



SANJAY CAMP

SURVEY REPORT

ECONOMICS DEPARTMENT

JESUS AND MARY COLLEGE,
UNIVERSITY OF DELHI

ACKNOWLEDGEMENT

We would like to express our gratitude towards Sr. (Dr.) Rosily T.L. , the Principal of Jesus and Mary College, Ms Shalini Srivastava in whose tenure as Head of Department the project was initiated, Ms Rajni Singh, the incumbent Head of Department for all the support and guidance, Ms Smita Gupta and Dr Daisy Sales for their invaluable suggestions and encouragement, Mr Naveen Thomas , Ms Megha Jacob, Ms Jasmin and Ms Akshara Awasthi for helping us to engage with the field and collect data.

We would like to thank TARSHI for their session on Reproductive and Sexual Health. The one day training workshop equipped us with the requisite inter personal skills and communication skills to conduct an outreach programme in the Sanjay Camp. The outreach programme for all the women residing in Sanjay Camp was not just engaging, informative , interactive but also entertaining because of the brilliant skits performed by Kahkasha- the Hindi Dramatics Society. The Research cell is grateful for all their efforts in making the programme a success.

Lastly, the project could never have taken off without the cooperation of the residents of Sanjay Camp who took time out from their schedules and participated in the personal interviews conducted by the students. In this regard, we deeply appreciate the constant support we received from Ms Girija (Anganwadi Worker), Ms Lalita, & Mr Basant in keeping us connected with the field.

PREFACE

The Research & Outreach Cell was established under the Department of Economics with the objective of training students in research concomitant with sensitizing them through outreach programmes for disadvantaged sections of the society. The idea for the establishment of the cell came from the students themselves who were keen on expanding their horizons into the real world. The quest to explore and understand the different issues that people in the country are facing and then trying to help through action oriented research is a step in the direction of developing qualities of empathy, effective communication, social responsibility and research ethics. Even though the cell is in its infant years, the students have diligently worked towards fulfilling the twin objectives of research and outreach. In this pursuit, they have engaged in data collection and analysis undertaken in Sanjay Camp, an urban slum located in Chanakyapuri. The survey collected information on living conditions, employment, educational qualification, demographics and health and sanitation conditions of the inhabitants. It also focused specifically on the situation of women in this urban slum. Upholding the principle of reciprocity, they also conducted a workshop as an outreach program to spread awareness amongst the women living in the slum about menstrual hygiene, family planning and legal rights. The cell donated books & stationery to the Anganwadi Centre located in the slum.

In the coming years, the cell intends on deepening the engagement with the field and expanding the scope of affirmative action in order to benefit as many people as possible while simultaneously striving for academic excellence.


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-MS AKANKSHA AGGARWAL
-MS G LAVANYA



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CHAPTER 1

OBJECTIVES

The Research & Outreach Cell of was established to fulfill the dual objectives of exposing students to field based research and to sensitize them through outreach programmes. To this end, the cell conducted a multi-faceted survey which aimed at determining various aspects of life of the residents of Sanjay Camp, an urban slum located in Chanakyapuri. The slum is one of the largest in Delhi. Its proximity to the college also facilitated continuous access and outreach to the field.

The team collected data at the household level using the technique of simple random selection. The sample households were chosen on a random basis whereby only the ones whose members were willing to co- operate and share the required data were surveyed by the team. In order to supplement this objective of data collection, the questionnaire prepared by the team aimed at exploring and understanding the socio- economic life of the residents in the project area through variables such as sex composition, age structure, educational status of the slum-dwellers, health, sanitation and medical facilities availed by the residents.

Secondly, it looked at the prevalent infrastructure such as water supply, common toilets, access to healthcare , schools, and transportation. Thirdly the questions were framed with regard to education of the children and to ascertain the time spent on physical activities and household chores. Fourthly, the survey aimed at getting a closer look on the lives of women in particular, for whom, an entire section of the questionnaire has been dedicated. It includes questions related to reproductive health and sanitary conditions of women.

Finally, based on the data analysis the objective was to conduct an outreach programme focusing on those aspects of living which showcased the weakest indicators. Hence the cell conducted a session on menstrual hygiene, awareness regarding contraceptives and legal rights since during the survey, it was observed that many women were unaware about these issues.

CHAPTER 2

SAMPLE DESIGN

The survey was conducted in Sanjay Camp , a cluster in the affluent Chanakyapuri area near the embassy of Nigeria and Rail Museum. It is one of the oldest 25 slum clusters in New Delhi district. The camp has a total of 7 Anganwadis and each Anganwadi consists of around 900 inhabitants. The area comprises people of different faiths and most of them are daily wagers. The number of households surveyed was 76 and the number of persons surveyed was 381. The students conducted a primary survey using the method of personal interviews. A questionnaire covering different aspects of living was prepared for this purpose.

The survey was conducted in four stages. In the first stage, the Anganwadi Centres in the slum area were visited to get a generic idea about the living conditions of its inhabitants. During our visits, what struck us most was how a large number of people were living in cramped and small spaces without proper hygiene and sanitation facilities. These observations were reflected in the questionnaire which was prepared to conduct personal interviews at the household level. The second stage included preparation of questionnaire, conducting a Pilot Survey to test the questionnaire and finally collection of data. Some of the factors that were focused on includes 'Health and Sanitation', 'Education level ' , 'Occupation and wages' , 'Assets they hold ' , 'Children Schooling' and 'Women related issues'. The questionnaire is divided into eight parts that included particulars of the field operator, identification of Anganwadi selected, basic details of the respondent (above 15 years), details of members of household, health related details of members in households , Children specific details per household (18 years and below), distribution of time, women-centric details and finally a section for additional remarks. The required number of samples was selected by the method of simple random sampling without replacement. The students of Jesus and Mary College were trained as field investigators for collection of data, under the guidance and supervision of the professors. In the third stage, the data collected was compiled and analyzed using statistical tools. In the fourth stage, an outreach programme was organized based on the analysis of summary statistics to spread more awareness on women-centric issues.

CHAPTER 3

CONCEPTS AND DEFINITIONS

The concepts and definitions of some of the important terms used in the survey and relevant to this report are discussed in the following paragraphs.

3.1 Age (Years):

The age in terms of completed years of the household members was recorded as on the date of survey. The objective of recording the age of each member was to know the proportion of individuals in different age groups (working, dependents etc).

3.2 Address:

The house number allotted to the respective households was recorded. The house number was recorded as per the information provided by the respondent. If a respondent was not aware of their house number, the number was noted down from the municipal allotted numbers, in front of their houses.

