0.76
3	Church Leaders	3.21	1.18	3.67	0.49	3.43	0.93
4	Own Family Members	3.47	0.96	3.39	0.70	3.43	0.83
5	Knowledgeable Persons	3.37	0.83	3.39	0.61	3.38	0.72
6	Relatives	3.05	0.85	3.17	0.92	3.11	0.88
7	Friends	2.47	1.17	3.00	0.97	2.73	1.10
8	School Teachers	2.16	1.26	2.89	1.02	2.51	1.19

Source: Computed

Table 7 Exposures to Official and Non-Official Development Functionaries

Sl.No	Development Functionary	Type of Blocks		Total N = 37
		Least Developed n =19	Most Developed n =18	
1	Member of Legislative Assembly (MLA)	17 (89.00)	17 (94.00)	34 (92.00)
2	Block Development Officer (BDO)	17 (89.00)	15 (83.00)	32 (86.00)
3	District Deputy Collector (DDC)	17 (89.00)	15 (83.00)	32 (86.00)
4	Extension Officer (EO)	16 (84.00)	13 (72.00)	29 (78.00)
5	Village Agriculture Worker (VAW)	14 (74.00)	13 (72.00)	27 (73.00)
6	Deputy Commissioner (DC)	12 (63.00)	15 (83.00)	27 (73.00)
7	Primary School Headmaster	14 (74.00)	12 (67.00)	26 (70.00)
8	Village Health Workers (Nurse)	11 (58.00)	12 (67.00)	23 (62.00)
9	Any Police Officer	12 (63.00)	11 (61.00)	23 (62.00)
10	Any Bank Manager	9 (47.00)	8 (44.00)	17 (46.00)
11	State Ministers	8 (42.00)	6 (33.00)	14 (38.00)
12	Member of Parliament (MP)	6 (32.00)	0 (0.00)	6 (16.00)
	Exposure to Development Functionaries Index	0.67 ± 0.19	0.63 ± 0.23	0.65 ± 0.21

Source: Computed   Figures in parentheses are percentages

Mean ± S.D

Table 8 Role Perception of Chiefs

Sl.No	Function	Type of Blocks				Total N = 37	
		Least Developed n =19		Most Developed n =18			
		Mean	S.D	Mean	S.D	Mean	S.D
1	Monitoring Forest Clearance	2.00	1.15	2.00	1.14	2.00	1.13
2	Deciding Date of Forest Clearance	3.21	0.85	2.44	1.04	2.84	1.01
3	Distribution of Land	3.21	0.79	2.83	0.92	3.03	0.87
4	Deciding Land Site for Cultivation	3.53	0.77	3.06	1.00	3.30	0.91
5	Protecting the Village	3.53	0.51	3.56	0.51	3.54	0.51
6	Ensuring Order and Justice	3.68	0.58	3.56	0.51	3.62	0.55
7	Promoting Hard Work etc	3.79	0.54	3.72	0.46	3.76	0.49
8	Promoting Integration	3.89	0.46	3.67	0.49	3.78	0.48
9	Promoting Religiosity & Spirituality	3.84	0.50	3.78	0.43	3.81	0.46
10	Promoting Honesty	4.00	0.00	3.67	0.49	3.84	0.37
11	Improving Living Condition	3.79	0.71	3.61	0.50	3.70	0.62
12	Promoting Self Help	3.79	0.54	3.67	0.49	3.73	0.51
13	Preventing spread of disease	3.84	0.50	3.72	0.46	3.78	0.48
14	Promoting Education	3.95	0.23	3.89	0.32	3.92	0.28
I	Traditional Role (1:10)	3.47	0.62	3.23	0.70	3.35	0.68
II	Developmental Role (11:14)	3.84	0.49	3.72	0.44	3.78	0.47

Source: Computed   Figures in parentheses are percentages

Table 9 Perceived Achievements of the Chiefs: Traditional and Developmental

Sl.No	Achievement	Type of Blocks		Total N = 37
		Least Developed n =19	Most Developed n =18	
1	Physical Infrastructure	14 (73.68)	15 (83.33)	29 (78.38)
2	Social Infrastructure	13 (68.42)	14 (77.78)	27 (72.97)
3	Settlement of Disputes and Justice	11 (57.89)	10 (55.56)	21 (56.76)
4	Economic Development	12 (63.16)	8 (44.44)	20 (54.05)
5	Implementation of Customary Law	1 (5.26)	2 (11.11)	3 (8.11)
6	Administrative Development	3 (15.79)	5 (27.78)	8 (21.62)
I	Traditional Achievement Index (3+5+6)	0.26 ± 0.18	0.31± 0.24	0.29 ± 0.21
II	Developmental Achievement Index (1+3+4)	0.68 ± 0.28	0.69 ± 0.33	0.68 ± 0.30

Source: Computed   Figures in parentheses are percentages
Mean ± S.D

Table 10 Correlates of Role Perception and Achievements of Chief

Variable	Exposure to Development Functionaries	Role Perception		Achievement	
		Traditional Role	Developmental Role	Traditional	Developmental
Type of Blocks	-0.09	-0.30	-0.14	0.12	0.00
Age Group	-0.23	-0.14	-0.11	0.38*	-0.09
Education Status	0.05	0.16	0.14	0.10	-0.07
Level of Income	-0.03	-0.23	-0.15	0.28	-0.05
Duration of Chieftainship	0.02	0.05	0.04	0.24	-0.04
Number of Generation as Chief	0.06	0.12	-0.05	-0.02	0.04
Exposure to Development Functionaries	1	0.23	0.03	0.13	0.31
Traditional Role Perception	0.23	1.00	0.66 **	-0.05	0.15
Developmental Role Perception	0.03	0.66 **	1.00	-0.21	-0.09
Traditional Achievement	0.13	-0.05	-0.21	1.00	0.11
Developmental Achievement	0.31	0.15	-0.09	0.11	1

Source: Computed   Figures in parentheses are percentages
* P< 0.05   **P<0.01

Table 11 Constraints to Effective Functioning of Chiefs

Sl.No	Constraint	Type of Blocks		Total N = 37
		Least Developed n =19	Most Developed n =18	
1	Dealing with Insurgent Groups	10 (52.63)	10 (55.56)	20 (54.05)
2	Poverty and Illiteracy	10 (52.63)	8 (44.44)	18 (48.65)
3	Lack of Unity Among Villagers	9 (47.37)	7 (38.89)	16 (43.24)
3	Lack of Infrastructure Development	6 (31.58)	5 (27.78)	11 (29.73)

Source: Computed   Figures in parentheses are percentages
Note: Multiple responses were obtained

Table 12 Suggestions for Effective Functioning of Chief System

Sl.No		Type of Blocks		Total N = 37
		Least Developed n =19	Most Developed n =18	
1	Strengthening and Empowering Chief System	11 (57.89)	14 (77.78)	25 (67.57)
2	Release More Funds for Development	10 (52.63)	12 (66.67)	22 (59.46)
3	Special Financial Assistance for the Chief	9 (47.37)	11 (61.11)	20 (54.05)
4	Inclusion of chief in Development Body	9 (47.37)	9 (50.00)	18 (48.65)
5	Construction of Village Court Building	4 (21.05)	4 (22.22)	8 (21.62)
6	Reduction of Corruption	4 (21.05)	3 (16.67)	7 (18.92)
7	Employment Generation for the Villagers	6 (31.58)	5 (27.78)	11 (29.73)
8	Establishment of Village Market	5 (26.32)	2 (11.11)	7 (18.92)
9	Empowering Youth & Women	5 (26.32)	3 (16.67)	8 (21.62)
10	Development of Social Infrastructure	9 (47.37)	5 (27.78)	14 (37.84)
11	Development of Physical Infrastructure	11 (57.89)	5 (27.78)	16 (43.24)

Source: Computed   Figures in parentheses are percentages

Note: Multiple responses were obtained

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We want Daughters-in-Law, not Daughters: Forced Marriages in Jhajjar District of Haryana, India

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The paper looks into one of the lesser known but very pertinent area of human trafficking, that is, forced marriage. Jhajjar District, Haryana is facing a severe shortage of girls to marry their boys. The situation might not have caught the attention of researchers, media and policy makers, had it not emerged that there are no brides for the men in the district. The birth of a son, seen as a boon by the local people, is creating a severe crisis in the state which is now forced to 'purchase' girls from other states to marry their men—an emerging form of trafficking. The paper looks into the practice of forced marriage in contemporary Haryana in light of the cultural meaning of consent and coercion and attempts to unknot the multiple interests and circumstances surrounding forced marriage. It unravels the cultural practices and traditional thoughts that are responsible for the forced marriages taking place in Haryana and reflects on the patriarchal thoughts among men and women which can be held responsible for a low sex ratio.

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Introduction

Trafficking of women and children is one of the worst forms of violation of human rights. It is a violation of right to life, right to liberty, human dignity and security of person, right to freedom of torture or cruelty to name a few. Trafficking is understood as a 'trade in something that should not be traded for various social, economic and political reasons' (Sen & Nair, 2005, p.2) while human trafficking is seen as illegal trade of human beings. The UN Protocol to Prevent, Suppress and Punish Trafficking in Persons especially Women and Children 2000 gives a very comprehensive definition of trafficking. Indian Constitution prohibits all forms of trafficking under Article 23. The Suppression of the Immoral Traffic Act 1956 (SITA), amended to Immoral Traffic (Prevention) Act (ITPA) in 1986 was passed following the ratification of the International Convention on the Suppression of Immoral Traffic and Exploitation of Prostitution of Others in 1950 by India. The

Goa Children's Act 2003 is the only other Indian Law dealing with trafficking though in a limited context. However none of these laws have been accompanied by an independent and sustained mass movement against trafficking in the country (D' Cunha, 1998).

Human Trafficking

Human trafficking in India can be categorized under following categories:
1. Trafficking for Child Labour
2. Trafficking for Sex Trade
3. Trafficking for Forced Marriage
4. Trafficking for Organ Transplant
5. Trafficking for Escort Houses/ Massage Parlour

Forced Marriages: Concept

United Nations views forced marriage as a human rights abuse because ultimately the right to marry a person is one's choice.

The term has been examined in varied ways. The generally accepted definition says that forced marriage is a marriage in which one or both the parties is married without his or her consent or against his or her will. It differs from arranged marriage in which both parties consent to the assistance of their parents or a third party in identifying a spouse. However arranged marriages can also involve a certain degree of indifference of the parents towards their child's wishes, as put by Khan (Welchman & Hossain, 2006, pp. 297-98) who says that the affluent and educated parents, in their quest for 'good' matches, frequently ignore their children's wishes by imposing arranged marriages. Khan's definition of 'imposing or force' may involve difficulties of drawing analytical boundaries between forced and arranged marriages where minors are involved.

However, in forced marriage victims fall prey through deception, abduction, coercion, fear, and inducements. Generally it is the woman who easily falls prey. Some victims of forced marriage are tricked into going to another country by their families and often experience physical violence, rape, abduction, torture, false imprisonment and enslavement, sexual abuse, mental and emotional abuse, and at times, murder.
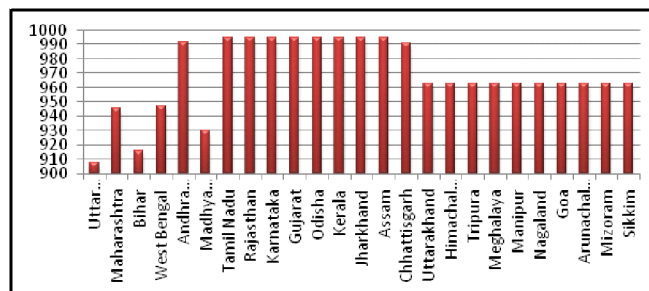

Fig 1.1: States with sex ratio more than 900 women/ 1000 men, Census 2011

Research Methodology

The paper is descriptive with analysis and relevant comments being made at

relevant places.

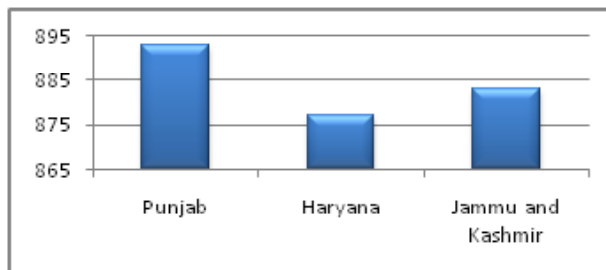## *Scope of Research: Haryana, India*

Fig 1.2: States with sex ratio less than 900 women/ 1000 men, Census 2011

The geographical area for the research is Jhajjar district of Haryana.

India is a federal country comprising of 28 states and seven union territories. The sex ratio of the country is in favour of the men and stands at 940 men per thousand women as per the Census 2011. The figures have definitely improved from the last census data i.e. 2001 Census when the figures stood at 933/1000. The 28 states vary from each other in terms of the per capita income, culture, geography, weather, population size and sex ratio (Fig.1.1 and 1.2) and many other aspects. Northern states of Bihar, Uttar Pradesh, Madhya Pradesh Orissa, Rajasthan (categorized as BIMAROU states, term coined by Ashish Bose) rank low on economic growth and are seen as the poor states while the states of Haryana and Punjab rank highest in terms of per capita income and are considered the rich states. However it is interesting to note that these two states which are high on economic growth, rank low on sex ratio and as per the Census 2011 and 2001 data, the sex ratio in these two states is lower than the national figure, Haryana having the lowest sex ratio among all the 28 states (Fig. 1.2).

Haryana is the field area selected for the present research for practicing 'forced marriages' which is because of its very patriarchal mindset and their belief in the saying: ***Chora mare nirbhag ka, chori mare bhaagwaan ki (Son of the doomed dies, daughter of the blessed dies)***

The situation in 2015 is not very different. While the overall sex ratio of the country has improved to 943 women per thousand men, the ratio is still positively biased towards the men. Interestingly, Haryana, Jammu and Kashmir and Punjab and Sikkim continue to be the states with the most adverse sex ratio (in 800). The paper is based on the census data of 2011 Census.

The shocking data

Haryana's sex ratio as per the 2011 Census is 877 women per 1000 men, a slight improvement over the 2001 Census which was 861/1000. As per the Census Reports 2011, at 774 girls per 1,000 boys, Jhajjar district in Haryana has the country's worst sex ratio in the 0-6 age group. Its villages namely, Bahrana, Dhimana and Chhara have incredibly low sex ratios where Bahrana and Dhimana have a conspicuously low sex ratio at 378 and 444 girls per 1,000 boys respectively, as per 2011 Census figures. Thus, Haryana has over four lakh fewer girls than

boys in the age group of 0-6 years. The gap was 3.31 lakh in the 2001 Census.

Over all, the state has 1.35 crore men, compared to 1.18 crore women, a difference of 17.57 lakh (Census 2011). In 2001, the figure was 15.83 lakh. Jhajjar reported a child sex ratio of 774 compared with the national average of 914 and the state average of 830.

Data collection

The paper is based on both primary and secondary information. Primary field data was gathered by the author's visit to Jhajjar district, Haryana, India. Jhajjar district comprises of three sub divisions—Bahadurgarh, Jhajjar and Beri.
Visits were made to the following sub-divisions and the villages in the Jhajjar district:
   1. Jhajjar and Bahadurgarh sub-division;
   2. Chhara and Bahrana villages.

Interactions were held with:
o Block Development Officers (BDO) of Jhajjar and Bahadurgarh sub-division;
o Heads of the villages who were present at the BDO office;
o Heads *(Sarpanch)* of Chhara and Bahrana village during visit to the two villages;
o Local people of the two villages;
o Families who have purchased wives in the two villages.

Sample Size

S. No	Designation	Size
1.	Block Development Officers (BDO) of Jhajjar and Bahadurgarh sub-division	2
2.	Heads of the villages who were present at the BDO office	7
3.	Heads *(Sarpanch)* of Chhara and Bahrana village during visit to the two villages	2
4.	Local people of the two villages	20
5.	Families who have purchased wives in the two villages	5

Convenience sampling was used in case of selection of local people (S. No. 4). Regarding the families who have purchased wives (S. No. 5) it was not very easy to locate such families as local persons were not very open about it though it is

through them that the researcher got introduced to some of these families.

Data was collected primarily through two methods:
- *Interviews:* Semi-structured interviews were conducted to gather information from the respondents.
- *Observations*: Participant and Non-participant observations were employed to supplement the findings.

Operational Definitions

- Forced marriages: The paper defines 'forced marriage' as a marriage where a young girl (minor in most cases) is 'purchased' by the boy's family and is transported from her state to another state within the same country. Due to her young age the girl is incapable of understanding the deal and the thus the question of seeking her consent is not even considered.
- Bride Price: Bride price is the money paid by the bridegroom to the parents of the bride for marrying their daughter to him. This is different from 'dowry' which is given by the bride's parents to her/ her in- laws at the time of marriage.

Findings

Impact of the adverse sex ratio: Trafficking for Marriage

The skewed sex ratio has had a social impact and is causing a huge bride shortage. This section narrates five cases of forced marriage in Jhajjar. It shares important findings of another study conducted by a Pune based organization and also the views of a Delhi based organization working in the area of human trafficking. The section concludes with analysis of the narratives, the interactions and observations made regarding the emerging situation in Haryana with focus on Jhajjar.

Narratives of Forced Marriages

Case 1: Duped into marriage by mother on pretext of a trip

The girl from Kolkata is married to Rajesh who is eight years elder to her, 14 years and 18 years respectively. Rajesh narrated that his wife was supposed to get married to a 40 year old man from his village (Chhara). The marriage could not commemorate as the groom had arrived in a drunken state and could hardly hold himself. It was then that Rajesh offered himself for the marriage to the girl's father, who instantly agreed. Rajesh himself had a broken engagement as his neighborhood had foul mouthed his reputation, a practice commonly followed in the area to break marriages.

Rajesh said that for her family it was better to get a younger man as husband and her father was happy to get her married because they were living in abject

poverty. He shared that had she been told about the marriage in Kolkata, her maternal grandparents would have resisted as they were against inter-state marriages. She was duped to go to Haryana on the pretext that one of their relative who had delivered a baby had to be attended. The girl shared that she was too young to understand what was happening and had no choice. She was scared as she as going to be away from her house and her food and language were different. *The husband denied paying 'bride price'.* Rajesh owns small piece of land which is not very fertile and works as a truck driver, able to earn just sufficient to make two ends meet. The couple has two small children and the family comes under the lower economic strata.

