

**GENDER SENSITIZATION TRAINING PROGRAMME :  
TRAINING MODULE AND PROCEEDINGS**

Patthalgaon and Ambikapur

24 – 26 February and 27 February –1 March 2003

Submitted to

**Tribal Development Society**

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Submitted by

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## Chhattisgarh Tribal Development Programme : Assessment and Recommendations.

### Introduction

The **Chhattisgarh Tribal Development Programme** initiated in Sarguja, Raigarh and Jaspur districts of the state under the sponsorship of the **International Fund for Agricultural Development (IFAD)** and the **World Food Programme (WFP)** has adopted an innovative and holistic approach to the challenge of developing some of the poorest regions in the country. Marked by a high proportion of Adivasis in the local population, the guiding principle of the project is to 'bring up the last woman first'. Gender sensitivity has therefore to be an essential ingredient in the conceptualization and operationalization of project strategies. On the basis of a request from the Chhattisgarh TDP, a four member team from the **Institute of Social Studies Trust (ISST)** comprising of Swapna Mukhopadhyay, Rajib Nandi, Jyotsna Shivaramayya and Rina Bhattacharya, administered a **Gender Sensitization Programme** to two mixed groups of Project Staff and NGO representatives involved in the Programme. The Training module was developed specifically for the TDP.

It is clear from the feed back from the trainees, that the training imparted has been able to set in motion a process of self-analysis among the trainees on their own gender ideologies. The fact that gender is primarily a social construct, that one is constantly, albeit unconsciously, using double standards to perpetuate women's subordination in society, are realizations that came from the analysis of the role plays and flip charts prepared by the participants themselves during the training process. To the extent this has taken place, the training has been successful. The challenge now is to strengthen these ideas and help develop project strategies that would mainstream gender in all the activities of the project.

The management may wish to consider the following observations based on the interactions that the ISST team had with the trainees in Patthalgaon and Ambikapur.

### Assessment

#### *The relative newness of the project initiatives*

The project is still in its infancy. Apart from some activities that have started in some of the designated project villages, primarily in the area of micro credit in the form of formation of Self Help Groups, and some activity in the area of watershed management, there is very little work that has actually been initiated on the ground. As a result, very few concrete examples were available from the project sites which could be used to demonstrate how gender sensitive strategies could be developed in operationalizing the project activities within contexts that have been actually faced by the NGOs or the project staff.

### ***Heterogeneity of the trainees in terms of gender-sensitivity***

The trainees in both locations consisted of two categories of people; i.e., the project staff and the NGO representatives. By and large they come from different backgrounds and have been exposed to different sets of experiences. In both places, the project staff are young, professional recruits, primarily from local Universities, they are predominantly from a middle class background, and understandably, subscribe to a very middle class value system. The NGO representatives on the other hand were more acquainted with the life situation in the target population. This difference was indeed quite pronounced in Patthalgaon, but was less so in Ambikapur. Also some NGO representatives stood out in sharp contrast to some of the workers in these NGOs, especially those that were adivasis.

There was also a gender divide in both the locations, but the differences among the male and female trainees in terms of gender sensitivity, in general and along class or caste divides, were found to be more pronounced in Patthalgaon as compared to Ambikapur. The Ambikapur women, especially if they were Project Staff and non-adivasi, shared similar middle class gender perceptions along with men from both the project and NGO groups. This pattern emerged very clearly from the intensive interactions one had with both the groups and was reinforced by the results from the rapid survey that was conducted using ISST's 'Gender Ideology' module. In fact in Ambikapur, the answers coming from the female project staff turn out to be much more 'politically inappropriate' than that from the males.

While heterogeneity in the nature and extent of gender sensitivity within the groups posed a challenge to the trainers in terms of deciding how and at which level to target the interventions during the training period, it also unearthed the extent to which traditional norms on gender roles and notions on women's secondary status in society has been internalized by the majority of the trainees. These beliefs are often deeply implanted in one's psyche, and get reinforced by the socialization process that takes place since one's birth. There is therefore a need to systematically expose the trainees to the essence and manifestations of gender bias, preferably through the analysis of actual experiences on the ground as the project evolves over time, and concurrently encourage them to spend time and effort for developing practical strategies for mainstreaming gender concerns within project activities.

### ***Motivation of the trainees***

Motivation of the trainees for attending the training course was found to vary between different groups of trainees. By and large the Project Staff were less inclined to sit through the exercises. While in Ambikapur, the difference was not very discernable, it was found to be very marked in Patthalgaon. Several of the Project personnel absented themselves for long stretches of time in Patthalgaon, although there were some among the project staff who did participate to the full and were very attentive throughout the programme. Also, the project staff was found to be more

inclined towards lecture-based and non-participatory training. In contrast, the NGO representatives were more attentive and participated in the proceedings of the workshop to a greater extent, especially in Patthalgaon.

## **Recommendations**

### ***Male sensitization***

From discussions on the few cases of ground level experience that were narrated by the Project Staff and NGO representatives, it was clear that much of the community resistance that was being faced in pushing women's issues in the project villages was actually from the men in the community. Whether it is the case of the Community leaders taking exception to providing chairs only to the 250 women in SHGs and not the men when the IFAD President visited the community in one case, or whether it is the men in the local Panchayats shrugging off the voice of women members of the SHGs in Gram Sabha meetings in another, it is the men who are proving more difficult to carry along. Any project strategy that is designed to challenge the traditional gender roles could be looked upon as a potential threat to male supremacy. It is therefore essential that along with promoting women's substantive involvement in project activities as envisaged in the project design, a concerted effort be concurrently directed towards gender sensitizing the males in the Community as well. An effort should be made to project the activities as instruments of overall development of the community as a whole and dispel notions of project benefits in the mould of zero sum games. Male cooperation is vitally needed to ensure women's empowerment in the community and concerted efforts to promote gender sensitization of males could be developed as an explicit project strategy.

### ***Need for a discussion forum***

There is a felt need for a common forum for the NGO representatives and Project Staff which could meet regularly to exchange information and discuss location and sector-specific project strategies. This forum can also be used to discuss practical problems faced by the NGOs or Project Staff in implementing gender-sensitive activities in project sites and develop solutions in a participatory manner.

### ***Documentation of experiences***

There is also a felt need for process documentation of the project as it evolves in different locations. The project might consider a Project Officer who could be assigned with this task.

### ***The need for exposure to other interventions***

The desire for greater exposure to successful developmental interventions elsewhere in the country or in neighbouring countries was voiced by the trainees in both the locations. If exposure trips turn out to be too expensive, one could perhaps think of

the more cost-effective alternative of inviting qualified guest lecturers and/or arranging for video presentations of selected projects and programmes.

***Heterogeneity of trainees***

The Project staff needs to be more oriented towards ground conditions. In particular, they might need additional inputs in gender Training Programmes that the management may want to consider in future.

***Evaluation criteria***

It was felt that evaluation of NGO interventions should not be limited to examination of quantitative indicators alone. For example, success in the area of micro credit intervention should not be perceived as a function only of the number of Self Help Groups formed by a particular NGO. Instead, evaluation criteria should be multi-dimensional. Apart from quantitative indicators of success, it should also take into account the quality of the work, the process adopted and the effort spent in getting the ball rolling.

***Avoiding avoidable problems***

It is important that the project does not dissipate its energy on avoidable problems and conserves it for substantive work. A simple example of how it can be done came out in course of the discussions. The use of the term “Gram Sabha” for Community of adult men and women in natural villages seems to have raised the heckles of Panchayat leaders in Revenue Villages, who look upon this as encroachment on their rights and, more importantly potential encroachment on their resources and power base. This can be avoided by designating the community in Natural Villages by some other name. Such a strategy may not solve the problem for all times to come, especially when the project initiatives start showing concrete results and begin to be perceived as potential threats by the local power elite, but it may be postponed until the poor are sufficiently empowered.

