

**The Beginnings of a Process
Towards Empowerment**

A

**Partnership Venture together
with the People of
Maya Bazaar
Bangalore**

February 1996

Area of Operation - Maya Bazaar

Objective - To draw up a strategy of action based on the socio-economic variables of the total population.

The tool for data collection was individual Interview Schedule - Twenty major variables were identified and data on these were gathered - Data has been analysed and concerned areas culled out. On the basis of this the strategy recommended.

DEMOGRAPHIC PATTERN

Total number of families - 750

Total population - 3737. Male, female break-up being 1910 and 1827 respectively

Which means there is a 51% male and only 49% female population. A descending female population figure does not auger well.

Agewise population has been analysed. The class intervals have been based on needs of the particular age group. So that physical needs, social needs of each group could be prioritised for that target population and programmes initiated.

POPULATION BREAK-UP

Age	Male	Female	Total	%
0 - 10	465	498	963	25.68
11 - 18	283	347	630	16.85
19 - 25	423	356	779	20.84
26 - 40	458	376	834	22.41
41 - 60	222	205	427	11.42
60 & above	59	45	104	2.78
TOTAL			3737	99.98

2. More than one fourth of the population are children. The causes of the diminishing quality of childhood are known : insufficient food, lack of nutritious food, poor hygiene, and health care, no security, pushed into adult responsibility early. These are not only the result of poverty but also the cause of poverty. Hence the improvement of the quality of childhood must be a concern area for any empowerment process.

Another 630 are adolescents - not gainfully employed, with time hanging on their hands, lack of life goals, self-concept low, impact of the TV (have been cited) are some of the causes of juvenile delinquency and the making of young criminals. This group thus calls for goal setting, capacity building, self-worthiness, sexual maturation needs and a healthy interpersonal relationship environ. Utilisation of energy in gainful employment and recreation are a set of inputs that need to be worked at. The Human Resources building and utilisation is an area of concern. The young adults form less than 50% ($20.84 + 22.41 = 43\%$). This is the working population and young parents, many of them shouldering responsibilities with no employment/little employment security. Some are alcoholics and yet some indulge in gambling. Leadership for the community and a social responsibility are areas to bring meaning for this group.

3. 104 persons are in the old age group. Society's most uncared for group, grappling with their own health problems, loneliness and not being wanted, are, factors which have affected this segment of population. The community's quality of life will to a great extent depend on the sensitivity it shows to make the dusk period of these lives worth living. This groups forms part of the dependency population.

4. The smallest size between 2 - 4 is the largest group. 16 families have a size of 12 to 14 members. What has to be noted is that a 40% of the families are large. The acceptance of the small family norm and effective education on Family Planning are areas to be acted on.

MARITAL STATUS

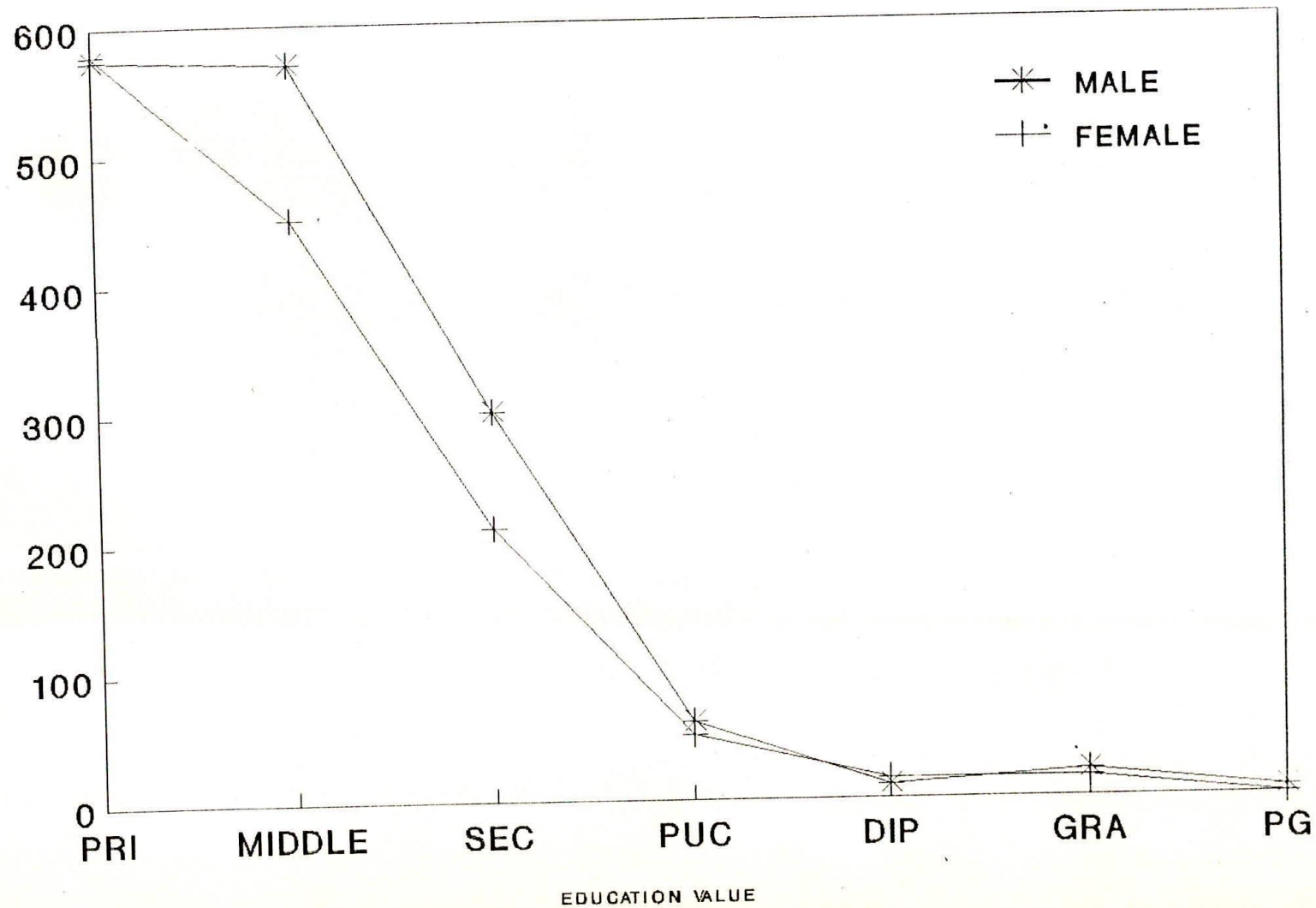
Marital Status	Males	Females	Total
Married	763	727	1490
Unmarried	547	353	900
Separated	6	10	16
Divorced	2	7	9
Widow/Widower	31	136	167
Not applicable	559	594	1153
Total			3737

