



Knowledge. Voice. Democracy.

PRIA

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Participatory Research and Gender in PRIA's Projects: An Exploration

Keywords: Participatory Research, PRIA, gender, mobilisation, awareness, collectivisation, multi-stakeholder action-research

Abstract: *PRIA has pioneered the concept of Participatory Research (PR) in bringing about social change among the marginalised in India. For three decades, PRIA has not only built capacities of/trained grassroots development workers to incorporate the PR approach in their work, it has used the PR methodology in implementing its own projects.*

The objective of this paper is to illustrate the application of a gendered approach to using PR in some recent interventions of PRIA. How have the principles and methodology of PR been incorporated into project activities, and were there any PR outcomes in the project? How was people's knowledge and voice, especially those of women, valued? Did the project entail production of new knowledge, new learnings? Did local actors have a role in production of that knowledge? What use has been made of that knowledge and by whom?

The paper begins with a very brief overview of the PR approach and the potential outcomes of adopting this approach. The next section describes the PR methodology and suggestive gendered outcomes in four recent initiatives undertaken by PRIA. The last section summarises the PR outcomes from the four initiatives.

PRIA's projects are always premised on participatory principles; all or many stages of a project incorporate PR principles and methodologies in implementation. To appreciate the application of the PR approach and methods, we begin with a brief overview of PR, followed by a description of the initiative from the perspective of PR. Results are viewed as PR outcomes, which are summarised in the last section.

1. Participatory Research: A Brief Understanding

The essential premise of PR is recognition and utilisation of knowledge for purposes of transforming the relations of power in social systems. This perspective allows the knowledge production function to be carried out in 'engaged' stances – where learning about the dynamics of a social-political system (be it a community, an organisation, programme or region) is closely linked to bringing about changes in that system to achieve certain desirable public goods of equity, justice and peace. PR methodologies are thus used to both learn about realities and also transform the same towards such desirable public goods.

Another crucial aspect of PR is linking knowledge production with mobilisation – in terms of conscientisation, awareness raising, collectivisation, getting together to address a problem, with or without external help. There is a very close link between knowledge, learning and mobilisation to act to solve a problem.

PR methodologies essentially involve:

- Involvement in the process of research
- Respect for people's own capability and potential to produce knowledge and analyse it.
- Qualitative data collection and analysis, leading to planning and taking action. Existing problems can provide the initial motivation for engagement.
- Groups of people engaging together, most importantly in collective analysis of a given situation.
- Raising awareness among the people in the situation, who become more knowledgeable through their engagement. They become critically aware of their situation and possible ways to change that situation.

The application of PR methods can result in any or all of the following outcomes.

- *Systematising indigenous, local, experiential knowledge*, and bringing it to the attention of other stakeholders.
- *New knowledge is built on participants' existing knowledge*: What has been done with the new knowledge created? Have people/institutions been motivated to create and use the new knowledge to solve some concrete problems in the daily lives of communities?
- *It creates informed options*: The process of collectively understanding, analysing and interpreting the information collected provides many alternatives. Is the community now empowered to accept and reject options on an informed basis?
- *People learn to exercise control*: Has the community been energised to take responsibility for their own reality? Are they motivated to solve their own problems?

- *It becomes a collective process*: One of the elements of PR is people learn to come together, collectively seeking and analysing information. Many a time this forms the seed of a rudimentary people's organisation. Did the process initiate the process of organisation-building or strengthen existing organisations?

2. Giving Women a Voice in Maternal Health Planning at the Local Level

Nineteen-year-old Kavita, from Sandasar Gram Panchayat (in Govindgarh block), was in her third trimester of pregnancy. She felt faint and breathless, but continued with her household tasks. She was determined to finish them, even if her body was telling her she needed rest, to slow down. When a young woman, who had signed up to volunteer with the Apna Swasthya Apni Pehel program, visited Kavita's home, she found Kavita so pale and weak, that she immediately took her to see a doctor at the Community Health Centre (CHC) in Chomu. The doctor advised a blood transfusion, within the next day, as Kavita's haemoglobin level was dangerously low at 4 g/dl. On returning to Sandasar, the volunteer coordinated with the ASHA worker, asking her to book an ambulance for the next day. Kavita's family was counting their savings, to pay for the blood transfusion and the ambulance trip. The young volunteer, armed with information acquired when she attended a training organised by PRIA, informed them that under the government's public health program, Kavita was entitled to free blood transfusion and transportation; they didn't have to spend their savings. In fact, Kavita was also entitled to free delivery of her child, if she opted for an institutional delivery at the local health centre. The next day, Kavita, her mother-in-law, the volunteer and PRIA's field facilitator on the ground, accompanied her to the CHC for the blood transfusion. Over the next few weeks, the volunteer followed up with Kavita, ensuring she went for check-ups and never forgot to take the iron pills the doctor had prescribed. Within a month, Kavita's haemoglobin had climbed to 9 g/dl. A couple of months later, she gave birth to a healthy baby.