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*Training provided by the Institute of Social Studies Trust, New Delhi*

**Day 1**

**Session 1 : Welcome and Introduction**

<b>Objective :</b>	Establishing rapport and communicating the basic thrust of the training programme
<b>Core Message:</b>	Gender considerations are important for the success of developmental interventions.
<b>Expected Outcome :</b>	<ul style="list-style-type: none"> <li>• The ‘ice’ is broken.</li> <li>• The group is genuinely willing to undergo the ‘gender training’.</li> </ul>

<b>Methodology :</b>	<p><b>Materials:</b> Name Tags; Cards; Notebooks and pens for each participant</p> <p><b>Activities and exercises</b></p> <ul style="list-style-type: none"> <li>• Memory game</li> <li>• Exchanging I-tags and introducing one another</li> </ul>
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**Proceedings**

The three day gender sensitization training for Chattisgarh Tribal Development Society was began with the welcome address, delivered by Mr. S.K. Behar, State Director of Tribal Development Society, Chattisgarh. In his brief introduction he welcomed Prof. Swapna Mukhopadhyay, Director, ISST and her team and the participants representing local NGOs and Project Staff from the district as well as state office of TDS, Chattisgarh. In his address, ISST was introduced as one of the important institutions working in the area of gender. Mr. Behar expressed his happiness over ISST’s co-operation in conducting a participatory gender sensitisation workshop with the group involved in the International Fund for Agricultural Development (IFAD) project in Chattisgarh.

In her short speech, Prof. Swapna Mukhopadhyay, Director, ISST explained the need for gender training for the people working in IFAD sponsored project. She clarified the importance of a gender perspective in dealing with issues of health, food security and livelihood practices, which are the key components of the Chhattisgarh Tribal Development Project. She also mentioned that as this project is focused on tribal development, therefore an attempt would be made to relate these issues to the lives of men and women in the tribal society. She informed the group that different activities and

exercises that would be done in the workshop would try to bring out how men and women have different roles to play in their day to day activities and how differential status enjoyed by men and women is constructed through social norms and practices. She said that the workshop is aimed at helping the participants to understand issues from a gender perspective and recognise the potential of a gendered approach in development work.

The session begins with the introductions of workshop participants using a memory game and name-tag exchange. The resource persons explained the procedure of the game. In the memory game the entire group sits in a circle. The first person speaks out his or her name and the second person repeats the previous person's name and adds his/her own name, and so on. Thus each person has to remember the all previous persons' names. The last person has to memorise all the names sitting in the circle. This game is very useful to break the ice and to facilitate greater participation.

In the next game of the session, groups of two were formed and each participant exchanged his or her name-tag with that of the partner. Five minutes were given to find out the name, organisation, educational background, work area and hobby of one another. Each participant then introduced his or her partner to the rest of the group. This also helps to develop friendship among the participants.

After the introductory session, a short questionnaire on gender ideology was canvassed among the participants. (See Appendix: I). The participants were requested to mention their sex and identify themselves either as project staff or representative of an NGO. The participants were told that the questionnaire was designed to elicit their perception of gender in its various manifestations and that there was no right or wrong answers to the questions.

## Session 2 : Sex and Gender

<b>Objective :</b>	To familiarise the group on the difference between sex and gender.
<b>Core Message:</b>	Gender is socially constructed.
<b>Expected Outcome :</b>	Better understanding of gender as an instrument of social hierarchy.
<b>Methodology :</b>	<p><b>Materials:</b> Large sheets of flipchart or newsprint paper Sketch pen/marker Bulletin board</p> <p><b>Activities and exercises:</b></p> <ul style="list-style-type: none"> <li>• Divide the entire group in four or five smaller groups and ask them to point out different characteristics between men and women in two different columns on a large sheet of paper.</li> <li>• Put the completed sheets on the wall for discussions by the whole group.</li> <li>• Ask each participant to recall a childhood incidence when he or she realised for the first time that they were boys or girls.</li> </ul>



**Proceedings:**

During the second session, the participants were divided into five groups. Each group was given a flip chart and was instructed to write the characteristics of men and women in two different columns. The completed flip charts were put up on the wall and each group was asked to send a representative to explain the group work. This exercise was followed by another game. The participants were asked to go back to their childhood and try to remember at what stage of their life, first time they learnt of being male or female.

In the analysis, some of the characteristics, which were identified, that differentiate between men and women are as follows.

<b>Women</b>	<b>Men</b>
Dress – Sari, salwar suit	Dress – Shirt, pant, Dhoti
Soft spoken, polite, shy, have motherly affection, emotional	Hard, arrogant, less emotional, have leadership quality
More patient, tolerant	Hard working, less tolerant
Honest	Corrupt
Devoted, dependent	Egoistic, independent
Physical Strength- woman has less physical strength	Have more physical strength
Have a tendency to save	Gambling
Lower property rights, in law and custom	Have greater property rights, rights of inheritance
Identity is linked to father or husband	Self identity
Do not have rights to light the pyre	Have the right
Do the domestic work	Go out for work and have responsibility to look after the family financially
Feminine demeanour	Manly

There was much discussion on each of the characteristics to arrive at a consensus on which of these different characteristics are biological and which are the results of a socialization process. At the end of the session the group started realising that except for differences in body structure, all the differences between men and women are socially constructed. And this difference between the biologically given and the socially constructed is the difference between sex and gender.

***What is gender?***

*Gender refers to the socially created differentiation between men and women. Men and women have been assigned different roles and responsibilities in society. Access and control of resources is also socially determined for men and women. Society also determines the type of socialisation and behaviour that are to be taught. This differentiation changes according to time and social settings.*

***How is gender different from sex?***

*Sex refers to the biological differences between men and women. These differences are given by nature and are constant.*

In the third exercise the participants were given three small cards of three different colours, and they were asked to write their responses of the following three questions:

- A gender role assigned to your own gender that you like to do.
- A gender role assigned to you that you do not like to do.
- A gender role assigned to the opposite sex that you enjoy doing.

Both the exercises of remembering childhood experience and the last exercise were helpful to highlight the fact that gender differentiation is taught by society and society assigns gender roles which we may or may not like. These exercises can start a process of self analysis and help reduce the gender bias one has come to internalize.

### Session 3 : Control, access and discrimination on the basis of gender

<b>Objective :</b>	To show that gender bias exists in all spheres and at all stages of life.
<b>Core Message:</b>	Women in tribal and as well as non-tribal societies are generally at a disadvantage because of unequal power relations.
<b>Expected Outcome :</b>	Heightened awareness about differences in life situations faced by men and women in both tribal and non-tribal societies.
<b>Methodology :</b>	Bar charts, Group work and discussions
	<p><b>Activities:</b></p> <ul style="list-style-type: none"> <li>• Divide the group into 4 or 5 groups and give them a list of activities to show which are to be performed by men and women.</li> <li>• Give the participants a paper with bar charts. Each bar represents an activity. Ask the participants to divide each bar (in terms of percentage) of contribution of men and women for each activity.</li> <li>• Analysis of group responses.</li> <li>• Pose questions for discussions. Consolidate discussion by explaining how women's roles are affected by gender division of labour and unequal status in the society and explain the gender based needs and its relevance.</li> </ul> <p><b>Life cycle approach</b></p> <ul style="list-style-type: none"> <li>• Hand out pointers and ask them to develop stories, follow it up with discussions.</li> <li>• Issues to be discussed following : discrimination against women since childhood, lack of power and decision making and lack of control over resources by women.</li> </ul>

#### Proceedings:

In the session, the facilitator presented a list of activities, which are performed by men and women. Participants were divided into five groups and each was given a paper with bar charts. Each bar chart represents an activity. (See Appendix II) Participants were asked to divide each bar in terms of percentage of contribution of men and women of

each activity. This was followed by an analysis of group responses. From the analysis of group work clearly two things were identified by the group, that is there is a clear demarcation of gender division of labour among men and women. The other important thing that the group could relate was unequal access of resources and decision-making powers among men and women. A few questions were posed for discussion. The questions are:

- Who takes what decisions in the household?
- Are there different jobs assigned to people depending on age or sex?
- What are the sources of household income?
- How do women earn money?
- Who decides how the money is to be spent?