What needs to be noted is the special disadvantaged group of which women form the majority. Of the total separated, divorced, widow/widower numbering 182, women alone are 153, accounting thus for 84%. Women who are separated, divorced and widowed suffer social stigma and are often exploited. They have no social status and are nonentities - very often are sexually abused and looked down upon. This is an area of concern.

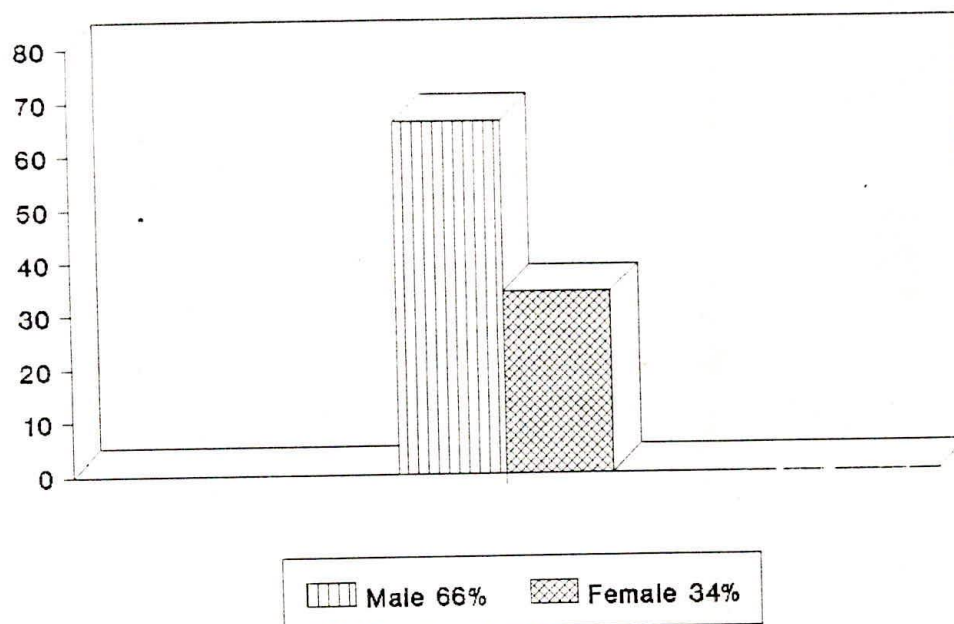
EDUCATION

Education is an indicator of development. Literacy according to the government is the ability to sign one's name. It merely helps in boosting the government's statistics. Literacy according to the developmental index is the ability to read and write simple texts. The idea behind such an ability is the foundation for an upward mobility. This in operation means completing at least the 5th Standard. Very often

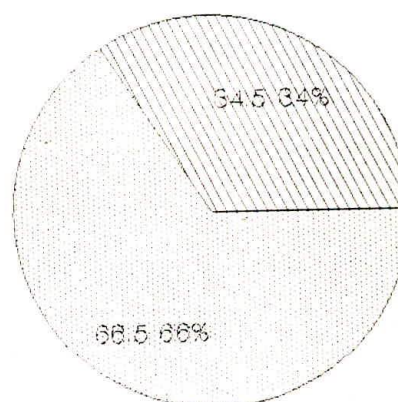
COMPARISON OF LEVEL OF LITERACY MALE & FEMALE



