## Confident, trained slum women's groups negotiate to make urban governance more responsive and overcome socioenvironmental exclusion

April 3, 2016 13<sup>th</sup> International Conference on Urban Health (ICUH) San Francisco, California, United States of America

Agarwal Siddharth, Verma Shabnam, Verma Neeraj, Agarwal Kabir, Sharma M.R., Sharma C.B, Goel S.

Urban Health Resource Centre, India









#### **Presentation Outline**

- Socio-environmental exclusion, deprivation in today's fast urbanizing world
- Confident, trained slum women's groups negotiate with civic authorities for services and entitlements across > 430,000 urban disadvantaged population
  - 1. How Trained slum women's groups and Cluster Teams operate
  - 2. Increasing Access to Proof of Address and Picture ID
  - 3. Gender empowerment enhances caring capacity of woman and family
  - 4. Pull Outreach health service in migrant, other deprived neighbourhoods
  - 5. Gentle Demand-side Negotiation through Community Petitions
  - 6. Demonstrate uses of Neighborhood Mapping
  - 7. Inter-sectoral-Coordination for Bringing Multi-sectoral Efficiencies for Improved Health and Well-being
- Glimpses of Improved Access to Services in Slums, Informal Settlements

#### Women and Children of an Urbanizing World



#### Physical Living Environment of Urban poor



Slum at the edge of large drain – risk of floods



Wading through a large drain for daily transit- Indore



Water enters low-plinth house after heavy rain: climate change



Child filling water -Delhi



Community toilet- pig; hard to keep clean



Mosquito breeding in collected water - Indore

#### Living Conditions of Urban Disadvantaged Women

- ■The urban disadvantaged, including women contribute cheap labour towards GDP
- Construction site, brick kiln workers, labourers
- Excluded from availing education, socialopportunities, and services in city
- Restrictions on freedom of movement; weak socialnetworks; little awareness of opportunities, services.
- •Child-bearing migrant-girls, women faced greater risks.





## Socio-environmental and multi-dimensional Deprivation of Slums/Deprived pockets

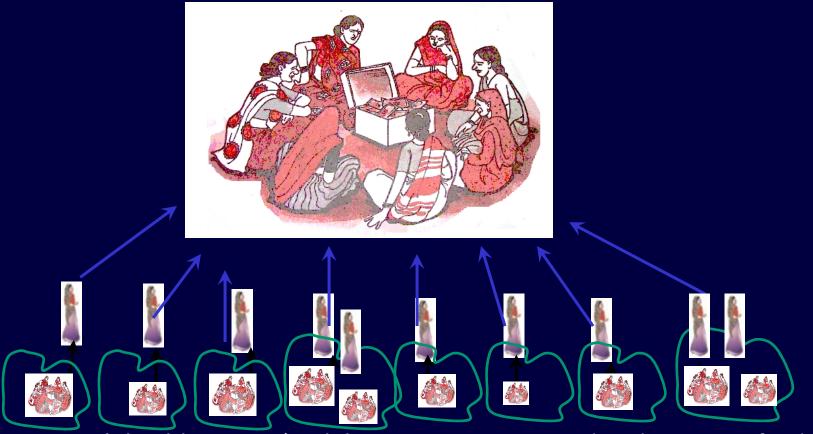
Factors	Situation Affecting Vulnerability in Slums
Housing	Permanent, less permanent, not permanent material, separate cooking space, ventilation, overcrowding
Basic Services	Water supply, Toilet, Sewage system, drainage, cleaning, electricity
Land status, location	Secure or insecure land tenure, location on Municipal/Govt. land, or private land, hazardous location, low-lying areas
Economic conditions/poverty	Families having regular source of income, having no debt from money lender/finance companies, able to save in some mode, have to not interrupt child's schooling owing to inability to pay fees etc
Access and use of public health services	Lack of access to primary health and hospital services, poor quality of health services, nutrition, food security services
Hidden / Unlisted Slums	Many slums are not notified in official records and remain outside the purview of civic and health services
Temporary, cyclical, recent migrants, homeless people	Temporary migrants, homeless persons usually do not get access to health services and other development programs. It is difficult to track and follow-up health services to recent migrants
Past Infrastructure intervention in the slums	If an infrastructure project ahs been implemented reasonably well, some slums have better roads, community halls, other infrastructure
Alcohol, gambling joints, gender inequity	Affect the extent of depletion from alcohol, domestic violence, gender inequity, uncomfortable social environment, girls completing class XII and above
Negotiating Capacity	Lack of organized community collective efforts in slums and absence of active, aware individuals who can be the voice of the community.