Kavita's is just one success story that resulted from the increase in community knowledge and coordination among community volunteers, health workers and panchayat representatives under the "Apna Swasthya Apni Pehel" project implemented across 104 gram panchayats in Rajasthan, India for three years between 2017 and 2020. The project strategy was based on PRIA's theory of change, of bridging the gap between a community's demand for services and the planning for quality, equitable services by institutions mandated to provide these services. In a clear departure from the conventional clinical approach to addressing reproductive health of women, the project addressed maternal health as a public health issue, focused on making public maternal health programs reach the last mile in an effective and accountable manner.

Maternal health is a complex and multi-layered issue, especially in a state like Rajasthan, where women are held back from exercising their social and political rights by a rigidly patriarchal society. Maternal mortality in Rajasthan remains well above the national average, even while there has been significant improvement in institutional delivery, access to Antenatal Care (ANC) services, and better nutritional services through anganwadis for pregnant and lactating mothers and adolescent girls in the state. Maternal mortality is very context-specific; for example, it is directly related to the prevalence of tuberculosis, malaria, an extended period of strenuous

physical work, early marriage and conception, delayed and unscientific abortion, etc. In Rajasthan, these causes are acute; there is high incidence of malaria and tuberculosis, widespread use of unhygienic cloths during menstruation leading to vaginal infection and multiple gynaecological diseases, etc.

A primary focus of the PR approach in the Apna Swasthya Apni Pehel initiative was on generating demand from women for improved maternal health services. PRIA's efforts of intensive community mobilisation process over three years helped in motivating women, to understand and take action to secure their health during pregnancy and after giving birth, and mobilising them to attend gram sabhas and make their voices heard.



Ratri choupals

A crucial step in mobilising women was to facilitate and rejuvenate Mahila Sabhas, or women-only meetings held prior to the main gram sabha.¹ These meetings were instrumental in giving women the freedom to speak and express their concerns without any cultural barriers and fear in their minds. Mahila Sabhas are one of the ways to initiate discussion and generate interest among women, regarding women's issues. Finding their voices is challenging but an important step in making women confident to voice their issues, not just amongst themselves but in public settings (such as a gram sabha meeting) as well.

Prenatal health check ups



Since women are busy during the day with household chores and working in farms, smaller meetings beginning at 7 pm with women from one village/cluster/hamlet were also organised. These meetings were called "Ratri Chaupals" (or night meetings). In a Ratri Chaupal, videos related to gram sabhas and maternal health issues were screened to sensitise the women. After the screening, women were divided in groups and participated in a social mapping exercise of their village. This helped them identify problems in their village and discuss solutions. These smaller meetings gave the women a space to voice their opinions with familiar others, and the confidence to

¹ A gram sabha is a constitutionally mandated village meeting, held to promote participatory planning and community decision making on developmental priorities.

attend the Mahila Sabha to speak in front of unfamiliar others from the wider gram panchayat.

PRIA mobilised community women through:

a) Home visits and informal meetings

Community volunteers in each gram panchayat (who were involved in project activities from the beginning) took the initiative to meet and interact with women to motivate them to attend the Mahila Sabha. Creating community volunteers was an important capacity building initiative which helped the local community take ownership for their own development and ensure sustainability of community goals.

b) Using the social capital of front line health workers to spread the word

The second approach used was engaging local health workers to spread the word. ASHA and anganwadi workers are great influences in a woman's life in rural India. Considering their social recognition and acceptance, they were requested to share information about Mahila Sabhas during home health checkups and with women who visited the primary health centre. Considerable time was spent on building trust with the frontline health workers and crafting convergence of health workers with the panchayat. This trust created the circumstance of engaging them to spread the word about Mahila Sabhas.

c) Engaging with the community, especially men, to become sensitive to women's issues