Literacy Rates Gender Disparity



ILLITERACY LEVEL FEMALE & MALE



34.5% Male
66.5% Female

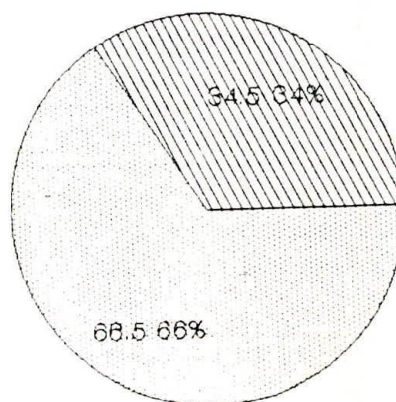
even a 5th Standard child is unable to read simple sentences or to write. This has to be kept in mind when one juggles with the statistics on educational level. There are 397 illiterates out of a population of 3358 (above 5 years). This means an illiteracy level of 12%. Country-wise and Karnataka State-wise the illiteracy level is low. Yet one cannot brush aside the fact that 397 persons had not seen the portals of a school.

ILLITERACY RATE

Illiterates	Number	%
Males	135	34.5
Females	262	65.5
Total	397	100

The female illiterates level is almost double the male illiteracy level.

ILLITERACY LEVEL FEMALE & MALE



34.5% Male
65.5% Female

The absolute 'no schooling' figures cannot be analysed in isolation of the below primary level. There are 38 graduates and post graduates at one end of the scale and a 578 on the primary level at the other end. The literacy level between the male and females is depicted in the graph - again it shows the female at a lower level. Right from the start the females are at a disadvantage position. Though the enrolment rate of the females is higher than the males but the sloping downwards is steep and steadily falling at different levels. The education of the female child calls for support.

INCOME

Slums are expressions of the social sins of the larger community stated the late Mr.Nehru. Basically people have been compelled to live in slums. It is not their option. Only the poor live in slums. They are poor because they earn less, they earn less because they do not have skills. Yet the larger community depends on the slum community for cheap labour. They do not have a bargaining capacity. It is the demand of such cheap labour that has led to the spawning of slums in all metropolitan cities. There is thus an exploiting community that keeps the slum population poor. Maya Bazaar is no exception to this. Some of the working population have acquired skills ~~on a~~ non-formal learning system. Thus they are artists, painters, masons, plumbers, tailors etc. But the larger working population have only their physical strength to sell. The income of the slum community is based on the 1199 working population.

INCOME PER MONTH

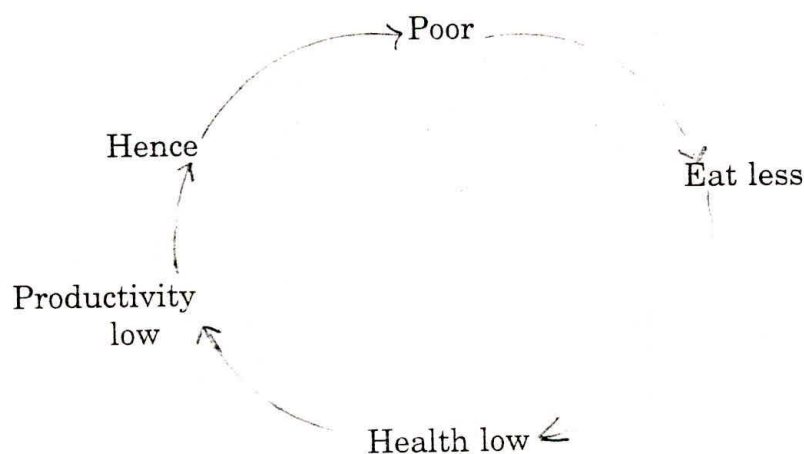
Amount (Rs.)	Number of Persons
500 below	330
501 - 1000	630
1001 - 1500	132
1501 - 2000	50
2001 - 2500	27
2501 - 3000	19
3000 - above	11
Total	1199

For convenience the class intervals have been staggered at Rs. 500. To grasp the depth or different levels of poverty an analysis of the incomes of the 330 persons below Rs. 500 is given below.

Amount (Rs.)	No. of Persons
100	102
150	143
200	61
250	7
300	4
350	2
400	5
450	2
500	4
Total	330

Statistics cannot remain as mere numbers but represent humans who earn so little, Humans who are exploited and on them the well-off people depend on. The 330 persons are coolies, construction workers, domestic helpers etc. Those earning above Rs. 2000 account for only 57 persons. These are factory workers and masons. The individual earnings are aggregated and the per capita income has been calculated. The percapita (monthly) income of the population in Maya Bazaar is Rs. 231. The total incomes in a family has been aggregated and the mean calculated, the average family income is Rs. 260. A significant and crucial dimension of the slum population is its varying levels of poverty. Again the income does not reflect the 'real' income. This can be gauged only by the analysis of two factors, namely the purchasing value of a rupee, and the expenditure pattern of the families. The lower the income the larger is the proportion of the earning spend on mere food. It is necessary to just work out the expenditure on just one item to understand the capacity of the earning population. Through the Public Distribution System (PDS) the government supplies rice, k-oil, sugar and wheat at subsidised prices for the poor on the ration cards they possess. Each family is allotted 10 kgs. of rice, 1kg. of sugar, 5 litres of kerosene and 5 kgs of wheat monthly. The price of rice is Rs. 4 per kg. So the 10 kgs of rice cost Rs.40. A family of 5 members will require two kgs of rice for two meals a day. Thus