3.3 State of Origin:

The respective Indian states which the respondent belonged to from the time of their birth were considered. The objective of recording their respective states was to measure the number of migrants and natives in the area under the survey.

3.4 Year of Settlement:

The year in which the respondents settled in Sanjay Camp, New Delhi after moving from their respective states of origin was termed as the year of settlement for the respondents. If the respondent was not aware of the exact year, then the year was approximated to the closest possible year as informed by the respondents.

3.5 Household Head:

The individual in the household named as the household head according to the ration card of the respondent was recorded as the head of the household. However, if the respondent was not aware of the same, the eldest member was considered as the head of the household.

3.6 Number of Family Members:

The number of individuals residing in the house surveyed was recorded. The objective for the same was to collect information on the size of households in the area.

3.7 Caste:

Class,group or division within a society based on rank privilege or occupational status. The caste of the household head was recorded to find the proportion of individuals in different caste groups. It was categorized under SC, ST, OBC and General.

3.8 Religion:

It is defined as the fundamental set of faith and beliefs in God or Gods as in the case of Hindus, Muslims etc. The religion of the household head was recorded to know the proportion of people belonging to each religious community for the sample surveyed.

3.9 Sex:

The sex of each member (male/female/others) in the household was recorded in the survey. The objective for recording the sex of each member is to know the sex ratio of the population covered in the survey and to analyze how important variables vary across gender.

3.10 Marital Status:

Marital status of each member in the household has been recorded under married, unmarried, divorced, widowed and separated. The objective is to observe the proportion of married or unmarried individuals in different age groups.

3.11 Relationship with Head:

Class,group or division within a society based on rank privilege or occupational status. The caste of the household head was recorded to find the proportion of individuals in different caste groups. It was categorized under SC, ST, OBC and General.

3.12 Educational Qualification:

It refers to levels of successful completion of an educational program or a stage of program. The objective of recording the educational qualification was to study the proportion of people who have completed different levels. In the survey the educational level of a person is classified as literate and illiterate as explained below:

- **Literate:**

1. Primary: A person who has successfully completed either 1st, 2nd, 3rd, 4th or 5th standard of school education.
2. Upper Primary: A person who has successfully completed 6th, 7th, or 8th standard of school education.
3. Secondary: A person who has completed either 9th or 10th standard of school education.
4. Senior Secondary: A person who has either completed 11th or 12th standard.
5. Graduation & above : A person who has a graduation degree or any degree above graduation.

- **Illiterate:**

A person who cannot read and write.

3.13 Occupation:

It is recorded as a person's usual or principal work or business, especially as a means of earning a living. It records what each member of the family does in order to earn a living. The objective for the same has been to study about the areas where the workforce is employed and to know the proportion of daily wage unskilled workers, skilled workers and others.

3.14 Monthly Wages:

The monthly wage is defined as the wages or salaries earned by the working members of the household per month. The objective of recording the monthly income of the households was to determine the income category to which each household belongs.

3.15 Household Assets:

It includes land, livestock, vehicles and other assets owned by any one of the members of the household or all.

- **Land Owned by Household:** A piece of land was considered as “owned by the household” if it is a permanent heritable possession or any other piece of land bought by a member or members of the household. Classifications were made as yes, no or unknown.
- **Own House:** The proportion of individuals owning their own house was recorded. Rented accommodation or living quarters was not included under this subhead.
- **Vehicles:** It includes any mode of transportation that is owned by one of the members or all members. Example: bicycles, scooters, cars etc.
- **Livestock:** Farm animals owned by the members of the household in both the area of survey and those held at the respective state of origin. Example: cow, goat, buffalo etc.
- **Other Assets:** It includes all other things that are of economic value owned and used by the members of the household.

3.16 Height:

The height of each individual was recorded in inches. The objective for measuring the height of an individual was to analyse BMI and stunting.

3.17 Weight:

Weight refers to how heavy a person is or the measurement of the body mass of an individual. For the purpose of the survey it is measured in terms of kilograms. The objective for calculating the weight of an individual was to ascertain the body mass index (BMI) for individuals.

3.18 Frequency of Illness:

The frequency of illness of each individual member in the household in the last three months was recorded in the survey. It was classified as the following:

- **Never:** If the individual has not had any illness in the last three months.
- **Rarely:** If the person had illness twice or less.
- **Frequently:** If the person had been ill four times or less.
- **Always:** If the individual had been ill more than four times.

3.19 Cause of Illness:

The cause of illness (flu/fever/others) for each individual was recorded in the survey. The main objective for including the cause of illness is to understand the source of such an illness, for example: unsanitary living conditions, mosquitoes, non availability of potable drinking water etc.

3.20 Course of Treatment:

The course of treatment sought by households to remedy the illness was classified as follows:

- **Public:** Government hospitals and primary health care centres (PHCs).
- **Private:** Private hospitals, visits to private clinics etc.
- **Self-Treated:** If the individual does not avail public or private healthcare facilities and treated themselves with traditional medicines.

3.21 Cost of Treatment:

The cost of treatment per month including consultation fee, medicine cost etc was included under the total cost spent on treatment for the respective individuals.

3.22 Health Insurance:

It refers to insurance taken to cover the cost of medical care. Any health insurance that the individual had was recorded. The objective was to ascertain the proportion of individuals who took advantage of government provided insurance facilities.

3.23 Access to Toilet:

Easy availability of specific room or facility to urinate and defecate. It was classified as common washroom and toilets at home. This was observed to analyse whether people have proper availability of toilets and identify the proportion of people practicing open defecation.

- **Common Washroom:** Toilets which are situated outside the houses which can be used by all the inhabitants residing, built by the local government.
- **Toilets at Home:** Toilets which are situated inside the houses for use by members of that household only was classified under this.

3.24 Access to Regular Water:

The objective was to analyze the level of access to regular water supply to the households for both drinking and sanitary purposes. Availability of regular water supply in the household was classified under “sometimes” and “always” as follows:

- **Sometimes:** water supply is available only for a certain period of time. For example, one hour in the morning and evening.
- **Always:** water supply is available 24/7.

3.25 Name of the School:

Respective names of the school both public and private in which the children from the household are enrolled and pursuing their education were recorded.

3.26 Distance from the School:

Distance between the school and the residence of the school-going children was recorded in kilometers. The objective of recording the distance from school is to determine the time children spend travelling back and forth.

3.27 Medium of Instruction in School:

The medium of school or the language used as the primary source of communication; English or Hindi or any other language of the school in which the student is enrolled was recorded. The objective is to look at the most common medium of education.