These questions were analyzed to explain how gender division of labour and unequal status in the society affects women's roles as also the relevance of gender-based needs. Some of the concepts that were discussed in this context are as follows:

### **Reproductive work**

All work and activities involving child-bearing and rearing, care of the home, family members and dependents. All household and domestic tasks such as preparation and processing of food, care of the old and the sick, child care.

### **Productive work**

Work done by paid labour – mostly men.

Ideally it should also include activities, which save cash for the household, such as home-based production for home use. These are products and services which can be exchanged in the market, but are generally not. Mostly done by women.

The work that a man does is considered productive and that of a woman is considered unproductive and is not valued.

The discussion was followed by role plays with '**life cycle approach**'. Again the group was divided into five groups. A woman's life was divided in five age groups. The theme for each age group was as follows:

- 0-5 years: A girl child is born in a family.
- 5-12 years: The girl child wants to go to school.
- 12-20 years: Talk of marriage
- 20-50 years: Situation of a married woman with three children and an alcoholic husband.
- 50+ years: Situation of a widow.

After the role-plays were done, the group was asked to react on them. The participants identified the following gender issues:

- Gender discrimination exists right from the birth
- Indifferent attitudes to girl's education
- Early age at marriage and its adverse consequences for women
- Impact of drinking by men on household situation
- Domestic violence
- Helplessness of widowhood.

The issues were discussed with the group. It transpired from the discussions that gender discrimination prevails at every stage of a woman's life. It was observed that in all the role plays men did not extend the support that women needed at crucial stages of their lives. The group admitted the importance of ensuring male responsibility in combating gender discrimination.

## Day 2

Recap of day 1

### Session 4 : Exposure to secondary information on gender

<b>Objective :</b>	Provide information on gender discrimination in economic, social, political and demographic spheres using secondary data.
<b>Core Message:</b>	Women in tribal as well as non-tribal societies are generally at a disadvantage.
<b>Expected Outcome :</b>	The group is made aware of the impact of gender discrimination on women as a direct result of lack of power in decision making and control over resources.
<b>Methodology :</b>	Transparencies. <ul style="list-style-type: none"> <li>• Data sheets of various demographic and social indicators for Chattisgarh (at district level), India (state level) and similar indicators from other parts of the world were shown on the overhead projector.</li> </ul>

### Proceedings

In this session, participants were shown data based on selective gender indicators like Literacy Rates, Enrolment and Retention Rates, Sex Ratio, Total Fertility Rate, Infant Mortality Rate, Life Expectancy at Birth, Worker Participation Rate, and some vital demographic statistics in select countries. The definitions, data sources and likely explanations of gender differences in the various indicators in different contexts were discussed. (See Appendix III)

A discussion was initiated on the need for studying these data from a gender development perspective. It was explained how low sex ratio and high infant mortality rates may be taken as indicators of gender bias; how gender differences in indicators like Total Fertility Rate (TFR) and Life Expectancy at Birth (LEB) are relevant for understanding the status of health of women. Reasons for low rate of workers participation among the women was explained.

## Session 5 : Tribal life-style and tribal world view

<b>Objective :</b>	To pull together the trainees' perceptions on tribal culture and tribal world view from a gender perspective
<b>Core Message:</b>	All societies, including tribal societies, have cultural specificities.
<b>Expected Outcome :</b>	Heightened awareness of the need to shed the judgmental attitudes of dominant non-tribal societies towards tribal culture and practices.
<b>Methodology :</b>	<p><b>Activities</b></p> <ul style="list-style-type: none"> <li>• Listing of tribal and non-tribal communities in the project villages.</li> <li>• Divide the entire group in four smaller groups (region wise) ask them to list the derogatory terms and proverbs reserved for the tribal people and their practices and put those on a flip chart for open discussion.</li> <li>• Initiate discussions on how these terms manifest inequalities between tribals and non-tribals.</li> <li>• Give each group pointers to develop situational stories for role plays.</li> <li>• Seasonal calendar of important tribal festivals – A volunteer from the entire can write on a flip chart with an open consultation with the entire group</li> <li>• A comparative analysis of tribal and non tribal festivals/rituals (The discussion should highlight the fact that no culture is high or low, only that cultures are different)</li> <li>• An open discussion on the presence of gender bias and gender discrimination in adivasi and non-advasi societies in different forms.</li> </ul>

### Proceedings:

The facilitator apprised the group of the importance of the session. It was pointed out that it is a tribal development project, and a very large percentage of the actors is from non-tribal communities. Hence it is very important to understand and respect the adivasi culture and their world-view before starting any developmental programme for them. The facilitator further emphasised the importance of understanding cultural practices and values of a particular community, which should not be considered high or low. The community workers need to be sensitised towards tribal culture and realise their own biases. If one goes with a biased attitude, it would be very difficult to involve the adivasi communities in the process. Moreover, it is very important to understand the worldview of adivasi community before implementing developmental programmes for them. Many of the adivasi communities do not follow any long-term future plans. Consequently, many do not have any inclination towards savings. Under such circumstances, programmes like forming self help groups or distributing seeds won't help unless the programme takes such initial conditions into account in designing the strategy.

A participant was invited to volunteer for writing the points on the board. The facilitator asked the concerned participants from the NGO workers to speak out the names of the tribal and non-tribal communities live in a particular block, where the project activities is under progress. All the blocks under the project area was covered one by one and an exhaustive list of all the communities residing in the project area was made. The facilitator initiated a discussion on the history of settlements of non-tribal communities in

the region. The origin of these people, their traditional occupation, the period during which they came and settled in the region and their relationship with the adivasi communities. Emphasis was given on the relationship and extent of interactions between the adivasi and non-advasi communities, within the villages and outside the villages. The participants were asked to speak out openly on how the adivasi communities are addressed or referred to by the non-advasi communities informally. After this the participants were divided in five smaller groups and were asked to develop situational stories and do a role play on the following themes.

- Group A: A tribal woman working as a labourer
- Group B: A tribal man travelling to the market to sell something
- Group C: A tribal teenage girl goes to the forest to collect forest produce
- Group D: A tribal student in a school
- Group E: An adivasi man gets promotion in the office.

After all the groups presented their role-plays, the participants were asked to react to the presentations. The main points for discussion were the issues that came up in the presentations, weak points in the stories if any, alternative scenarios that one could think of, etc. The group presenting a particular theme was also given a chance to comment on or explain their own story.

The issues that came up from these five role-plays in Patthalgaon and Ambikapur were:

#### Group: A

- Extra labour without extra payment
- Less wage than standard wage rate in the region
- Exploitation of the underprivileged
- Physical and sexual exploitation
- Unequal wages for men and women
- Exploitation by the employers when workers have little options.
- Unavailability of jobs in the rural areas
- Absence of unity among the workers and lack of awareness
- Implementation of government programmes has not been done properly

#### Group: B

- Barter system is still prevalent in the rural areas
- Lack of information about price of goods
- Exploitation by the middlemen
- Absence of transportation and road infrastructure : the rural people cannot reach the market where they would get a better rate
- Interlinkages between labour, credit and product markets, working to the disadvantage of the rural poor.

### Group: C

- Exploitation of people by some forest officials
- Physical exploitation/sexual abuse on women by some forest officials
- Danger of wild animals
- Complicated procedures for getting compensation from the forest department
- Forest resources are steadily depleting.