the total quantum of rice requirement is 60 kgs a month. The remaining 50 kgs of rice they must purchase from the open market where the cost is between 9 Rs. and 12 Rs. per kg. So another 50 kgs cost them $\text{Rs.}450 + 50(\text{PDS}) = 490$. This for just purchasing rice to have two meals a day. The fuel for cooking has not been included. On such a calculation of the bare minimum necessities a family of 5 will need Rs. 2000/- monthly for subsistence. One must remember that the purchasing value of a rupee is 15 np. even according to the Government. An augmented expenditure will take into account clothes, education and health. This kind of analysis must be kept in mind when the incomes of the families are assessed. On such an assessment nearly 70% of the slum population is on and below the subsistence level. The questions that legitimately needs to be answered are: what is the bargaining capacity of such a population? Have they other alternatives? If their incomes are so low what is their ability to increase their productivity? They have low income and if even all the incomes go towards food they still eat less. The poor is thus caught in a vicious circle



Yet is all the incomes siphoned for food alone? The lure of consumerism is too great a force and exerts a pressure, so many want to own a TV, the addiction to alcoholism also is a phenomenon that grips the poor. This is precisely why action has to be multi-prong if the vicious circle has to be broken and if a new pattern of priorities and a higher earning capacity be firmly established.

SAVINGS

About 40% of the families claim to save through chit funds. This brings them no interest. On the other hand when they need money they participate in the monthly auctioning of the amount. Depending on the urgency and compulsions the auctioned amount will at times be even less than the capital already paid by the members. Hence the system of savings in the chit funds is not beneficial to the members. It is rather strange that their hard earned savings are not profitable to them. Today many financial institutions offer high interests, even the Small Savings Scheme of the Government is a good scheme. But these have not attracted the people of Maya Bazaar.

Loans are taken from money-lenders at exorbitant interest rates - example. Rs. 10/- per day for Rs. 100/-. This is for small loans and for short duration. Normally these loans are taken by vendors and small business people in the morning to buy vegetables and small items and they return the amount in the evening with the interest. For long term loans of bigger amounts an interest of Rs. 100/- per thousand per month is levied. What surfaces is the lack of credit facilities for the people. The system now in vogue is very easy because they have no red tapism to overcome, nor security or guarantees to be made. It is a mutually accepted code of payment and repayment which they strictly adhere to. The easy availability of money is a temptation to which they succumb to.

EMPLOYMENT STATUS

The employment status is correlated to the type of occupation and this in turn reflects on the security of employment, the benefits the family will be entitled to and in turn has an effect on the well-being of the family.

TYPES OF OCCUPATION

Types of Occupation	Males	Females
Attender / Peon	53	4
Carpenter / Assistant	41	3
Cooly	205	46
Domestic help	25	79
Factory worker	48	-
Gatekeeper / Watchman	59	-
Hotel worker / bearer cook, cleaning etc.	149	12
Mason	85	-
Construction workers	102	23
Shops, vendor	49	8
Tailor	34	45
Electrician / Plumber	129	-
Total	979	220

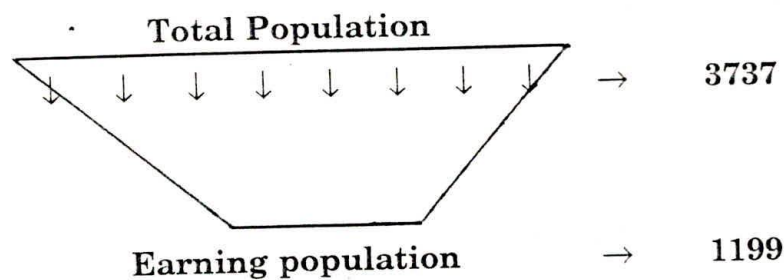
The types of jobs clearly indicate the seasonal nature and also the demand for it. Except for factory workers, attenders, peons all the rest are on and off jobs periodically. The earnings also are not steady, with some months bringing in more income and other months very little. It is this unsteady nature of earnings that drives the people to borrow. This creates insecurity resulting in quarrels, family bickerings and more than all in starvation. It is also significant that almost all are not entitled to any family benefits and have no insurance against accidents or injuries while at work. A total of 1199 persons. That 45.31% form a dependency segment of the population does not indicate automatically that the rest are economically independent because of the insecurity of even those who work.

EMPLOYMENT STATUS

Employed	Permanent	Casual	Temporary
Males 979	150	321	508
Females 220	13	68	139
Total 1199	163	389	647

As shown in the Table only 163 have permanent employment. This means just 13.5% have security of employment. The temporary and the casual nature of employment is because of the type of employment. Tailor, carpenter, painter, mason - these are temporary, as and when the work comes up. Cooly, helper in construction are casual labourers. That the majority have no security of employment is an area to be concerned of.

The earning population is 1199 on which the total population subsists.



As depicted the weight of the entire population falls on the 1199. Had the 1199 'good' earnings, security of employment the strain would not be much. But the base is weak and strainful.