3.28 Mode of Commute:

The mode of transport used by children to go to schools was broadly classified into public and private. It was further sub classified as bus, auto, walking and van. The objective is to determine the most used type of transport by children.

3.29 Class:

It is recorded as the grade in which the children of the household are currently enrolled in.

3.30 Weak Subject:

The subject/subjects which children find difficult to understand were recorded in the survey. The objective further been to identify those subjects which are common across the sample which can open scope for positive intervention regarding these aspects.

3.31 Distribution of Time of Household Members:

- **Hours Spent on Household Chores:**The hours spent on household work in a day was recorded for all the members of the family.
- **Hours Spent on Collecting Water:**The hours spent on collecting water from the tanker or other sources by each member in the household in a day was recorded.

These two tasks were chosen as these consume a considerable amount of time of the household members as pointed out by women in the pilot survey and also to know the involvement of all family members to these tasks which are primarily considered as the task done by the women in the household.

3.32 Distribution of Time of School Going Children:

- **Hours Spent on Tuitions:** The hours spent by school going children on tuitions in a week were recorded. The hours spent for self-study is not included here.
- **Hours Spent Studying:** The hours spent by school going children studying at home with or without the help of household members in a day was recorded. Hours spent on tuitions was not included here.
- **Hours Spent Helping Parents:** The hours spent by school going children in helping their parents at the place of work and also household chores were recorded. The objective is to determine the number of hours spent by children helping parents at home or their workplace.
- **Hours Spent on Outdoor Activities:** The hours spent on outdoor games and activities in a day was recorded. The objective is to determine the number of hours spent by children on outdoor activities like playing a sport or any leisure activity.

3.33 Women-Centric Details:

- **Period Products:** The type of period products used by women were specified under sanitary napkins, cloth or others. The objective of collecting information on the variable is to understand the most used period products by women.
 - **Brand of Sanitary Napkins:** If chosen pads under period products, the women were then asked regarding the brand of sanitary napkins used by them, for example, Stayfree, Whisper etc. This data is collected to understand which brand is mostly preferred by women in terms of cost efficiency and comfort.
 - **Availability of Napkins:** This variable is collected to understand the accessibility of sanitary pads nearby the camp.
 - **Frequency of Use of Sanitary Napkins:** Information on duration for which a woman uses sanitary napkins was collected. This data is collected to record the regularity or irregularity of usage of napkins, cloth and other period products.
-

3.34 Pregnant/ Lactating Mother:

If the woman been interviewed is pregnant or lactating then this variable is marked as 'Yes' and if not, it was marked as 'No'. This variable is collected to understand how anganwadi center meets the needs of pregnant/lactating women.

3.35 Care Taken by Anganwadi Centre:

Work done by the Anganwadi Centre includes ensuring children under five come for regular classes at the center, conducting women-oriented workshops and holding regular counselling sessions. The respondents were asked if the Anganwadi Centre is helping households with respect to the same.

3.36 Awareness on Contraceptives:

Women were asked questions on whether or not they were aware about contraceptives and it's usage. Those who were aware were marked with a 'Yes', while those who were not aware were marked with a 'No'. The information is collected to determine the percentage of women aware of the usage of contraceptives.

3.37 Types of Contraceptives:

Information on the type of contraceptives used by men & women was sought to determine the most preferred type of contraceptives. Type of contraceptives been used included condoms, pills, surgical methods etc.

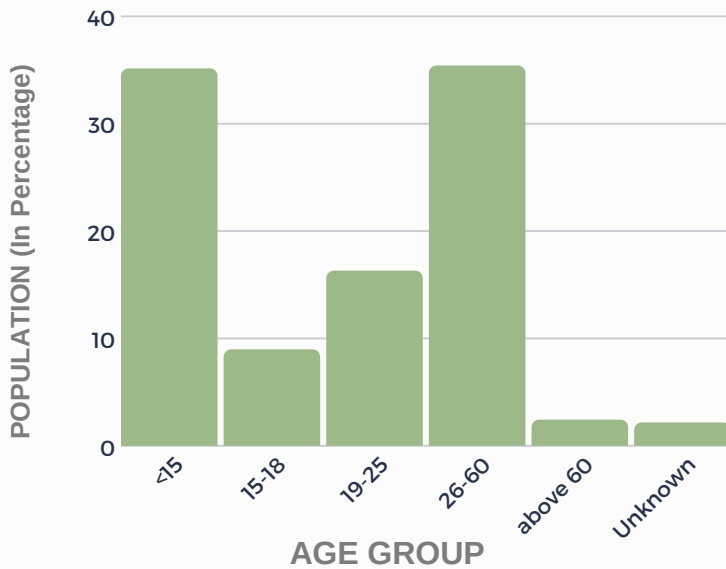
3.38 Reason for contraceptives:

The reason for choosing a particular type of contraceptive was sought from the respondents.

SUMMARY OF FINDINGS

CHAPTER 4

DEMOGRAPHICS



STATEMENT 4.1

The children and young adolescent population (under 18 years old) is 43.97%, the working-age population (18-60 years) is 51.57% and the elderly population (above 60 years) is 2.35%. This indicates a high working-age population and a dependency ratio, that is, ratio of dependent population (young and old) to the working-age population (18-60 years) of about 89.81 dependents per 100 people of working-age.

AGE DISTRIBUTION OF THE RESIDENTS

Age Group	<15	15-18	19-25	26-60	60<	Unknown
Percentage of Residents	35.07	8.9	16.23	35.34	2.35	2.09

STATEMENT 4.2

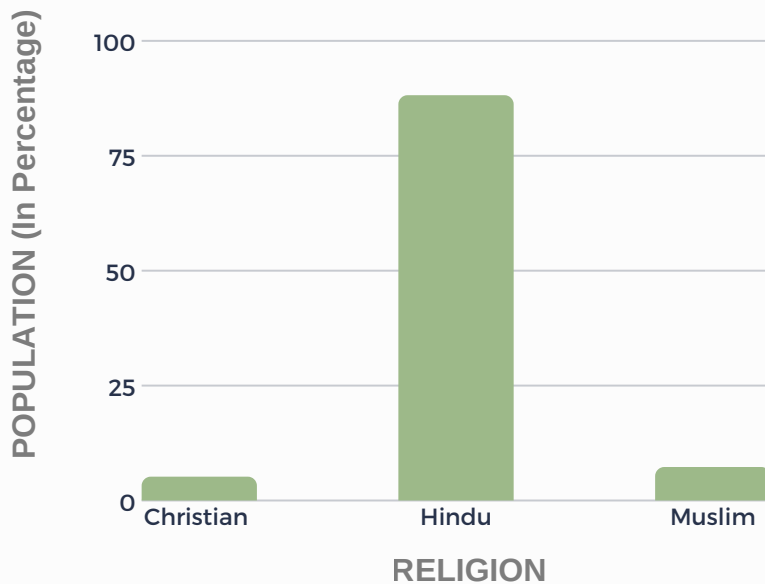
The distribution of population in terms of gender depicts an equal distribution, however parameters like equal opportunities, safe home environment etc have to be evaluated to assert that no gender-based discrimination exists within the surveyed area. Also, the households were majorly headed by men (83%) in contrast to women (17%).