Case 2: Father worked with her now husband in the brick kiln in Jhajjar

This family, just like the earlier case, belongs to the lower economic strata of society. The girl hails from Assam. Her father and her husband worked in the same brick kiln in Jhajjar. The father had a good idea about the social situation of the village and was also looking for a match for his daughter. The marriage proposal was immediately accepted by the boy. She has been married for 7 years and says that she is happy. She was 15 years old at the time of marriage and her husband was 17 years. The girl was not told about the marriage earlier but came with her family from Assam, thinking that she was going to meet her father. It was only on reaching the village that she was told about her marriage. She had nothing to say on what her reactions were then probably because she was young. However she did express that initially she was not comfortable as her surroundings were different.

The neighbours explained that since the family is poor, marrying a girl from outside the community proved cheaper for the husband as it was a simple marriage in the temple. Had he married a local girl it would have been a very expensive affair. On asking about bride price she said that her husband offered money to her father who refused to take saying that he does not want to sell his daughter. She has two sons and is expecting another child.

Case 3: Marriage took place in her home town–cousin mediator

The girl hails from Tripura and was married 9 years back at the age of 14 years. She has 3 daughters and wants a son. The marriage was arranged by her cousin in Kolkata. The husband is a truck driver and comes home thrice a week. The respondent expressed happiness and on being asked about bride price denied. She said that her husband had paid INR 50,000/- to her father for hosting the guests and added that 'but not as her price'. She was aware of the stigma attached with bride price and thus denied having been purchased.

Case 4: Plight of a mother

The mother of the son shared that they definitely prefer sons over daughters when it comes to the birth of the child but what they need now for their son is a girl who

can marry him. Her two sons who are in their mid 20s are unmarried and there are no girls available for them. In the absence of any other option she plans to get girls from other states but fears the cultural differences.

Case 5: Adjustment problems

The man got married at the age of 30. He faced a similar problem of no girls of marriageable in his area. He thus got a girl from Jharkhand (a poor state). Both of them initially faced problems due to the language barrier and adjustment issues. His wife had to put in more efforts to learn the language and the customs and felt uneasy keeping her face covered, a practice in Haryana. She still is not happy to cover her head and face.

Case 6: Unmarried men

Interactions were held with some men who were not married. One of them aged 30 years looked dirty, un-kept and under influence of drugs. He had studied till 3rd standard. His four brothers were married. On asking why he did not marry he was not very forthcoming in his response but on repeated questioning mumbled that he is happy the way he is. His friends surrounding him seemed to be amused at his state. Another man with whom conversation was conducted was also 30 years of age. He was active and very keen to marry. On asking why he had not married, his immediate response was 'get me a girl and I will marry this very minute'.

Findings of a study

A field study was done in 2010 by a Pune (Maharashtra, India) based organization, named Drishti Stree Adhyayan Prabodhan Kendra, on the impact of sex ratio on the pattern of marriages in Haryana. Their findings were as follows:

1. Out of the 10,000 households covered, more than 50% married women in Haryana are bought from other States. The study covered 92 villages of Mahendragarh, Sirsa, Karnal, Sonepat, and Mewat districts.
2. In every village more than 50 girls have been purchased, of which some are as young as 13 and a very small percentage of them are living a married life. Most are untraceable or exploited or duplicated as domestic servants by the agents or men who marry/buy them. The study also found instances where after a few years of married life, the girls were resold to other men.
3. Most of the girls come from poverty-ridden villages of Assam, West Bengal, Jharkhand, Bihar and Orissa because their families need money. Despite the prevalence of dowry system in the North Indian states, men are ready to pay for a wife.
4. The pretext of marriage and the social sanction makes it difficult for police or NGOs to trace the trafficking or the atrocities, as women rarely speak of the domestic disturbances.

Interaction with the Director of Shakti Vahini revealed a disturbing picture. He shared that only a small number of the women, who enter into a forced marriage,

lead a settled married life. They are exploited and treated like commodities because a price has been paid for them. The organization shared that they have rescued women who were raped, tortured and denied medical attention for years before being dumped at a public place.

Analysis

On the basis of the interactions and observations made by the author, the following analysis emerged:

1. While trying to locate families where the married woman was from a different state, it was realized that the villagers identified the family with the man's name and a suffix - 'jiski biwi mol layi gayi hai' (the one who has purchased his wife). The local people showed lack of willingness to accompany the author to the houses of these families. This could probably be to avoid being associated with them and also the feeling that the family might get annoyed on such sensitive information being shared with outsiders.
2. The purchase money ranges between INR 20,000 to INR 50,000.
3. It is a common practice among such families to deny paying the bride price. But the fact remains that the local community refers to them as families with women who have been *purchased* with an expectation to bear a son to the family.
4. The girls were married at a young age and not even consulted beforehand. Hence they rarely know if a bride price had been paid for them.
5. Since it had been long since the women of the author's sample got married, they seemed to have accepted their fate and adjusted to it.
6. In case the man holds a government job or is economically sound, irrespective of his negatives, he easily gets married.
7. A man who is 30 years and above is considered old.
8. Unmarried men were seen to be desperate to marry a girl from their culture.
9. Unmarried men seemed to be as much in number as the married men. In other words, they were easily locatable.
10. Unmarried men were easy targets of casual jokes within their peers and were very much a part of the community gatherings and celebrations.
11. Men who had advanced in age and were not married shied from being questioned on the reason for them not getting married.
12. It was shared that any prospective groom ran the risk of the engagement being called off due to bad mouthing by jealous relatives and neighbours.
13. Due to shortage of girls, those from the lower castes and low economic strata are accepted by families of higher castes for marriages, generally considered socially unacceptable in rural India.
14. Different stories emerged regarding how well the married woman is kept by her husband. The elderly believed that the woman is looked after since a price has been paid so that she can manage the family and bear children, especially sons. However, there were cases where the girls ran away

soon after marriage. The reasons cited were that since they were not informed earlier by their families about the marriage they probably were not prepared for a married life and, that too, in a different culture.

15. Local leaders shared cases of women who, after identifying potential economic benefit from the shortage of girls, go back to their village and demand money from the husband in lieu of returning to him. In another case, a woman who got married at bride price duped her husband by running away after marriage. This seems to be an emerging trend to make quick money.

16. The local leaders denied the scenario of one wife serving multiple men.

17. Marriages cannot take place between '*bhaichara* villages' (these are clusters of villages that fall within a radius of 15–20 kms., and are considered one family. Marriages within these villages are strictly prohibited. Couples have been prosecuted for going against this rule) and this creates a further shortage of girls.

18. Barter marriages also take place, implying that parents marry their daughters in a family in return for a bride for their sons.

Marrying a girl from outside is stigmatizing for the family because of various factors as:

1. It reflects poorly on both the man and the woman who have entered into matrimony.

2. It implies that the man is economically weak—is unemployed or earns less and thus was unable to get a local family who would marry their daughter to him.

3. He could be an addict or an alcoholic.

4. Marrying their children could create a problem in future as they would be known as the children of a mother who was purchased, because the father was incompetent to get a girl from within the state.

5. Some men, thus, prefer to remain unmarried rather than marrying someone from outside their state.

Supplier states

- The shortage of the girls in the district has led to girls being trafficked from the other states of the country. Girls are being purchased from the BIMAROU states and the North Eastern part of India, which have a good sex ratio and are also considered economically poor.

- Agents engage professionally in supplying girls. At times the marriage also happens through someone known to the family.

- Due to shortage of girls in the area almost every family has at least one unmarried man. Though historically it was done to keep him as a standby incase a misfortune occurs in the family, implying that in case any brother dies then his wife gets married to the unmarried brother (as shared by BDO). But now they remain unmarried due to shortage of girls. The choice for them is—either remain unmarried or purchase a girl with the

attached ramifications.

The findings show that the bias against girls, rooted in short-term economic considerations, is slowly but surely leaving behind long-term scars that Haryana will find difficult to heal. A lot of its men may just be forced to stay single with brides hard to come by.

The Debate

The practice of forced marriages is linked up with the barbarous practice of female infanticide, a growing concern in human rights debates. A review of available literature and discussions with the heads of the local bodies shows that girls in Haryana are still considered a liability on the parents.

Haryana has the most hard working women and famous names like Chawla, Dhnakar, Selja Kumari and in general women of the state have won laurels at the Commonwealth and Asian Games. But then why are the girls treated low and unwanted in such an affluent state? The answer lies in the age old practice of dowry. '..Girls are not needed, as they are of no use', argues Umed Singh, 73 years old farmer. As per the sarpanch of Chhara village '..nobody demands dowry but it is given'. Bride shortage should have checked dowry which has not happened. Another reason cited for the preference of boys over girls is that boys support the parents and carry forward the family name.

……And the step taken is disastrous

Sex determination tests are being conducted to abort the female foetus. Non–registered ultrasound centers are mushrooming but function in a clandestine way due to the government laws. Sampla, a village in Jhajjar, is reported to have many private clinics which come to the aid of families wanting a male child. According to the state officials 'the ultrasound centers are the single largest factor behind the skewed sex ratio'. According to them the problem is that most of these illegal activities take place in unregistered ultrasound centers that operate with small devices, making it difficult for the officials to catch them. The general practice in the area is that a couple going in for a second child opts for a sex-detection test. According to the BDO, the problem cannot be eradicated unless people have the will and the right mindset which favours the girl child.

But there is denial to the practice

In Bahrana, the local leader discarded the thought of practice of female foeticide in their village. He felt blessed and attributed the higher number of boys with the eating habit of the villagers. He pretended to be very liberal with his thoughts on preference of girls and shared that he has three sons and he wanted the third child to be a daughter. The villagers of Dhimana village also refuse to believe foeticide as the reason behind the skewed sex ratio. They believed it to be God's gift that most of the children in the village were boys and attribute it to the diet, 'people eat well here and so give birth to boys', both men and women echoing the

same thought.

Conclusion (a statement)

This ghastly practice of trafficking young girls in the form of forced marriages needs to be stopped. This can only be done when the women and men of the state realize the importance of girls. A collective discussion on such practices is vital at the international level to arrive at Conventions so that places like Jhajjar are stopped from becoming 'village of men'.

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Silent Screams: A Gender Analysis of Kashmir Conflict

Bhat Iqball Majeed & Yasir Hamid Bhatt

Militarization and armed conflict have been a central frame of reference in South Asia from at least last two decades. The subsequent political and security crisis have together forged an environment primed for the acts of collective violence that pervade in the region even today. The conditions created by conflict forced the people to remain at the fringes of society and most often disproportionately exposed the population to variety of risk factors, both physical and psychological. Although armed conflicts affect both men and women equally, evidence has proved that women are more likely to be subjected to violence than men. Jammu & Kashmir is one of the prime examples where due to the continuing presence of large number troops and their use of military force in response to anti-insurgency threats within civilian communities, has fed a reservoir of scepticism, fear and intimidation. In this whole saga of conflict story, the worst and silent sufferers have been, the women indeed. On one hand, women have to bear the pain and suffering of the loss of their young ones and husbands, while on other side they become victims of worst war crimes like sexual violence.

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Introduction

Armed conflict, whether internal or international, long-term or short-term, remains a pervasive phenomenon affecting human, social, and economic development of many regions of the world (Brunborg & Urdal, 2005). The conditions created by conflict forced the people to remain at the fringes of society and most often disproportionately exposed the population to variety of risk factors, including physical, psychological, environmental and economic. The net effect on those living under such conditions has brought destruction and destitution on the people by rending apart the fine fabric of everyday life, its interlaced economies, its material systems of care and support, its social networks and has impeded development and economic growth of the region, particularly, conflict affected

areas. Across the world, the large number of the people who lost their lives have been the non-combatants. But this phenomenon is not unique, as out of five largest instances of armed conflict recorded in the 20th century which led to the approximately 191 million people dead, 60 per cent were civilians (World Health Organization, 2002). Even today hundreds of humans are being put to death, thousands are being rendered disabled and streams of blood are being spilled in the streets of Libya, Bahrain, Syria and many other countries across the globe. Some get martyred while protecting their dignity, honour, chastity and valour; others are butchered while fighting against imperialist regimes and dictators. Some are forced to die (farmer suicides), while thousands are killed on the pretext of war against terror (Iraq and Afghanistan). Yet others are killed in civil wars and internecine conflicts and many others get martyred just to fulfil their basic human needs and rights like food, water, and freedom.

In South Asia, militarization and armed conflict have been a central frame of reference from at least last two decades. Despite varied reasons of military confrontation or intensity of conflict governed by particular histories, the subsequent political and security crisis have together forged an environment primed for the acts of collective violence that pervade in the region even today. Srilanka, Pakistan, India, Nepal all have been witnessing killings of combatants and non-combatants on daily basis. These 'low-intensity wars' – a form of war at the grass-root level –, targets the population not the territory with the aim of penetrating into homes, families, and demoralize and paralyses the entire fabric of grass root social relations (Summerfield, 1991). The deliberate and systemic violence deployed on the whole population by torture, mutilation and summary execution in front of family members is one of the means to demoralize and terrorize the communities suspected of supporting enemy groups (Amnesty International, 2008), and to "intimidate young people not to join militancy or to frighten the general population not to shelter or associate themselves with members of armed opposition groups" (Amnesty International, 1999, cited in Navlakha, 1999, p. 13).

Jammu & Kashmir is one of the prime examples where due to the continuing presence of large troops and their use of military force in response to anti-insurgency threats within civilian communities, has fed a reservoir of scepticism, fear, intimidation and fuelled insurgent groups openly active since 1989. Over the years, the continuous struggle for freedom has become now struggle for the life and survival for the people. Incidents like murders, torture, illegally detention, verbally harassment and physically abuse by the security forces are being repeatedly reported (IPTE&HR, 1997; Khanday, 2005). Although armed conflicts affect both men and women equally, evidence has proved that women are more likely to be subjected to violence than men. On one hand, women have to bear the pain and suffering of the loss of their young ones and husbands, while on other side they become victims of worst war crimes like sexual violence.

Objective

There is no doubt about the fact that armed conflict has profound direct and

indirect impacts on the long-term physical and mental health and well-being of civilian population. An increasing number of studies have focused on the long-term health consequences of conflicts on population; relatively few studies have focused on the impact of armed conflicts on women who are considered not to be direct victim of violence. With this backdrop, the present study attempts to document the lived experiences of women who have experienced the conflict in their own ways and which may necessarily not qualify the victimhood but nonetheless bears the consequence of the conflict. The study is Further the study attempts to explore how these experiences shape their personhood and well-being.

Methodology

To achieve the objectives of the study, hermeneutic methodology was found apt to document the lived experiences of women. The study was carried out in five villages of district Anantnag of Jammu and Kashmir state of India. For sample selection, purposive sampling was followed for selecting the medical blocks, primary health centre's and sub-centres villages. In the district, three medical blocks namely Verinag, Larnoo and Acchabal were purposively selected keeping in view the intensity of the armed conflict. Out of these three medical blocks two Verinag and Larnoo are farthest from the district headquarter. From these three medical blocks three Primary Health Centers were selected and out of those two sub-centre villages were taken from each respectively. Later on only one sub-centre village was taken from the Primary health centre Achabal due to some logistic constraints. The selection of the area and sample villages was done keeping in view the various factors like time, road connectivity, safety, and local know how of the area. Out of five sample villages, 36 respondents were included for the data analysis. This sample size was arrived at after a pilot study was done where the feasibility of the respondents being available and the time required were taken into consideration. One of the main consideration that was put up for selecting the sample was that only those cases were taken which have experienced the conflict from last thirteen years, that is from 2000 onwards. This was done to minimize the bias due to memory loss that poses a big hurdle in researching of lived experiences of people. In-depth interviews and case study were used as tools for data collection. The interview was deliberately kept open ended in order to explore the lived experiences of the respondents.

Keeping in mind the sensitivity of issues, one female associate was hired to assist in data collection process and to easy out the barriers which could have clouded the interaction between the respondents and researchers. Interviews were mostly one-on-one basis in a proper confidential setting as per the feasibility of the respondent. Oral consent was taken from the respondents. The basic purpose of the study was explained to each respondent. Informed consent of whether to include their names in the data analysis or not, was taken. The basic idea behind this was that respondent should deliberate all the experiences that he/ she has lived through. The validity of the facts as provided by the respondents was cross checked from the sources which happen to be key figures in the village like *numbardars*, *moulivis* and others. For the purpose of protecting the

confidentiality of the respondents, the names of the respondents that appear in the study are not real.

Profile of Respondents

All the respondents were those who have lived in the sample areas for more than 13 years. The respondents belonged to the age group of twenty years and above. All of the 36 respondents were female. The level of education was not taken as any criteria for selection of the sample. Most of the respondents were illiterate and belonged to poor families. Around twenty four respondents had schooling up to primary level only. Four respondents had schooling up to undergraduate level. The respondents have been living in these villages from their birth. Out of these 36 respondents nobody has ever migrated from the village during any time of the conflict. Ten of the respondents belonged to the Scheduled Tribe. None of the respondent belonged to the Scheduled Caste. All the respondents were Muslims. All the female respondents were illiterate and were engaged with the household jobs with no independent source of income. Four respondents were unmarried.

Analysis

Data was initially analysed within the context of the interview using both hand written notes and audio data simultaneously. This allowed consideration of tone, expression of speech and use of culturally embedded meanings of certain words.

Gender Violence and Well-being

Wars and armed conflicts are one of the major social and political problems faced by the humanity. With every war and armed conflict emanates and underlies mass destruction. Every year, millions of people are either experiencing or witnessing the consequences of conflict (Verwimp *et al.,* 2009). Ninety percent of war related causalities are of civilians; half are female, and children (Reza, Mercy & Krug, 2001). Thousands of people die each year as a direct result of armed conflicts, but millions more die from the indirect consequences of warfare. Coupled with social, economic instability and insecurity, armed conflicts completely destroys public infrastructure, increases poverty and unemployment and causes massive migration and displacement of population, decreases access to food, leading to poor nutrition, increased risk of communicable diseases, diminished access to health services, reduced public health programmes, poor environmental conditions, and psychosocial distress (WHO, 2002; Franco *et al.,* 2006). The impact of armed conflict on health is far from limited to death as a result of injuries sustained in direct conflict. (Murray *et al.,* 2002; Utzinger & Weiss, 2007; Li, & Wen, 2005). Though the immediate consequences of conflict on human health and well-being are drastic, it causes relentless pain and suffering – physical, mental and physiological pain to the coming generations also (Ali, 2006).

The vicious cycle of conflict reciprocates (gets resonated) on those

people who are not engaged in activities of armed conflict. Of particular concern to present research is the indiscriminate harm done to women. Along with the risks and exposures associated with their gender, women in conflict areas are often exposed to extreme stress and traumatic events, since they are bearers of pain and suffering of both individual and collective identity.