### Group: D

- Social distance exists between adivasi and non-advasi people exist from the childhood.
- Discrimination against adivasi communities exists.
- However, the situation is changing gradually for the better due to affirmative action.
- The extent of rift between adivasi and non-advasi communities is much less in villages where they live together; adivasi exploitation is much more by outsiders
- Sometime non-advasi teachers do not accept adivasi students wholeheartedly.
- There is a lack of interest among village people to send their children to the school
- Negligence of duties by the teacher
- Teachers should be gender sensitive; often they are not.
- Quality of education has come down.
- Gram Sabhas can intervene to solve some problems in village schools.

### Group: E

- The animosity between adivasi and non-advasi communities can increase because of reservation provisions for the adivasi people.
- Negative attitudes by the non-advasi colleagues in the office
- Employees require capacity building training

Another exercise, which was there in the original module, which was not covered due to lack of time was making of a list of important festivals celebrated by adivasi and non-advasi communities. This exercise would have helped in understanding the cultural specificities of different adivasi groups, the objectives of these festivals and rituals, the similarities and differences between adivasi and non-advasi communities, role of women in these social functions. This exercise is important for comprehending the tribal worldview and the relationship of tribals with the environment.

The nature and extent of gender discrimination in adivasi societies was then discussed. It was noted that gender discrimination is also present in the adivasi societies but its manifestations might be different from other non-advasi societies. It is generally acknowledged that the extent of gender discrimination is comparatively less in the adivasi communities. Some female participants reported that adivasi societies have learnt a number of non-advasi cultural practices from the neighbouring communities. Now-a-

days an adivasi community may be found to be exploiting another adivasi community, a phenomenon which was not present earlier. They also reported that formed among the adivasi communities are gradually getting to be more hierarchical, which was also not present in earlier days. Practices like dowry, restrictions on movement, female feticide or female infanticide are generally not present in the adivasi communities but a number of adivasi communities still practice 'bride-price'. Some members of the group felt that women are more empowered in those societies where 'bride-price' is practised. But discussions on the theme led to a revision of this view. The group learnt that independent of whether it is dowry or bride price that is being practiced, it is the senior male members either from bride's family or groom's family who decide on the amount and who are the only ones who have control over that property, whether it is in cash or kind.

### Session 6: Gender and livelihood practices

<b>Objective :</b>	To understand the livelihood practices of tribal men and women in the study sites
<b>Core Message:</b>	Poverty, ecology and gender interact to define the domain of activities of the tribal people
<b>Expected Outcome :</b>	Heightened awareness about the fact that development initiatives need to be framed within the context of tribal life situations.
<b>Methodology :</b>	<p>Flipchart, Marker pens</p> <p><b>Activities:</b>            Take a volunteer from the group, ask him/her to write on a flip chart with an open discussion on the flip chart:</p> <ul style="list-style-type: none"> <li>• Nature of work men and women do</li> <li>• Activities of men and women through out the day</li> <li>• Highlight the burden of work on women.</li> <li>• Paid and unpaid work ; importance of unpaid job of women for the families' survival and sustenance</li> <li>• Make Seasonal calendar of: farm, non-farm activities(forest based activities, collection of forest produce, other home based works including cottage industries) on a large sheet of paper a followed by an open discussion.</li> <li>• Open Discussions on land holding pattern, gender, tribal/ non-tribal, control over resources, control over income (highlight on agricultural income, income from forest gathering (if any), Decision making</li> </ul>

### Proceedings:

The facilitator initiated a discussion on patterns of livelihood practices of local people. The nature of work, paid and unpaid, that men and women do. It was pointed out that women do the household chores and collect forest produces including firewood, mahua, tendu leaves, different kinds of roots and tubers etc. The male members of the households mostly go at paid jobs, often outside their respective villages. The participants reported that women members too go as wage labourers in neighbouring areas. Both men and women take part in cultivation and related agricultural work. Adivasi households mostly consume their agricultural production. Non-advasi communities mostly sell their surplus



production in the nearby markets. The importance of unpaid work by women was discussed in the session.

The following exercises were present in the original module, but could not be executed due to lack of time.

1. Making a chart of daytime activities both paid and unpaid jobs by men and women.
2. Making a seasonal calendar of both farm and non-farm activities, home based craft works by men and women in different programme areas.

This should be followed by a discussion on roles played by men and women for livelihood. Importance of economic and non-economic activities. Gender division on control over resources and control over household income and nature of savings.

### Session 7 & 8 : Gender and Health

<b>Objective :</b>	To understand the social determinants of health.
<b>Core Message:</b>	Gender is a major criterion determining the health status of an individual in all societies.
<b>Expected Outcome :</b>	Increased understanding of the social determinants of health in the project sites.
<b>Methodology :</b>	Defining health: the participants' perceptions of a healthy person, by gender, and by age. Discussion on <i>Rakku's Story</i>

### Proceedings

The participants were first divided into five groups. Each group was then asked to discuss and write out the qualities of one of the following on flip charts :

- A healthy adult
- A healthy female
- A healthy male
- A healthy boy, and
- A healthy girl.

Each group then explained the characteristics of the healthy person assigned to the group. It emerged from the discussions of the characteristics noted by each group that the state of being healthy had different connotations for different categories of people. Health did not merely refer to a physiological state but had social and mental health dimensions as well. The participants were then familiarised with the definition of health advocated by the World Health Organisation.

*WHO's definition of health: Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.*

During discussion it also emerged that while the emphasis was on physical and mental development for boys and girls, for adult man and woman, the focus was on how well they performed their social roles. The facilitator pointed out the links between gender roles and responsibilities and the state of being healthy. The characteristics of a healthy woman referred to how well she could perform her household responsibilities and maintained a happy disposition, while for men, the emphasis was on how energetic they were and how well they performed their duties. It was also pointed out that in the perception of the participants, a 'person' or an 'adult' almost invariably conjured up the image of a male. The analysis showed that the concept of a healthy adult closely resembled that of a healthy man but not of a healthy woman. It was pointed out that often we pick up the gender model of a male to represent an adult person, completely ignoring the female gender. The comparison between a healthy boy and a healthy girl also showed that the link between gender roles and health that is visible since childhood. It was pointed out that for a 'healthy girl' the emphasis was on speaking politely and observing proper decorum which was absent in the notion of a 'healthy boy'.

### ***Social determinants of health***

The participants were given a modified and abridged version of *Rakku's Story*. In the discussion that ensued, the participants were asked to first list out the main points emerging from the story. The main points listed out by the participants were;

Rakku has social responsibilities (of having children), economic and famiial responsibilities.

- Neglect of family and children by Rakku's husband
- Poverty and malnutrition
- Lack of easily accessible health facilities
- Importance of mid-wife
- Insufficient sources of safe drinking water
- Lack of education
- Conditions perpetuating high child mortality
- Lack of job opportunities
- Choosing between income and the child's health needs : a difficult choice
- Lack of Transport
- Unsuitable hospital timings

It was then pointed out that the situation depicted in the story was very common and that the participants were likely to come across such situations in their project areas. The story showed very clearly that health has to be viewed in a larger perspective and that it cannot be viewed merely in terms of absence of illnesses or a curative perspective.

The story also showed that women have a double burden to shoulder : productive work, including unpaid family labour, and reproductive work, including domestic responsibilities. Care of the family is a woman's responsibility and she is primarily

responsible for taking care of the children, the sick and the aged. The project has to recognise this burden on the woman as well as her lack of control over resources.

## Session 9 : Gender and Reproductive Health

<b>Objective :</b>	To establish links between gender, reproductive health and social practices.
<b>Core Message:</b>	Reproductive health is a very good entry point for understanding gender issues.
<b>Expected Outcome :</b>	Trainees get better insights into why reproductive health is important for gender related development interventions.
<b>Methodology :</b>	Flip charts, Transparency <b>Activities</b> Role-Plays and Open Discussions

### Proceedings

The participants were divided into five groups and given different situations to work out through role-plays. The themes were as follows:

- A woman who is anaemic delivers a baby that dies within a few days.
- A landless labourer is raped by the landlord's son and has missed her periods.
- A woman has been married for six years but does not have any children.
- A woman whose husband stays in a different place, has been suffering of white discharge, and now her husband has come for a visit.
- A woman with three daughters is pregnant again.