STATEMENT 4.3

The Table below depicts the marital status of men (above age 21) and women (above the age 18) of the area.

MARTIAL STATUS OF THE RESIDENTS

Martial Status	Females (%)	Males (%)
Married	71.93	76.77
Unmarried	14.91	19.19
Divorced	2.63	0.00
Separated	2.63	1.01
Widow	7.89	3.03



STATEMENT 4.4

This states that about 87.96% of the residents follow Hinduism, followed by Islam (7.07%) and Christianity (4.97%).

STATEMENT 4.5

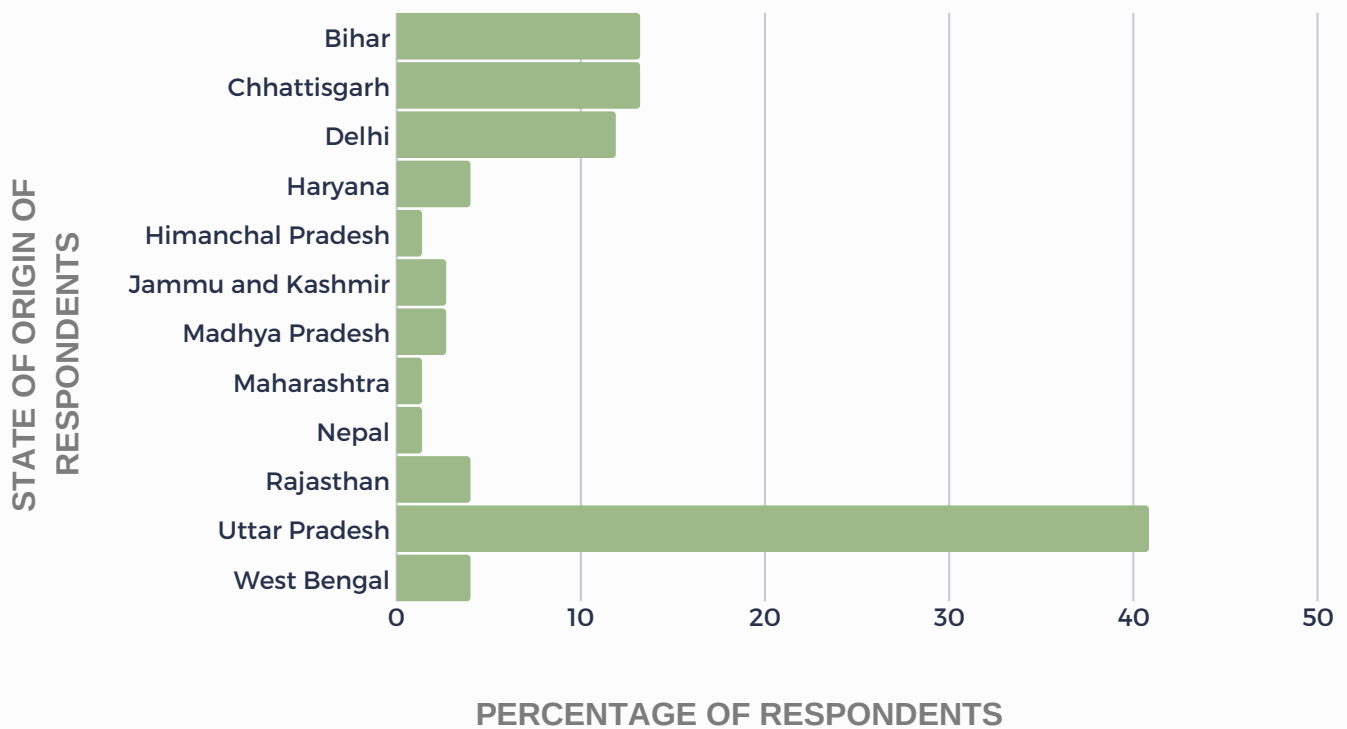
This states that 40% of the population belongs to Schedule Caste, 17% belongs to General category, 5% belongs to Scheduled Tribe and it is surprising that 38% of the residents are unaware of their caste.

STATEMENT 4.6

The table below indicates that the respondents have migrated mostly from boundary sharing states of Uttar Pradesh and Haryana (44.74%) followed by farther states of Bihar (13.15%), Chhattisgarh (13.15%), Rajasthan (3.94%), West Bengal (3.94%), Jammu and Kashmir (2.63%), Madhya Pradesh (2.63%), Himachal Pradesh (1.31%) and Maharashtra (1.31%). Further, around 1.31% of respondents migrated from Nepal.

STATE OF ORIGIN OF RESPONDENTS

State of Origin	Percentage of Respondents
Bihar	13.16
Chhattisgarh	13.16
Delhi	11.84
Haryana	3.95
Himanchal Pradesh	1.32
Jammu and Kashmir	2.63
Madhya Pradesh	2.63
Maharashtra	1.32
Nepal	1.32
Rajasthan	3.95
Uttar Pradesh	40.79
West Bengal	3.95