Adapted from <sup>1</sup>Agarwal and Taneja. 2005, All Slums are Not Equal, Indian Pediatircs indianpediatrics.net/mar2005/233.pdf

With training and mentoring, slum women's groups negotiate confidently to make urban governance more responsive and overcome socio-environmental exclusion

## How Slum Women's Groups Function Cluster Teams of Women's Groups, Indore and Agra

Trained, empowered slum women's groups and cluster-level teams of slum women's groups gives stronger voice and greater negotiation power



Slum women's health groups (Mahila Arogya Samitis mandated in Govt. of India's National Urban Health Mission\* to strengthen demand for health services.

\*Government of India, Ministry of Health and Family Welfare (2013). National Urban Health Mission: Framework for implementation. May 2013. http://nrhm.gov.in/images/pdf/NUHM/Implementation\_Framework\_NUHM.pdf

## Slum Women's Groups Negotiation Approach 1 Increasing Access to Govt. Address Proof and Picture ID



During Apr 13 - Mar 15: 14,000 persons benefited from Govt. proof of address and Picture ID lending legitimacy as 'citii-zens'

## Slum Women's Groups Approach 2 Women's empowerment enhances caring capacity of woman, family, lends social support

- Slum women's groups gradually contribute to a positive gender equation at family and society levels, provide social support to needy families
- Women's enhanced access to resources and greater capacity to take timely care of themselves, children, and the family helps the family and community
- In a patriarchal society, women's groups result in increasing women's autonomy in decisions on healthcare, children's (including girls') education, associated expenditure and promote savings.
- Prevent early marriages of girls in a society where some families considering girls unsafe marry them early\*
- Reduce number of alcohol vending, gambling joints

\*26 per cent women age 20-24 became mothers before age 18 years against 8 per cent among the rest of the urban population – quartile analysis of Urban NFHS-3



#### Slum Women's Groups Negotiation Approach 3

## **Pull** Regular Outreach Health Services by Government and Private Providers in Migrant, other Deprived clusters



Registration of beneficiaries - identifying left-outs and drop-outs



Information and community motivation – women arrive for immunization day



Linkage with the Auxiliary Nurse-Midwife for vaccine administration



Linkage with Doctor for ailments,

Ante-natal check-up

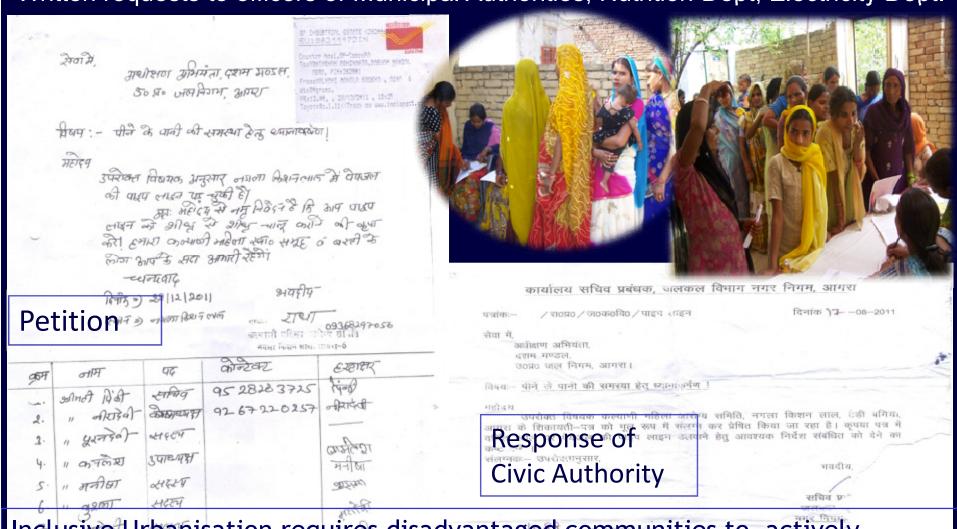
Based on UHRC's experience in Indore and Agra, slum women's groups are mandated as "Mahila Arogya Samiti" in National Urban Health Mission\*. Urban Social Health Activist, ANM mandated to identify vulnerable pockets, improve service access, infection prevention, promote healthy behaviours

\*Government of India, Ministry of Health and Family Welfare (2013). National Urban Health Mission: Framework for implementation. May 2013. http://nrhm.gov.in/images/pdf/NUHM/Implementation\_Framework\_NUHM.pdf

#### Slum Women's Groups Negotiation Approach 4

#### Gentle, Tactful Negotiation through Collective Petitions

Written requests to officers of Municipal Authorities, Nutrition Dept, Electricity Dept.