The participants had to depict the reaction of society, family and the main actor. The issues brought up by the participants from the role-plays for discussion were;

#### Theme 1

- Lack of nutrition and balanced diet for women
- Orthodoxy and superstitions
- Women is blamed
- Women do not pay attention to their own health

#### Theme 2

- Exploitation of the weaker sex
- Lack of family support
- Woman is blamed
- No responsibility on the man

#### Theme 3

- Lack of information/knowledge
- Importance of a son
- Woman is blamed
- Orthodoxy and superstition
- No support from the family

#### Theme 4

- Men are unaware of women's reproductive health problems
- Support from men is essential
- Importance of couple treatment

#### Theme 5

- Pressure on the woman to have more children
- Importance of the son
- Woman is blamed
- No support from the family

The facilitator introduced the definition of reproductive health as adopted by the ICPD.

*Reproductive health is a state of complete physical, mental, and social well-being, and is not merely the absence of disease or infirmity in all matters relating to the reproductive system and to its functions and processes. Reproductive health, therefore implies that people are able to have satisfying and safe sex life, and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so. Implicit in this last condition are the rights of men and women to be informed and to have access to safe, effective, affordable, and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility... and the right of access to appropriate health-care services that shall enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.*

The links between gender and health come out very clearly in the context of reproductive health. The role-plays brought out women's powerlessness and the fact of being blamed for in all situations very clearly. The facilitator drew the participants' attention to the unequal power relationship and the lack of recognition of female sexuality in Indian society.

In our society STIs and other infection's pertaining to the reproductive tract are a cause of concern for women as well as men. The culture of silence pertaining to reproductive health and sexuality results in both men and women being unable to seek appropriate treatment. This is partly due to a lack of knowledge and information, or wrong information. In the case of women it is aggravated by restrictions on mobility, being labelled as 'loose woman', and non-availability of a female doctor in the neighbourhood. In addition in most cases the woman is held responsible for any reproductive health problem, which makes couple treatment a very difficult proposition.

This situation is compounded by a low nutritional status of women. It is estimated that 80-90% of pregnant women in India are anaemic. Lack of calcium and vitamin A also affects women's reproductive health.

Reproductive health cannot be viewed only as a women's issue. Including men is very important. Moreover in a patriarchal society like India where the men are the main decision makers, men's involvement is very necessary.

### **Day 3**

The day began with a recap of the previous day's session on gender and health. The facilitator pointed out that differences in body structure do result in differences in types of illnesses. For instance only women suffer from breast cancer. However social and gender relations have a bigger influence on health. It was found in Himachal Pradesh that older women reported prolapses of the uterus and it was linked to insufficient rest and care after delivery.

Men and women have different roles, activities and responsibilities, occupy different physical spaces, they have different access and control over resources, power and decision making. Our daily lives and the sort of work we do also have an impact on our health status. Women who use traditional stoves may have a greater risk of lung infections, while more men may be more prone to accidents on the road if they travel to work. Apart from this as development workers we should be aware that under-reporting of illnesses among women is also a cause of concern.

Constructions of femininity, masculinity, also have an impact on health. For instance in some societies consumption of alcohol and other substances is viewed as a sign of masculinity. Also in some parts of India women go only after dark to fields and forests to defecate and are not supposed to carry water. Both situations have serious health implications.

The link between gender and health is most clearly seen in India's sex ratio. The sex ratio is a very good indicator of the gender bias as the female foetus is biologically stronger than the male foetus. More male foetuses are spontaneously aborted or are still born and upto the age of six months mortality is higher among male children. Women also tend to live longer than men, therefore the sex ratio should not be unfavourable to women.

However in India the situation is reversed. The number of women is less than the number of men. The gap has been widening since the beginning of the century. There were 972 women for every 1000 men in 1907 and in 1991 it had come down to 927. The participants were also informed that this has no relationship with poverty. There are countries poorer than India have better sex ratios. And within India Punjab has very poor sex ratio though it is counted among the prosperous states and has much less population below the poverty line as compared to other states.

**Sessions 10 and 11 : Gender and Sectoral Interventions in Food Security, Nutrition, Micro Credit, Livelihood options, Watershed Management, RCH Programme etc.<sup>1</sup>**

<b>Objective :</b>	To highlight the importance of incorporating gender in implementation in all sectors.
<b>Core Message:</b>	Develop gender based strategies for implementation of all activities
<b>Expected Outcome :</b>	Integrate women in all stages of the project from design to implementation.
<b>Methodology :</b>	Open Discussion

**Food Security/Food and Nutrition**

This session was supposed to be designed on open discussions on the experiences of Project staff and NGO representatives.

The discussion should be based on the following broad questions.

- Food habits of the people in the region
- Nature and extent of food insecurity in all the villages (seasonal variations)
- Different situations at the time of ‘famine’ or ‘no rain’ and normal conditions in the household. (use case studies or role plays)
- Seasonal variations in ‘normal conditions’ and different situation for men and women in the household.
- The extent of hunger (how the food habits change, what people do when food runs out, what kind of food they collect from the forest if any, who collects them and how, etc.)
- What has been the traditional practices or strategies for coping in times of food scarcity Any special role of women in food management previously? And what is the present situation ?
- What is the role of panchayat in times of scarcity, what is the role of panchayat in normal situations ? What was the role traditional panchayats?

Following this, the next step of discussion would be to highlight the interventions being made under auspices of the Project.

- What are activities in the food security component of the project?
- The problems being faced in implementing project interventions.
- Can one identify the gendered needs of the people?

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<sup>1</sup> Much of this part of the Training Module could not be administered for two reasons. One, the time was too short, and two, it was found that very little field experience on running the project was available at the moment because the project is still very new. The only segment on which some discussions could be held was the one on micro credit on which some work has started. The other sector which was discussed at length in the earlier sessions was reproductive health.

- How are men and women in the communities involved in this component of the project?

### **Micro credit**

Discussions on ground situations

- Do people need the micro credit programme? What do they tend to use the money for
- Is there a difference between men and women in this regard ?
- Where do they go now for loans?
- Where they used to go earlier?
- Who were the traditional money lenders earlier? Who are the emerging money lenders?
- Do men and women benefit differently?

Basic information on the project activities:

- Types of loan people usually look for: Consumption loans; Loans for marriages, rituals, etc.; productive loans - purchase of cattle, land, starting up a business etc.
- What is the role of women?
- What are problems faced by the project staff during intervention?
- What are the demands faced by the community?
- Is the project capable of meeting those demands?

### **Watershed management**

Discussions on basic situations:

- Traditional source of water for irrigation, drinking , and other uses.
- Adequacy or otherwise of water resources.
- Who controls water - Land lords, upper caste people, tribal community, non-tribal communities?
- What were the traditional mechanism of sharing water? Any role of traditional panchayats?
- Do the old water sources still exist? What are the new forms of water source for irrigation, drinking and other uses? And who controls them ? Any role of panchayats?
- Role of women in watershed management.
- Extent and types of cultivation - is it market oriented/subsistence agriculture? Any variations among the communities?
- What are the actual / planned project interventions?

*The above discussions would be useful for building strategies while implementing the project activities in different sectors.*



## **Session 12 : Evaluation and feedback**

The participants were asked to answer five questions :

1. Did they get any new information from the Training Programme? If so, of what kind?
2. Did the Training programme help them to develop a gender perspective? If so, how?
3. Were there any drawbacks in the programme? If so, what were they?
4. Do they think any follow-up programmes would be useful in their work? If so, of what kind?
5. Any other suggestions?

The participants were more forthright in their views in Ambikapur as compared to Patthalgaon. Most of the feedback was positive, but there were a few which were not so.