STATEMENT 4.7

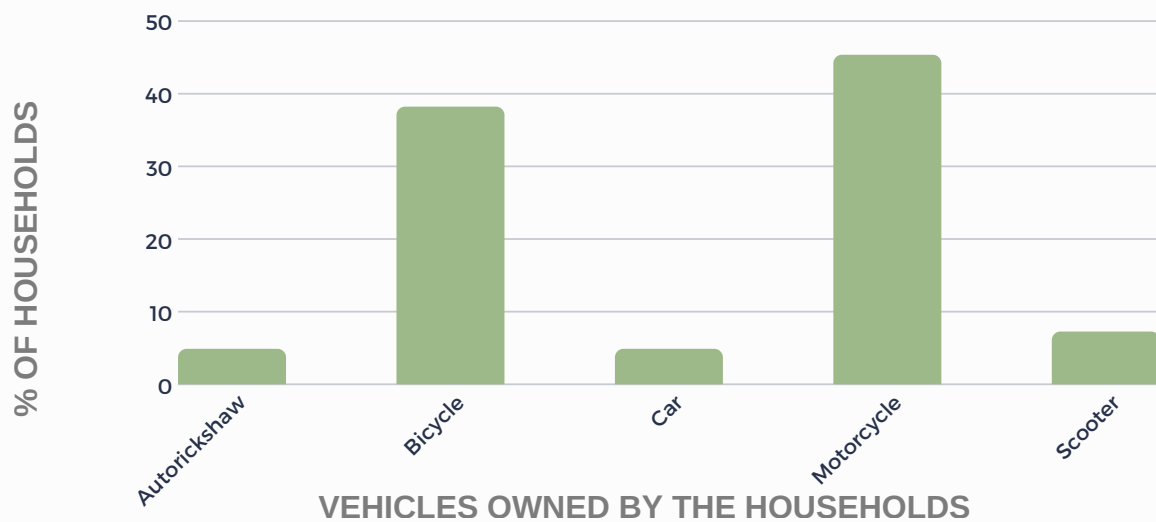
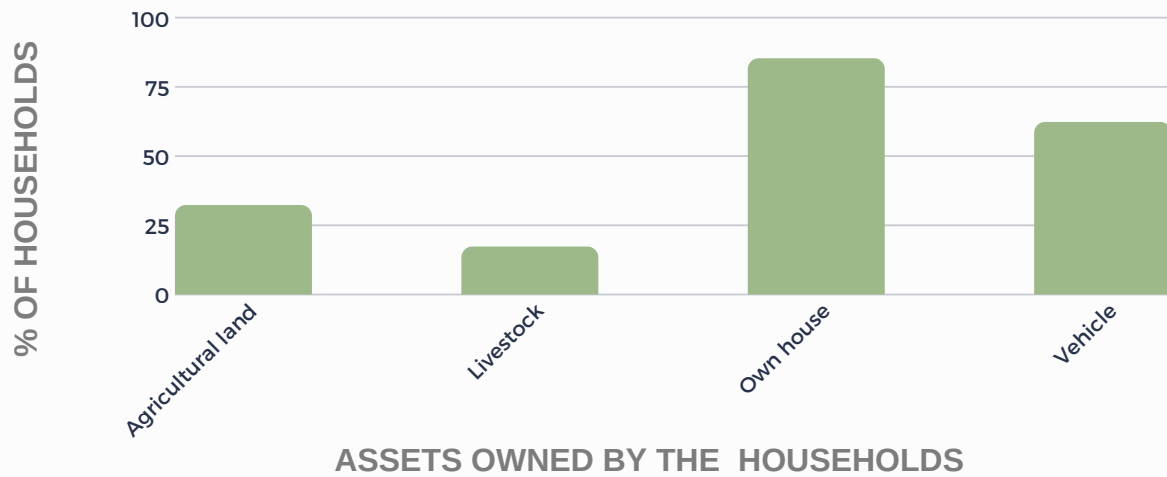
13.12% of the residents are homemakers and most of the workers in the colony are dependent on the services sector (97.27%) for employment, followed by manufacturing (1.82%) and agriculture (0.91%). Services is the key driver of employment with most people employed as drivers, gardeners, housekeeping and construction workers.

OCCUPATION STRUCTURE OF THE POPULATION

Occupation	Females (%)	Males (%)	Total (%)
Agriculture	0	1.2	0.91
Manufacture	3.7	1.2	1.82
Services (including Construction)	96.3	97.59	97.27

STATEMENT 4.8

The graph below shows the distribution of assets owned by the households surveyed. A huge 85% of the households own a house and 62% own vehicles too. Motorcycle is the most owned vehicle (45.24%) followed by bicycle (38.10%). Other vehicles owned include auto rickshaw, car and vendor cycle. Agricultural land and livestock is owned by 32% and 17% of the households respectively.



STATEMENT 4.9

The table below shows that the average monthly household income calculated as ratio sum total of household income and total number of households is around Rs. 13,196. The maximum household income is Rs. 62,000 while about 6.58% of the households have no monthly income.

INCOME DISTRIBUTION OF THE HOUSEHOLDS

Income Levels	Percentage of Households
<5000	9.21
5001-10000	31.58
10001-15000	28.95
15001-20000	9.21
20001-25000	6.58
25001-30000	5.26
30001-35000	1.32
35001<	1.32

CHAPTER 5

EDUCATION

STATEMENT 5.1

The table shows that out of the total number of students surveyed in the slum about 52% are females as against 48% comprising of males. The equal access to education irrespective of gender can be perceived as a progressive step.

GENDER DISTRIBUTION OF STUDENTS

Gender	Percentage of Students
Female	52
Male	48

STATEMENT 5.2

The following table depicts the educational qualifications of the people surveyed. It shows the educational qualifications of the people surveyed. It shows a significant fall in educational qualifications after grade 10. Also illiteracy rate was found higher in females than males. Of the total 71 illiterate people, 29.58% were males and 70.42% were females..

EDUCATIONAL QUALIFICATIONS OF LITERATE RESIDENTS (Above 21)

Grades	Males (%)	Females (%)
1st-5th	27	37
6th-10th	54	46
11th-12th	9	12
Graduation	10	5

STATEMENT 5.3

The following table shows the distribution of average minutes spent on studies by children in various levels of education. We observe that females are spending more time on self study than males. Further there is an increasing trend of hours spent on self study with the education level of the student for both males and females.

GRADE-WISE DISTRIBUTION OF TIME SPENT ON TUITION AND SELF STUDY

Grades	Gender	Gender-wise Percentage of Children	Tuitions (min. per week)	Self Study (min. per week)
1st-5th	Males	41	170	210
	Females	29	87.22	465.64
6th-10th	Males	56	114.5	411.25
	Females	41	82.86	863.31
11th-12th	Males	3	0	840
	Females	11	108	1435

STATEMENT 5.4

The table below shows the time spent by children on household chores and outdoor activities. It was found that on an average females spend more time on household chores than males and males spend more time in outdoor activities than females. It can be observed that the gender wise difference in time spent on household chores is much larger compared to difference in time spent on outdoor activities.