Along with women, men were also targeted to sensitise and orient them so that they could encourage other male members to support the idea, as well as support their wives, mothers, daughters, daughters-in-law, sisters, and other female relatives in exercising their political rights by attending Mahila Sabhas. Cluster level meetings helped mobilise male community representatives and community leaders to encourage women to attend the Mahila Sabhas. Such meetings were held in accessible, common spaces like the Panchayat Bhawan. Participatory activities such as role-play, screenings of learning videos, etc, were used to share information on what is a Mahila Sabha, its relevance for the

Engaging with men



Gram Panchayat Development Plan,² and why it was important that women's voices were also heard in the gram sabha.

d) Mass information sharing and communication

Intensive campaigning through public meetings and visits to individual households, and distribution of pamphlets and posters, helped in spreading the word.

Participatory Mahila Sabhas were an important mechanism to ensure that women can speak on issues close to their heart, and they had an impact on women's participation in local governance processes. The processes of engagement, mobilisation and organising, conducted regularly, involving community members from all walks of life, ensured the following outcomes:

- Women of reproductive age, and pregnant women gained new knowledge when they became aware of the causes of anemia and nutrition benefits of different foods. They learnt the importance of taking iron folic tablets that they can avail from the public health service.
- Women of reproductive age group became aware of their rights and entitlements regarding maternal health care services and were able to access these services.
- Participation of women in gram sabhas increased, on average, by 4% to 25% across the intervention panchayats.³
- Maternal health concerns were included in Gram Panchayat Development Plans. Some of the activities related to reproductive and maternal health that featured in the GPDs prepared under the initiative included awareness programs on nutrition and safe motherhood, sanitation facilities in secondary and senior secondary schools, health camps, and installation of incinerators for disposal of used sanitary pads in schools.
- Men and women of all communities, including marginalised, Scheduled Castes (SCs), Scheduled Tribes (STs) participated in gram sabhas to plan for maternal health services, and supported the health sub-committee of their respective gram panchayats in monitoring the delivery of health services.

When I understood that a Mahila Sabha is only for women, where we can put forward our concerns, our issues, I wanted to attend. I wanted to put forward my problems. Now I am confident, secure that I can raise my voice and will be heard. I will encourage every woman in my panchayat to attend Mahila Sabhas.
– Babli Bua, Kushalpur Village,
Banswara block, Rajasthan, India

² Gram Panchayat Development Plans (GPDs) prepared by each panchayat are presented and approved in a gram sabha.

³ Between the gram sabhas held on 15 August 2018 and 2 October 2018, women's participation increased from 36% to 41% in Govindgarh, and in Banswara from 21% to 49%.

3. *Raising Knowledge on Health and Safety Among Women Sanitation Workers*

PRIA implemented the Engaged Citizens Responsive City project (also known as “Strengthening Civil Society of the Urban Poor to Participate in Planning and Monitoring of Sanitation Services in Indian Cities”) between 2016 and 2020 in the cities of Ajmer (Rajasthan), Jhansi (Uttar Pradesh), and Muzaffarpur (Bihar). The overall objective of the project was to promote diversity and strengthen the capacity of civil society of the urban poor and municipal authorities in addressing the issue of access and provisioning of sanitation services to the urban poor in these three cities.

The project worked on the demand side by strengthening the leadership capacities of urban poor and ensuring their representation in the preparation and monitoring of inclusive city-wide sanitation plans. On the supply side, it strengthened the capacities of municipal authorities (departmental officials, mayors, elected councillors, etc) for inclusive and joint planning and monitoring of sanitation services. Other stakeholders who were engaged in building a multi-stakeholder coalition of citizens to influence sanitation planning and monitoring included middle-class residents, related government departments, traders and market associations, civil society, academia and the media.

The urban sanitation worker is at the frontline of keeping India’s cities clean. They sweep the roads, clean the public toilets and drains, collect and dispose the garbage. In the planning and development of sanitation services, the voice of the sanitation worker in building an inclusive sanitation value chain is rarely given space. For PRIA,

raising the voice of women sanitation workers as an important stakeholder in deciding sustainable sanitation services and practices in a city was key.

Women sanitation worker in Muzaffarpur



A participatory research among women sanitation workers was conducted in 2018 across the three project cities. The objective of the research was to explore the lives of the women sanitation workers and the overlapping identities they perform each day, the associated problems of dignity, and map the socio-politics of their existence. The primary research question, “What does it mean to be a woman sanitation worker in Ajmer, Jhansi and Muzaffarpur?”, was explored through the themes of gender, caste, geography and education. Learning about the daily lives and lived experiences of

women sanitation workers was intricately linked to understanding their “world of work”⁴.