TYPE OF HOUSE

Most of the families live in a one room house measuring 8'x5'. The space is not correlated to the size of the family. The family activities like eating, family gathering, sleeping or even just sitting are all outside on the streets. The space inside is used for holding their belongings. Except for a 2% (numbering 13 families) who have R.C. roofing the rest have houses with mud/brick walls and thatched/tinsheet roofs. There is no privacy and here again women are the most affected when even changing clothes, dressing etc. are not personal, private but becomes open activities. This has an adverse impact on the personal relationships.

LANGUAGE

The slum population is predominantly Tamil speaking. The breakup on the basis of the mother - tongue is shown in the Table.

BREAK-UP ON THE BASIS OF MOTHER-TONGUE

Language	Number of Families	%
Tamil	547	73
Telugu	150	20
Kannada	22	3
Malayalam	15	2
Urdu, Marathi	16	2
Total	750	100

Strangely those whose mother tongue is only 3%. Irrespective of the mother tongue all claim to be Kannadigas, having lived in Karnataka for generations. It is relevant for any agency working here to be sensitive to the language because there has been communal riots based on language. There is a vulnerability in this area but it has not surfaced so far.

RELIGION

Coming to religion the majority are Hindus.

BREAK-UP ON THE BASIS OF RELIGION

Religion	No. of Families	%
Hindu	554	74
Christian	184	25
Muslim	11	1
Others	1	-
Total	750	100

An interesting feature is the celebration of both hindu-christian festivals by the total population. There are two christian shrines and three temples. Annual festivals are conducted in these shrines and temples by the 750 families contributions. This is a great strength of the community-that religions are not divisive factors.

CASTE

As far as caste is concerned the SCs/STs form 79% (594 families) with BCs following with a 20% (147 families) and FC-1% (9 families). Throughout India this pattern has emerged: The slum population comprise of the SCs/STs and BCs - that they are the poorest of the total population is evident. The castes follow their own segregation norms. The SCs/STs are clusters and are on the periphery. The muslim population are also contained in one corner. The BCs here are not the dominant class numerically and hence keep to particular streets.

ASSETS

Coming to ownership of movable and immovable assets of the 750 families, 350 own their houses - while 396 are in rented houses and a mere 4 are in houses on leased.

What is to be noted is that 45% of the families own TV sets. The lure of consumerism is obvious. Three factors have influenced this high rate of TV sets in the slums : the availability and sale of TV sets on easy and small instalment basis, the need for recreation, and when a few have the TV sets the neighbours too get addicted to TV watching. TV sets have found its place in the priority list of needs even where education and health have not. 39% own cycles to commute to work. Notable assets in a few families (21) are grinders. This brings them a small income. Transistor sets are also owned. This was observed in 48 families.

A strength of the community is its saving habit. About 417 families claim to save something of their meager earnings. Why they save? Again for those who do not have a TV set for a TV., for others, savings go to meet marriage expenses and still

for a good number for festivals and religious rites. Savings have not been earmarked for health, education or other basis needs. Clearly this indicates that an area for education and ordering of their priorities is called for. The following priority list of the families clearly clearly points to this.

List of Priorities

1. Household items (TV, Transistors etc.)
2. Marriage expenses/festival expenses
3. Pilgrimages
4. Clothing

All the 750 families had given the above priority list. Even at the cost of cutting down one meal some are motivated to save to acquire these/or to make a pilgrimage. Consumerism and fatalism both have influenced their set of needs.

FUEL

The commonest fuel used for cooking is kerosene oil. This is available at the Public Distribution shops of the government at the cost of Rs. 3/- per litre and each family gets about 10 liters. Some complement this with firewood.

UTILISATION OF COOKING FUEL

Type of Fuel	No. of Families	%
K.Oil	526	70
K.Oil & Firewood	157	21
Firewood	52	7
Gas	15	2
Total	750	100

Those using firewood only are the lowest economically. They do not possess a kerosene stove even, and sell their ration kerosene for double the price in the open market. This group has to come into the targeted group.

HEALTH

Physical and mental health are indicators of the well-being of a community. Development is measured on these parameters. The factors which directly affect physical and mental health of a community are: low nutrition, environmental pollution, lack of basic sanitation facilities, inaccessibility to health facilities, ignorance of basic health safeguards and lack of safe drinking water. All these factors can be easily observed in Maya Bazaar. One is almost reluctant to even attempt to educate the people unless they have sufficient water. It has been pointed out by the World Health Organisation that half the illnesses suffered by children can be prevented if safe water is available sufficiently. Similar when the environment is polluted by open drains, stagnant water, human waste etc it becomes a fertile breeding place for viruses and contamination. Here again community action, family-wise action and individual action need to be simultaneously stimulated. No data is available on the community's mental health. No medical check-up has been carried on. But what had been observed has been noted down to give some indication of what needs to be further investigated indepth.