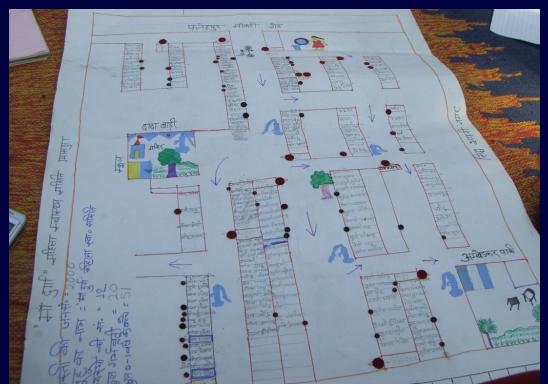


Inclusive Urbanisation requires disadvantaged communities to actively participate in governance: maintain paper trail, persevere with tact (including tea + biscuits, polite thank you) to achieve "Right to the City".

## Slum Women's Groups Approach 5 Demonstrate uses of Neighborhood Mapping

Slum Women's groups in slums use hand-drawn maps to

- a) Ensure that no family is left out from lists used for housing, sewage system, toilets, entitlements;
- b) Track access to health services e.g. Immunization and ANC, delivery, other health and nutrition services,
- c) Help identifying recent migrants for linkage to services, entitlements



Multi-Sectoral Women's Groups' Efforts in the Smart City

Health Dept
ANC, Immunization
Maternity Benefit Scheme,
Other services

Politicians Lend support for applications

Labor Dept
Domestic worker
registration

Cluster team of Women's Groups

UHRS

ndore/
Agra

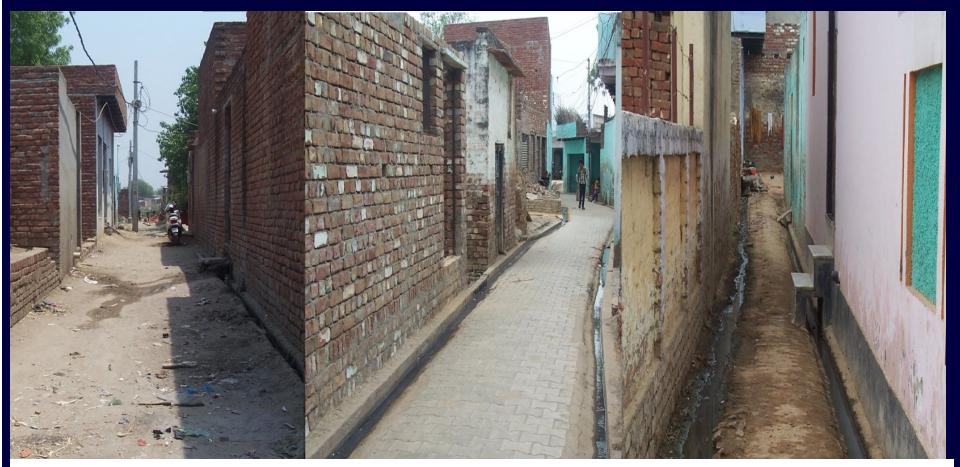
Dept. Women Child Dev. ICDS, LADLI, Others

> Roads, drains, water., toilet, tenure, housing City Govt/ JNNURM

Food Subsidy Cards Picture ID, proof of Residence, Certificate of residence Collector's Office
Social Assistance Programs
Old Age & Widow Pension

# Glimpses of Improved Access to Services in Slums, Informal Settlements

#### Improvement of Slum Pathways, Lanes



During 2013-2015: 100,000 slum population benefited (Agra + Indore) from paved streets

Unpaved Roads

Recently Paved Roads

Smaller lane needs to be paved again

#### **Cleaner Drains**



During 2013-2015: 140,000 slum population benefited (Agra + Indore) from cleaning of drains