Our sampling technique was purposive in nature. The research approach involved a mixture of participatory assessments of situations through a sociological lens and phenomenology involving 181 personal interviews, 14 focus group discussions (5 in Ajmer, 4 in Jhansi, 5 in Muzaffarpur), 10 shadowing exercises⁵ and 15 daily log interviews⁶ of women sanitation workers across the three cities. There were combinations of all types of workers (permanent, contractual and outsourced) as well as self-employed workers in the 110 women (30 each in Ajmer and Jhansi, and 50 in Muzaffarpur) who participated in the focus group discussions. In total, the research reached out to 206 women sanitation workers. Municipal officials, contractual employers, sanitation inspectors, ward inspectors, circle inspectors, ward councillors and trade union leaders were also interviewed. All responses were anonymised in the reporting, unless specific permission was given by the respondent.

We began with a broad set of questions through semi-structured questionnaires specific to personal interviews, focus group discussions and informal discussions. Throughout our research, we iteratively refined our questions based on emerging data through the narratives. We intended to describe the situation of women sanitation workers through their voices; thus their stories and quotes guided our research as well as our analysis.

Gendered analysis of the “world of work” of a woman sanitation worker revealed:

- Like most women in India, women sanitation workers also live in a society still mired in patriarchy, imposing the double burden of labour on women who have to work in order to survive.
- Most of them are employed as contractual and outsourced workers in the three cities of our study. Working as contractual workers reiterated experiences of fear, risk, insufficiency. Those employed on daily wages feared losing their jobs should they take a day off.
- Women sanitation workers have low to nil awareness levels about the protective laws for them. Not a single woman sanitation worker in Jhansi, for example, who participated in the study had any awareness of the laws and policies meant to protect them and their rights.
- The perennial association of sanitation work with a particular caste and their gender caused these women’s lived experiences to entail emotional trauma of social isolation, invisible citizenry and economic depression.

The unhappy kinship of gender, caste and occupation makes women sanitation workers the most vulnerable worker among all workers. The Swachh Bharat Mission (SBM) program sought to “empower” women by giving titles of the new household individual toilets built in the name of the woman of the household. But the lower caste woman sanitation worker who cleans these toilets, without proper gear, in fear of her livelihood, working in a physically and emotionally challenging workplace remains stuck in a cycle of rejection, invisibility, humiliation and sadness, divorced from the idea of building agency for change.

⁴ The International Labour Organization (ILO) uses the concept of “the world of work” to include the broader place of economic activities. The concept of the world of work helps capture paid productive work that does not take place within the traditional “public sphere” such as a factory or office.

⁵ Shadowing exercises refer to being a passive observer of daily routines and schedules of the people being studied/explored. It requires the researcher to melt into their daily activities like shadows and note the patterns and differences emerging out of the observations.

⁶ Daily logs are a compilation of accounts of the days of women sanitation workers. It is the account of each activity undertaken from the moment they rise until the moment they go to sleep to identify common trends and differences in the daily lives of women sanitation workers – the break up of their days based on working hours and domestic chores, etc.

The methodical measurement applied was a matrix analysis. For the purpose of this research, we were less concerned with generating quantified counts than with locating – through systematised reading and coding of transcripts – recurrent themes connected to the central triangle of caste, gender and vocation. Further, we were interested in the patterns of relationships that might surface, especially those between women and institutions and education and socio-economic pressures, under the broader axis of identity politics. An inductive and iterative research process was used in which our themes and categories of analysis were constantly refined by what we found emerging from the data.

Through understanding the politics and “world of work” that shape the lives of women sanitation workers, our participatory research raised a new discourse of caste and sanitation labour with reference to women sanitation workers. Dissemination of new knowledge generated from this participatory research served three broad purposes, i.e., awareness, mobilisation and action. By encouraging dialogue-centric problem analysis of the research findings with the broader community and multiple stakeholder groups, the new knowledge was utilised to advocate for action. In an attempt to include the voices of these women in policy making and action at all levels, the study findings were shared:

- In small group discussions with the women sanitation workers who participated in the research to raise their awareness on their rights and entitlements.
- In training programs, such as those on the process of home composting, during which women sanitation workers from different wards across Jhansi got an opportunity to get to know each other and share their stories.
- In public meetings and multi-stakeholder citizen dialogues in each city, information presented was used to exchange views on how citizens of a city can honour the work of sanitation workers. For example, a “toilet talk” was organised at a community toilet in Gulabbari area of Ajmer, with community members cleaning and decorating the community toilet premises. They thanked and honoured the sanitation workers in charge of cleaning and maintaining the community toilet, recognising the frontline services provided by sanitation workers long before the COVID pandemic that would grip their city a year later. After learning about the health hazards faced by sanitation workers in collecting and disposing garbage, the Ajmer Citizen Forum included the sanitation workers in ward 38 as stakeholders in their campaign to educate the ward’s citizens on the need for waste segregation at source.
- With the municipal corporation authorities in each city, to showcase the contribution and knowledge of sanitation workers in keeping a city clean. Sanitation workers were part of these sharing workshops. This gave the workers, especially the women sanitation workers, an opportunity to raise their issues like timely payment of their salaries, lack of safety equipment and temporary nature of their employment directly with the authorities. Municipalities sensitised to the needs to women sanitation workers, resulted in

Muzaffarpur Municipal Corporation setting up its Internal Committee as per the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, and the Jhansi Municipal Corporation conducting regular health check-ups for its women sanitation workers

- In structured workshops and seminars at the state level and national level to influence policy makers and government departments to re-evaluate their policies and schemes for sanitation workers to become gender inclusive.
- In the current age of digital revolution, social media was also used effectively for dissemination of the research to sensitise the middle classes and to impact change in valuing sanitation workers. A social media campaign on how women sanitation workers ensure the health of others, by compromising their own, and their stories as mothers, daughters and wives who have mouths to feed, bills to pay, children to educate and drunken husbands to bear was undertaken to change society's attitudes towards these women workers.

4. Women Domestic Workers Demand Safer Workplaces

Low income women domestic workers are some of the most vulnerable and exploited workers in India. Sexual harassment of women workers in myriad forms is pervasive in informal workplaces. It remains under reported and invisible. Vulnerability of women domestic workers result from low bargaining power, lack of financial literacy or access to institutional credit, low economic status, lack of knowledge about laws and schemes, lack of control over income, unequal gender relations, and lack of social security or welfare legislations.



Since 2016, PRIA, in collaboration with Martha Farrell Foundation, has been organising women domestic workers to increase their capacity for lobbying and advocacy to prevent sexual harassment in their workplace. “The Dignity of My Labour” project reached out to 1518 domestic workers in three districts of Faridabad, Gurugram and South-East Delhi over three years, training 24 domestic worker champions to lead the demand for effective grievance redressal from Local Committees (LCs) as per the legal mandate under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013. These domestic worker champions have involved multiple stakeholders, including civil society organisations and labour unions, to build a common platform to advocate for institutional and policy obligations towards women’s workplace safety in the informal sector.

The project used the combined strategies of awareness raising, collective action by multiple stakeholders, and multi-level advocacy to ensure safe and dignified workplaces for women workers in the informal sector, especially women domestic workers.

a) Raising awareness among women domestic workers

The lack of organisation, capacity, and support in the informal sector make the challenges women face doubly difficult. Sexual harassment of women informal workers in particular goes unreported. The lack of awareness of the procedures to be followed as per the SHW Act, 2013 is exacerbated by the ambiguities and the lack of understanding among the women of what constitutes sexual harassment. A daily life assessment of the domestic workers helped find out the struggles and challenges these women face in day to day life. The assessment also focused on understanding different forms of harassment and sexual harassment experienced by them at their workplace, public places and in their own homes

The project worked with women domestic workers to collectivise them, and strengthen their collectives through participatory processes. The processes to build awareness followed in each collective were organic, local and specific to the women's contexts. The women's perspectives on issues around sexual harassment were built through a series of discussions with them. Considerable amount of time was spent in listening to stories, and facilitating discussions on challenges faced and possible solutions. The process of building togetherness among the workers helped in creating a collective identity as domestic workers. The first group which was formed by the domestic workers in Gurugram named themselves "Ekta" (Unity).

A mapping exercise indicated how little awareness the women had about their settlement. They were unable to provide a description of the area surrounding their home and did not know the name of the locality their workplace was situated in. A transect walk exercise facilitated by the project team along with women from the community helped them get better acquainted with where they lived. Problem tree sessions let the women understand their problems and its root cause, following which a participatory analysis session was facilitated on the different issues that were reflected on the map. The women were also made aware of the SHW Act and redressal mechanisms as per the law.