### ***Whether training imparted any new information***

Most of the participants mention that the Training has helped them get a better understanding of natural and socially constructed differences between men and women.

The exposure to new information on gender indicators from various places was generally liked by the participants.

Many have appreciated the participatory method adopted in the programme. Generally speaking, NGO's were more appreciative of the method adopted as compared to the project staff.

### ***Whether training has been useful for building a gender perspective***

Most participants have written that the Programme has been successful in getting them to rethink their understanding on gender. Some have said that it has made them look inside their minds and unlock values and perceptions that they had lived with since childhood.

Also, they write that they are now able to better appreciate the close relationship between gender and health and understand why a gender perspective and gendered strategy is essential in developmental work. In particular, there is better understanding now as to why reproductive health is a good entry point for developmental work in poor communities.

### ***Drawbacks in the training programme***

Most of the participants felt that the Programme was deficient in not providing enough reading material. This drawback was pointed out by many participants, but mostly, and more forcefully, by the Project Staff as compared to the NGO representatives.

There was a feeling among many that the Programme was too short. Many said that it should have been extended by at least one more day in each location. Many have mentioned that they did not have enough time to discuss various issues that they face in the field with the resource persons. Once again, this view came out more prominently in Ambikapur as compared to Patthalgaon.

Some complained that the resource persons used too much English during the training.

***Follow up***

As far as follow up of the training is concerned participants by and large felt that there is a need to do follow up of such training so that their understanding of the issues is deepened further. Many expressed the view that the follow-ups should come when the project has moved on a little more, so that they can discuss the actual problems they face in the field with the Trainers and devise practical strategies. Some felt that such training programmes should be conducted periodically.

## Appendix: I

### ISST Module on Gender Ideology

#### Answer 'Yes' or 'No'

1. Do you believe that women should not go for outside employment a far as possible? Yes? No?
2. Do you think it is shameful if wife earns more than husband? Yes? No?
3. Do you think that it is shameful for a man to do work like sweeping the floor or washing vessels? Yes? No?
4. Even under conditions of severe financial stress, do you think that there are some jobs that a woman may take up but a man should not? (Eg:-menial work) Yes? No?
5. Do you believe that girls should be brought up to be submissive and modest but boys need not? Yes? No?
  - a) Do you think that girls or women who are outspoken or assertive should be disciplined to behave ? Yes? No?
  - b) Do you think boys or men who are outspoken or assertive should be disciplined to behave ? Yes? No?
6. Do you think a man has the right to beat his wife but a woman has not Yes? No?
7. a) Do you think women should always obey men in the family? Yes? No?  
b) Do you think men are superior to women? Yes? No?
8. If you were to have only one child would you rather have a son? Yes? No?
9. Do you think that if you do not have daughter the family would be incomplete? Yes? No?
10. Do you think that a man loses respect in the community if his wife or daughter moves about freely outside the home? Yes? No?
11. Do you think that a woman or girl who goes out alone after dark is herself to be blamed if she gets molested. Yes? No?
12. Do you think that a girl or woman who moves about freely outside the house is most likely to be a loose woman. Yes? No?

*Note: The above 12 items are worded so that a positive response is in the direction of a gender ideology that is based against women's status and freedom. A higher score is correlated with a more orthodox gender ideology*

*Three additional questions which may be useful in getting additional but related information on the nature of the ideology*

13. Do you think women should leave the final decision to men about

- |  |      |     |
|--|------|-----|
| a) Property matters  | Yes? | No? |
| b) How many children to have and when                        | Yes? | No? |
| c) Women's participation in community groups of various kind | Yes? | No? |

12. Who are the women who do not get respect in the community?

( Mark v the items which you agree with)

- a) Those who do not carry out their domestic chores satisfactorily.
- b) Those who are immodest (talk too much, talk boldly, move about freely)
- c) Those who do not obey their husbands
- d) Those who are of bad character
- e) Those who are spinsters
- f) Those who are childless
- g) Those who have no sons
- h) Those who have been sexually assaulted
- i) Those who are beaten by their husbands
- j) Those who take up outside employment

12. Who are the men who do not get respect in the community?

( Mark v the items which you agree with)

- a) Those who drink too much
- b) Those who do not care for their families
- c) Those who beat their wives
- d) Those who cannot control their wives
- e) Those whose wives/daughters are thought to be of loose character.
- f) Those whose wives/ daughters are in outside employment.
- g) Those whose wives /daughters move about freely
- h) Those who have no sons
- i) Those who have no children
- j) Those who do household work
- k) Those who are not virile

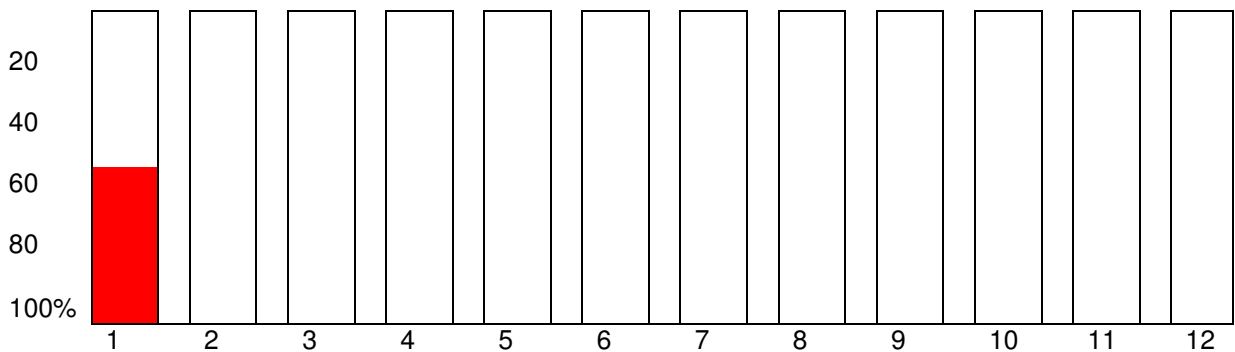
## Appendix: II List of Activities

Taking care of children  
Taking care of livestock  
Cooking, cleaning & washing  
Looking after sick and elderly  
Fetching water  
Access to education  
Access to health care facilities  
Access to credit or loan  
Control over self earned income  
Going out to do free collection (vegetables, roots, firewood, cattle feed)  
Decision to buy jewellery or other major household assets  
Decision to sell properties

### List of Activities

- Going out to wage work
- Taking care of children
- Fetching water
- Cooking, cleaning & washing
- Looking after sick and elderly
- Access to education
- Going out to do free collection (vegetables, roots, firewood, cattle feed)
- Access to credit or loan
- Control over self earned income
- Taking care of livestock
- Decision to buy jewellery or other major household assets
- Access to health care facilities
- Decision to sell properties

Out of these twelve bars (each bar represents an activity) please point out or mark with shade for men's contribution in terms of percentage.



% age of Men		Groups					% age of Women		Groups				
		1	2	3	4	5			1	2	3	4	5
	Going out to wage work							Going out to wage work					
	Taking care of children							Taking care of children					
	Taking care of livestock							Taking care of livestock					
	Cooking, cleaning & washing							Cooking, cleaning & washing					
	Looking after sick and elderly							Looking after sick and elderly					
	Fetching water							Fetching water					
	Access to education							Access to education					
	Access to health care facilities							Access to health care facilities					
	Access to credit or loan							Access to credit or loan					
	Control over self earned income							Control over self earned income					
	Going out to do free collection (vegetables, roots, firewood, cattle feed)							Going out to do free collection (vegetables, roots, firewood, cattle feed)					
	Decision to buy jewellery or other major household assets							Decision to buy jewellery or other major household assets					
	Decision to sell properties							Decision to sell properties					

## Appendix: III : Some Statistics on Gender Indicators

### LITERACY RATES

Definition: The percentage of people aged 7 and above, who can both read and write with the understanding in any language. The ability to read and write with understanding is not ordinarily achieved until one has some schooling or at least some time to develop these skills. It was therefore decided in the 1991 Census that all children in the age group 0-6 years, will be treated as illiterate by definition and the population aged seven years and above only is to be classified as literate or illiterate. The same criterion has been retained at the 2001 Census.