HEALTH STATUS

Categories of illness	Males	Females
Visually handicapped	9	7
Hearing impairment	4	10
Locomotor (lack of co-ordination)	37	31
Mental retardation	6	3
Chronic illness	42	42
Terminal illness	40	19
Others	16	11

This does not take cognizance of other ailments fever, diarrhoea etc. Similarly also it is obvious that a medical eye alone would observe more symptoms and detect

ailments. But even from what has been recorded there is a morbidity revealed in the community. The people are not unduly anxious on this aspect. A fatalism that these are sent by God keeps them 'accepting' inflictions stoically. Most of them do not go to the hospitals because even there drugs are not free and they are not treated well. Hence they resort to home remedies or go to the 'vaithiyan' or native doctor who uses both native medicines and some religious rites to effect a cure. when sickness persists then they go to the private practitioner. Many believe in witchcraft. Simple prevention, home made remedies, and ability to detect ailments should become part of an educative process. It is in this general health dimension of the community that health of women has been focused.

Women's health has never been sufficiently emphasised in the socio-cultural dynamics. That women eat less and last in a family and yet she nurtures a child and so needs better nutrition is lost in the secondary status given to women. They are expected to eat of what remains - Maya Bazaar women are not exempted from this gender based deprivation which has an adverse effect on their health.

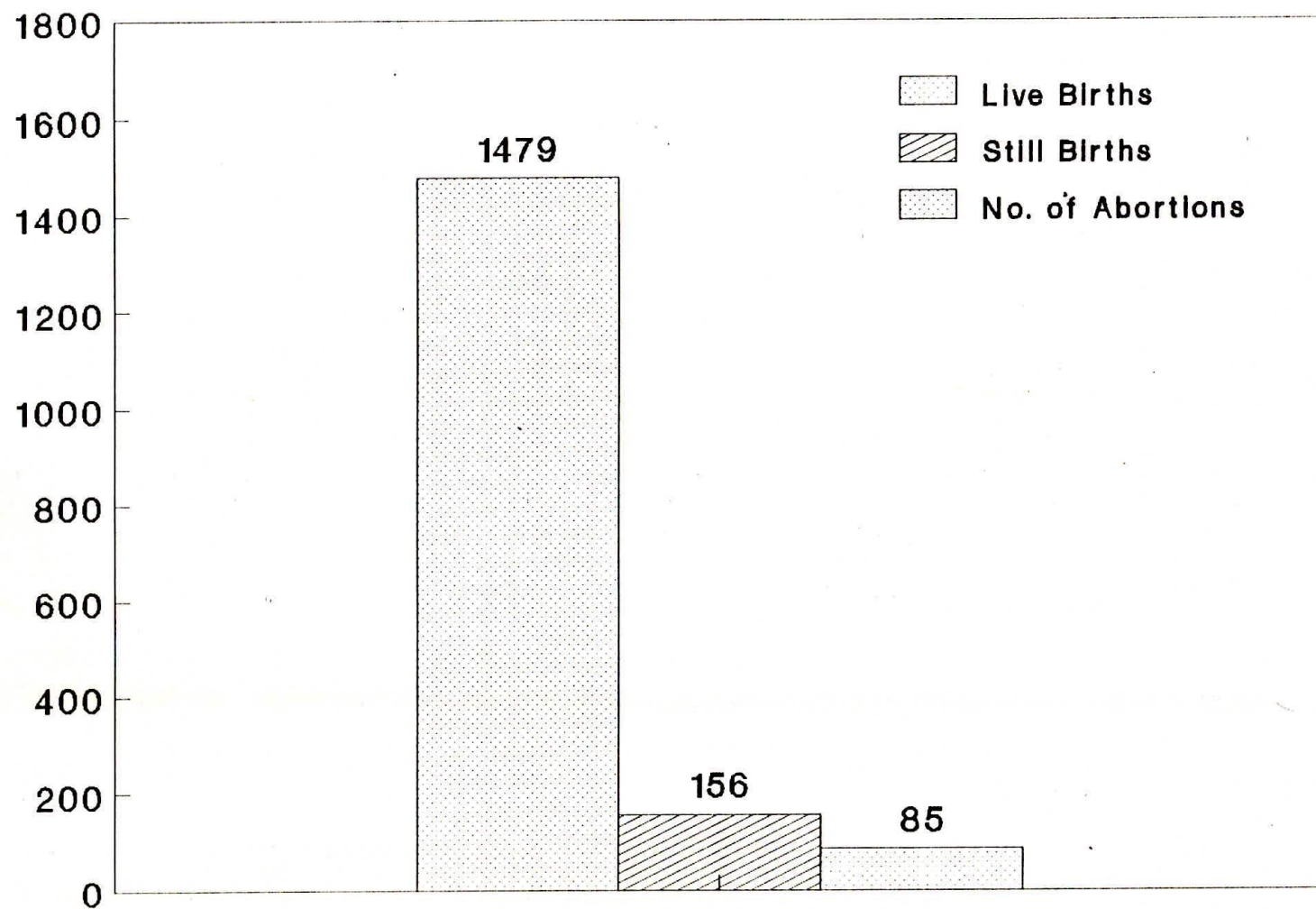
WOMEN AND HEALTH

Social discrimination, economic deprivation and gender-bias rapidly converse. This is reflected in gender differentials in education. The cumulative consequences becomes visible in other areas too. One such is health. It must be emphasised that health care has not found a place in the list of needs.

The average age of marriage for the women is 17. Of the total 590 married women 56% had their deliveries in the corporation / state hospitals. 40.5% in private hospitals and only 3.5% had their babies delivered at home.