The domestic workers conducted participatory safety audits of their journey to work and of their workplace. In doing so, the women were able to place specific incidents of

Participatory Safety Audit with women domestic workers in Gurgaon



harassment with particular locations in their workplace. The collectives soon came to be viewed by the domestic workers as safe spaces to discuss their issues and learn to find collective solutions.

b) Identifying domestic worker champions and supporting collective action

In the process of collective discussions, domestic worker champions were identified. These champions act as local leaders who support and sustain our work at the ground level. The champions are trained to work as community mobilisers and as a support system for other domestic workers in their neighbourhood, to build solidarity and togetherness.

The domestic workers champions were trained as action researchers in their own community. In the process they were exposed to new knowledge and methods of understanding sexual harassment at workplace and building consensus on how to deal with the issue. Trained in mobile based survey techniques, the champions conducted a participatory survey to find out the prevalence of sexual harassment among domestic workers in their neighbourhoods and their awareness of redressal mechanisms should they decide to file a complaint.

Supported by the champions, domestic workers in the three project sites conducted participatory safety assessments of the settlements where they lived and their journey to work, collecting stories and data on incidents of sexual harassment. They shared their data and analysis with other workers and stakeholders to initiate dialogue on the issue and to work on the problem collectively. Different groups took different routes to resolve the problems they had identified:

- The South East Delhi group organised a discussion in their local police station where they shared their participatory safety assessment map with the policemen, pointing out key unsafe areas and demanding the police patrol these areas more effectively.
- The Faridabad group wrote applications to the competent authority based on their assessment. They included other problems in the application like lack of access to subsidised rations and lack of sanitation in their settlements.
- The Ekta (Gurugram) group met the members of the Gurgaon District Local Committee and worked on collectivising more domestic workers to join their group.

c) Linkage building with multiple stakeholders

Discussions were initiated with civil society organisations working with domestic workers, domestic workers unions, trade unions, residents' welfare associations (RWA), police, women and child development department, and labour department in the three locations.

In the process of engaging stakeholders, the #DignityOfMyLabour campaign was launched. It is the middle class that is the largest employers of domestic workers (commonly called maids). Raising awareness among middle class and youth across India was a central goal of the campaign, and social media was the vehicle employed to engage with this audience. Vivid creatives, insightful content and a Tweet chat were used to share information. Celebrating International Domestic Workers' Day, panel discussions and street theatres performance sustained engagement on the issue.

Case of the Missing Local Committee
[Read the tale of how the search for the Local Committee of South East District](#)

If it took more than 6 months for a development practitioner who is well aware of the law and the system to locate a Local Committee in one district, can you imagine how difficult it will be for domestic workers or any informal sector worker who wants to file a complaint of sexual harassment with a Local Committee?

d) Building capacities of Local Committees

Early in the project, it was realised that requisite institutional mechanisms have not been put in place, and are not effective, in addressing the issue of sexual harassment for informal sector workers. The project focused on activating the institutional mechanism of the Local Committee (as per Sections 5 and 6 of the Sexual Harassment at Workplace Act 2013) in the three locations, and strengthening them to undertake their legally mandated roles.

With the help of information generated through the Right to Information Act, we learnt that the Local Committees in all the three districts have been constituted but there was no information available about the South East Delhi and Faridabad Committee members. Considerable effort was made to identify the members of the committee, contact them, motivate them to attend trainings, and build their capacities to function effectively. The South East Delhi Local Committee was reconstituted and trainings were organised for the members at different levels for effective implementation of the law.

A model was created with the support of Women and Child Development Department, Government of Delhi, where 600 frontline health workers were involved and trained to sensitise community women in their districts on the issue of sexual harassment at workplace.

e) Advocacy with institutions and government

The research the women domestic workers had conducted on their everyday experiences of sexual harassment was systematised to catalyse and impact state and national level policies, led by the domestic worker champions. The findings were shared with Local Committee members, district administrators, and national policy makers.

At the state level consultation, the domestic workers presented findings from their study to the Deputy Chief Minister of Delhi and pressed for proper implementation of SHW Act, 2013. This resulted in Local Committees being



set up in all 11 districts of Delhi. In 2019, Standard Operating Procedures based on the Act were prepared for all these Local Committees, to be rolled out by the Women and Child Department of Delhi government.