Although armed conflicts affect both men and women equally, evidence has proved that the impact is more offensive on women as they are often considered soft target, thus, they are more likely to be subjected to violence than men. Violence against women is not an unintended side effect of today's wars and conflicts but rather a political objective, a core strategy to purse exclusionary political goals and economic ends. Thus, gendered violence results in gender-specific disadvantages that are not always recognised or addressed by the mainstream, gender-blind understandings of conflict. Sexual violence (including rape) is one of the most commonly employed and cited forms during armed conflict (UNHCR, 1999). It is used as an intentional act of war, ordered or tacitly tolerated by military authorities, in order to demoralise the enemy (Colombini, 2002). The brutality to the body marks the difference for women. Both men and women experience the conflict differently not only because of physical differences between the sexes but more importantly because of the different meanings society, culture and religion ascribe to the male and female bodies (Cockburn, n.d; Jack, 2003).

In case of women in Kashmir, the effect is not inevitable outcome of on-going conflict, but rather deliberate strategy to destabilise the families and communities of perceived enemies. As Manchanda (2001), notes, "rape by security forces in Kashmir is neither incidental nor 'private' but a weapon to punish, intimidate, coerce, humiliate and degrade". Living in such insecure environment takes its toll on both physical as well as mental health and well-being of people in general and women and children in particular.

In Kashmir, a significant segment of population have been reported to developed various kind of mental disorder, be it depression, trauma related disorders or substance abuse (Margoob *et al.*, 1995; *Margoob et al.,* 2002; Margoob & Dutta, 1993; Majid & Margoob, 2006), to name a few. As per reports and studies conducted by psychiatrics of the valley, mental disorders both in men and women have shown an alarming increase (Margoob & Dutta; 1991). Although significant number of studies undertaken by psychiatrists in the Kashmir valley illustrate a high number of women and children suffering from psychiatric/ psychological disorders such as anxiety disorders, depression, post-traumatic stress disorder (PTSD), suicide, and substance abuse (Margoob, 1995; 1996; Akash & Margoob, 2006), however, mental health and well-being is to be understood in light of the atmosphere around a being and the circumstances within which s/he lives, works and ages. Ironically, mental health and well-being are not regarded with the same solicitude as mental disorders. Mental health has been usually understood in terms of a continuum between "stronger minds" and "weaker minds" — an equilibrium that one has to maintain and a slight deviation from which traps one in a mire of suffering, pain and discrimination, not to mention the stigma of being labelled as having some or the other disorder.

Given the scenario of persistent, localized and growing number of armed conflicts across the globe, gender-based violence and in particular sexual violence, has become a widespread phenomenon and mental health and psychosocial support is recognized as a core public health issue. The effect of armed conflict on women's mental well-being is appalling. Helplessness and fear of sexual violence can have psychological manifestation, which necessarily need not to be abnormal. For instance, the below narratives of the female respondents (Age 36 & 31 years) points out the fact that women are often remains a soft target for armed forces, thus vulnerable to atrocities which negatively affects their lives.

> *No women in this village feel safe. Our life has become hell. We are not safe even in our houses. They (armed forces) pray on us. They are always looking for chance. By any excuse they enter our houses both during day and night. One day when they were on patrolling in our village, they came by house. I was in corridor when one of them knocked the door. He asked me, who is the house? I told him that I am alone and nobody is in the house. He wasn't convinced and asked me to show him the way to the rooms. When I insisted that there is no one & I am alone. He tried to force me. I quickly ran into kitchen and jumped from window to save myself. I shouted help from my neighbors and one of my neighbors (male) came quickly. I told him that there is army in my house and I am alone. I asked him to come over to show them the house as they wanted to search it. When he came to my house, the soldier left without searching. I didn't go back until my husband came back from fields. From that day onwards whenever I hear knocking on the door I suddenly get panicked and my body trembles and heart beat rushes like anything. I always feel threatened.*

The reactions to the unwanted and traumatizing events carries the potential of triggering various physical and psychological manifestation affecting their well-being and personhood. The mental scars inflicted by sexual violence on women could have serious psychological repercussions. This is not to say that there has to have a personal experience to traumatic event. Instead, the fear witnessing the violent event is enough to inflict psychological pain and suffering. The fear and uncertainty could prove quite determinately which at times might have as serious manifestation as experiencing the traumatic event personally. The narrative of women from Kapran village whose son had joined the militant organization is worthy to note. She says,

> *They always (Army) come at night and enter the house in search of my son. We always say to them that we do not know but they deliberately enter in each and every room and ransack the whole house. The soldiers don't spare anyone: young, children, old; they beat everyone whosoever came their way. I have other son who is married and three unmarried daughters; they do the shawl weaving work and are young. They (army) deliberately entered their room at night and ask them what they do, how they do it. They are terrified*

and frightened of soldiers. So we start sending them to their aunt's house at night. I always worry about their safety. I have started take medicine for tension, while my husband is a heart patient. We are living in terror. Our neighbors also look at us in a suspicious way, as army too often comes to our house too often.

This fear becomes more pronounced due to presence of army camps in local habitations. From the respondents it has come out quite clearly that women in rural and isolated areas are always at greater risk of sexual violence. The intensity of such fear was so pronounced that the mere presence of army personnel induces anxiety among many respondents.

Female Respondent (age 27 years): *"Whenever, I come across any army soldier, strangely my hearts beats goes fast, my hands shakes and I feel shortness of breath…"* This is due to the fact women in villages which are geographically remote and isolated become easy target of the perpetrators of sexual violence. These villages had hardly any nearby police posts, most police stations being located in the tehsil towns, thus people were feeling isolated and vulnerable as they were surrounded by military camps. Due to remoteness and geographically isolation, intensity of the sexual violence were reported more by respondents who had to cross by these camps to either go to their agriculture fields or to other places like schools or market. The data also shows that incidents of sexual violence were less reported in village near to district centre than far off hilly villages.

Female Respondent (age 16 years):*"I can't go alone from that side (referring to army camp). I always ask my father or my brother to accompany me to cross the camp. From school I come along with my teacher who resides in neighbouring village. At times, when I alone they pass bad comments and utter something in their language and laugh aloud. I feel so frightened."*

Female Respondent (age 45 years):
> *Our girls can never go alone past the camps (Army camps). The army men always pass comments which are very derogatory. They continue to speak in Urdu and in between also speak broken Kashmiri. We always wait for some male member to accompany us. It is very disturbing to get our burqas taken off from face while passing through these army camps. We can never be safe in their presence. Their gestures are very disturbing and they knowingly pass obscene remarks. They continuously stare at us till we cross the camp.*

There are also numerous accounts of kidnapping, torture, murder, and the molestation and rape of women, both by the security forces and the militants, on grounds of the victims being informers or traitors or simply because they hold public office. Though very few cases, sexual violence in Kashmir has been from done by militants as well. It can be argued that rape has been used often as form of sexual violence by all the major actors of war. The narrative of the mother from

Lahur village, whose young daughter had been abducted by militants and then brutally molested and killed, is self-explanatory. She says:

> *These beasts (militants), came at around 8pm and asked us where is Huzefa, and then took her with them at gun point telling us that they needed to talk to her. We waited for some time and later I along with my two sons went to search for her but all in vain. In the morning we again went towards the forest area and found her body in such a position it cannot be described, it is too shameful dear son. My belief says human being can't be so brutal.*

It was in the year 2002 that this incident happened. This girl was one of the beautiful girls of the area, and she was labeled as a spy by some militant organization and on that note abducted. The army personnel also used to come to their house for searching purposes. The presence of a beautiful unmarried girl always seems to act as a pull factor to men from the army, to regularly search houses, humiliating inmates. This was heard repeatedly from many villagers.

From the above narratives it comes out clear as to how the notion of body and sexuality plays role in an armed conflict. It has been found that mostly the women from the rural areas are victims of this crime. The reason for this can be traced in the topography of the region which makes it a battle ground both for military and terrorist groups. Another factor that plays role is these areas are relatively remote from cities and the media, thereby making it less possible that people could raise a hue and cry about crimes that are being committed.

Women are of course the worst sufferers if not in the number of deaths but as the worst hit of trauma, of losing their loved ones, of getting raped and of separation from their partners. It has been found that women in conflict settings may be forced by circumstances to engage in exploitative relationship in order to stay alive. They offer sex for survival, or in exchange for food, protection or shelter. Sexual violence is more pathetic in the patriarchal societies as it makes the victim feel guilt and shame for no fault of hers. The societal pressure is even more stressful when it comes to the frisking of only those houses where there happen to be young unmarried girls. Society usually assumes that these girls are in a relationship with military personnel. Then everyone in the village starts to look down at them including their parents. The pressure is even so intense at times it may force early marriage on the girls. The social stigma on families of unmarried girls, whose homes are frequently searched by Indian troops, is very prominent. This stigma either forces early marriage of the girls or restricts them from going to schools.

Discussion

The ongoing conflict-related events cause substantial suffering in the Kashmiri population. Once referred to as 'Paradise on Earth' but due to constant violence, Kashmir has become rather a nightmare of constant fear and uncertainty that affects all areas of life. Although, the effect of conflict on the physical and mental health and socio-economic functioning is alarming, the level of despair is quite visible and potentially harmful for the long-term well-being (both physical as well

as psychological) of the coming generations. The vast body of literature on the conflict in Kashmir is mainly concerned with the historical and political aspects, paying little attention to the cost paid by women and, more importantly, their experience and articulation of it. Much of existing literature does not address the social, psychological, economic, and emotional impact of the Kashmir conflict on women and how it affects and alters their everyday lives. This is because of the fact that women role in Kashmir, and perhaps in most of the societies in the world, is confined to reproduce life and community, in ways that reflects both class and gender difference, their voices often remain unheard. As women are seen as symbol of honour for the family and society, protection of this "honour" becomes more important than the women herself. The conflict also led to an odd phenomenon for women, exacerbating pre-existing inequality, forced early marriages, financial vulnerability, restriction of their movement, and lack of access to resources, such as health, education and other basic goods and services, and more importantly greater male dominance. Thus, keeping in mind the psychological effects of violence, gender-based experience requires special mention.

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Understanding the issue of access to water- Examining the relationship of water with women through different disciplinary lenses

Kopal Chaube Dutta

Understanding water is a complex endeavor. The study is at best interdisciplinary in nature because understanding inter-relationship between water and women involves looking at it through the lenses of gender, livelihood, culture, geography to name a few. In this article I have looked at works from the disciplines of gender studies, geography, economics, political ecology to gauge how they perceive the issue of access to water and gender.

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> *"Water is a multiple entity: it possesses its own biophysical laws and properties, but in its interaction with human societies it is simultaneously shaped by political, cultural, and scientific factors (Gandy M., 2002: 22)."*

Introduction

Water has travelled a long distance from being a source of life to becoming an economic good. Whether one looks at it as a result of reductionism of western civilization (Gaard, 2001; Shiva, 1988) or an onslaught of Malthusian approach, the fact remains that water is in short supply, hence a scarce resource and therefore logically market seems to be the only just provider/distributor of it. Scarcity however is a perception (Zetland, 2014) and I am inclined to believe that water should not be treated as an economic good. I choose to base this position on the feminist economic critique of treating water as an economic good (Zwarteveen, 1998) as well as on the arguments against scarcity (Mehta, 2011). Scarcity occurs less due to natural order of things but more due to "unequal gender, social and power relations that legitimize skewed access to control over finite and limited resources" (Mehta, 2011, p. 3). In the context of water this position plays an important role. Scarcity legitimizes control, empowers the efficiency argument and

is driven by the logic of demand and supply, that is, market. Feminist economists argue that people enter market through a definite structure of property and endowment which shapes their relations to market (Sen, 1996). Women have very little say in the activities of the market and activities in the non market sphere suffer from problem of valuation. Treating water as economic good raises a fundamental question about issue of access – who can access? An economic good is based on the principal of consumer sovereignty, that is, goods to be allocated to those who are willing and able to pay (Perry et *al.,* 1997 cited in Zwarteveen, 1998). This is detrimental to women considering that they have very little role in the decision making process. So a woman may be willing to pay for improved service but cannot if the patriarch is unwilling to. In one of the studies in Rajasthan, unmarried girls' are not counted among the beneficiaries of water and the family needn't pay for the water they use because they belong to the other family which they will eventually move to post their marriage (Reilly, 2011) .This finding raises very fundamental question about a woman's identity in a social set up. Similarly, women may be willing to pay if canal water is available for domestic use but cannot access water unless, water allocation criteria (based on land holding size and paying capacity of the male head) provisions it. According to Zwarteveen (1998, p. 304) "There are examples in the literature that show that access to water in public irrigation systems may be heavily dependent on access to male dominated and politically influenced social networks and administrative structures." Access is a complex issue which is dependent on a host of variables like **availability** (in the nature (natural capital) as well as through networks (social capital), **labour** (human capital), **institutions**- facilitating mechanisms, associations, **legal processes**- *pani panchayats*, c**apital** and **technology.** It is important to understand access beyond the notion of *allocation of goods 'to those who are willing and able to pay'* and as "*the ability to benefit from things*" (Ribot & Peluso, 2003, p.153 as quoted in Milgroom, Giller & Leeuwis, 2014).

In the realm of water where it is increasingly categorised as productive and domestic thereby demarcating the male (productive) and female (domestic) domain, access seems to depend more on social and human capital rather than natural and/or finance capital. The frameworks that have looked at issue of access whether from anthropological perspective (Sultana, 2009) or gender (Krishnaraj, 2001; Agarwal, 1999) emphasize on two things that impact access: (i) power structure within the society, and (ii) and the quality of resource - the availability of free time, their relationship within the household (Agarwal, 1999), livelihood option they can avail. Milgroom, Giller & Leeuwis (2014) in their research in the Great Limpopo Transfrontier Conservation Area have shown that resource use is shaped by dynamic and changing relationship between quality, quantity and access. They go on to say that- "The combination of the quantity and the quality of a particular resource sets the outside limits of the potential use and function of a resource. This, together with social contextual factors such as (but not limited to) social institutions, cultural values, formal laws and policies and economic opportunities make up the informal rules and norms of access to that resource (ibid.).*"* It is also important to know that along with above factors lived experiences and practices are productive of, as well as produced through, "gendered ideologies, structural

power relations, and processes of both local and global change" (Trulove, 2011, p. 145).

Unlocking the links between control and access to water and social relations of power reveals that urban waterscapes are never socially or ecologically neutral (Swyngedouw *et al.,* 2002, p. 125). Women are seen as rational users of water, particularly domestic water, and are expected to benefit from whatever water options are available to provision of water for their households. However, in studying gender–water relations, it is important to look at who does what with which type/source of water and why, where, and what such relations mean for broader social relations and production of gendered subjectivities.

Methodology

This article is an analysis of writings on water from the domains of gender studies, livelihoods approach and geography – to understand how issues of access, space, identity and politics intersect at the water frontiers. The disciplinary boundaries are not rigid though. Many of these works are path breaking perspectives that have changed the way we looked at issues of access as well as inter relationship of women and water. I have picked up themes in every section to look at how they link water and gender to the dominant perspective of the discipline. The insight has been arrived at through literature review and analysis of secondary sources.

Women and water: issues identity, economics and productivity

Understanding water inequality is a tough endeavour. Researchers have, for long, engaged with issues of power, identity and politics to disentangle the equation of gender and water. However there are other dimensions-of space, of every day micro-politics, of interaction within 'informal spaces' and practice of globalization-that also need to be understood for a nuanced understanding of this complex subject.

Women and water - An Eco-feminist Approach

We understand nature through our inter relationships with one another. Water and women are associated with birth and death- the renewable cycle of life. Greta Gaard says that gradually the cultures that valued the 'circle of life' were replaced by patriarchal culture-one that no longer considered women and water as sacred. She holds that Western civilization is reductionist in approach as much as is patriarchal. Water is an important resource but is not an animate source of life in the western culture. "It is rather an inanimate servant to the dominant population now (Gaard, 2001)." Progressively water has veered from the giver of life to an economic good. It is valued in terms of money and any activity which doesn't fetch money is considered less important. The water that rural women carry from the wells to their homes has no monetary value, but the water carried through pipes is valuable.

Eco feminist approach critiques the increasing commercialization of

traditional resource. Gaard explains it thus – "a clean lake that offers women fresh-water supplies has no value in these accounting systems; once the lake is polluted, however, and companies must pay to clean it up, then the clean-up activity itself is performed by men and recorded as generating income….. Only when the water is dammed, its force used to create energy that is sent over high-voltage power lines and sold to cities, does the water enter the accounting (ibid.)". In these ways, both water and women do not count in the international market economy. Human relationship with water, in light of a liner model, implies one can keep extracting goods from water without having to pay anything back, there is no waste. This, however, is a problematic equation. Greta underscores the need to change the financial foundation that informs Western society's association with water, and to do this we require three sorts of progress to happen simultaneously— changes in the practice of democracy, economic accounting and cultural beliefs.

Democracy needs to permeate deeper and government needs to be accountable to its people. The superfluous distinction of water into productive and domestic category needs to be corrected so that economically the value of fresh water is accounted for. This will hopefully correct the gender bias towards domestic work (read: fetching water) and men will not shy away from participating in fetching water for household purposes. It will also reduce the dichotomy of male-female division of labour in the domestic sphere. Cultural acknowledgement of the fact that our identity is interdependent on human as well as non- human others needs, to be developed.

Women and Water- Economic approach: The scarcity argument

Since fresh water is a scarce resource whose availability is diminishing by the day, universal acceptance of water as commodity is looking more plausible. Scholars like Mehta (2006) and Scoons (2011) have pointed out that scarcity is more of a perception and a construct, a tool at the hands of the neo liberal government to commodify water and empower corporations with its control and management. Zetland (2014) argues that though scarcity is a perception and shortage is a reality, shortage is worse than scarcity. He underscores that shortage can't be negotiated even if you have money and resource. Increasing shortage calls for competing claims and majority of the population suffer such competition and so, shortages need to be managed. In the face of such arguments market intervention appears as a logical solution.   There are scholars like Nicholas Xenos (1989) and Achterhius (1993) who have demonstrated in their work that scarcity is a modern construct. Xenos explains, through the writings of Hume and Smith that post the industrial revolution the needs and desires increasingly became interchangeable and scarcity was invented. The scarcity argument is now a mainframe of all policy discourses on water even though feminists have strong objections to water commoditisation on the ground that it excludes women from accessing it. Water use is heavily affected by the dimension of caste class as much as gender. Women bear a double whammy of being a woman as well as from a particular caste. They are excluded from the domain of productive use of water like irrigation due to the

fact that it is a man's domain. Men have the entitlements of property as well as access to land which gives them a clear control over things. Even where women have been given participatory rights like the water user associations, their participation is nominal and doesn't translate into real decision making powers despite legislations to this affect.