**Table-1: Literacy Rates across the Districts in Chhattisgarh**

S. No.	Districts	1991		2001	
		Males	Females	Males	Females
	<b>Chattisgarh</b>	<b>58</b>	<b>27.5</b>	<b>77.9</b>	<b>52.4</b>
1.	Koriya	51.78	24.53	76.01	50.08
2.	Surguja	39.01	15.21	68.19	42.17
3.	Jashpur	51.02	25.67	76.7	54.09
4.	Raigarh	59.05	26.93	83.1	57.9
5.	Korba	61.52	28.15	77.27	48.65
6.	Janjgir-Champa	67.41	27.56	82.21	50.41
7.	Bilaspur	62.43	27.99	78.98	48.08
8.	Kawardha	45.42	14.16	71.35	39.6
9.	Rajnandgaon	66.01	31.91	87.54	67.92
10.	Durg	74.06	42.78	86.59	64.91
11.	Raipur	65.47	31.56	82.41	55.3
12.	Mahasamund	60.22	25.85	81.58	54.04
13.	Dhamtari	69.92	36.02	86.78	63.66
14.	Kanker	51.37	24.13	83.03	63.69
15.	Bastar	32.41	13.7	57.09	33.97
16.	Dantewada	22.87	10.09	39.59	20.59

**Table-2: Literacy Rates across the States of India, Population Census 2001**

<b>S. No.</b>	<b>States</b>	<b>Males</b>	<b>Females</b>
	<b>India</b>	<b>75.9</b>	<b>54.2</b>
1.	Uttar Pradesh	70.2	43.0
2.	Maharashtra	86.3	67.5
3.	Bihar	60.3	33.6
4.	West Bengal	77.6	60.2
5.	Andhra Pradesh	70.9	51.2
6.	Tamil Nadu	82.3	64.6
7.	Madhya Pradesh	76.8	50.3
8.	Rajasthan	76.5	44.3
9.	Karnataka	76.3	57.5
10.	Gujarat	80.5	58.6
11.	Orissa	76.0	51.0
12.	Kerala	94.2	87.9
13.	Jharkhand	67.9	39.4
14.	Assam	71.9	56.0
15.	Punjab	75.6	63.6
16.	Haryana	79.3	56.3
17.	Chattisgarh	77.9	52.4
18.	Jammu and Kashmir	65.8	41.8
19.	Uttaranchal	84.0	60.3
20.	Himachal Pradesh	86.0	60.3



## ENROLMENT RATE AND RETENTION RATE

**Definition:** Enrolment rate is the number of students belonging to a certain age group enrolled in school as a percentage of the children in that age group. Retention rate is defined as the percentage of enrolled students who reach a certain grade level.

Table-3: Child Enrolment and Retention Rates in Chattisgarh across the Districts in 2001

S. No.	Districts	Child Enrolment Rates in Primary schools (%)		Retention Rates in Primary school (%)	
		Male	Female	Male	Female
1.	Bastar	44.00	30.00	31.30	23.10
2.	Bilaspur	81.60	49.10	47.70	42.90
3.	Dantewada	44.00	30.00	31.30	23.10
4.	Dhamtari	85.60	58.50	66.20	58.20
5.	Durg	77.90	58.30	67.90	64.80
6.	Janjgir	81.60	49.10	47.70	42.90
7.	Jashpur	79.20	36.90	54.80	49.50
8.	Kanker	44.00	30.00	31.30	23.10
9.	Kawardha	67.20	47.60	59.50	45.10
10.	Korba	81.60	49.10	47.70	42.90
11.	Koriya	72.20	43.70	70.40	60.20
12.	Mahasamund	85.60	58.50	66.20	58.20
13.	Raigarh	79.20	36.90	54.80	49.50
14.	Raipur	85.60	58.50	66.20	58.20
15.	Rajnandgaon	67.20	47.60	59.50	45.10
16.	Sarguja	72.20	43.70	70.40	60.20

Source : Infrastructure Development Action Plan for Chattisgarh—Final Report, prepared by Price Water House Coopers, accessed from [www.chattisgarh.nic.in](http://www.chattisgarh.nic.in)

## SEX RATIO

**Definition:** Sex ratio is the number of females per thousand males.

**Table-4: Sex-Ratio across the Districts for all Age-Groups**

S. No.	Districts	1991	2001
	<b>Chattisgarh</b>	<b>985</b>	<b>990</b>
1.	Koriya	926	947
2.	Surguja	966	972
3.	Jashpur	1001	998
4.	Raigarh	1000	995
5.	Korba	952	964
6.	Janjgir-Champa	1007	999
7.	Bilaspur	973	975
8.	Kawardha	996	1002
9.	Rajnandgaon	1016	1024
10.	Durg	967	982
11.	Raipur	983	980
12.	Mahasamund	1015	1019
13.	Dhamtari	1009	1005
14.	Kanker	1000	1006
15.	Bastar	999	1009
16.	Dantewada	1009	1017

Source : Infrastructure Development Action Plan for Chattisgarh—Final Report, prepared by Price Water House Coopers, accessed from [www.chattisgarh.nic.in](http://www.chattisgarh.nic.in), and [www.censusindia.net](http://www.censusindia.net)

**Table-5: Sex-Ratio across the States in the year 2001**

<b>S. No.</b>	<b>States</b>	<b>0-6 years</b>	<b>7+ years</b>
	<b>India</b>	<b>927</b>	<b>935</b>
1.	Uttar Pradesh	916	895
2.	Maharashtra	917	923
3.	Bihar	938	916
4.	West Bengal	963	929
5.	Andhra Pradesh	964	980
6.	Tamil Nadu	939	992
7.	Madhya Pradesh	929	918
8.	Rajasthan	909	925
9.	Karnataka	949	966
10.	Gujarat	878	927
11.	Orissa	950	976
12.	Kerala	963	1071
13.	Jharkhand	966	936
14.	Assam	964	926
15.	Punjab	793	886
16.	Haryana	820	869
17.	Chattisgarh	975	992
18.	Jammu and Kashmir	937	894
19.	Uttaranchal	906	976
20.	Himachal Pradesh	897	981

Source: [www.censusindia.net](http://www.censusindia.net)

## TOTAL FERTILITY RATE (TFR)

**Definition:** Average number of children that would be born to a woman if she experiences the current fertility pattern throughout her reproductive span (15-49 years).

Table-6: Comparison of NFHS-I and NFHS-II<sup>2</sup>

S. No.	States	Urban		Rural	
		NFHS-I 1990-92	NFHS-II 1996-98	NFHS-I 1990-92	NFHS-II 1996-98
1.	Uttar Pradesh	3.58	2.88	5.19	4.31
2.	Rajasthan	2.77	2.98	3.87	4.06
3.	Bihar	3.25	2.75	4.15	3.58
4.	Madhya Pradesh	3.27	2.61	4.11	3.56
5.	Haryana	3.14	2.25	4.32	3.13
6.	Gujarat	2.65	2.33	3.17	3.01
7.	Maharashtra	2.54	2.24	3.12	2.74
8.	Orissa	2.53	2.19	3.00	2.50
9.	West Bengal	2.14	1.69	3.25	2.49
10.	Punjab	2.48	1.79	3.09	2.42
11.	Assam	2.53	1.50	3.68	2.39
12.	Andhra Pradesh	2.35	2.07	2.67	2.32
13.	Karnataka	2.38	1.89	3.08	2.25
14.	Tamil Nadu	2.36	2.12	2.54	2.22
15.	Himachal Pradesh	2.03	1.74	3.07	2.18
16.	Kerala	1.78	1.51	2.09	2.07

Note : Compiled from Preliminary Reports of NFHS-II, International Institute of Population Studies, Mumbai, 2001, [www.populationfoundationofindia.org](http://www.populationfoundationofindia.org)

<sup>2</sup> National Family Health Surveys I and II were carried out in different states of India in the years 1992-93 and 1998-99 respectively.