To multiply demands from women domestic workers, the domestic worker champions were supported to liaise with like-minded civil society organisations and trade unions. The multi-stakeholder platform brought together more than 80 domestic workers from across the country along with trade unions, civil society organisations working on women's rights, and gender equality activists for the first time on the issue of sexual harassment at the workplace of domestic workers. The domestic workers issued a National Call for Action asking for drafting of rules that would clearly define the mechanism which would ensure safe and dignified workplaces for them.

Learnings from the project have resulted in several knowledge products, in both English and Hindi, available in Open Access, which continue to be used for advocacy.

PRIA continues to support the domestic worker champions. During the lockdown imposed to tackle the COVID 19 pandemic, domestic worker champions in Gurugram undertook a participatory research, 'My Life as an Informal Migrant Worker during the COVID-19 Pandemic', to highlight the socio-economic and health impacts of COVID and the lockdown on their lives. PRIA supported synthesis and systematisation of their research findings, sharing it on social media along with their stories, documented in an anthology, Those Who Stayed. The women domestic workers used this data to prepare a manifesto of demands for safety in their workplace when the lockdown was lifted.

5. Young Girls Aspire to Complete Their Education and Start Working

Adolescent girls (15-18 years) in India are experiencing huge transitions. Their aspirations for and imagination of a better future have grown exponentially. But they face cultural, social and institutional constraints in fulfilling their aspirations. These constraints operate together, resulting in continued exclusion of young girls from

actively exercising leadership and making use of opportunities to fulfil their aspirations.

PRIA's "Go Girls Go" project, undertaken in collaboration with Martha Farrell Foundation, focuses on adolescent girls to strengthen their agency to change their lives. It also prepares boys to support these adolescent girls in realising their aspirations in an enabling, violence-free environment. The project was piloted in three government schools in Delhi in 2019-20.

The initiative began with rapport building with parents and principals, for without their support young girls could not have undertaken this journey of change. Principals from the three schools nominated 100 youth (boys and girls) to take part in the project. These students formed the Go Girls Go Youth Club in their schools. A baseline survey was conducted to determine the underlying attitudes and mind sets of these youth around the issues of gender and violence against women.

With the objective of promoting and building a comfortable relationship among the participants, initial communication and trust was established through sports-based activities to break the ice. It helped the youth get to know each other and the trainers.

The period of adolescence is one of huge physical, emotional and psychological changes. Youth club members participated in workshops to know themselves better and learn how to deal with these changes, managing their feelings and emotions, internal and external body changes (including menstruation and menstrual hygiene). These workshops enabled a positive mindset and attitudinal change among the adolescents.

Girls Matter!



It was important for both girls and boys to dismantle gender through understanding gender stereotyping, gender inequality, gender discrimination, the meaning of consent and how to apply it in everyday practice. Sessions were conducted separately with boys and girls so that they could openly participate in the discussions without hesitation.

Learning methods used

- Sports-based activities
- Arts based methods of story-telling
- Animated graphics of young adults depicting different bodily changes
- Gender relay
- Picture perception test

Sessions with girls on non-gendered career choices and articulating their aspirations helped in building their agency. The participatory workshops used an approach which begins with the girls understanding the circumstances of their own lives, and learning to commit to individual and social change. By the end of the workshops, girls were exhibiting an increase in self-confidence and were taking leadership to seek support from their teachers, principals, parents and peers to complete their

education and make a choice of career and livelihood. A variety of learning methods were experimented with.

By gaining new knowledge around gendered socialisation, adolescent health, and career options, young girls were influenced to aspire to “be more than” and “go beyond” what society tells them they can be, or have to be.

When schools closed due to the COVID 19 pandemic, in mid 2020 PRIA began connecting with members of the Go Girls Go Youth Clubs through digital learning platforms, engaging them in rooftop poetry sessions, which gave these young girls a chance to come out of their homes during the lockdown and express themselves freely in a safe space.

Sports based activities



6. Conclusion

The gendered PR approach adopted by PRIA builds on the premise Knowledge Is Power. The outcomes resulting from the work done in the four interventions described above are testament to the success of this approach.

Experiential knowledge is valued to raise awareness: In all four interventions, participants’ own knowledge based on their local reality was put centre-stage and was the starting point of generating awareness.