Today water is an impure public good because though it is non excludable it is still competitive. Krishnaraj (2001) rightly points out that "Mehta (2006), using a human development approach, makes a case for moving away from regarding water purely in bio-physical terms to focusing on socially constructed scarcity. We need to disaggregate users and their entitlements and to look at the politics of distribution within a political economy" (ibid.: 39).

Gender and Irrigation: Women and the productive domain of water

Margreet Zwarteveen (1998) postulates that irrigation management with a gender perspective starts by identifying the end-users, and by understanding their needs and interests. The basic premise here is that unless the actual users are willing and able to use the water delivered by the irrigation system efficiently and effectively, the objectives of the irrigation system will not be achieved. Hence, developing a gender perspective to irrigation management consists of answering the following questions:
1. What are the objectives of the irrigation system?
2. What are the needs of female and male water users?
3. To what extent are above both objectives compatible?
Gender and irrigation development are closely linked. There are several inter-linkages and while some are evident, some are hard to fathom in advance. These linkages differ in every cultural, institutional and environmental context and vary with the type of irrigation technology used. The fact is that prevailing gender relations structure the direction and nature of irrigation related developments and therefore the success of irrigation interventions. Zawateveen maintains that privatisation changes the basic socio-economic relationship between irrigation agencies and users. The anticipated benefits of privatisation can only be achieved when women's responsibilities and tasks with respect to irrigation are recognised and accommodated. If women's contribution and needs are overlooked it may distort the incentive and accountability structures as it will also disassociate payments from benefits.

Women and water: issues of access and livelihood

Access to water-the quality, quantity and time spent on acquiring it, has important implications for livelihood options of women. Zwarteveen (1998) says that women's schedule are most elastic. If the access of water is easy and allows them spare time then they use it for livelihood diversification. The issue of access is gaining prominence in the livelihood discourse (Haan & Zoomers) and is relevant to this discussion.

Gendered livelihoods and the management of water: As stated above access

is a complex issue which is dependent on many variables. It is important to understand access beyond the notion of allocation of goods 'to those who are willing and able to pay' and as "the ability to benefit from things" (Ribot & Peluso, 2003, p.153 as quoted in Milgroom, Giller &Leeuwis, 2014). In the realm of water where it is increasingly categorised as productive and domestic thereby demarcating the male (productive) and female (domestic) domain, access seems to depend more on social and human capital rather than natural and/or finance capital.

As early as 1995 Cleaver postulated distinction between productive and domestic water. The policy discourse on water during this time had started looking at market as a tool of distributive justice. Fresh water being a scarce commodity needed to be saved from losses and water pricing seemed to be the answer. However this is also a period where 'Women In Development' perspective was gaining ground and so policies encouraged structural participation. Considering the gender divide at the water front (productive vs domestic) treating water as an economic good undermines domestic use of water. Market is a gendered place (Cleaver, 1995). Technocratic approach to participation is detrimental to women because it ensures 'formal' participation and doesn't account for exclusion or analyses whether this participation benefits women. It runs the risk of ignoring structures of power at local level as well as underestimating gendered constraint of participation. Little attention is paid in the water sector to the scope for negotiation of gendered roles at the household level.

Women and water: the role of gendered spaces

Spaces are gendered and public spaces have been historically construed as masculine spaces whereas private/domestic spaces as feminine. While public–private boundaries may be blurred and often are for various reasons, they can also be maintained through cultural and material practices with regard to water (e.g. men irrigate farm land; women manage domestic water needs).

Subjectivities: gender and water

Gender relations are linked to 1) gender division of labor, 2) norms and rights, and 3) the spatiality and materiality of different kinds of waters (Sultana, 2009). Gender identities and subjectivities both forge and challenge gender relations in water but in myriad ways. Sultana says that gender relations are influenced not just by direct resource use/control/access but by multiple knock-on effects like the quality of water, its location (e.g. water poisoning from arsenic consumption). Truelove also underscores this fact in her article where she points out that "*micro-politics of context, subjectivity, and struggle provide critical insights into the operation and consequences of global economic and political systems*" (Mohanty, 2003 as quoted in Trulove, 2011, p. 145).

Farhana Sultana (2009) argues that while scholars have contended that better consideration is expected in order to address gender issues in water management, there is little focus on the role that broader societal and ecological variables play in

the ways that gender is implicated in water management – and the ways by which gendered waterscapes are created, reproduced and questions. She points that feminist geographers, who have long argued that spatial and social processes are co-produced emphasize that social processes occur in specific spaces and places, and they influence the constitution of these processes and the spatial configurations. Spaces are gendered and 'patriarchal social structures and institutions' create identities which limit women's spatial mobility'. For instance market place is a male domain, homestead is a feminine place. As a result, it is more difficult for women (especially younger women and unmarried/teenage girls) to fetch water from water sources in overtly public and masculine places such as bazaars and roadsides. The public–private and home–outside divides become problematic when safe water sources are increasingly in distinctly public spaces.

Gender, class and access to water-

Geography creates class and is impacted by it as well. The access to water of households is dependent on material and other social divisions so for instance rich and influential households may have preferential conditions of access, and different sources of water, compared to those of poor households. Crow and Sultana (2002), through their work in Bangladesh, emphasize that the quality, reliability, and costs of water for a particular household will be influenced by a range of characteristics including conditions of the water source, geographic location of the household or enterprise in relation to the water source, past social investments in water infrastructure, and the social, economic, and even political position of a household or enterprise. Gender relations interact with material inequalities to influence access to water in at least three ways - first, through gender-based divisions of work, second through property entitlements in the name of women and third, by situating economic uses of water in a male domain and domestic uses in a female domain in policy discourses . They have postulated 4 main modes of access of water:

- Ownership of land and pump
- Market access
- Common property access
- State backed provision

For each of these categories of access it is possible to identify social conditions that ensure water security for some and water deprivation for others. Material inequalities influence water security and deprivation through a range of processes operating at different social levels. These processes include property relations, inequalities of income, state provision, rules of access to common social property, and social status.

Conclusion

Women do not have access to resources (or decision making powers pertaining to it) so even when they are willing to pay for it, they may not be able to do so owing to male control. Water is no exception. It is clear from above discussion that

access to water- for both domestic as well as agricultural use- for women is difficult owing to dominance of patriarchal institutional, economic and cultural structures. This fact then compels us to critique the current policy consensus on treating water more as an economic than as a social good, riding on the back of an efficiency logic. The problem with the efficiency argument is that it perceives users of water as economic agents, taking decisions about water use and management based primarily on their expectation of quantifiable economic benefits (Najlis & Edwards, 1991; Wade, 1988 as quoted in Zwarteveen, 2013). There is a danger that this might lead to an underestimation of the importance of domestic use. It also fails to quantify the social and health implications of water. There is need to shift the focus from water as economic good towards promoting it as a public good owned and managed by community with a definite focus on gender participation. However this understanding is not easy to arrive at owing to multi-dimensional nature of the issue, and calls for a multi-disciplinary approach for a nuanced understanding of the subject.

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Adivasi Identity and Accommodation in Assam

Harsha S.

The present paper examines the issue of Adivasi identity and accommodation in Assam. Although Adivasis have been inhabited in Assam from time immemorial, they have been subjected to exploitation and neglect by the state and rival ethnic groups of Assam. The present paper reviews the issues plaguing the community and discusses the viability of alternative institutional arrangements which could resolve the crisis.

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Introduction

The Adivasis who inhabit Assam today can broadly be divided into two communities: tea garden workers and those who left the tea gardens at the end of their contracts and settled in and around the area after procuring a little land.

According to studies of scholars such as Karotemprel & Roy (1990); Pullopillil (2005); Chakraborty (1997), and Fernandez (2013) the identity of Adivasi community in terms of their social, political, cultural and economy is at the critical juncture in present day Assam.

All Adivasis in Assam trace their origins to the torturous and oppressive regime of indenture. As Das (1990) wrote 'Tea is the product of the cumulative toil of the labourers. It is mainly because of their hardships that we have the golden brew which cheers thousands. The North East region of India is home of the world's finest variety of tea. It also accounts for a large bulk of the world's tea output'.

The Adivasis who inhabit Assam today can broadly be divided into two communities: the tea garden workers; and those who left the tea gardens at the end of their contracts and settled in and around the area after procuring a little land (mostly through government schemes). They are most numerous in Khokrajhar in western/Lower Assam, in Marigaon, Nagaon, Sonitpur and Darrang in Middle Assam, in Golaghat, Jorhat, Sibsagar, Dibrugarh and Tinsukia in eastern/Upper Assam, in North Chachar and Karbi Anglong in southern Assam, and in the Barak

Valley.

The position of the tea garden and ex-tea garden Adivasis is clearly different, but their experience of social and political disenfranchisement has been similar. The condition of the tea garden workers remains abysmal. As Das (1986) has shown, plantation labour is essentially un-free labour and while payment modes, work organization etc. may be similar to other segments of the industrial labour force, there are also some distinctive socio-economic traits which derive from the fact that plantations are essentially enclave economies combining both agricultural and industrial characteristics. Workers are in essence captive to the command of capital.

But conditions were worse during the colonial era. From the 1850s until the 1920s, working conditions on the tea estates were akin to slavery. Recruits were confined in concentration-like camps in the tea gardens themselves, housed in segregated 'coolie' lines, and kept under strict surveillance. Discipline was enforced by flogging, rape and torture, with the harshest punishments meted out for perceived laxness. They were required to perform their work despite the inclement weather. No concessions were made for women and children. Yet wages in the tea gardens were lower even than those received by coolies employed on public works or the railways. Not surprisingly, mortality was high, but such was the uncaring nature of the system that the bodies of workers who died were simply thrown into rivers.

While certainly not comparable to earlier times, working conditions today are still far from well regulated. The Plantation Labour Act of 1951 which was enacted to protect the interests of workers in plantations is routinely violated, and the same goes for other legislative measures meant to protect workers in general such as the Workmen's Compensation Act 1929 and the Assam Plantation Employees Welfare Fund Act 1959. In 2004 the North Eastern Social Research Centre, based in Guwahati, conducted a comprehensive study of 172 tea gardens in Assam, holding numerous interviews and group discussions with workers and their families. The study brought to light many cases of inadequate or non-existent provision of basic services such as drinking water, schools, health facilities and shelter. Women, who are the backbone of the tea industry and comprise the large majority of the work force, face particularly difficult working conditions. According to studies sanitation facilities dedicated for female use were either inadequate or lacking altogether. There were rumours of adivasis being subjected to verbal, physical and sexual abuse. It is not surprising to learn that female labourers are preferred to males because managers feel that they are easier to exploit.

Witch-hunting is a curse in the Adivasi societies, where women are assaulted, beaten up, heads tonsured, murdered, dragged into public places, faces painted black, forcefully paraded naked in public meetings and raped in the name of they being witches. The peculiar thing about the violence is that, most victims are widows, aged women and mainly women who are closely related to the accusers. Witch-hunting is one of the most brutal forms of violence against Adivasi women. Witch-hunting is a frightening phenomenon, which is on the increase in recent years in Adivasi dominated villages in the states of Jharkhand, Bihar, Assam,

Tripura, Madhya Pradesh, Chhatisgarh, Gujarat, Rajasthan, Andhra Pradesh and Maharashtra. Realizing the gravity of the problem, Guwahati High Court had asked the Assam Government to investigate the matter.

Issues surrounding gender deserve special mention due to the feminized nature of the tea-picking industry as well as the specific ways in which oppression and marginalization play out for Adivasi women, both inside and outside the tea gardens. While traditional norms of patriarchy and gender hierarchy are not as prevalent in Adivasi society as they are in many conservative upper-caste Hindu communities, local traditions do have women bearing a disproportionate socio-economic and cultural burden. They perform the bulk of unpaid labour in the house hold and are regarded as the bearers of Adivasi culture and tradition. Furthermore, a history of exotic sexualisation of Adivasi women dating back to colonial times has led to them being stereotyped as sexually loose and even deviant. This in turn has made them specific targets of sexual violence, especially in recent times in the context of communal clashes.

The conditions of the Adivasis who made it out of the tea plantations and settled down as cultivators around the gardens is certainly better—but not by much. Those who have land are managing well enough but those without it have been forced to look for informal laboring jobs in nearby towns and cities. Overall education and poverty levels, and health indicators for Adivasis are among the worst in Assam. Many Adivasi families find it difficult even to get their children into primary school. They are disproportionately affected too by natural disasters, with erosion and floods taking a toll of their small farms. Being denied loans in regular banks, they have to rely on usurious moneylenders. Occasionally their land is stolen from them by the state or private players because of a lack of proper documentation. Last but not least, they have little political voice. Although they account for nearly 20 percent of the population of the state, their representation in the legislative assembly is miniscule. Due to continued disenfranchisement and oppression, self-exploitation within the community is on the rise, with alcoholism becoming rampant and the trafficking of women and children to work as domestic workers or sex workers in cities like Kolkata and Mumbai also increasing.

Indeed, according to a recent study of the Adivasi problem in Assam by Pulloppillil (2005), the community is at a critical juncture today in terms of its social, political, cultural and economic identity. The Adivasis' situation, he suggests, is dire, and has been made even more perilous by the recent granting of regional autonomy to territories such as Bodoland, Lalung, Karbi and Mishing.

The most potent cause for the emergence of Adivasi insurgent groups is the large scale Adivasi land-grabbing in Assam. The land-grabbing has taken an ethnic guise in the districts of Karbi Anglong & Bodoland where Karbis and Bodos respectively are snatching land from the Adivasis by claims of indigenousness, ethnic cleansing and the provisions of autonomous council which prohibits alienation of land to non-tribals. In November 3, 2010, The Forest department under Haltugaon Forest Division in the western part of the State had burnt down houses of more than 1500 Adivasi families of 33 forest villages in Longchung Forest area in the name of an eviction drive from forest land.

In this connection, All Adivasi Students' Association of Assam (AASAA) of

Karbi-Anglong District has demanded land rights, special recognition and creation of an Adivasi Development Council within the six schedule areas of Karbi-Anglong in Assam, besides permanent land patta (rights).

Apart from land-grabbing, in some areas of Assam such as bodoland territorial council, the local bodos consider the native adivasis as intruders and there has been a series of attempts by Bodo militants to forcibly evict the adivasis and other non-bodos through ethnic cleansing.

Furthermore, The Assam-Nagaland border dispute in the districts of Jorhat and Golaghat of Assam had exacerbated the plight of the adivasis living in the border districts of Assam. Nagaland has been accusing Adivasis's of encroaching their land and Naga militant groups NSCN are tormenting and threatening the adivasis of border districts. There have been complaints of NSCN kidnapping tea garden labourers.

Against this background of disenfranchisement, some prominent Adivasi Organizations such as the AASAA and groups active with tea garden workers such as the Assam Tea Tribes Students' Association (ATTSA) are agitating for the granting of ST status to the state's Adivasis. This, they feel, would go a long way towards ameliorating the historically-oppressed condition of the Adivasis in Assam. Indeed it is often the central, if not only, point of many of their campaigns.

The Karbi organizations in Karbi Anglong are vehemently opposing the ST status demand of Adivasi in Karbi Anglong in particular and Assam in general. Some of the causes for the opposition to the ST demand of adivasi are as follows:

1) Granting of NOC by council to Adivasi and their eventual declaration as ST would endow them with political power by enabling them to contest elections for reserved assembly & loksabha seats. It would further consolidate their power in the district in particular and Assam in general.

2) There is an apprehension among Karbi and other Tribals in Karbi Anglong that declaration of ST status to Adivasi would embolden them to up the ante with regard to other demands such as creation of Adivasi development council exclusively for hill areas and ST Hill status.

3) There is a fear among Karbi and other tribals that Adivasi are not indigenous people of Assam and the granting of ST status tantamount to recognition of their indigenous status.

4) Lastly, there is disquiet among Karbi and other Tribals that recognition of Adivasi as ST would make a dent in their share of reservation pie.

Five Assam based Adivasi militant groups comprising Adivasi Cobra Military of Assam (ACMA), Birsa Commando Force (BCF), Adivasi People's Army, All Adivasi National Liberation Army and Santhal Tiger Force, in ceasefire expressed unhappiness over the "tardy progress" in according Scheduled Tribe (ST) status to Adivasis. The unhappiness was conveyed to the Centre by 15 leaders of the groups during a tripartite meeting held during November 2013. These groups had laid down arms on January 2012 with a declaration that they would continue to fight for Scheduled Tribe status for Adivasis.

Institutional Arrangements to accommodate Adivasis in Assam

Having analyzed the issue of adivasi identity in the previous section, the present section focuses on the question of institutional arrangements to accommodate them. Adivasis in Assam have been clamoring for some sort of autonomy or institutional arrangement to represent their interests or identity.

To placate adivasis, the Assam government established development councils for them and some other ethnic groups of Assam in 2007. Although development councils have been constituted, they have not been endowed with adequate powers and they have not become democratically elected bodies. Moreover, in Karbi Anglong autonomous council area, adivasi's and their organizations have been demanding development council exclusively for hill areas. Disillusioned with such development councils, Adivasis have been demanding autonomous councils under the sixth schedule of the constitution. However, some of the studies on autonomous councils (Singh, 2008) indicate that working of these councils have been marred by corruption, nepotism and intensification of ethnic conflict. According to Misra (2012) the demographic transition of Assam alongside the growing prosperity of migrants and other non-Bodo communities is what provoked 2012 Bodo-Muslim clashes in the BTAD area. He avers that disproportionate representation and BTC's consistently anti-minority stance had provoked demands for the exclusion of Muslim-majority villages from BTAD and the Adivasis, too, claiming to comprise 9,00,000 of BTAD's population, wants to be excluded from BTAD jurisdiction.

Moreover, of late other ethnic groups of Assam such as Amri Karbi, Garos of Assam, Gorkha, Non-Dimasa (Kuki, Hmar, Biate, Hrangkhol, etc.) communities in N C Hills and recently the scheduled caste communities in Assam have been demanding sixth schedule autonomous councils. Out of desperation, adivasis are joining adivasi insurgent groups such as Adivasi Cobra Military of Assam (ACMA), Birsa Commando Force (BCF), Adivasi People's Army, All Adivasi National Liberation Army and Santhal Tiger Force. The emergence and reinforcement of adivasi insurgency poses a threat to the peace and stability of the Assam state in particular and India in general. According to India Today report The All Adivasi National Liberation Army (AANLA) an Adivasi insurgent group in Assam with definite links with some of northeastern India's frontline separatist groups and a possible nexus with the Maoists could well turn out to be the new terror front in the state.