GENDER DISTRIBUTION OF HOURS SPENT ON HOUSEHOLD CHORES AND OUTDOOR ACTIVITIES

Gender	Minutes spent per week on household chores	Minutes spent per week on outdoor activities
Female	427.8	879.06
Males	62.4	976.92

STATEMENT 5.5

It was found from the survey that a notable portion of the students are seeking education from public schools rather than private schools which corresponds to about 86%. There is also a skewed picture within this finding wherein more boys are increasingly enrolled in private schools than girls which indicates that parents are more willing to spend on the education of their son. Out of the total students 9% boys and 5% girls are enrolled in private schools,

DISTRIBUTION OF STUDENTS BY TYPE OF SCHOOL

Gender	Public School (%)	Private School (%)
Female	49	5
Male	37	9

STATEMENT 5.6

The table depicts the data on the mode of commutation used by students. Out of the total students, 77% of them walked to their schools, some of them being accompanied by their parents. This is largely because the average distance of the schools is 2.09 km. This shows that a majority of them incurred little expense on transportation. Other 10% use private vehicles, 4% use public transportation and 3% use both interchangeably.

MODE OF COMMUTE OF STUDENTS

Mode of Commutation	Percentage of Students
Walking	77
Private Vehicle	10
Public Transportation	4
All	3

STATEMENT 5.7

Out of the total students surveyed, about 42% of them are found to be weak in the English subject which is followed by Mathematics (20%), Hindi (14%) and Science (6%).

STATEMENT 5.8

About 54% students study in Hindi medium schools and 46% students study in English medium schools. The reason could be that most of the students go to government schools where Hindi is the medium of instruction.

STATEMENT 5.9

Around 77% of the people surveyed were found to be literate. Out of the 23% illiterate people, a large proportion are females. A major proportion of the illiterate people are homemakers and unemployed and the remaining few work as daily wage labourers.

CHAPTER 6

HEALTH AND SANITATION

STATEMENT 6.1

The table depicts that out of the total number of people surveyed in the slum, about 67% of the people seek subsidized treatment from public hospitals. It was found that low household incomes across respondents force them to get treatment from public hospitals.

COURSE OF TREATMENT BY RESPONDENTS

Treated By	Percentage of People
Public Hospital	67
Private Hospital	28
Self-treated	3
Both Public and Private	1

STATEMENT 6.2

Out of the total number of people surveyed, it was found that around 22% of people frequently suffered from illness since last 3 months (as on the date of survey). Those suffering rarely were usually suffering from fever. The out-of-pocket expenses varied from Rs.200 to Rs.1000, depending on the cause of illness for those who were always or frequently ill. These expenditures include consultation fee, medicines, MRI, etc.

FREQUENCY OF ILLNESS

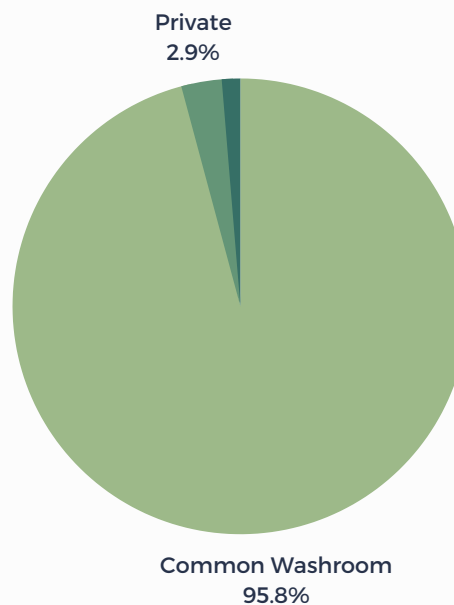
Frequency of Illness	Percentage of People Suffering	Cause of Illness
Always	3.36	Old age ailments, disabilities since childhood, diabetes
Frequently	22.02	Flu, headache
Never or rarely	74.61	Fever, cough, cold

STATEMENT 6.3

Regarding health insurance, out of total households surveyed, it was found that only 1% of the households were covered under Health Insurance. This was due to the fact that most of the respondents work in the informal sector where employee benefits like insurance are rarely offered. Also, the dwellers living in the slum are not able to pay the premium amount of the insurance, even if they had taken the insurance and hence after sometime, that insurance becomes null and void.

STATEMENT 6.4

It was found that a majority of dwellers were using common washrooms installed at the periphery of the slum. Unsurprisingly, only 2.9% percent of the slum residents had toilets built in their homes, justifying the high reliance on the common washroom and there were about 1.31% of people who were using both, the common washroom and the washroom built at their homes. None of the dwellers reported open defecation in the area. As far as sanitation is concerned, the slum suffers from the problem of open sewers, along with stinky and dirty lanes.



ACCESS TO TOILETS

STATEMENT 6.5

BMI (Body Mass Index) is a measurement of body fat based on height and weight that applies to both men and women between the ages of 18 and 65 years. BMI can be used to indicate if a person is overweight, obese, underweight or normal. The data in the sample paints a certain picture regarding BMI (as per WHO standards) which can be witnessed as follows:

BMI FOR SURVEY SAMPLE

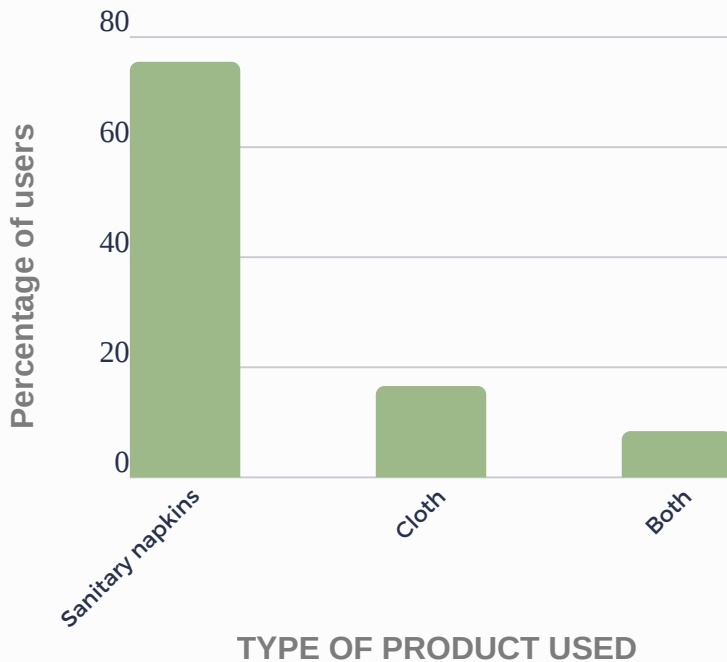
Classification	BMI	Percentage of People
Normal	18.5 -25	62.5
Above Normal (overweight)	25 - 30	19.64
Below Normal (thin)	16 -18.5	8.93
Severe Thinness	<16	8.93
Obese	>30	0

Through this, it can be inferred that:

- majority of the sample lies within the normal range of BMI (62.5%).
- Nearly 9% of the sample individuals lie below the normal range and are considered to be 'thin'.
- Nearly 9% of the sample individuals lie under the 'severe thinness' category.
- 19.64% of the sample individuals are overweight, however, no cases of obesity were found.
-

CHAPTER 7

WOMEN HEALTH AND SANITATION



STATEMENT 7.1

The distribution of products used by the respondents during menstruation is given in the adjacent graph. It tells that a majority of women use sanitary napkins, while some use cloth and still others use both. Some constraints behind the use of sanitary napkins were found to be its high cost, concerns regarding comfort level, social stigma attached to using sanitary napkins instead of traditional options like cloth and a reluctance to break away from the habit of using cloth.