- Mahila Sabhas initiated discussions and generated interest among women, regarding women’s issues. Finding their voices is challenging but an important step in making women confident to voice their issues, not just amongst themselves but in public as well.
- Women of reproductive age group became aware of their rights and entitlements regarding maternal health care services and were able to access these services. Participation of women in gram sabhas increased, on average, by 4% to 25% across the intervention panchayats.
- Women sanitation workers in Ajmer, Jhansi and Muzaffarpur, who participated in the participatory research, became aware of their rights and entitlements as workers.
- ***Women domestic workers became aware of what constitutes sexual harassment and*** of the redressal mechanism should they decide to file a complaint. Domestic worker ***collectives soon came to be viewed by the***

women as safe spaces to discuss their issues and learn to find collective solutions.

- The participatory workshops with Go Girls Go Youth Clubs raised awareness on how to deal with changes during adolescence, and understanding gendered relations.

New knowledge is built on existing knowledge: Systematisation of survey results, research findings and secondary research creates new knowledge that is used for advocacy.

- Maternal health concerns were included in Gram Panchayat Development Plans.
- Participatory research with women sanitation workers raised a new discourse of caste and sanitation labour with reference to women sanitation workers.
- The mobile based participatory survey and participatory safety assessments conducted by the women domestic workers highlighted the prevalence of sexual harassment in their neighbourhoods and their homes.
- With the help of information generated through Right to Information Act, we learnt that the Local Committees in the three districts in which The Dignity of My Labour project was being implemented had been constituted.

It creates informed options: The process of collectively understanding, analysing and interpreting the information energises individuals and communities to take responsibility for their own reality and solve their own problems.

- Training programs on home composting gave women sanitation workers from different wards across Jhansi an opportunity to get to know each other and share their stories.
- The South East Delhi domestic workers group organised a discussion in their local police station where they shared their participatory safety assessment map with the policemen, pointing out key unsafe areas and demanding the police patrol these areas more effectively.
- The Faridabad group wrote applications to the competent authority based on their assessment. They included other problems in the application like lack of access to subsidised rations and lack of sanitation in their settlements.
- The Ekta (Gurugram) group met the members of the Gurgaon District Local Committee and worked on collectivising more domestic workers to join their group.
- The domestic workers collectively issued a National Call for Action asking for drafting of rules that would clearly define the mechanism which would ensure safe and dignified workplaces for them.
- The women domestic workers used the data of their participatory research conducted during the lockdown to prepare a manifesto of demands for safety in their workplace when the lockdown was lifted.

- Sessions in the Go Girls Go project with adolescent girls on non-gendered career choices and articulating their aspirations helped in building their agency. This resulted in the girls committing to individual change, exhibiting an increase in self-confidence, and taking leadership to seek support from their teachers, principals, parents and peers to complete their education and make a choice of career and livelihood.

Multiple stakeholders are capacitated to come together for change: One of the elements of PR is people learn to come together, to collectively seek change.

- Community volunteers were an important capacity building initiative in Rajasthan which helped the local community take ownership for their own development and ensure sustainability of community goals.
- Men and women of all communities, including marginalised, Scheduled Castes (SCs), and Scheduled Tribes (STs) participated in gram sabhas to plan for maternal health services, and supported the health sub-committee of their respective gram panchayats in monitoring the delivery of health services.
- Information presented in multi-stakeholder citizen dialogues in Ajmer, Jhansi and Muzaffarpur was used to exchange views on how citizens of a city can honour the work of sanitation workers.
- Ajmer Citizen Forum included the sanitation workers in ward 38 as stakeholders in their campaign to educate the ward's citizens on the need for waste segregation at source.
- Workshops with municipal authorities in which sanitation workers also participated gave the workers, especially the women sanitation workers, an opportunity to raise their issues like timely payment of their salaries, lack of safety equipment and temporary nature of their employment directly with the authorities.
- Municipalities sensitised to the needs to women sanitation workers, resulted in Muzaffarpur Municipal Corporation setting up its Internal Committee as per the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, and the Jhansi Municipal Corporation conducting regular health check-ups for its women sanitation workers.
- State level and national level consultations influenced policy makers and government departments to re-evaluate their policies and schemes for sanitation workers to become gender inclusive.
- The South East Delhi Local Committee was reconstituted and trainings were organised for the members at different levels for effective implementation of the law.
- Social media campaigns reached out to a larger middle class audience to trigger change in attitudes and improve the working conditions of women sanitation workers and women domestic workers.

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