Hence, at this juncture it is imperative to interrogate the issue of autonomy in the context of Assam. Scholar Sarmah (2011) recommends an alternative conception of differen-tiated citizenship which is based on the acknowledgement of the political relevance of difference. According to him differ-entiated citizenship in Assam will recog-nise the pluralist character of the demo-cratic community in the state. Instead of difference-blind universalism, differentiated citizenship develops the sense of collective belongingness and equal respect for the "other". At the same time, a number of rights could be ensured and established, viz, special representation rights, multicultural rights, self-government rights or rights to self-determination, etc. the author opines that autonomy should not be viewed as a tool

to govern people of the frontier or periphery. It is to be taken as the integral and inherent part of the democratic process. It should not be regarded as a process to deal with extraordinary circumstances, and instead must be taken as a spontaneous flow of political life.

However, the problem with deterritorialized autonomy is that it would open a pandora's box for group recognition and might lead to mushrooming of ethnic groups in Assam state.

A review of the representation of two autonomous councils namely Karbi Anglong and Bodoland where adivasis are living in large numbers reveals that adivasis are scarcely represented in these councils. Moreover, these councils have a history of adivasi displacement and land grabbing perpetrated by dominant ethnic groups. In order to ensure the safety and voice of the adivasis in these councils, it is imperative to establish some sort of consociational arrangement in which different ethnic groups along with adivasis are represented in these councils through rotation. Furthermore, executive positions in these councils should also be reserved for Adivasi and other Non-tribals.

The Standing Committee on Law and Personnel said in its latest report that it supports the proposal of the central government to create a second chamber in Assam in "larger public interest". Since parliament has made a provision for the second chamber for the Assam state, the possibility of providing representation to adivasis in the second chamber should be explored. Many minority ethnic groups could be provided representation in the second chamber.

The grading of ST status to adivasis and accommodating them in the existing institutions through consociational arrangements would go a long way in empowering the adivasis and nipping in the bud the menace of adivasis insurgency in Assam.

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Health Concerns of Truckers in Tughlakabad, Delhi: Need for Social Work Intervention

Ali Azam & Bindya Narang

The truckers constitute an important occupational group who connect production and distribution centres across distant places and keep the economy running. They undertake long and arduous journeys spanning national and state highways at odd times and through difficult terrains. By virtue of the specific nature of their occupation involving recurrent long distance travels, monotonous and tight schedules, prolonged rest deprivation and loading or unloading heavy weight, they are predisposed to a multitude of health risks. It has been pointed out in several studies that the truck drivers face numerous physical, psychological and behavioral problems and an even deadlier threat from HIV/ AIDS. The present paper examines the self perceived well-being and health concerns of a sample of truck drivers in Tughlakabad Transshipment Location Area, Delhi. A cross sectional study was conducted to this end involving drivers, helpers and allied workers chosen through convenience sampling. Semi structured schedules and discussions were used to collect relevant information. It was found that these long haul truckers faced several problems related to physical and mental health. A hampered self esteem, poor social connectedness, work related stress, aggression, bodily fatigue and loss of productivity due to lack of sleep were highly reported. High risk behavior such as substance abuse and unprotected sex with multiple partners were also profound. The study concludes with the role of social workers in developing an explicit plan of interventions to encourage and assist the truckers to improve their health, empowering them to make healthy choices and minimizing their health risks.

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Background

It is acknowledged that the health issues faced by people largely stem from the lifestyle that is imposed upon them through their job or occupational requirements. Transportation is an important occupation that undeniably serves as the lifeline of an economy. Workers in this large and growing occupational segment are at risk

for a range of occupation-induced adverse health conditions. Undertaking long and arduous journeys spanning national and state highways, the truckers connect production and distribution centres across distant places play a key role in commercial and material transportation. By virtue of the specific nature of their occupation involving recurrent long distance travels, monotonous and tight schedules and prolonged rest deprivation, they are predisposed to a multitude of health risks.

It has been pointed out in several studies that the truck drivers face numerous physical, psychological and behavioral problems and an even deadlier threat from HIV/ AIDS (Saltzman & Belzer, 2007). Morris *et al.*, (1996) and Singh & Malaviya (1994) ascertained that truckers often have multiple partners along their truck routes and use condoms infrequently, which increase their susceptibility to HIV infection. In consonance, Rao et al. (1996) in their study across five states of India found that most intercity truckers had a history of multiple Sexually Transmitted Diseases. There are also ethnographic studies on American truckers published by Agar (1996) and Ouellet (1994), which contain detailed descriptions of truckers' tough working lives and culture. It has also been found that the truckers suffer from mental health-related problems and psychiatric disorders due to a work environment that produces high occupational stress, low access to and use of health care and limited opportunities for social support (Apostolopoulos *et al.,* 2010). Occupational stress has been further associated with burnout, which is considered a product of long term exposure to stress (Mearns & Cain, 2003). It has also been strongly associated with temporary and chronic illnesses, such as headache, hypertension, reduced immune response, stomach complaints, depression and stroke (Ashcraft, 1992; Kahn & Byosiere, 1992).

In a study by Korelitz *et al.*, (1993), a cross-sectional survey of truck drivers was conducted in order to provide general information on their personal characteristics, health status and health interests. It was found that 54 per cent of male truck drivers smoked cigarettes, 23 per cent consumed alcohol daily, 92 per cent did not exercise regularly, 50 per cent were overweight and 66 per cent had high blood pressure. It is further reported a higher prevalence of back pain, hypertension, stomach ulcers and hemorrhoids among truck drivers in Japan. The scientific literature is very clear that truck drivers have an increased risk of developing cardiovascular disease, and that their working and lifestyle patterns contribute directly to this elevated risk (Krueger *et al.*, 2007). A link between professional driving and stroke has also been indicated (Tuchsen *et al.,* 2006), and there are also a number of factors that are likely to cause fatigue within the trucking industry (Charlton & Ashton 1997).

In India, long distance truck drivers are recognized as an important 'high risk group' (Rao *et al.,* 1994, Bal *et al.,* 2007) and it has been acknowledged that in such high risk populations, HIV could spread rapidly in a short period of time. Anecdotal evidences suggest that by purchasing sex at different stops on the highway, truckers may transmit HIV along trade routes to the local population of those areas, which is inevitably a serious concern. Pal (2014) argued that labeling of truck drivers as a high-risk group has marginalized them socially, thus affecting their willingness to access sexual and reproductive health services, and

accordingly, their health needs remain uncared for. Moreover, it has been ascertained that most of the research done on truckers in India has only focused on their sexual health and very few studies have been done till date to understand the other morbidities among them (Kartikeyan *et al*., 2004). Also, there are no special programmes, except the National AIDS Control Programme, to address the common health problems of this occupational group. Thus, the present study was designed with the objective to study their self perceived health concerns and multitude of risk factors associated with being in the given occupational context.

The importance of community-based social services and social work interventions in the healthcare delivery is being widely acknowledged. Additionally, the focus of social workers to address social determinants of health seals a critical gap in the evolving healthcare environment. Social work professionals can provide person-centered care, can coordinate with other caregivers and focus on solutions for myriad issues related to health and wellness of the truckers. Considering that social workers can play a major role in the assessment of needs and risks over a number of client groups, the study would serve as a platform to recognize and assess the general health concerns of truckers and plan health and safety interventions for and with them.

Materials and methods

The study was conducted in Tughlakabad trans-shipment location area in the south zone of Delhi, which is a known hub for long distance truckers. A trans-shipment area is a place where trucks are loaded and unloaded or halt for maintenance and replenishing supplies. A sample of thirty-five respondents comprising of 15 truck drivers, 12 helpers and 8 allied workers were chosen based on their availability and convenience. Some of these truckers were also selected through non probability accidental sampling at a clinic run by a NGO, Society for Promotion of Youth and Masses (SPYM). The study used an inductive approach since the main objective was to understand the self perceived well being and health concerns of truckers through their subjective viewpoints, which also justifies the small sample size. It was also intended to gain an insight into the prevalence of any health risk behavior in this occupational group. The respondents were interviewed using a semi structured schedule after taking their consent and were assured of confidentiality and anonymity. The inclusion criteria were: any truckers on long distance route of not less than five hundred kilometers, their willingness to participate in the study and responding to every part of the enquiry. This was ensured through rapport building during the initial field visits. The information obtained was put to thematic segregation and manual content analysis.

Results and discussion

General Profile of Truckers

The truckers primarily included drivers, helpers and allied workers. The selected drivers and workers were altogether in the age group of 25- 40 years. The helpers

were found to be in the younger age group (less than 20 years) and guided the drivers in directions, keeping a vigil on the roads, helped in loading and unloading and also received hands on training in truck driving and dispatching goods. The allied workers were mainly responsible for maintenance and repair of the vehicle. It was revealed by one of the respondents that since their occupation involves a lot of physical stress and driving in glaring lights at night, most drivers above the age of 50 years avoid driving trucks on long routes due to vision blurring / weak eye sight and other physical ailments. It was also cited by one of the helpers that "*We hail from rural families and get married early, so by 45-50 years of age, we have grown up sons to earn for the family and thus we discontinue*". The average number of years spent in their present occupation was 5 to 15 years and a majority of them were reportedly married, none was illiterate and most drivers and workers studied till middle school. The interviewed respondents belonged to the northern states of Punjab, Haryana and Uttar Pradesh.

Work Schedules and Mental Stressors

All the respondents reported some or the other form of occupational stress, being away from home, family, friends, and other support networks for several days, weeks or months altogether. One of the respondents reflected his plight as "*We don't even come to know when and how our children grow up, which class or school they go to, sometimes we don't get to see them for months*". Several other work stressors that were cited included time pressures for delivering goods, seclusion, insolent treatment from others, driving hazards due to weather changes, massive traffic snarls, poor road conditions and fear of police personnel across the state borders. Irregular sleep and working hours as long as 12 -15 hours due to long distance driving, were asserted as challenging by all the respondents alike. It was revealed during discussion that most truckers were forced to use abusive language and resort to aggression when plying on long routes. The agony of stressful drive, inadequate rest and relaxation, coupled with harassment and money extortion at the hands of police personnel reportedly exacerbated their mental stress. One of the drivers commented "*I get illusions of full blowing horns and constant movement even when asleep*". Many drivers also reported mental stress and depression related manifestations like insomnia, high blood pressure, headache, and instances of dizziness as well as frequent mood swings.

Physical Strains

It was pointed out in discussions that driving trucks in a prolonged sitting position makes drivers vulnerable to back ache and joint pain. The older vehicles with poorly designed seats and back rests were also reported to be causing this. It was also observed in some of the parked trucks that the seats were not ergonomically conducive or comfortable. Borle *et al.,* (2012) also found that the occurrence of multiple ailments which primarily posture related are well-explained by the fact that long distance truck drivers are continuously exposed to whole body vibrations of low grade which cause resultant nervousness, fatigue, local injuries and

inflammation of bones and joints.

A high prevalence of gastric problems, especially acidity and heartburn were also reported. This may have been caused due to irregular food habits, consumption of unhygienic and spicy food at roadside eateries on day to day basis, coupled with tobacco and alcohol addiction among this population. It was found that although the truckers devoured calorie dense food in sufficient quantities but compromised on personal hygiene and nutritional quality of the food consumed. This coupled with sedentary nature of their work also increases their chances of diseases such as diabetes, hypertension and coronary heart disease, which may remain undiagnosed for long due to lack of access to or deferred health check-ups.

Besides, frequent cold and coughs were also reported. These were attributed to weather changes across terrains and constant exposure to particulate pollution. All the interviewed respondents affirmed chronic smoking which could have further increased their susceptibility to recurrent coughing and Tuberculosis, in a few cases.

A quarter of respondents, when diligently probed, also confirmed having Sexually Transmitted Infections (STIs), although only a handful were availing treatment at the medical centre run by NGO SPYM. It was noticed that many truckers confused STIs with HIV.

Health Risk Behaviors

It was found that more than half the truckers had multiple sexual partners. They admitted having hired the services of female / male sex workers, prostitutes and eunuchs on their long routes. The reasons cited were loneliness and for entertainment or recreation. Apparently, only a few truckers used condoms on such occasions. None of the truckers ever used a condom with their spouses. This multiplicates in transmission of infections to their wives and to be born children. Another study by Rao *et al.,* (2013) highlighted the issue of HIV being spread to the low risk group by the long distance truckers who engaged in unprotected sex with high risk groups, such as female sex workers and transgenders.

Further, it was revealed in interviews that most of them preferred local doctors at the NGO clinic and quacks for the fear and stigma attached to STIs. They conspicuously availed medical or health facilities and thus did not prefer visiting any Government hospital due to sheer hesitation. A research study conducted by Mishra *et al.,* (2012) among cohorts of low and high experience truckers also revealed that the adolescents who enter the trucking industry are at a higher risk of contracting STIs and HIV than the adult entrants. It was put forth that adolescent boys who are believed to be 'risk takers' in the context of physiological sexual urge, peer influences, and a need for experimentation are more likely to engage in riskier behaviours, including commercial sex and, some of the senior drivers also may force adolescent helpers into 'survival sex'. Though all the helpers in the present study denied any such encounters with drivers, they admitted having engaged with prostitutes at brothels.

It was also ascertained that apart from smoking, some truckers also consumed liquor or regular basis. It was revealed that they consumed alcohol at

countryside *Dhabas* (small eateries along the highways) to ward off stress. Due to increased police vigilance, they avoided alcohol when moving across Delhi. Nevertheless, driving in a drunken state has been shown to decrease concentration and cause accidents and this was also a pertinent health risk behavior. A significant number of truckers also consumed chewable tobacco products. Some attributed it to childhood habit while some also claimed that it improved their focus while driving and prevented them from falling asleep, thus improving their work efficiency. Kartikeyan *et al.*, (2004) too have reported a high prevalence of tobacco chewing and alcohol addiction among truckers, similar to our results.

Some of the truckers interviewed at the NGO clinic also admitted having used injectible drugs and related it to peer and work pressure. Initially hesitant, they gradually admitted having taken to substance abuse and drugs to get relief from anxiety, stress, and tiredness or to enhance sexual stimulation. However, having known the side effects and through clinical help, they reportedly intended to quit this addiction.

Conclusion and Suggestions

The study purports that trucking is a high risk occupation and contends that poor health of truckers not only affects individuals but also affects road safety and the productivity of transport operations. Facing acute stressors on day to day basis was determined as a factor in the prevalence of risky behaviors including substance abuse and sex with multiple partners in this occupational group. The paper suggests that physical and mental health promotion as well as treatment for truckers are important areas of concern and must be examined within the broader context of the transportation environment. Social workers can play a crucial role in delivering and maintaining public health by ensuring that people have all the information and enabling support they need for better self-care. They can provide both, the epidemiological and a social perspective and have the benefit of training in both prevention and intervention.

Since the truckers are hardly static and they move on to different places, transporters and respective hiring agencies could also be taken as important stakeholders in planning the specific and targeted interventions. Maintaining the health data base of this client group and regular follow up is highly recommended. It is also important to impart mainstream life skills and sexual and reproductive health education to the truckers through activities like, one to one interaction, health exhibition, street plays and counseling in conjunction with field based, local non government organizations. Further studies, which focus on the morbidities of long distance truckers, need to be conducted among a larger sample. In addition, it is imperative that favorable road and job policies get framed for the truck drivers targeting them for periodic health evaluations for early detection of common ailments and chronic conditions. In advisory capacities, providing health education and counseling, making referrals, case management interventions and organizing support groups, social worker are thus, in a pertinent position to significantly address the health concerns of truckers.

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Purview of Health Care services in Ukhrul District of Manipur

Sword Ronra Shimray & M. Tineshowri Devi

The study tries to describe the services provided by both government and private hospitals in Ukhrul district of Manipur. It further describes on the availability, accessibility and utilization of health services by people from Ukhrul district hospital (government) and private hospitals under the study area. The study is determined by sample size of 200 respondents who have utilized the health services in different departments like Women Reproductive Department, TB Department and HIV/AIDS Department of both government and private hospitals. The study discussed on the problems encountered by respondents in accessing and utilizing the services due to non-availability of health care providers, equipments, ambulance and also due to uncertain social unrest in the region.

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Introduction

Health is a pre-requisite for human development and is essentially concerned with the well-being of an individual as well as for integrated development of society be it cultural, economic, social or political. Societal health status is intimately related to its value system, its philosophical cultural traditions, and its social, economic and political organizations. The cultural pattern varies from tribe to tribe and region to region. Moreover, cultural setting and religious beliefs and treatment among others influence human health and health seeking behaviour. The study of health culture of a particular community is important because health problems, procedures to handle such problems, and other health practices are influenced by a complex interplay of social factors. It is difficult to implement health services without knowledge of community's traditional health culture. Thus, there is an urgent need for initiating a comprehensive study on changing health scenario.

Profile of Manipur

Manipur is a small State lying in the extreme North Eastern corner of India. It is bounded on the north by Nagaland State, on the south-east by Myanmar and on the west by Mizoram and Cachar District of Assam. The State has an area of 22,327 sq.km of which constitutes 0.7 percent of the total land surface of the country. The State has 29 Scheduled Tribes (ST) and 7 Scheduled Castes (SC) having their unique languages, tradition and culture with ethnic diversity. The state is divided into nine districts of which five are Hill districts. These are Chandel, Tamenglong, Ukhrul, Churachanpur and Senapati. The four plain districts are Imphal West, Imphal East, Thoubal and Bishnupur. According to the 2011 Census, the total population of Manipur is 2,721,756 constituting 0.22 per cent of India's population. The male population is 1,369,764 and the female population is 1,351,992. The sex ratio in Manipur is 987 for each 1000 males and has increased from 978 per 1000 males since the last census. Manipur has a literacy rate of 79.85 percent, with male literacy at 86.49 percent and female literacy at 73.17 percent.

The state has three tier administrative set up in the health care services. The state has more than 500 hundred Primary health care centres, 13 hospitals including one state level hospital (Jawaharlal Nehru Hospital) as a referral centre and seven district hospitals.

Objectives

The focus of the study was on the utilization of health services by people of Ukhrul district with regard to reproductive health, HIV/AIDS and Tuberculosis. Following were the broad objectives of the study:
(1) To assess the program/activities available in three departments (Reproductive Health, HIV/AIDS and TB) of both government and private hospitals in the district.
(2) To examine the availability, accessibility and utilization of health services by respondents in government and private hospitals under the study area.