STATEMENT 7.2

In the survey, it was found that most respondents feel that sanitary napkins are easily available. This easy availability of sanitary napkins might have contributed to its use by a large proportion of respondents.

STATEMENT 7.3

The table shows the respondents' answer upon being asked whether they are aware about contraceptives. Only about 52% of women surveyed, responded in the affirmative, while approximately 48% were unsure or ignorant about the concept and the methods of contraception.

COGNIZANCE ABOUT EXISTENCE OF CONTRACEPTIVES AMONG WOMEN

Response	Percentage of Women
Yes	51.61
No	48.39

STATEMENT 7.4

The table reveals the details about the type of contraceptives being used by the respondents. This survey-question's response reflects and corresponds to the results of the preceding statistic. Out of the total respondents, 8.06% of the women are on birth pill, the same proportion of women use condoms, while a minute 1.61% have a 'Copper-T', another 1.61% had been injected contraceptives and 6.45% of the women had a sterilization procedure done. It was observed that 25.82% of the women do not use any contraceptives despite being aware of them. According to the dialogue the field reporters had with the women surveyed, it can be deduced that this dismal figure can be attributed to the lack of access to contraceptive among women in the slum. Anecdotal accounts further reveal that many women did not have the agency or decision-making power over their spouses to insist on the use of contraceptives.

TYPE OF CONTRACEPTIVE USED BY WOMEN

Types of Contraceptives Used	Percentage of Women
Birth Pill	8.06
Condom	8.06
Copper-T	1.61
Injection	1.61
Operation (Females)	6.45

CHAPTER 8

WORKSHOP ON REPRODUCTIVE & SEXUAL HEALTH

On the brisk Saturday morning of August 10, 2019, 20 students from the Research Cell of the Economics Department arrived at the Jesus and Mary College premises to participate in a day-long workshop conducted by TARSHI, an NGO based in New Delhi, founded in 1996. The workshop was a key part of the Research Cell's action-oriented research which aims to train students to conduct independent research and, in the process, reach out to the disadvantaged.

The workshop aimed at educating the students about sexual and reproductive health, and the ethics of conducting a session on sexuality related issues, in communities that they engage with, in the course of their research. The session was interspersed with informative presentations, interactive exercises and engaging discussions.

The workshop commenced with an ice-breaking session to build a comfortable atmosphere for the participants. This correspondingly highlighted the importance of such sessions in building a rapport with the participants while conducting workshops. The students were advised to make use of such techniques themselves, in the capacity of trainers. TARSHI also introduced the concepts of Safe, Inclusive, Sexuality/Self Affirming (SISA) spaces and Sexual and Reproductive Health and Rights (SRHR).

This was followed by a detailed discourse on the distinction between gender, sex and sexuality to elucidate these concepts and enable the students to have a coherent understanding of them. The firm knowledge of these concepts would also act as a prerequisite for the students when they conduct similar workshops. A discussion on sexual and reproductive physiology was held which provided the students a lot of information about reproductive health and the available forms of contraceptives. This would help the students create awareness about the types, use and benefit of contraceptives.

The students were then enlightened about training ethics which will allow them to discharge their responsibilities in the capacity of trainers. Anonymity, beneficence, competence, confidentiality, informed consent, non-exploitation, non-maleficence and

protections of rights were some of the ethical principles discussed during the session. The students were then up skilled by informing them about some tips that could come handy for them while conducting informative and awareness sessions in the community. The workshop concluded with a feedback session, where the trainees had to fill out a questionnaire.

The key takeaways from the workshop, by the participants include;

1. The primordium of the first half of the session emphasized on laying a distinction between gender, sex and sexuality, paving way for an exhaustive discourse on the technical, vernacular as well as social definitions of the terms.

The intricacies of the matter were a revelation for a quiet a few of us, and exposed us to new perspectives and ideas, that we were prior, unaware of. This exposure to such novel information also conveyed to us, the importance of being open minded and non-judgmental.

2. The individuals from TARSHI highlighted how trainers should be equipped with extensive knowledge about the issues that they are conducting workshops on.

3. We also learned that theoretical knowledge should be paired with communication skills required to interact with trainees. For instance, one should've the ability to identify the temperament of the attendees and adapt accordingly with apropos exercises.

4. We learnt to be optimistic about the end result of our workshops and action plans. We understood that we are not going in with the objective to alter or invalidate people's current beliefs or decisions but rather to provide them with complete and correct information, so they can make cognizant choices, on their own accord.



CHAPTER 9

OUTREACH PROGRAM

9.1 Introduction and Aim of the Workshop

Having conducted a survey in the Sanjay Camp previous year, the Research Cell of Economic Department, JMC observed that a substantial proportion of the women interviewed, used cloth instead of pads during menstruation and most were unaware or ignorant about the importance of contraceptives. Thus, an outreach programme was organized for girls and women of Sanjay Camp to spread awareness about menstrual hygiene, contraceptives and various laws through interesting skits, music and talks.

In order to equip ourselves with the necessary tools to conduct such an outreach programme, the research cell participated in a day-long workshop conducted by TARSHI, an NGO based in New Delhi. TARSHI (Talking About Reproductive and Sexual Health Issues) is an NGO based in East of Kailash, New Delhi. It works towards expanding sexual and reproductive choices in people's lives in an effort to enable them to enjoy freedom from fear, infection and reproductive and sexual health problems. TARSHI's work on sexuality is from an affirmative and rights-based perspective, a fresh change from perspectives that often restrict sexuality within a disease prevention, violence against women, or sexual minorities framework.

Based on the knowledge gained from the TARSHI workshop and in light of our specific target audience we designed our outreach programme with an aim to create a safe environment where the women could not only learn but also share their thoughts and experiences and leave with a good understanding of the numerous options available to them with respect to menstrual products and hygiene measures.

