

Collective Bargaining of Dalit Women through Solidarity Groups- A Case Study of Dalit Women in JJR Nagar Slum of Bangalore

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Abstract

Dalit women in urban slums of India continue to be marginalized due to their location within the society which is determined by their class, caste, gender. Literatures on dalit women project the fact that they were not only sidelined during the feminist movement, were also neglected in the dalit movement.

In India there have been limited efforts to study the health of dalit women living in urban slums, who are too preoccupied with their struggle against other imminent threats to engage themselves with preventive health.

Primary health care and its emphasis on community action and social process in the urban setting is a key strategy in achieving better health equity for the urban poor. In Bangalore city, especially in its west zone, dalit women from few slums have come-together and formed solidarity groups to tackle the health issues and have initiated social action towards health promotion.

Under this pretext this paper aims to examine the outcomes of the bargaining agenda of Dalit women from the solidarity groups of Jag JeevanRamnagar (JJR nagar) in Bangalore.

Descriptive Method is adopted in this study. The role of Solidarity groups is examined through Case Studies that has promoted better health outcome.

KEYWORDS: Solidarity groups, Dalit Women, Slums, Health promotion.

Introduction

In all nations across the world there are communities which continue to be marginalized and are denied their rights due to their location within the society determined by their class, caste, race, ethnicity, gender and colour. The plight of Dalit women in the urban slums due to the increase in migration of the rural poor has further deteriorated their status and pushed them into much more deprived conditions.(PWECSR, 2007)

In India there has been limited efforts to study the health of Dalit Women living in Slums. Slums have often been conceptualized as social clusters that engender a distinct set of health problems. The poor environmental conditions with high population density makes them a major reservoir for a wide spectrum of adverse health conditions such as under nutrition, delivery related complications, postpartum morbidity etc. (Khan MH, 2008)The life of dalit women in urban slum is a cause of concern.

In India, when we speak about powerless women the focus is on Dalit woman. And the communities they live in is the slum community. Unfortunately Dalit Women in Slum Communities are powerless people who are too preoccupied with their struggle against other imminent threats to engage themselves with preventive health,

Primary health care and its emphasis on community action and social process in the urban setting is a key strategy in achieving better health equity for the urban poor.(Albert Lee, 2007)

In Bangalore city especially in the west zone Dalit women from few slums have come together to tackle the health issues and have initiated social action towards health promotion.

This paper examines the outcomes of the bargaining agenda of Dalit women from the solidarity groups of Jag Jeevan Ramnagar (JJR nagar Slum) in Bangalore city. JJR nagar is one of the undeclared slum in Bangalore with a total population of 38639 people according to 2011 census. (bbmp.gov.in). An approximate 20,000 population reside in this slum. And the Dalits occupy one part of this area. Out of the total 7500 women population an approximate 800 women belong to Dalit community.

With the formation of Solidarity Groups of Dalit women in JJR nagar slum, the women have worked towards realizing the right to health of Urban poor women in their locality.

Bruhat Bangalore Mahanagara Palike (BBMP) is the Governing body of Bangalore Urban District. The Government Health facilities come under BBMP. While the State Health and Family Welfare Department provides services in the outer Wards, the primary and some secondary health services in the inner wards of the city is provided by the BBMP.(Sudha Nagavarapu, 2014: 37,39)

JJR nagar Referral hospital is one of the 6 Referral Hospitals under the BBMP and serves the west zone. Dalit women seeking Health services have shown huge out of pocket spending but poor health indicators. These women have faced abusive language to death of their loved ones. Thus Solidarity groups of Dalit women were formed with the goal of approaching and addressing health issues in their local areas.

Methodology

The Methodology adopted in this study consists of primary and secondary data collection. The present investigation depends on primary data supported by secondary data.

Along with census report and Slum board records, and other published literature from internet are the sources of Secondary data.

Tool for collecting data included Case Studies of successful activities leading to health promotion by Solidarity groups in JJR nagar.

Operational Concept:

Solidarity groups: A homogeneous group of Dalit women constituting 10 to 15 members who work voluntarily take up issues related to health rights and work unitedly for a common cause.

Findings

Jaga Jeevan Ramnagar (JJRnagar) solidarity Groups comprise of 10 -15 women in each group. There are 3 Solidarity Groups in this area. These women conduct meetings once in a month and they discuss and follow up on health and other issues in their neighbourhood.

The roles and responsibilities of solidarity group include:

- Addressed health issues especially related to Dalit women in the locality.
- Sensitized and sought the support of stake holders like local area leaders, political leaders, doctors etc to solve health issues of dalit women.
- Advocate health rights and created awareness to the dalit women in their community.
- Crisis Intervention especially related to cases of discrimination on dalit in government hospitals

Thus during the study in the JJR nagar slum, the findings from the interview with the solidarity group members are as follows:

- Increased awareness on various health issues such as family planning, STI/RTI, ANC/PNC, TB, MTP, immunization etc.
- identified health issues such as - TB cases, non-institutional delivery, incomplete immunization for children, STI/RTI problems among dalit women, negligence in undergoing family planning, Pregnant women not undergoing ANC, Abortion/miscarriage.
- Identified cases from solidarity groups:
 - Negligence at Maternity Hospital
 - Cases of Extortion of higher fees than user fees
 - Cases of bad behavior of hospital staff
 - Cases of Denial of services
 - Cases of referral to other hospital for delivery
- The solidarity group members have been noticing that JJR Referral Hospital staff had been demanding more amount above prescribed user fee as follows:

Table 1. Extortion above user fees

Sl.No	Services	User Fee	Bribe extorted
1.	Normal Delivery	- Free (for BPL Card Holders) - Rs.300/- to	- Rs.2000/- to Rs. 3000/- for Normal

		andRs.350/- depending on suture (for general public) - Rs.500/- for C- section	delivery. - Rs.15000/- for C-section
2.	Immunisation	Free for all children	Rs.20/- charged every time
3.	Family Planning	Free	Rs.1000/- charged
4.	Thai card or ANC card	Free	Rs.20/- to Rs.50/-
5.	Birth Certificate	Free	Rs.50/-
6.	Benefits like ,	- Janani SurakshaYojana (patients receive a cheque of Rs.600/- after delivery from the hospital) - Prasoothi RakshaYojana (Patients receive cheques of Rs.1400/- in two installment before and after delivery) Madilu Kit: 19 items for care of newborns and mother received free after delivery) - Inpatient facilities- 1pound of bread daily along with 1egg/banana for all inpatients-	All these services are charged and sometimes even delayed or denied.

Source: Primary Data

- The above issues were directly advocated by the solidarity groups and the JJR nagarstaff were questioned every time they demanded bribe from the public. Awareness program from the Solidarity group members helped the community to understand the userfees and hence this issue was solved. The staff stopped demanding extra and the hospital has come up with notices in the premises regarding the user fees.
- Crisis intervention on issues of blocked drainage and lack of facilities in Anganwadis issues such as family violence. Initiated Self Help Group of Dalit women who not only save money and disburse loans, but also act as front line groups to take up any social action during crisis bothering their community members.
- The solidarity groups have surveyed Anganwadis and PDS stores, and demanded better services. On the issues of ward committees, they have discussed its functioning and powers and submitted recommendations to state government and to their local Corporators.

Case Studies:

Case Study 1

Mrs.Yellamma (name changed) was identified as an ANC case by the activist.

Mrs.Yellamma has been regular to all her ANC checkups at the JJRnagar Maternity Hospital. She delivered her baby in the same hospital on 14/06/16. Mrs.Yellamma informed that her baby didnot cry after birth at the JJRnagar Maternity Hospital. Further the staff of the Hospital had kept the baby in incubator. But still the baby was not crying. Mrs.Yellammadidnot know whom to ask and finally she informed the activist.

The activist attended to Mrs.Yellamma, by informing the Paediatrician at the hospital. But the doctor referred the baby immediately to Vanivilas Hospital. Since ambulance was required for transport, Mrs.Yellamma waited for the Hospital authorities to arrange for one. Finally the activist requested the doctor to call the ambulance and thus ambulance was arranged after half an hour. At the vanivilas hospital the baby was treated for 4 days in the incubator. Mrs.Yellamma was informed that the baby had drunk lot of amniotic fluid and was also suffering from Jaundice. Thus the baby recovered after treatment and was discharged.

Case Study 2

Mrs.Vedavathi(name changed) was identified as an Antenatal case by the activist of Solidarity group. She has been actively participating in the awareness programs.

Mrs.Vedavathiinitially had to return from the JJRnagar hospital with out getting any treatment for her ANC checkup. She had waited for nearly three hours. disappointed by the irresponsible staff ,Mrs Vedavathi spent Rs9000/- for ANC check up at a private hospital. During the 9th month of her pregnancy she was introduced to the activist of Solidarity group and Thus with the intervention of the activist Mrs.Vedavathi was introduced to the gynaecologist at the JJRnagar Referral Hospital.She received the Thai Card and some iron tablets initially and on the day of delivery i.e on 6/3/17 Mrs.Vedavathiwasinformed that she is anemic and asked to go to vanivilas. when the activist intervened the case was taken up by doctor. She conducted ceaserian and Mrs.Vedavathi delivered a boy baby.

Case study 3

M/s. Valli (name changed) was identified as an Antenatal case by the activist of Solidarity group. She has been actively participating in the awareness programs.

When Mrs.Valli was due for her delivery she went to JJRnagar maternity Hospital. But the staff of the hospital refused to conduct delivery and asked her to go to VaniVilas Hospital. The reason they said was that her amniotic fluids were low and the baby was weak. But Mrs.Valli informed the activist about the incident immediatly through another community woman.

Thus when the activist intervened and asked the reason for this refusal, the hospital staff denied the allegations. Thus the activist directly spoke to doctor incharge and hence admitted Mrs.Valli. But after a brief check up The doctor told the activist that Mrs.Valli suffers from Epilepsy and it is complicated to conduct delivery in JJR nagar hospital. But the activist insisted that the delivery should be conducted in JJRnagar hospital itself because Mrs.Valli had epilepsy 4yrs ago. But still the doctor refused to conduct delivery. The activist had to wait for another 45minutes, Finally the doctor at the JJRnagar hospital agreed to conduct cesarean and thus Mrs.Valli delivered the baby. Both baby and mother are fine.

Conclusion

The activities of the solidarity groups has resulted in increasing the confidence of Dalit women. They have raised their voice when necessary and have gained recognition and respect by solving short term problems JJR nagar. One Solidarity group member has become member of the Ward Committee and one member was selected in the Board of Visitors team for JJR nagar referral Hospital. The growing strength of the solidarity group has led to a desire to establish their presence at a larger level and work towards systematic solutions to their problems.

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