#### Improved access to Toilets, Sewer, Paved Streets

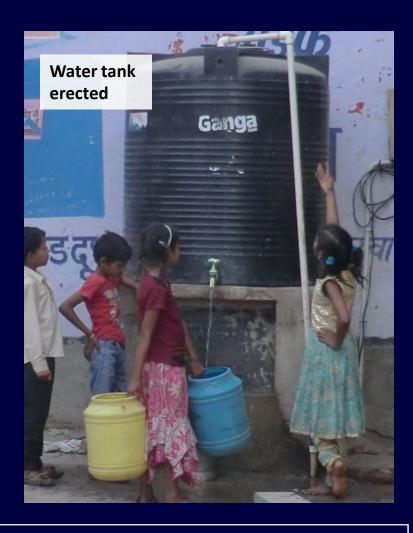
Dusty, Water-logged, Slum streats paved, Sewer-line laid, Connected to houses



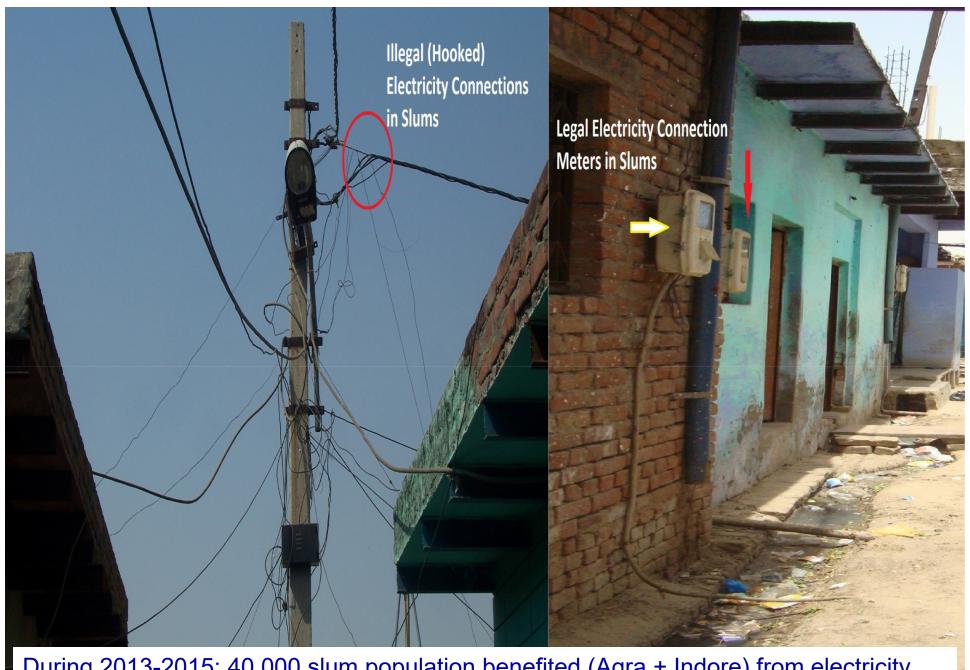
During 2013-2015: 60,000 slum population benefited from sewage system

#### Improved Water Supply





During Apr. 13- Mar. 15: 120,000 slum population in Agra and Indore slums benefitted from improved water supply



During 2013-2015: 40,000 slum population benefited (Agra + Indore) from electricity connections

### Slum Women's, Children-Youth Groups community requests to civic authorities over 5 years bring bridge over large drain, Indore



**Bridge over Large Drain Benefits 1,20,000 population** 

#### Lessons for Policy, Action Research, Sustained Efforts

- 1. Trust the less formally educated to analyse challenges, evolve & implement solutions with support
- 2. Appreciation, motivation, sustained mentoring and training builds collective confidence, negotiation skills among urban vulnerable communities to work towards overcoming exclusions, vulnerabilities
- 3. Simple 'indicators' can assess challenges & improvements e.g. i) proportion of households in neighborhood having toilet, ii) proportion of families with money-lender debt, iii) proportion of families with habitual alcoholics, gamblers, iv) number of community petitions, reminders per year to civic authorities for services (water supply, cleaning drains, sewage system, paving of streets)
- 4. What keeps them motivated: Recognition from the community, and at public platforms, enhanced self-esteem, opportunity to be coopted as Govt. outreach worker through training, outreach work

Let us Build Human Capability,
Expertise, Ignite Action, Engagement,
Collaborative efforts and Tenacity of
Urban deprived to bounce forward, and
prevent their learning to survive in
exclusion and impoverishment

Let us translate words into real action towards inclusive, socially just cities.

siddharth@uhrc.in