9.2 Preparation and Arrangement of the Workshop

In order to spread our message effectively, a team of 8-10 students formed the logistics and support group to finalise the target audience and search for a venue that would fulfil our purpose. Since the field survey was conducted in Sanjay Camp in Chanakyapuri, naturally our intended population for the outreach programme was going to be the women from this very slum. We chose to invite young girls in their teens and all women aged beyond that, since the topics of interest were of vital importance to girls approaching adulthood and to create awareness among middle-aged women as well. The team was continuously in contact with the Angadwadi Centre worker to seek help in informing women about the programme and to take into account their suggestions for the topics they wanted the session to revolve around.

The chosen venue was an open space with a low periphery, enough to accommodate a group of 50-60 women. For seating purposes, the team arranged mats for younger women and chairs for the elderly. Pamphlets highlighting the topics addressed such as - safe contraceptive methods, importance of menstrual hygiene, legal rights to protect against sexual harassment and helpline numbers for women including other major key takeaways from the programme post the session. Refreshments were arranged for each and everyone in the audience. The entire cell jointly contributed in collecting storybooks, drawing books and other stationery items for the children of the Angadwadi Centre.

9.3 Topics covered in the workshop and Sequence of Events

The programme began with a thought-provoking play by Kahkasha addressing the stigma associated with menstruation to facilitate open conversation with young girls on what is a natural biological process. The skit highlighted the need to shift from outdated practices towards more sanitary methods. According to the results of the survey, there was a lack of awareness among the females about the use of sanitary napkins instead of cloth. They were completely unaware about the use of contraceptives and its various types as a means of birth control and also about their rights regarding abortion and sexual harassment. They were informed about the various products that can be used while menstruating, safety measures to be taken to ensure hygiene and prevent infections.

The students spoke about the various types of contraceptive methods to avoid pregnancy, their advantages and disadvantages and illustrated the same using charts and posters. In addition, a short dialogue between a husband and wife discussing contraception was enacted to further ingrain the importance of the subject and to encourage open conversations about these topics.

In an effort to make mothers more aware of the importance of protecting their young children from sexual predators, students spoke about ways to explain the concept of "good touch- bad touch" accompanied by a short demonstration.

Lastly, the students cleared misconceptions about sexual harassment, addressed the stigma attached to it and focused on making them understand the precautionary measures to be taken in such circumstances. If we are aware of our rights, understand the procedures and take precautions, the trauma faced by a victim during investigation and trial of a rape case can be reduced. This was followed by an interactive session where members of the community clarified their doubts regarding the legal process and shared their personal stories of seeking legal redressal.

In addition, pamphlets were distributed containing helpline numbers and outlining women's legal rights. After the vote of thanks by the students, a token of appreciation was given to the Anganwaadi workers. The programme ended with the uplifting song "Bekhauf" performed by the students and refreshments being distributed to the participating residents.

9.4 Conclusion

There were about 60 women across different age groups who attended the outreach programme. There was great amount of interaction among the speakers from the cell and the women. The women were very curious about certain topics and asked many interesting questions. They felt comfortable in sharing their personal stories and experiences with the rest of the audience and the team members and could relate to the topics that were discussed. Some of them reached out to the team members even after the workshop ended. Overall, it was an insightful and a light session which revolved around fundamental and social issues faced by women in the lower sections of the society. In the future, we plan to conduct more workshops like these to help women know their rights and laws. In the future, we plan to hold similar workshops for males in order to make them aware of similar pertinent issues like contraception.



CHAPTER 10

SURVEY REMARKS

Remarks from respondents/residents of Sanjay Camp:

Poonam Kumari, 30:

The respondent, Poonam does seasonal sewing work with Enactus and sells petty items like combs, safety pins, bindi etc. The respondent shared that the pipeline water system recently installed makes water collection easy. The respondent finds the use of condom to be expensive.

Anita Devi, 45:

The respondent lives alone since her husband left her about 15 years ago. She does not have any children. After a few instances of being pestered by inebriated men in her vicinity, the respondent has developed a concern regarding her safety.

Kavita Devi, 30:

The new water supply system recently installed in the area does not reach their house. There is no tap installed nearby which is why they still depend on the tanker for water. The respondent spends about 2 hours daily in collecting water. Most other households in the slum are able to make use of the new water system and do not have to spend as much time collecting water. This implies that the new system has not been able to reach all households. Some households have benefited from it while others still have to spend a lot of time and effort collecting water.



Seema Devi, 34:

The respondent feels that her children need tuition, but the family cannot afford them. Even the NGOs and college students that come to help the children with studies, don't focus on higher standards like 10th grade, in which her son is currently studying.

Anganwadi Worker, Smt. Lalita's remarks on the outreach programme conducted:

I appreciate the students' sustained efforts, which spanned over a year, that they put into the program. The students and teachers maintained long-term contact and interaction with me as well as other slum-dwellers, as they conducted extensive research. The actual outreach program was greatly appreciated by the women and children who attended it. After the program ended, many women came up to me and gave me good feedback. They really appreciated the informative pamphlets the students distributed. The young attendees were amused by and thoroughly enjoyed the theatrical and musical performance put up by the students. The Anganwadi also appreciates the donation of books and stationery made by the Cell.



b) If No:

Specify the reason:

Last class attended by the child:

7. Distribution of Time

Name	Hours spent in household chores per day	Hours spent on collecting drinking water (per week/day)	Applicable only for school going children:		
			Hours spent on tuitions in a week	Hours spent studying in a day	Hours spent on helping parents with their jobs (at the place of work and also specify the work done)

8. Women Centric Details (To be answered only by women):

For both Unmarried/Married:

1. List the product(s) used during Periods (Sanitary Napkins-specify the brand/cloth/both)
Reason:
2. How often do you use Sanitary Napkins? (in a year):
3. Are Sanitary Napkins easily available? (Yes/No) If No:
 - Would you prefer using Sanitary Napkins?
 - Reasons/constraints for not using them:
4. Do you have access to a regular supply of water in toilets?
(Always/Sometimes/Never):
5. Water supply in toilets (Tap water/ water collected from tankers):

For Married women only:

6. Are you a pregnant/a lactating mother? (Yes/No)
If Yes: How does the Anganwadi Centre cater to your needs?
-

THE TEAM

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 - Archita Agarwal
 - Gunjan Gupta
 - Harshita Joshi
 - Kavya Benara
 - Kavya Maria Raju
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No Research Without
Action, No Action
Without Research

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