## INFANT MORTALITY YEAR (IMR)

### Definition:

IMR is defined as the number of deaths of infants (defined as babies below one year of age) during a calendar year, divided by the number of live births in the same year, multiplied by 1000.

Table-7: Rural Infant Mortality Rates, 1995-98 (Per 1,000 Live Births)

S. No.	States	1995	1996	1997	1998
1.	India	80	77	77	77
2.	Madhya Pradesh	104	102	99	104
3.	Orissa	107	99	100	101
4.	Uttar Pradesh	89	88	89	89
5.	Rajasthan	90	90	89	87
6.	Assam	78	79	79	80
7.	Andhra Pradesh	74	73	70	75
8.	Haryana	70	70	70	72
9.	Gujarat	68	68	69	71
10.	Karnataka	69	63	63	70
11.	Bihar	74	73	73	68
12.	Himachal Pradesh	63	63	64	66
13.	Maharastra	66	58	56	58
14.	Tamil Nadu	61	60	58	59
15.	Punjab	58	54	54	58
16.	West Bengal	61	58	58	56
17.	Kerala	16	13	11	15

Source : Registrar General, India, SRS Bulletin, April, 2000, [www.populationfoundationofindia.org](http://www.populationfoundationofindia.org)

## POVERTY LINE

**Definition:** Poverty line is defined as the income needed by a household for purchasing a basket of goods and services considered to be the minimum essential for the subsistence of the household.

**Table-8: Percentage of People below the Poverty Line in the year 1993-94**

S. No.	% of Persons (Official)
Andhra Pradesh	23.08
Assam	41.46
Bihar	56.44
Chattisgarh	38.91
Gujarat	23.92
Haryana	24.21
Himachal Pradesh	28.39
J&K	25.03
Karnataka	33.18
Kerala	26.82
Madhya Pradesh	42.60
Maharastra	36.43
Orissa	48.41
Punjab	11.08
Rajasthan	27.68
Tamil Nadu	36.63
Uttar Pradesh	40.99
West Bengal	35.69
India	36.31

Source : Data compiled from Chattisgarh Human Development Report accessed from [www.chattisgarh.nic.in](http://www.chattisgarh.nic.in), and Economic Survey (various issues)

## LIFE EXPECTENCY AT BIRTH

**Definition:** Average number of years expected to be lived at the time of birth, if current mortality trends were to continue.

**Table-9: Life Expectancy for Males and Females in Chattisgarh during 1998**

S. No.	Male	Female
Bastar	61	63
Bilaspur	60	62
Dantewada	61	63
Dhamtari	60	60
Durg	63	65
Janjgir	60	62
Jashpur	60	62
Kanker	61	63
Kawardha	57	60
Korba	60	62
Koriya	63	64
Mahasamund	60	60
Raigarh	60	62
Rajpur	60	60
Rajnandgaon	57	60
Surguja	63	64

Source : Infrastructure Development Action Plan for Chattisgarh—Final Report, prepared by Price Water House Coopers, accessed from [www.chattisgarh.nic.in](http://www.chattisgarh.nic.in)

## WORKER PARTICIPATION RATE

Definition: The size of workforce as a percentage of total population at a point of time.

Table-10 : Worker Participation Rates for Males and Females in Different Districts in Chattisgarh (in %)

S. No.	Male	Female
Bastar	49	13
Bilaspur	47	13
Dantewada	49	13
Dhamtari	50	26
Durg	47	11
Janjgir	47	15
Jashpur	45	13
Kanker	45	14
Kawardha	49	20
Korba	48	8
Koriya	44	4
Mahasamund	49	15
Raigarh	48	12
Rajpur	48	12
Rajnandgaon	47	19
Surguja	46	7

Table-11: Percentage of Population getting the Basic Amenities in Chattisgarh

Basic Amenity	All	Rural	Urban
Access to Electricity	31.8%	25.4%	61.2%
Access to Safe Drinking Water	51.2%	45.1%	79.6%
Access to Toilet	10.3%	3.3%	42.4%

Source : Human Development Report of Chattisgarh, accessed from [www.chattisgarh.nic.in](http://www.chattisgarh.nic.in)



**Table-12: Vital Statistics of Population in Select Countries**

Country	Crude Birth Rate (per 1000 population)		Crude Birth Rate (per 1000 population)		Infant-Mortality Rate (per 1000 live births)		Total Fertility Rate		Average Annual Growth rate (%)	National Mortality Rate
	1995	2000	1995	2000	1998	2000	1997	2000	1975-98	1990-98
1. Bangladesh	26.8	27	10.4	8	79	82	3.1	3.3	2.1	440
2. Bhutan	41.4	40	14.4	9	84	71	5.5	5.6	2.3	380
3. India	28.3a	27	9.03	9	72a	72	3.4a	3.3	2	410
4. Maldives	41.7	35	8	5	62	27	5.4	5.4	3	350
5. Nepal	38	36	12	11	72	79	4.5	4.6	2.6	540
6. Pakistan	37.8	39	8.5	11	95	91	5	5.6	3	-
7. Sri Lanka	18.2	18	5.9	6	17	17	2.1	2.1	1.3	60
<b>Other Asian and Pacific</b>										
8. China	17.3	15	7.2	7	38	31	1.8	1.8	1.3	65
9. Indonesia	23.9	24	8	8	40	46	2.6	2.8	1.8	450
10. Malaysia	27	25	5	5	9	8	3.2	3.2	2.5	39
11. Philippines	29.8	29	6.1	7	32	35	3.6	3.7	2.3	170
12. Korea	15.3	14	6.3	5	5	11	1.7	1.5	1.2	20
13. Thailand	17.4	16	6.4	7	30	22	1.7	1.9	1.7	44
14. Australia	15	13	7	7	5	5.3	1.8	1.7	1.3	-
15. Japan	10	9	8	8	4	3.5	1.4	1.3	0.5	8
16. N.Z. Land	17	15	8	7	5	5.5	2	2	0.9	15
<b>Africa</b>										
17. Ghana	39.3	34	11	10	67	56	5.2	4.5	2.9	210
18. Kenya	37.3	35	11.5	14	75	74	4.5	4.7	3.3	590
19. Nigeria	43.8	42	14.7	13	112	77	5.2	6	2.8	-
20. S. Africa	30.4	25	8.4	12	60	45	3.3	2.9	2	-
21. Uganda	51	48	21.4	20	84	81	7.1	6.9	2.7	570
22. Zambia	43.3	42	17.9	23	112	109	5.6	6.1	2.6	650
<b>North America</b>										
23. Canada	13.1	11	7.2	7	6	5.5	1.6	1.5	1.2	-
24. USA	15.6	15	8.8	9	7	7	2	2.1	1	8
<b>South America</b>										
25. Argentina	20.4	19	8.1	8	19	19.1	2.6	2.6	1.4	38
26. Brazil	20.6	20	7.2	6	36	38	2.3	2.4	1.9	160
<b>Europe</b>										
27. France	12.3	13	9.2	9	5	4.8	1.7	1.8	0.5	10
28. Germany	9.4	9	10.8	10	5	4.7	1.3	1.3	0.2	8
29. Russia	9.3	8	14.3	15	21	17	1.3	1.2	0.4	50
30. U. K.	13.1	12	10.1	11	6	5.7	1.7	1.7	0.2	7

Sources : (i) Population Reference Bureau, World Population Data Sheet-2000 (for 2000).

(ii) UNDP, Human Development Report-2000 (for 1998).

(iii) Registrar General of India, Sample Registration Bulletin, Vol. 33, No. 2. October, 1999.