

Strengthening access of rural  
women to HIV prevention, health  
services, social and legal  
entitlements

Vidrohi Mahila Manch

2013-2014

## Creating awareness and strengthening access for rural women and minority women to health services and social entitlements

**Area of Operation:** Sangli District including 730 villages in blocks-Miraj, Jat, Atpadi, Kavathe Mahankal, Tasgaon, Palus, Khanapur, Kadegaon, Walwa, Shirala

The district campaign team comprises of 25 members from the community

The district campaign team continued to focus its efforts to strengthen health care awareness amongst rural women in over 700 villages in the districts of Satara and Sangli.

Combining outreach, counselling, group discussions, exhibitions and informal sharing; the district campaign team has provided information on Gender based violence on women, Equality, sex and Sexuality, HIV/AIDS, Education, Law to women, young adults and children.

DOMESTIC VIOLENCE RESPONDED	
PERPETRATOR	INSTANCES OF WOMEN WHO FACED VIOLENCE
Husband	87
Mother and father in law	34
Brother and sister in laws	24
Neighbours	21
Own family members	36
<b>Total</b>	<b>202</b>

DOMESTIC VIOLENCE CASES HANDLED	NUMBER
SANGRAM negotiated	78
Village leaders	69
Gram Panchayat	19
Mahila Mandal	20
SANGRAM Maitrin	13
Lawyer/ court	3
<b>TOTAL</b>	<b>202</b>

*Aarogya melas* or health camps are being regularly held at the district level and there is increased presence of women at these health camps.

Women now are also motivated to access health facilities and taking care of their own health. The district campaign team have formed support groups at village level actively helps community members to resolve local issues.

*Tanta Mukti Samiti* (dispute redressal forum) become more accountable now, previously the committees were not listening to women's problems. Now the committees are motivated to handle cases of domestic violence.



Initially the Gram panchayat members were not serious about women's death and reasons behind their deaths. The district campaign team started collecting information of such deaths and sharing them consistently with the Gram panchayat and raising consciousness about the causes of the death, including quality of health services, delivery of these services and limited options to access the health care systems.

Following this the Gram panchayat members were convinced and agreed to organize health *melavas* at the village level. Following these *melava* women who wanted to access health systems were assisted by the team. DC team involved youths like inter-cast marriages; stopping child marriages. Earlier PLHIV needed support of the DC team in accessing health and govt welfare schemes; now on their own goes for treatment and accessing schemes. Those who needed guidance then they come for help.

Due to fear of stigma and discrimination many of the children were wanted to leave schools and not to continue education. DC team members created awareness and undertook special programs with positive children motivating them to continue education.

Due to regular follow up with government officials through letters and regular interactions; the government has started organizing free vocational training course camps for positive adolescents. Collectivization has been initiated among widow, separated, divorced to enable the members to support each other. 5 groups of young girls gathered together and started working on the issues of domestic women and organizing programs for other girls in their respective villages.

Activity	Meetings Attended
Tarun Mandal	701
Parents meetings	47
Mahila Mandal	810
P Health Provider	376
Maitrin Programs	2493
Poster exhibitions	31
Teacher training	114
Kishori program	221
Sex education Program	25
Public Meetings	289
Photo exhibitions	37

Pregnant women registered	14637
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Pre test counselling	14637
Tested for HIV	14637
Post test counselling	14637
HIV + Women	21
Pregnancy terminated	1
Women who started Zidovidine	7
On ART	12
HIV + women delivered	16
Death of child	0
Testing for DNA	43

The key focus of the district campaign team comprises of

Providing health education and awareness through outreach activities such as melas, self- help group, women's group and youth group meetings.

Linking pregnant women to maternal care services and tracking their well being during the pregnancies. Ensuring that the woman is motivated to access pre

and post natal care and takes adequate nutrition. The DC team plays a crucial role in HIV testing and providing after care services for HIV positive women and ensuring that the new born infant is not HIV positive.

The DC team has also mobilized over 2500 people to access various social entitlement schemes by linking them with government departments.

Providing awareness on issues such as domestic violence and its impact on family, helping women negotiate and resolve instances of violence within the family through negotiation or Gram Panchayat interventions.

Welfare Schemes	Application sanctioned
Shrawan Bal Yojana	543
Ba ISangopan	402
Indira Awas Yojana	121
Sanjay Gandhi NiradharYojana	1157
Ration Cards	368
Total	2591

The Vidrohi Mahila Manch also participated solidarity marches in the blocks of Sangli on the occasion of the World AIDS Day 2013. These marches were organised by the district health officials to create awareness about HIV/AIDS.



A training program was organised for health workers by MASUM, Pune. The focus of the training was to learn about collectivisation and health and women's rights. VMM is now working closely with the health movement in the villages and 10 women

from each village will participate in the collectivisation process.

VMM also participated in a right to life campaign organised in Sangli and Mumbai.

In December VMM took out a rally in protest against the stigma and discrimination faced by marginalised communities.