Methodology

Area of Study

Ukhrul district was marked initially as a sub-division in the year 1919 by the British. It includes 222 villages with a population of 1, 83,115 (Census, 2011). The sex-ratio of the district is 948 females per thousand males. It covers 4,544 square kms. of area and is 2nd largest and 7th most populous district of Manipur. The Tangkhuls are the dominant tribe of the district with a population of more than 80 per cent. Other smaller tribes/communities include Kukis, Nepalese and Meiteis. Ukhrul district is considered as one of the backward districts in Manipur in terms of health care. It has one general hospital with a 50 bed capacity, and two private hospitals with 50 bed and 25 bed capacities respectively. Moreover, Ukhrul

district has highest recorded rate of HIV/AIDS in the state. According to the data given by Manipur AIDS Control Society (MACS) in 2014, there are 1285 pre-ART persons and 664 persons are alive on ART. The rate of immunization was merely 30% and the rate of institutional delivery was merely 19 per cent.

Research design

Descriptive research design was used to describe and analyze the conditions of health care services in Ukhrul district. It focussed on three departments that include women reproductive health department, HIV/AIDS centre/department and TB centre/department from both Ukhrul District Hospital and the Private Hospitals of the district. Approximately 200 respondents were selected using simple random sampling and purposive sampling techniques. The respondents were selected from the patients who had registered in the last one year in Women Reproductive health Department, HIV/AIDS Department and TB Department. Further, data was also collected from the key informants like doctors and nurses from Ukhrul District Hospital and Private Hospitals. Two semi-structure interview schedules were used as tools for patients and for key informants.

Results

Health Structure in Ukhrul district
   (a) The District government Hospital
        The Ukhrul District Hospital was established on June 18 of 1976. It is 50 bedded capacities with 13 doctors, 11 nurses. Under the District Hospital, there is one Community Health Centre (CHC), eight Primary Health Centres (PHCs) and forty three Sub-centres.
   (b) Private hospitals
        The two private hospitals are namely: (i) **Comprehensive Health Service and Research Centre (CHSRC)** at Hamleikhong Ukhrul, which was established in 2007. It has 25 bedded capacities with 2 doctors, 14 nurses and other staff.
   (ii) **Leishiphung Christian Hospital (LCH)** is situated at Meizailung, Ukhrul. It was established on March 6th, 1997. And has 50 bedded capacities with 3 doctors, 8 nurses and other staff. (It is interesting to note that both private hospitals are offering mainly composite care in Obstetrics and Gynaecology and also associating with JSY programme of National Health Mission).

Available programmes in Government District Hospital and Private Hospitals

(a) Ukhrul District Hospital

Sl. No	Program/Activities
1	Women Reproductive Health related Programmes JSY (Janani Suraksha Yojana) JSSK (Janani Shishu Suraksha Karyakram) Rashtriya Bal Swasthya Karyakram (RBSK) IUD Service
2	Revised National Tuberculosis Control Programme-DOTS Centre (Directly Observed Treatment Short-course)
3	National AIDS Control Programme- ICTC(Integrated Counselling and Testing Centres) ART (Anti-retro Treatment) CST (Care Support and Treatment)
4	Operationalization of First Referral Unit (FRU)
5	Awareness and Health education Programme

(a) In Private Hospitals

Sl. No	Program/Activities
1	At Leishiphung Christian Hospital Women Reproductive Health related Programmes: JSY (Janani Suraksha Yojana) JSSK (Janani Shishu Suraksha Karyakram) Intra Uterine Device (IUD) Service Female Sterilisation
2	At Comprehensive Health Services and Research Centre Women Reproductive Health related Programmes: JSY (Janani Suraksha Yojana) JSSK (Janani Shishu Suraksha Karyakram) Intra Uterine Device (IUD) Service Female Sterilisation

The state health department of Manipur is committed to the total health care of its people. The priority is to meet the optimum health needs of the people living in rural areas. The state health system is based upon the primary health care approach as envisaged in the National Health Policy, 1983 with the objective "Health for All" and "All for Health". The state has followed the same principle in implementing different programmes and policies such as National Health Mission, Revised National Tuberculosis Control Programme, National AIDS Control Programme, National Malaria Control Programme, Immunization Programme, etc. Likewise Ukhrul district has also envisaged the same programme. Under the National Health Mission, to fulfil the millennium development goals the district government hospital is implementing Reproductive and Child Health Programme II which helps in reducing the Maternal Mortality Rate and Infant Mortality Rate. The district hospital has implemented Janani Suraksha Yojana (JSY) but the success rate of the programme is minimal due to lack of awareness and transparency in the health system. Janani Suraksha Yojana (JSY) provides cash assistance to the mother after their deliveries and further encourages them for institutional deliveries. There is public-private partnership between the government hospital and the two private hospitals under National Health Mission (NHM) in provision of the JSY program to the respondents in

order to make the programme better and ensure the availability of services for the general population especially for women.
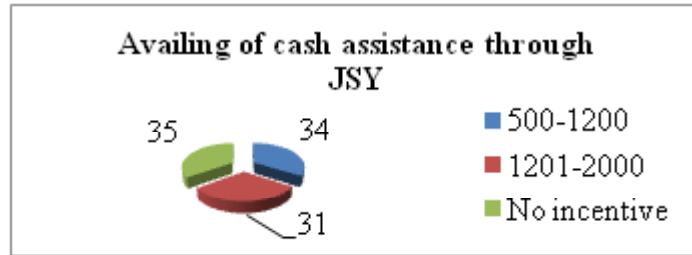

Fig. 1: Cash assistance availed through JSY

Fig. 1 shows the cash assistance which was availed under the JSY programme. The JSY programme states that a pregnant mother (belonging to a BPL household) receives at least 3 ante-natal checkups during pregnancy both in rural and urban areas for availing cash assistance (Park, 2013). It is seen that respondents who have availed incentives, the amount ranges from rupees 500–1200 and rupees 1201–2000. Here 35% of the respondents did not get any incentive both before and after delivery. They claimed that even after they had fulfilled the criteria, no assistance was provided from the government. They further expressed that they asked the Ukhrul district hospital staff for the assistance, but they were being asked to come along with the ASHA worker. Since they were unaware of the presence of ASHA worker as they had not received any facilities from her, they did not get the incentives. While 34% of respondents expressed that they received rupees 500–1200 as cash assistance through JSY after they delivered their babies in the government or private hospitals, followed by 31% who received a sum of rupees 1201–2000 from government or private hospitals. It is interesting to note that majority of the respondents who delivered at private hospital received cash incentives through JSY. It is further seen that majority of the respondents preferred private hospital than the government hospital not only for getting cash incentives but because of positive attitude of health care providers and timely availability of doctors. Thus, availability of health care facilities within the vicinity helps to receive services in time (Prakasam & Raju, 2006). According to respondents, although Janani Shishu Suraksha Karyakram (JSSK) and Rashtriya Bal Swasthya Karyakram (RBSK) were a part of the programme, it has not implemented in the region.

In Ukhrul District Hospital, Revised National Tuberculosis Control Programme – DOTS Centre has been introduced since 2005 onwards. They provide sputum testing examination and provide multidrug therapy to TB patients. Likewise the hospital has also implemented National AIDS Control Programme in collaboration with NGOs but the implementation of ART services started only in 2005. They provide services like (i) Integrated Counselling and Testing Centres (ICTC), (ii) Anti-retro Treatment (ART), (iii) Care Support and Treatment (CST), (iv) Operationalization of First Referral Unit (FRU), and (v) Awareness and Health education Programme.

But in both the private hospitals, the programmes like Revised National

Tuberculosis Control Programme and National AIDS Control programme are not implemented and they focus more on generic health services.

Availability, Accessibility and Utilization of health care services

Utilization of health care services is indirectly inter-linked with the availability and accessibility of health care services like, the programmes, schemes, materials, facilities, equipments and other services from the health care centres. The easy accessibility and availability of treatment from the health centres are indicated by provision of good services by the health care providers and establishing a good relationship between the health care providers and the patients.
(a) Availability of medicines in different departments/centres

Medicine brings relief and improvement to people particularly to respondents who seek services from health care providers. Timely availability of medicine in hospitals will make it easy to provide adequate medicines and will also increase satisfaction levels of respondents who avail services from different departments.

Table: 1 Availing and accessing of medicines from the hospitals

Women reproductive health		HIV/AIDS		TB	
Tetanus Injections	71				
Iron Folic Acid Tablets, etc	29	ART and Counselling	100	DOTS	100
Total	**100**	**Total**	**100**	**Total**	**100**

Table 1 shows the provision of medicines in different departments (Women Reproductive Centre, TB Centre and HIV/AIDS centre) in Ukhrul district hospital. 71 per cent of women availed only Tetanus injections from the district hospital (government) whereas 29 per cent of the respondents availed medicines like Iron Folic Acid Tablets, calcium, etc. free of cost. It is seen that due to shortage of medicines in the government hospital, the essential drugs are not available, which is a serious lapse in the health system. Thus, the respondents were asked by the health care providers to buy the medicines. At times the patients had to buy expensive medicines from the market. Many poor patients were to buy expensive medicines had to be contented with the cheaper drugs (Advani, 1980). It is more than evident that the government's initiative to provide free medicines to the rural poor who cannot afford the escalating costs of medications on the market has miserably failed to deliver the goods in Ukhrul district. They invariably fail to provide even one out of 4–5 medicines prescribed by doctors of the District Hospital. Instead, one has to buy all the medicines from the Chemist thereby incurring huge expenses even as free medicines provision is officially in place.

In case of HIV/AIDS and TB patients, all the respondents have availed ART

and Multi-drug therapy through DOTS from the government hospital. It is evident that Manipur government is trying to curb the problem of HIV/AIDS and TB by providing all the necessary medicines to patients in Ukhrul district. Further, 52.4 per cent of the HIV/AIDS respondents have received the ART services for more than 2 years, followed by 27.6 per cent who availed the services/facilities for 1 to 2 years, while 10.8% and 9.2% have availed it for 6–11 months and 1–5 months respectively. 51.5 per cent of the TB respondents had availed DOTS for 6–8 months from the centre, followed by 34.3 per cent who availed it for 3–5 months, while 8.6 per cent and 5.6 per cent availed the services for more than 8 months and 1–2 months respectively.

(b) Availability of doctors and equipments in hospitals

Hospital is considered here as a social system and the doctors and patients are the sole occupants who mutually interact to form relationship directed by their specific goals and the general goals of the system (Advani, 1980). Availability of doctors and equipment is a must and necessary to run effective health institution. Thus availability of doctors and equipments should always go hand in hand in order to provide good services to the people.

The health care institutions in the study area has still shortage of manpower, poor working conditions and lack of transparency in posting especially in rural areas makes people unsatisfactory with the government hospital (Misra *et al.,* 2003). Many of the women reproductive health respondents have complained that there is no specialised doctor in women reproductive health (Gynaecology) department. One specialised doctor from plain areas who is posted in the department (Gynaecology) never came for her duty this made patients face difficulties in availing the services from the government hospital. The hospital is functioning with six junior doctors or medical officers (MOs), 14 staff nurses against the actual sanction of 29. Thus, they mostly tend to avail the services from private hospitals. Likewise respondents from HIV/AIDS and TB departments complained that doctors who are posted from plain areas hardly come to the department. Even if they come, they do so only for five to six days in a month, this makes the respondents face difficulties in consulting the doctors resulting in helpless situations for them.

Regarding equipments available in the hospital, women respondents revealed that ultra sound machine and ECG have been installed in the hospital, however the machine lie unused due to shortage of staff. So they need to consult expensive private hospitals for check-up. Further the respondents from TB and HIV/AIDS department expressed, there is still lack of equipments like (X-ray, Liver Functioning Test, Kidney Functioning Test and CD4 count) in government hospital. Often such equipments are damaged or non-functional. According to Grant (1941) hospital facilities are inadequate in many communities, especially in rural areas, and financial support for hospital care and for professional services in

hospitals is both insufficient and precarious, especially for services to people who cannot pay for the cost of the care they need.

(a) Accessibility of health care services

In developed countries, there is not much problem for travelling to centres of medical excellence in larger towns and cities. But in poorer countries most of the people live in the rural areas where communications are difficult, expensive, and sometimes non-existent (Muriel & Katherine, 1978) due to lack of accessibility.
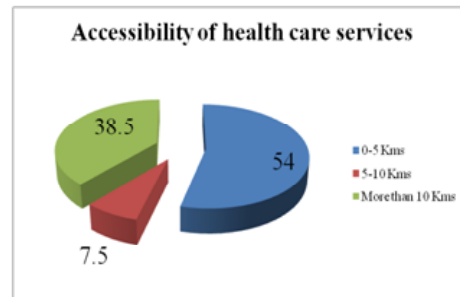

Fig. 2: Accessibility of health care services

Fig. 2 highlights the accessibility of health care services by the respondents. It is seen that majority of the respondents are living at a distance of 0-5 Kilometres from the hospitals. They are mainly from the main town and neighbouring villages of the health centres. 7.5 per cent of the respondents stay within a distance of 5 to 10 kilometres from the health centres. However, a significant number (38.5 per cent) of respondents are staying at a distance of more than 10 kilometres from the hospitals. It is important to note that the landscape of the Ukhrul District is totally hilly. It is very difficult for the respondents to avail the services of hospitals not only due to distance but also by difficult geographical terrain and poor road conditions. The situation becomes worse during rainy seasons.

Health centres and family medicine schemes are supposed to serve as the first point of contact. However, the provisions for ART and DOTS were not available at Primary Health Centre (PHCs), Community Health Centre (CHC) and the two private hospitals in the district. Thus, the respondents who are suffering from TB and HIV face maximum challenges in accessing the services from hospitals.

(d) Mode of Communication

The transport systems for the patients are extremely significant to reach the hospitals for treatment. In certain cases, due to long distance and transportation problems, the patients could not reach hospitals on time for their treatment and therefore, the patients went into critical conditions.
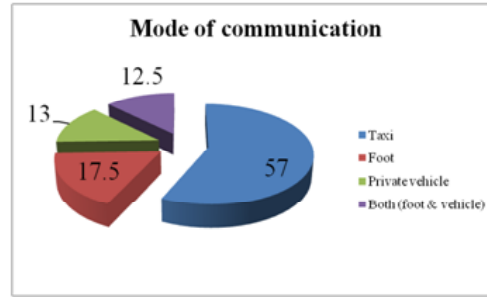
Fig. 3: Mode of Communication

Fig. 3 highlights the mode of communication of respondents to health centres. Their mode of communications is either own vehicles, taxi services, by foot or both (Vehicle and Foot). 57 per cent of them reached hospitals from their villages through taxi services, followed by 17.5 per cent walked to the health centres. 13 per cent went in their private vehicles to the health centres and 12.5 per cent of the respondents covered some distance on a vehicle and then walked to access the immunization, medicines as well as to take treatment. At times it became difficult for the respondents to access or avail the services from health centres due to heavy rains. Moreover, villagers staying in distant places have no access to vehicle services for around two to three months as the condition of the roads get worsened during rainy season.

Respondents who are accessing the services are mostly from the villages where their profession is farming in the paddy field. In the Tangkhul society, farmer's live in the villages whereas employees and business people are mostly resided and live in town. Thus, farmers have to travel for more than 10 kilometres for accessing, availing and utilizing the services from the health care institutions.

(e) Provisions of Ambulance services for women (reproductive health)

Ambulance services are provided for emergency cases. In case of emergency, ambulance service is crucial for taking the patients to health centres. Thus, availability of ambulance services 24X7 is necessary for dealing with emergency cases.
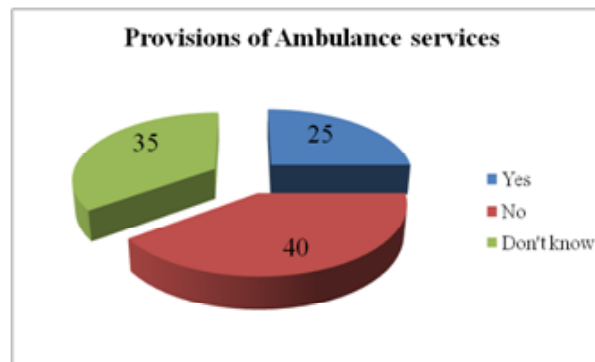

Fig. 4: Provisions of Ambulance services

Fig. 4 highlights the availability of free ambulance services for the respondents in both government and private health institutions. It shows that majority did not avail ambulance services from both government and private hospitals. 40 per cent of the respondents said that there is no free provision ambulance service for the community from both government and private hospitals. 35 per cent of the respondents were not even aware that there is any provision of free ambulance services for pregnant mothers. While 29 per cent of the respondents said that there is provision of free ambulance services by both government and private hospitals. Provision of ambulance services is subject to the health conditions of the patients. For example, ambulance services are provided when the patients have serious health problems (and are already admitted in the hospitals) need further referral to better hospitals in Imphal. In such cases, patients were provided ambulance services but they were charged an amount of Rs. 1500–2000 for refilling the ambulance fuel. Thus, there is still a shortage of ambulance services in the district. Until now there is no provision of 108 emergency ambulance services in the government as well as private hospitals of Ukhrul district.

(f) Utilization of services from traditional and religious practitioners

According to Kalla & Joshai (2004), to understand the meaning of tribal health, it is important to understand the people themselves their social, economic and cultural aspects and also their indigenous medicines. The health status of the tribal is marked by poverty, illiteracy, malnutrition, lack of personal hygiene, poor sanitation, poor mother and child health services, absence of health education, lack of national programmes, and lack of available health services.

Fig. 5: Utilization of services from the practitioners

Fig. 5 highlights the utilization of services from traditional and religious practitioners by the women reproductive health, HIV/AIDS and TB respondents. However, the practice of older beliefs during times of sickness has reduced with the discoveries of science and changing of medical knowledge and treatment of disease (Lenore, 1996). It is seen that 54.5 per cent did not consult traditional and religious practitioners believing that some sicknesses like HIV/AIDS and TB

need to be treated by doctors only. Whereas 45.5 per cent of the respondents mostly women reproductive health and few respondents from HIV/AIDS and TB have consulted the traditional and religious practitioners for treatment purposes. They have the perception that treatment can be sought from traditional and religious practitioners for both minor and major health related problems!

Conclusion

Hospital is the most important institution for improvement of health conditions. There is a fundamental incompatibility between supply of resources for modern health care and the demands for them. There is ambiguity surrounding the contribution of health services to social well-being (Wall, 1996). Preventive health services for the nation as a whole are grossly insufficient. Hospital and other institutional facilities are inadequate in many communities, especially in rural areas, and financial support for hospital care and for professional services in hospitals is both insufficient and precarious, especially for services to people who cannot pay for the cost of the care they need (Grant, 1941).