Private hospitals are expensive but the attention in the government hospitals is so deplorable that they go to private hospitals. This becomes a major expenditure and puts them under a great strain. It is a compulsion rather than an option which makes them go to private hospitals.

BIRTHS



No special nutrition or supplementary nutrition intake has been reported by mothers during their pre-natal and post-natal periods. None had reported of having had immunized tetanus during pregnancy.

The present status of women is given below:

Present Status

Pregnant women	-	21
Lactating mothers	-	299
Total		<hr/> 320 <hr/>

This 320 women need nutrition, health care, and health education.

A total of 243 married persons had undergone permanent Family Planning measures. Of this 235 are women who underwent tubectomy and only 8 men had undergone vasectomy. Another 52 had adapted temporary measures.

Population trends show that it is the poorest who grow the fastest in numbers. Poverty line also runs closely parallel to illiteracy line particularly in respect of women. Family planning methods especially the permanent methods are directed at women.

BIRTHS

There has been 1479 live births. 156 still births and 85 abortions. Data is not available whether these were selective abortion of the female foetus.

IMMUNISATION

As far as immunisation of children are concerned a total of 463 below 3 years have been immunised. 25 children have not been immunised.

IMMUNISATION

	Immunised against	No. of Children
1.	BCG	428
2.	Polio	426
3.	Measles	338
4.	DPT	202
5..	Non immunised	25

Though statistical data is not available, childhood diarrhoea is common. The causal factors include lack of access to nutritious food, poor sanitation and unsafe drinking water. Health of women and children must be a goal if gender disparities and the cumulative effects of it removed for development.

WOMEN AND WORK

The total number of women working for a wage is 220. The age-wise break up is as follows:

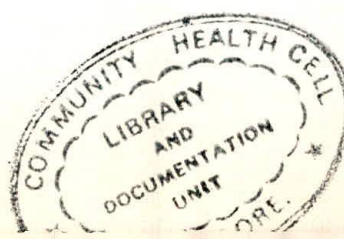
WORKING WOMEN - AGE-WISE

Age group years/	No.of women	%	
15 - 25	78	35.6	86.4%
26 - 35	69	31.3	
36 - 45	43	19.5	
46 - 55	19	8.6	
56 - 65	10	4.5	
65 - 68	1	0.4	
	220	99.9	

DEV-100

19/21

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The maximum number of working women fall between 15 and 45 years. This is also the fertility age group. One must reckon with the realities. This age group bears the full burden, pregnancy, child rearing, lactating, and the normal duties at home. Thus the women in this age group carries a heavy burden - what is come to be known in development parlance as the "Double Day" workload. Though only 220 women are working there is a demand for employment from 497 women. Gainful employment training could be an action mandated. Of the 497 women who seek employment only 70 women are prepared to go outside for work. The difficulty to commute, the need to look after the children and the household chores and also special mention was made on the hours they need to wait and carry water home. Hence 306 women prefer to be trained in tailoring, small business, shops etc. Perception could change with situational changes and awareness inputs.

COMMUNITY AMENITIES/NO AMENITIES

The characteristic externalities of poverty so obvious in a slum are the lack of access to safe drinking water, and the nonavailability of safe facilities for human waste disposal. This is true of Maya Bazaar slum.

There are three Corporation taps in and around the locality. But water comes only a few hours a day and so there are long queues. Most of the families do not have the facility to store water nor the space to keep the collected water. This means with the minimum water they manage. A basic input for human survival is water. Scarcity of water, no water for the toilet nor to wash hands before a meal directly affects health and well being of the community. These affected mostly women and children. This leads to a kind of impoverishment in their total well being. There can be no worthwhile development - nor sustained development unless water is made available to meet their daily requirements. There are no proper drainage system. Most of the houses allow the water to collect in a pit dug by the side of house. Very often these overflows on the road. Some have small open channels dug along the narrow lanes and let out towards the main road. The main road is on a higher level and hence it flows back or is stagnate. In rainy seasons the slum lanes becomes one with the drainwater. Except two houses which have individual toilets the rest have to use

community toilets. This again is more misused than used because there is no water. All the children defecate on the roads and there is no proper facility to remove the human waste.

These are serious environmental issues affecting the human quality of life. Access to safe drinking water, sanitation, and sanitary means of excreta disposal are prerequisites for survival and development.

SOCIAL PROBLEMS

Child labour definition varies. But the most commonly accepted one is children employed by the families, at the cost of education and other childhood activities necessary for growth. The slum has reported only 12 children below the age of 15 engaged in working for a wage. All the 12 are assistants to masons, carpenter, tailor except 2 who are domestic helpers. Of the 12 child labour, 8 are girls and 4 are boys. So the girl child labour rate is double than that of boys.

SCHOOL DROP-OUT

School drop-out rate shows only a total 29 number. The details are given in the Table.

DROP-OUT RATE SEX-WISE

Age intervals	Males	Females	Total
5 - 6	2	4	6
7 - 8	0	2	2
9 - 10	4	5	9
11 - 12	2	3	5
13 - 14	3	3	6
Total	11	18	29

The differential female /male dropout rate is almost double. For the female it is 62% and male is 38%. Once again disparities are accumulating. Female child labour is double and school dropout is a little less than double. This calls for purposive interventions, for the female child, must form part of the empowerment process.