The private sector has been playing a crucial role in curative health care in Ukhrul district of Manipur as compared to other districts of the state. It is not secure for patients to go for treatment, since there is no availability of doctors, and non-availability of equipments. Thus, it is necessary for state government to join hands with community people to take up necessary steps for betterment of hospitals. Also, they need to enquire about issues such as the negligent behaviour of doctors and non-availability of equipments. Thus, they should increase the recruitment of doctors and other staff in health centres otherwise the health institutions will remain perfunctory.

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Growing Up With Intra-Parental Violence

Seema Naaz

In the last decade, a lot of research has been undertaken on the issue of domestic or intimate partner violence in India but limited research has been undertaken on the issue from a child's perspective, that is, intra-parental violence. The children – silent witnesses of intra-parental violence (IPV) are neglected not only by the parents but also by researchers and the state. Thus, there remain very few opportunities to bring the children to the notice of the society. Often the society and the legal systems designed to help victims of domestic violence fail to address the needs of the children due to lack of sensitivity towards their vulnerability. Ample of laws do exist in India that deals with the issue of domestic violence, still we have to go a long way to understand plight children being exposed to IPV as silent witnesses and give it recognition as a social problem that requires legal intervention.

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Introduction

Intra-Parental Violence (IPV) often interchangeably termed as intimate-partner violence or domestic violence is a well known phenomenon in India and worldwide. It is also known that it causes serious implications to the millions of women as well as men. It affects both the victim and the perpetrator in a way or another, yet too little attention has been paid to the harm suffered by the children who witness parental abuse.

Looking at the violence between intimate partners from their child's perspective is the focus of the term Intra-Parental Violence. Intra-Parental Violence is described as an escalating pattern of abuse where one parent in an intimate relationship controls the other through force, intimidation, or threat of violence (Merrell, 2001). These forms of violence may include one or more of the following; physical, sexual, emotional or psychological, verbal, spiritual and financial abuse (Merrell, 2001). Intra-Parental Violence occurs in all racial, socioeconomic, educational, occupational and age groups, without distinction, and

can also impact on a child witness's development.

In order to survive, children who are raised in the environment of conflict and abuse develop complex defense mechanisms. Unfortunately, these mechanisms have a devastating effect on emotional, cognitive and physical health of the children i.e. survivors of intra-parental violence.

Regular exposure to IPV and a child's inability to process it provokes the development of anti-social behaviors. A child's ability to thrive in society is limited by her tendencies towards impulsive actions, resistance to authority, violent communication and other damaging behaviors. This leads directly towards higher incidences of depression, high-anxiety, drug addiction and alcoholism that only exacerbate her social exclusion. (Growing up with violence, n.d)

Recent researches show that a young child's emotional experiences are vital part of her/his development. The emotional experiences that children have in this segment are permanently engraved into the brain. Constant negative stress (family abuse, anarchy and abandonment) is a detrimental factor that prevents the appropriate connection of the child's mind and actions. Other negative experiences such as poor nutrition, a lack of stimulation, the absence of positive social relationships also cause negative alterations in the child. Often the result is a person who is not capable of coping and adjusting well in the social systems. However, this harm or loss can be reversed with the appropriate intervention.

Child's Exposure to IPV

Children witness violence in the home in a number of different ways. They may see or hear the abusive episode, been a part or even involved in the violence (e.g. the child may be in his mother's arms when she is hit), will experience the aftermath, and sense the tension in the build-up to the abuse. Not only physical violence is often found in abusive relationships, the children also observe emotional abuse, in the form of name-calling, accusations and threats made by the abuser in their presence. Where the parent is being abused, the children are also likely to be abused themselves. Here the child's own self-esteem is battered by being shouted at, being blamed or not understanding, or given mixed messages by being favored one moment and put-down the next. Quite apart from possible physical involvement or direct abuse, these emotionally damaging actions have a detrimental and often long-lasting effect on the children. (Effects on Children Witnessing Domestic Violence, n.d.)

It has been observed that the younger the child, the more he/she gets exposed to the conflicts due to their dependence on parents and adults. Infants and the younger children are often directly involved in violent episodes. They are held as a shield by the mother, hit by thrown objects, or intentionally threatened or hurt to terrify the mother. Even when they are apparently lying passively in their cots, infants are exquisitely sensitive to their surroundings and especially to the emotional signals given out by their caregivers, including the caregiver's depressed, anxious, fearful or angry mood. (Domestic violence and its impact on children's development, 2002)

Children hear their parents, the adults they love and depend on, screaming in

anger, pleading in fear and sobbing in pain. They hear fists hitting bodies, objects thrown and shattered, people thrown against walls and knocked to floors. They may see blood, bruises and weapons. Some children witness domestic rapes.' (Wolak and Finkelhor, 1998)

Impact of the Exposure on Children

A child is always affected by their parent's violence, the impact can be determined by many factors like frequency and intensity of violence the child is exposed to, support systems available, individual coping strategies and so on and so forth. Their reactions may become immediately apparent, or surface days, sometimes even weeks later. Just how a child expresses their fear, upset, anger and confusion can vary according to their age.

Research suggests that the children exposed to IPV are, on average, at greater risk for school, social and behavioral problems (Jaffe, Wolfe, & Wilson, 1990). Exposure is defined as children's seeing, hearing, or perceiving the effects of physical aggression between their parenting figures, and perhaps should also include the psychological abuse and verbal hostility that often accompany it. Greater frequency and duration of exposure and whether children have also been personally abused are associated with greater child problems. In addition, children's perceptions of the properties of the conflict and associated attributions appear to play a role in their reactions (Cummings & Davies, 1996). Conflicts that are unresolved, involve threats to leave or of physical aggression, are about the child, seem more severe and frequent, and elicit more self-blame are linked to greater distress.

The effects of witnessing intra-parental violence vary with the age of the child. Children of different age groups have different kind of impact due to exposure to IPV. Impact during different stages of childhood and that of adolescent differ, which is explained below by reviewing relevant literature.

Childhood

The exposure to IPV means that the young child may not develop a sense of trust or security. So by three years, it has been found that children exposed to Intra-Parental Violence may respond to adult anger with greater distress and increases in aggression directed at peers. One research found boys were more aggressive and girls more distressed. While others have not found gender differences (Margolin, 1998). But there is a consistent thread running through the research findings of higher levels of aggression, greater likelihood of seeing the intentions of others as hostile, psychosomatic disorders, difficulties with school work, poor academic performance, school phobia and difficulties in concentration and attention (Cumming & Davies, 1994).

Adolescence

The impact may be different for adolescents who have been part of an abusive

system from their earliest years compared with those who experience it for the first time in adolescence. Violence against mothers in childhood is found to be highly associated with ongoing depression in adolescent girls (Spaccarelli, Sandler & Roosa, 1994). The stresses associated with violence in the home may make usual adolescent risk-taking and escape behaviors worse and they may begin to participate in family violence themselves (Howard, 1995). It can also affect their relationships and other domains of their lives like academic performance and career choices.

Lack of meaning

Another thread that runs through the research literature is the impact on the child of the meaninglessness of the violence they witness or experience. No one talks about what is happening and the mother's sense of helplessness leads her to 'dissociate' from the violence so that when it is not happening, she may act as if there's nothing wrong. So the child's thoughts and feelings about the experience become fragmented, disorganized and they are unable to make sense of it (McIntosh, 2000). To sum up, 'violence affects children's view of the world and of themselves, their ideas about the meaning and purpose of life, their expectations for future happiness and their moral development. This disrupts children's progression through age-appropriate developmental tasks' (Margolin & Gordis 2000).

Potential Role of Social Work Profession

Children who grow up in violent homes can be helped through Intervention, prevention, and support programs. But there is much more to be done to keep them safe. The Children are forgotten victims. By creating awareness and educating the public, we can promote community and social responsibility – we can stop violence and help the children exposed to IPV.

Social workers can work at different levels and with different groups of clients. They can work with individuals (such as the children victims and witnesses of violence), with the families which are facing discord issues, communities where the violence prevails to generate awareness and mould the attitudes toward the issues and with governments to make and design policies for the children's security and protection.

Social Workers can play a vital role to safeguard the children and bring about a positive change in the attitude of the society towards domestic or intra-parental violence; they can turn the focus of the society on the children who are victims as well as witnesses of the violence of their parents. Social workers can educate the public, advocate for stringent laws for protection of the child witnesses and victims of violence, and stronger punishments for the offenders.

Social Workers or therapists can work with individuals as well as groups (children and families) who are especially trained and experienced at helping children and their families who are affected by intra-parental violence. The

sooner professional intervention is introduced —either through individual therapy for the child or parent(s) or with the family — the sooner serious emotional, psychological and physical damage can be put to a stop for everyone concerned (The Youngest Victims of Domestic Violence, n.d.).

Social workers in school can play great role by identifying the children by using the protocols and the hints to identify the children in schools. They can also carryout counseling sessions and interventions with the children. They can also involve the family in the process of helping the children. Social workers in schools can be very effective if they are well trained to identify and deal with the children.

Social workers working with family counseling centres or police and dealing with domestic violence cases can also play an active role by enquiring about the children and identifying the child victims and witnesses of intra-parental violence. In addition to provide support to the parents, they can then assess the children, counsel them and refer them to specialized services like child psychiatrist, psychologist or specialized social workers. They can also make the parents aware of the impact that their conflicts have on their children which can have great impact on their behaviors.

Social Workers working with communities can work to create a culture of safety in serving organization which can aim to carry out sensitization drives in the community. But organizations must also establish policies and procedures that address boundaries, supervision and responding to concerns - and provide the training to support these. And anyone with concerns about a child's safety must be encouraged and empowered to speak up - and have the confidence that their concerns will be dealt with responsibly.

Social activists can work with masses and advocate about the effects of witnessing violence on the children. They can do advocacy and involve the society and various stake holders to make laws that can protect the children. They can generate awareness about the ill effects of witnessing IPV on children in the society. Social Workers can be especially trained at helping children and their families who are affected by domestic violence.

Policy Implications

In India, when we talk about domestic violence the focus is on intimate partners, that is, the emphasis is on the partners involved in the violence. But the children as witnesses and victims of parental violence are often ignored. Thus, the phenomenon of intra-parental violence has to bring to the notice of society. Then protecting the children needs to be taken seriously by the Government and adequate provisions need to be made to do so.

The child witnesses of IPV are unseen and unnoticed as the law does not put much focus on them. We have no such policy or programme in India that deals with the child witnesses of IPV. Though we focus much on family and couple counseling but unfortunately the child is not considered important while counseling

the family. The child is kept out of the ambit of family while the intervention or services are provided to the couple and hence, they remain unnoticed and their needs remain unaddressed.

State should adopt legislation that broadens the definition of child neglect and abuse to include children who witness domestic or intra-parental violence. Expanding the legal definition of child maltreatment, however, may not always be the most effective method to address the needs of these children. Communities can better serve families by allocating resources that build partnerships between service providers, child protective services, and the array of informal and formal systems that offer a continuum of services based upon the level of risk present.

The requirement for special measures should be considered as part of the charging advice. Child witnesses under the age of 18 should automatically be eligible for special measures.

The UN Convention on the Rights of the Child emphasizes the need for adults and organizations, when making decisions that affect children, to consider their best interests and their views. Article 3.1 states:

In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be the primary consideration.

Based upon this, a law to protect the children is need of the hour and right of the children.

Conclusion

The children are forgotten victims of adult's violence i.e. parental violence and it is the high time to intervene in the situation before it is too late. As the children are future of the country, if they are maltreated or ignored they might not grow up in the true sense and their functioning can be hampered too. Thus it is needed to intervene at the earliest stages of exposure during childhood.

Social workers can play crucial role in bringing about a positive change which is required/needed to make the country a safe and better place to live for the children. They can work at different levels and with different client groups such as with individuals, groups, families, communities and with the government to address the issue of intra-parental violence.

Institutional and societal changes can only begin when an expansive network of service providers integrate their expertise, resources, and services to eliminate domestic/Intra-Parental violence in their communities. Thus, child welfare and domestic violence service providers can collaborate to achieve a shared goal of not just freeing victims but also witnesses from violence and working to prevent future violence and the children getting exposed to the same.

In India, we do not have such laws and legislations that address the children - forgotten victims of intra-parental violence appropriately. Thus, it is needed to bring the issue in notice of the society, sensitize the society about the issue and act to make stringent laws for protection of such children who need protection and care in their own homes.

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The Built Environment and Social Work Intervention with Youth in an Unauthorized Colony of Delhi

Habeebul Rahiman & Ali Azam

Like many other cities in the developing world, a considerable percentage of the total population of Delhi lives in squatters and slums. The population living in J.J. Clusters, Slum Designated Areas, Unauthorized Colonies and Resettlement Colonies is at 52% (Government of Delhi, 2002: 129). These colonies have several challenges ranging from poorly built environment to weak social infrastructure and other issues related to health, livelihood and deviant behaviour. The term built environment refers to the human-made surroundings that provide the setting for human activity, ranging in scale from buildings and parks or green space to neighbourhoods and cities along with supporting infrastructure, such as water supply, or energy networks. Youth aspiration means any goal, aim or objective of a youth's life (18-35 years of age) for his/her education, family, sports, profession, livelihood, social, political and psychological right. The study assesses the Built Environment and the aspiration of youth in an unauthorised colony of Abul Fazal Enclave situated in South East district of Delhi by adopting, both quantitative and qualitative, research methods. The study also explores the availability, accessibility, affordability and utility of various resources and services by youth. This would help Social Work Practitioners in working upon management of the built environment, community development and development of youth.

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Introduction

Environments are typically constructed for social reasons, designs lead to social consequences whether intended or not, and even the humblest construction inevitably acquires a socially ascribed meaning" (Halpern, 1995: 2). Statistics suggest over half of Delhi population lives in squatter area, unauthorised colonies, J.J. colonies and resettlement colonies. These colonies, especially unauthorised colony of Abul Fazal Enclave situated at the outskirts in South East Delhi has several challenges related to basic civic amenities, built environment and issues of

youth related to their education, career and sports. The study also explores the availability, accessibility, affordability and utility of various resources and services by youth and explores relations of the community's built environment with the career aspirations of youth. This would help in working upon resource management, community development and development of youth towards realization of their career aspirations more effectively.

The Social Work discipline in theory, practice and its profession is concerned with 'person in environment.' One of the primary methods of social work, 'community organization' uses resource mobilization as an important approach for community development. The environment comprises physical infrastructure, socio-cultural environment and the natural environment. The expansion of cities and towns resulting in booming urban population leading to rising youth unemployment and youth unrest calls for a serious discussion.

Operational Definitions

- **Built Environment** is defined as any human-made or human induced infrastructure of an unauthorized colony like houses, schools, health services, transport system, etc.
- **Youth** is defined as men or women who are more than eighteen years of age but less than thirty years and have been residing in Shaheen Bagh for not less than a year.
- **Career aspiration** of youth is defined as any goal, aim or objective of a youth's life for his/her vocation or occupation for livelihood.

Purpose of the study

The study of the Built Environment in relation to career aspirations of youth from Social Work perspective has been largely untouched. The observed and perceived knowledge of the authors, with regard to the Built Environment and Youth's Career Aspirations motivated them to undertake this research. The study is aimed at exploring the impact of the built environment on career aspirations of youth.

Methodology

The study employed purposive sampling for interview of thirty youths who have been living in the community for not less than a year. Besides, interviews, focused group discussions, observations and Participatory Rural Appraisal (PRA) were used for data collection. Collected data was grouped in a master copy, and then tabulated and analysed for interpretation.

The Study Locale

Abul Fazal Enclave is an unauthorised colony in South-East Delhi, situated on the bank of Yamuna and Agra Canal. It is a Muslim populated colony which came into existence during 1930s. The community stretched southwards up to Shaheen

Bagh by 1988–1989. Basically community has been built on agricultural land which was sold by land lords to the people who later built small houses for residential purpose.

New constructions are going on and every year many people migrate to this colony from Uttar Pradesh, Bihar, Haryana, Rajasthan, West Bengal, Kerala and other states. Owing to institutions such as – Jamia Millia Islamia, IGNOU centre, Apollo Hospital, Holy Family Hospital, Escorts Heart Institute, Nehru Place – livelihood opportunities in the informal sector act as pull factors for migrants to Abu Fazal Enclave.

The Built Environment of the Community

The community is flanked by the Yamuna river bank and Agra canal on its sides. Towards the eastern direction of the community is Okhla Bird Sanctury. A multi speciality hospital, Alshifa exists within the community itself. Hamdard Unani Centre and several NGOs are functional in the community. Within five kilometres radius of the community is Jamia Millia Islamia, IGNOU centre, Alfalah, Holy Family Hospital, Escorts Heart Institute and Apollo Hospital. The community is well connected through Delhi Metro services and Delhi Transport Corporation (DTC) bus services. The nearby railway stations include Okhla Railway Station and Hazrat Nizamuddin Railway Station.

Housing patterns

Transact walk in the community revealed that there are mainly pucca houses built in the community. Largely there are two storied to three storied buildings. People live in both; own houses and rented rooms. Some plots are also vacant and ongoing construction work is a common sight in the community.

Major Issues
- No M.C.D primary school.
- No Govt. Primary Health Centre.
- No Play Ground for growing Children and Youths.
- Unavailability of piped drinking water to all. There is no water connection in the community.
- Mismanagement of waste/ garbage
- Open drainage.
- Unemployment and underemployment.
- Water logging due to rain and overflow of drains.
- No Public toilets.
- Inadequate supply of electricity and high cost.

Major source and type of Employment in this area is:
- About 30% are in private jobs in IT sector, Hospitals and other companies at Nehru Place, Lajpat Nagar, Noida and within the community itself.
- Over 30% are self-employed in businesses like restaurants, tea shops, motor repairing shops, etc.
- Less than 7 % are in government jobs

- About 30% are either unemployed or work as factory workers, or labourers for daily wages.

Education

Not more than 60% of adults are literate. The rate of illiteracy among females is more than males. Whereas for youth, it was said that over 85% are literate and there is no difference in literacy among males and females. All the respondents said that education has significant impact on their career. The trend with regard to educational qualifications of males and females is that, higher the educational qualification, lower is the frequency of females. Thus, from higher secondary level onwards males outnumber females.

Lived Experiences of the youth

Some of the youth reflected on the changes that have been taking place in the community. They said that the population, number of buildings, houses, shops and vehicles have increased. This increase has made their life difficult and has put additional pressure on land, water, electricity and business in the local market. While some others revealed that this change has been better for them as the community itself offers scope to do business transactions and schools have opened up for children. Thus, some view these changes positively while others view them as problematic.

Twelve of the respondents were not satisfied from their current engagement. They did not find their jobs/businesses sufficient enough to meet their monthly expenditure and needs. Moreover, they expressed that their jobs were not in consonance with their aspirations.

When asked about the relationship between career and built environment of community on respondent said *"saara kuch facility par hi depend karta hai, agar sarkari suvidhayein jaise road, hospital, paani, school, college, police theek ho to ladkon ka kaam aur padhai bhi mast"* (it all depends upon facilities, if government facilities like road, hospital, water, school, college, and police systems are well built and managed then economic activities and education of youth is very satisfactory).

Social Work Intervention:

"Social Work …promotes social change and development, social cohesion, and the empowerment and liberation of people… social work engages people and structures to address life challenges and enhance wellbeing (IASSW and IFSW, 2014)." This draws attention of social work towards working with youth in their environment especially built environment in urban spaces like unauthorised colonies of Delhi where the issue of not only availability but also accessibility, affordability and utilization have added to youth unrest, deviance, lack of career aspirations, and misguidance. The energy of youth needs to be channelized for their development and the overall enhancement of the community they live in. Along with primary method of casework, group work and community work; social

workers should take up advocacy and resource mobilisation by enlisting community's active participation for youth empowerment. Not only the education, skill development and employability but also the psychological well being of youth in such areas is an important intervention for social workers. To address such issues towards Millennium Development Goal (MDGs) in Urban areas, it is important to partner with marginalised urban sections and organizations to explore mutually acceptable and affordable solutions to address the issue (Paddison & Parnell, 2010). The responsibility of this task lies primarily with social workers who need to collaborate with other stake holders and facilitate this initiative.

Siddiqui (1997) argues that, social workers take up specific issues with democratic procedure in all steps of intervention. The youth in Abul Fazal region lacks adequate opportunities to meet the desired goal. However, social workers and civil society organisations can engage them in career planning, sports, cultural activities, skill development and other areas of support on the basis of proper need assessment. The label of unauthorised colonies shows failure of the administration, policy and government. This keeps the colony vulnerable to survive in poorly built environment and compromise with inadequate civic amnesties. It is imperative for social workers here to work with different groups of people and stake holders to address their issues. Resource mobilisation, community organization and social action can play an instrumental role in dealing with issues of youth in this unauthorised colony of Delhi.

Limitations and Scope for further Research:

Data suggests over half of population in Delhi lives in squatter, unauthorised, resettlement and slum designated area. This paper could not cover the legal aspects of land rights and civic development. A study with in-depth assessment of the problem along with the legality of land right is a major gap which can be further explored.

Conclusion

The study revealed that the availability, accessibility, affordability and utilization of built environment of the community are very significant in determination and realization of career aspirations of youth. It has revealed that a significant number of youth; twenty eight out of the thirty interviewed and both the respondents of case study, have realized that the built environment of the community is impacting their career. From the findings discussed in the report, it can be concluded that absence of some important built environment or poor management or lack of accessibility to built environment have negative impact upon career aspirations of youth. Only two responded that their current engagement is not impacted from the built environment of the community and it would remain the same even if they belonged to a different community that had the requisite built environment. While others revealed that their career aspiration is compromised due to inadequate built environment or lack of accessibility to the same. A collaborative approach is required for youth empowerment through strengthening of built environment and

skill development in areas like Abul Fazal Enclave of Delhi. In the long run, it is imperative that social workers along with other stakeholders develop a comprehensive action plan for legal rights of youth in the community.

Acknowledgements

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Programme Delivery System In Social Work Through Open and Distance Learning (ODL): An IGNOU Model

Kaushalendra Pratap Singh

Open and Distance Learning (ODL) system is flexible in regard to modalities and timing of teaching and learning without compromising necessary quality of education. ODL learners are with diverse profile and separated from the teachers. As Social Work Education is a professional course, there is a challenge to maintain professional standard of Social Work Education through ODL system. However, School of Social Work (SOSW) at Indira Gandhi National Open University (IGNOU) does not only address this challenge but also maintain the professional standard of Social Work by providing quality education through various methods comprising print and multimedia. This paper is an attempt to present the various programme delivery systems used in offering social work programme through ODL system by SOSW at IGNOU. This paper also emphasizes that quality education in Social Work through ODL can be ensured if all the ODL institutions replicate the SOSW model by assuring timely and accurate delivery of all the essential components to the ODL learners at their door steps.

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Introduction

Open and Distance Learning (ODL) system is a system wherein teachers and learners need not necessarily be present either at same place or same time. It is flexible in regard to modalities and timing of teaching and learning without compromising necessary quality considerations. This is becoming more and more significant for continuing education, skill updating of in-service personnel and for quality education of relevance to learners located at educationally disadvantageous locations *(*http://mhrd.gov.in)*. Indira Gandhi National Open University (IGNOU), the world's largest University adhere the motto of ODL and disseminates inclusive education to the door steps of disadvantaged learners and people living in special circumstances. The School of Social Work (SOSW) was established at IGNOU with an aim to provide quality education in the areas of

social work through ODL by using multimedia teaching/learning packages. Dr. Armaity S. Desai, the convener of second review committee on social work education of UGC had said social work education can be offered through various modes including ODL system. In this regard, establishment of SOSW has opened a new chapter for professional social workers in Indian sub-continent. The initiatives of SOSW has taken social work education to the door steps of the unreached in far flung areas i.e. from Kashmir to Campbell Bay in Andaman and Nicobar Islands and all the states in the North-East regions (Suresh, 2012). The present paper intends to present the various Programme Delivery Systems (PDS) which are being used by SOSW in offering its diverse academic programmes through ODL mode across India.

Academic   Programmes

The SOSW began by offering certificate programme in 2007 and now offers various academic programmes from certificate to degree level in all states and Union Territories in the country. The programmes of SOSW directly deal with problems of society particularly the marginalized and disadvantaged sections. In India, it is very rare to find such curriculum which addresses the issues of marginalized and disadvantaged. SOSW created history by introducing such academic programmes through ODL which include Certificate and Diploma in HIV and Family Education (CAFÉ/DAFE), Certificate in Social Work and Criminal Justice System (CSWCJS), Post Graduate Diploma in Social Work among the Tribals (PGDSWT), and Master of Social Work in Counseling (MSWC). The curriculum of these programmes is designed for preparing a cadre of professionals who would work with poorest of the poor, marginalized and disadvantaged. The curriculum has been designed to help the learner in gaining knowledge, information and the much needed skills for working with the poorest of the poor that include destitutes, orphans, leprosy as well as People living with HIV, prostitutes, mentally ill, jail inmates, tribals, mentally retarded, refugees, landless and homeless labourers and other disadvantaged sections in the society.

The Learners

The process of programme delivery system does not start instantly. The foundation of PDS begins when learners seek admission and start inquiring about the courses which they want to pursue. They inquire about their desire courses through various modes such as internet, visiting study centres, regional centres and attending pre-admission counseling sessions at IGNOU headquarters. Finally, they decide their courses and take admissions. The Student Registration Division (SRD) maintains all the information about the newly registered and existing learners. The profile of the ODL learners is varied from conventional students. ODL learners come from various strata of society with different profile. Majority of the ODL learners are in-service or living in special circumstances. These learners find difficulties in pursing their further education through conventional mode thus; ODL becomes the only means to fulfill their educational aspirations.

PDS is one of the important components in fulfilling the educational aspirations of ODL learners.

Programme Delivery Systems

Once, the learners are enrolled with the University, the University attempts to reach every students to fulfill their educational aspirations. In ODL, the learners are physically separated from teachers, hence the quality of education depends on the effective programme delivery system. University uses different means to educate its learners consisting of print and non-print media. As indicated in the introduction of this chapter, SOSW is the first school in ODL offering social work programme through multimedia teaching/learning packages which include self-instructional print and audio-video materials, radio and television broadcasts, face to face counseling, laboratory and hands-on experience, teleconferencing, video conferencing, interactive radio counseling, and internet based learning (Figure1).

Figure 1. Media used in offering social work programmes through ODL

The social work programmes reach to the learners with support of these instructional methods which try to fulfill the gap between the teacher and the learner. In this connection, the delivery of these methods is highly essential. University has to ensure timely and accurate delivery of these methods for effective teaching learning interface in ODL system. On the successful admission, students receive three types of programme delivery services with regard to their studies a) study materials, b) academic counseling sessions consisting of face to face counseling, interactive radio counseling, teleconferencing and video-conferencing, and c) other programme delivery services.

Study Materials: Study material consists of self instructional print and audio-video material.

Self Instructional Print Material: Self Instructional Material is an important medium of imparting knowledge to the ODL learners. Since there is limitations in face to face interactions with the teacher, the quality and the content provided in the study material helps in providing classroom like atmosphere. The material production and distribution is one of the most important subsystems of the distance education and open learning system. Material Production & Distribution Division (MPDD) handles the production and distribution of self-instructional print material for various programmes and courses of the University. It is responsible for timely printing and dispatch of study material to the learners as well as to Regional/ Study Centres of IGNOU. By nature the entire task is a complex operation and is compounded by a large number of students changing their addresses, medium of instruction and courses very often (http://www.ignou.ac.in). The material is self instructional in approach and indigenously prepared. The term self instruction refers to a process in which learner learns step by step through an instructional process and as themselves through self assessment exercises which boost their knowledge level. The salient features of self instructional materials are self explanatory, self contained, self directed, self motivating, self evaluating and self learning. It is seem that delay in delivery of self instructional print materials can harm the spirit of ODL education where thousands of students are dependent on these materials. Although social work practicum is the soul of social work profession but the importance of theoretical understanding about the subject cannot be neglected. Thus, self instructional print material plays a crucial role to develop the theoretical understanding about social work profession among the learners in ODL system. Hence, timely and accurately dispatch of study material is highly essential in ODL system. SRD, MPDD and Regional Centres play an important role in timely and accurate delivery of these study materials.

Audio-Video Materials: Over the years, hundreds of education curriculum based audio and video programmes have been produced at Electronic Media Production Centre (EMPC) located at IGNOU. These programmes are available in the form of audio-video CDs for selling and distributing to the learners. Students can purchase these CDs from the marketing unit of EMPC at IGNOU headquarters (EMPC-IGNOU, 2014). Audio and video programmes for each course have been prepared to support learning for the students. Audio-video material is an add-on study material which helps students to develop better understanding about the subject. SOSW has produced good number of quality audio-video material on social work with the help of EMPC which is available for sale at marketing unit of EMPC.

The programme delivery system through audio-video material does not seem feasible at the doorstep of the learners on some places as it involves various technological components for learning. The learners who want to utilize this facility at their home, they should have a) audio-video CDs, b) computers, and c) electricity. As we know, the profile of the students is diverse in ODL. All students

may not have these facilities because of various reasons such as remoteness and family background. In this case, students can use audio-video materials at their study centres during sessions. The delivery of these materials to the students cannot be ensured as they have to purchase it. Thus, audio-video material is unused for several learners who do not go to their study centres for counseling session, such students are depended on the old form of ODL means of education that is self instructional print material.

Academic Conselling Sessions

The activity that takes place during counseling sessions for the learners through face to face and other electronic mode is termed as 'academic counselling'. Academic counselling in ODL education is considered as an important component of the teaching and learning process. The counselling sessions are not lecture-oriented, rather problem solving oriented. The activities of academic counseling are broadly divided into three parts: a) informing, b) advising, and c) counselling. Informing involves giving appropriate and correct information, which is largely independent of the learner. Advising means to give the best suggestion and also tell the related possibilities to the leaner. Counselling may help the learners in understanding their needs, feelings or motivations so that they can make appropriate decisions for themselves (NCIDE-IGNOU, 2009). Apart from print and audio-video study materials, SOSW provides counselling sessions to its learners to solve their academic problems and doubts through various modes. The details of counseling sessions provided by the SOSW are described below.

Face to Face Counseling: When a learner joins a programme in IGNOU, s/he is assigned a study centre of her/her choice where face to face counseling is provided. The leaner is expected to go through the study material and clear his/her doubts regarding the material during the counseling session. Depending upon the requirement of the learners they may like to attend the counseling session at their study centre. These counseling sessions are usually not compulsory for the learners to attend, but sessions are highly useful for them. These sessions are discussion oriented and not just lecture. The schedule of the counselling sessions is prepared by the Study Centre. Students can collect a copy of the counselling schedule from their concerned Study Centre. Participation in these sessions helps the students to clarify their doubts and develop a sound understanding of the subjects matter. These sessions are conducted by academic counsellors. The academic counselors in the ODL system bridge the gap between the learners and the teaching institution. They play a key role in enabling the students to become an active and effective learner. The principle goal of counseling in ODL is to provide "individualized guidance" to the learners (ibid). SOSW tries to ensure that all the academic counselors involved in face to face counseling for social work should have minimum professional qualification on the subject. Engagement of professional social worker in face to face counselling maintains social work standard in ODL system. The success of this mode of programme delivery depends on three stakeholders: a) study centre, b) academic counsellor, and c)

learners. Absence of anyone among these stakeholders can create a problem in effective delivery of face to face counselling. Thus, to ensure better delivery of this means, study centre must open, academic counselor must present, and students must attend the session.

Interactive Radio Counselling: Interactive Radio Counselling (IRC) is another form of programme delivery system. It is a live phone in programme where experts are invited who counsel the learners through radio (*Gyanvani*). The learners interact with the experts through telephone to get their queries answered through radio. Since radios are accessible to the learners in their home, they can tune into the programmes anywhere and talk back with the faculty using the toll free number given by University. The schedule for the IRC is available at Regional Centres. The IRC is being broadcasted through *Gyanvani* FM radio stations and also through the All India Radio (AIR), a national government agency, mostly on Sundays. In IRC, subject experts are invited at a fixed time and day to the broadcast centre. The learners are informed in advance through various media about the topic of discussion. IRC is a live programe, where the learners dial the studio when the programme is on air, to interact with the subject counselors. Toll-free telephone facility is available from various cities, enabling learners to interact with experts and seek instant clarifications. Thus, IRC is add-on counselling session for the learners to enhance their academic knowledge. The major challenges in successful delivery of this means of instruction may be: a) timely information about IRC to the learners, b) availability of the required technology at the learners end, and c) limited IRCs which do not cover maximum possible topics of the course.

Teleconferencing: The word 'teleconferencing' can be taken as a means for interactive electronic communication among people located at two or more different places. The ODL context teleconferencing provides live interaction through electronic means among learner groups and teachers. The process of teleconferencing involves interaction through the television. This is one of the electronic forms of academic counseling. EMPC organizes these teleconferencing sessions through *Gyan Darshan* Channel with the support of subject expert who provides expert knowledge about the notified topic. The learners at the receiving end locations spread all over the country can participate in the programme and send their queries through telephone or fax. To make this programme more accessible to the learners, toll-free telephone services are offered (Sharma, 2010). The teleconferencing facility remains available at the Regional Centre and Selected Study Centres. The teleconferencing schedule remain available with the Programme In-charge and Regional Director who inform the students (http://www.ignou.ac.in). Students can attend these sessions regularly and enhance their academic knowledge. Hence, teleconferencing is also an add-on counselling session for the learners to enhance their knowledge. The major challenges in successful delivery of this means of instruction may be: a) timely information about teleconferencing to the learners, b) availability of the required technology at the learners and study centre end, and c) limited scope to discuss various topics of the

course.

Video-conferencing: Apart from teleconferencing, University organizes video-conference for its learners. Video-conferencing is the conduct of a video-conference by a set of telecommunication technologies which allow two or more locations to communicate by simultaneous two-way video and audio transmissions. Video-conferencing uses audio and video telecommunications to bring people at different sites together (http://en.wikipedia.org). IGNOU arranges it through its own broadcast network. Video-conferencing differs from the teleconferencing. Teleconferencing is a general term that refers to hold a conference with a group of people, the individuals of which aren't necessarily present in the same location. So,   to accomplish this, the group might rely on telephones, computers, televisions (video), the Internet, satellites or even radio. Video-conferencing, on the other hand, also refers to this method of conferencing but specifically to the use of video, meaning that you can both hear and see those with whom you're having the conference (http://smallbusiness.chron.com). The Pan-African e-network is an extraordinary example of helping students from underdeveloped countries such as Ethiopia. Hence, video-conferencing is another supplement to the ODL students. Video-conferencing is done with the support of EMPC at IGNOU. The delivery of this means at learners end is not an easy task as it involves high technology. The major challenges in successful delivery of this means of instruction may be: a) timely information about the schedule, b) availability of the required technology at the learners and study centre end, and c) limited scope for discussion of various topics.

Other Programme Delivery Services

Apart from study material and academic counselling sessions, SOSW uses other methods to impart social work education to its learners.

Radio and Television Broadcasts: SOSW has developed various curriculum based on audio-video programmes of social work with the support of EMPC located at IGNOU headquarters. The video programmes are regularly broadcast through exclusive educational broadcast TV channel '*Gyan Darshan*'. The programmes are also telecasted through DD National network. The Audio programmes are regularly broadcast through 37 *Gyanvani* FM radio stations which are spread all over country (EMPC-IGNOU, 2014). *Gyanvani* is an educational FM Radio network providing programmes covering different aspects and levels of education including primary and secondary education, adult education, technical and vocational education, higher education and extension education. However, *Gyan Darshan* – I is a satellite based TV channel devoted to educational and developmental needs of the society. A bouquet of four channels providing round the clock service aiming at primary, secondary, higher and technical education. And *Gyan Darshan* - II is an exclusive educational satellite to provide interactive education using DVB-RCS technology. It offers distance education through Virtual Class Room mode and provides access to digital

repository of educational content hosted at IGNOU (http://www.ignou.ac.in).

These programmes enhance better academic understanding of the learners. The schedule of such programmes is communicated well in advance to the concerned regional and study centres. In addition, copies of the programme are made available at all the IGNOU regional and study centres for use by students in CD mode. The successful delivery of this style of instruction to the learners depends on EMPC, Regional & Study Centres, and on Learners as well. Hence, through this method of programme delivery system SOSW tries to ensure a holistic education to the learners in ODL system.

Conclusion

This paper presented the various programme delivery systems used in offering social work programme through ODL system. In ODL, learners are with diverse profile and separated from the teachers. Thus, SOSW tries to fill the gap by providing education through various methods comprising print and multimedia. Social work is a professional subject which required through theoretical understanding. The quality education in social work through ODL system can be ensured if all the methods are successfully delivered to the learners at their door steps. To ensure the professional status of social work, ODL institutions offering social work have to assure timely and accurate delivery of these methods by enabling the required needs at various stakeholder level including learners. SOSW has maintained such status of social work by timely and accurate delivery of its various programme delivery system. Other institutions may follow IGNOU model while offering Social Work courses through ODL mode for ensuring the quality education.

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