EVE-TEASING

A cluster of social and familial are visible. Some have been articulated and some have not been so well expressed. Eve-teasing and rowdyism were cited by all the female respondents as unbearable problems. In this context it is relevant to note that the famous social activist Sheila Barsa has pointed out that exploitation and harassment of the female child is rather high in Bangalore with eve teasing heading the list. The Maya Bazaar women blantly accused the youth for constantly intimidating and harassing the girls. When and if the elders intervene it leads to street fights. There is thus an unfriendly and aggressive socio-cultural milieu in which the girl child grows, taking it silently and allowing herself to be a victim of anti social behaviour.

ALCOHOLISM

Alcoholism is rampant. All the men are addicted to drinking country arrack and whatever comes handy. This often leads to the battering of the women in the house. The man who returns home drunk expects a good meal and if it is not there the wife is beaten. Children who come in the way are not spared. The home atmosphere becomes vitiated. But what is surprising is the way to women look at it. They feel that alcoholism cannot be prevented - men will continue to drink. Since all the men drink it has become an accepted habit. They are not able to analyse the ramifications it has on the personal and family levels. Domestic violence is something common in Maya Bazaar. The men expect the women to provide food for the family whether they bring in their wages or not. This has led many women to supplement their incomes by taking up the only available means to them - namely become sex-workers. Thus pushed into prostitution many women of Maya Bazaar are victims of

a tragic situation. What is surprising is that prostitution is not frowned upon as an evil as long as money comes to provide food and meet other expenses, the men try not to question the means. In a few cases the men demand part of this money for liquor.

No attempt has been made to further investigate on areas like protected sex practices AIDS etc. That the people of Maya Bazaar are unconsciously living as all pauprised grups, a de-humanised existence is a challenge thrown to the larger society on which Maya Bazaar impinges on. If there is exploitation then there is an exploiter and the exploited, if there is dehumanisation then there is a dehumaniser and the dehumanised. Maya Bazaar thus knocks at the conscience of the larger community with these issues.

It is in this environment that money lenders thrive. Though the community has inculcated the habit of saving they have also a habit of taking loans at an exorbitant interest. This is for emergencies and also when there are long periods of unemployment. Fulfilling a vow to go on a pilgrimage, fear that calamity will befall if they do not go on a pilgrimage makes the people spend enormous sums of money towards this. About 30% of the families sent one male member of the family to Sabarimala annually. This costs approximately Rs. 3000 - 3500. That is the kind of socio-religious fervour one experiences in Maya Bazaar.

The extent of these and allied problems on the quality of human life is certainly detrimental. The ramifications of these social aberrations on the existential system of the people will call for a deeper study. - This area needs careful handling with programmes to diminish these social aberrations to create a conducive environment for growth and integration.

MIGRATION

The pattern of migration is urban → urban flow. 121 families become mobile for varying periods.

MIGRATION

Migration Trend	No. of Families
Within Bangalore	31
Within the State	7
Outside the State	83

Of these 121 families affected 104 complete families move out. 7 families only the male members migrate. The duration of migration for 103 families is 3 months and 18 families between 8 months to 10 months. The peak of migration is during the summer i.e. March to Sept. Normally they return to the same slum in a few rare cases when they have found better employment they do not return. But this is a very insignificant number.

Causal factors of migration are: no permanent employment, they have very little possessions to tie them down, the type of occupation they are accustomed to like cooly work, construction (including road laying) are not anchored in a specific place. So they go seeking for these. The problems that they face are insecurity, no schooling for their children, inability to conserve goods, no belongingness. These 121 families should be drawn into the target group with linkages to achieve 'O' level school dropout and 'O' level child labour within a specific period.

The socio - economic analysis has been utilised to map out concern areas of deprivation, dehumanisation, powerlessness and differential male/female levels that converse fast to accumulate against the empowerment of females. On this canvass of human living and situation any strategy envisaged must aim at injecting inputs to remove deprivation and initiate a process of humanisation, build power within the community to enable them to demand their rights as citizens of this country.

Part II

STRATEGY MODEL RECOMMENDED - SOCIAL PLANNING MODEL

Rational for this model is based on the following:

1. **Goal categories** : Problem-solving with regard to substantive community problems.

Major goals : Reduction of the number of indicators of the Poorest of the Poor Index (PPI) and thereby alleviate poverty.

Support sectoral goals : Special attention to health & nutrition to the female child and to pregnant, lactating mothers (Task goals)

2. **Assumption concerning community structure and problems conditions** : Substantive economic and social problems - housing employment, sanitation, drinking water.
3. **Basic Change strategy** : Fact gathering, analysis, structuring of the Poorest of the Poor Index, administration of the PPI for the targeting group. Decision on the most rational course.
4. **Characteristic change tactic / technique** : Capacity building, awareness of Fundamental Rights, affecting Convergence of Services.
5. **Agency's Role** : Fact gatherer, analyst, resource mobiliser, builder of collaborative alliances, facilitator.

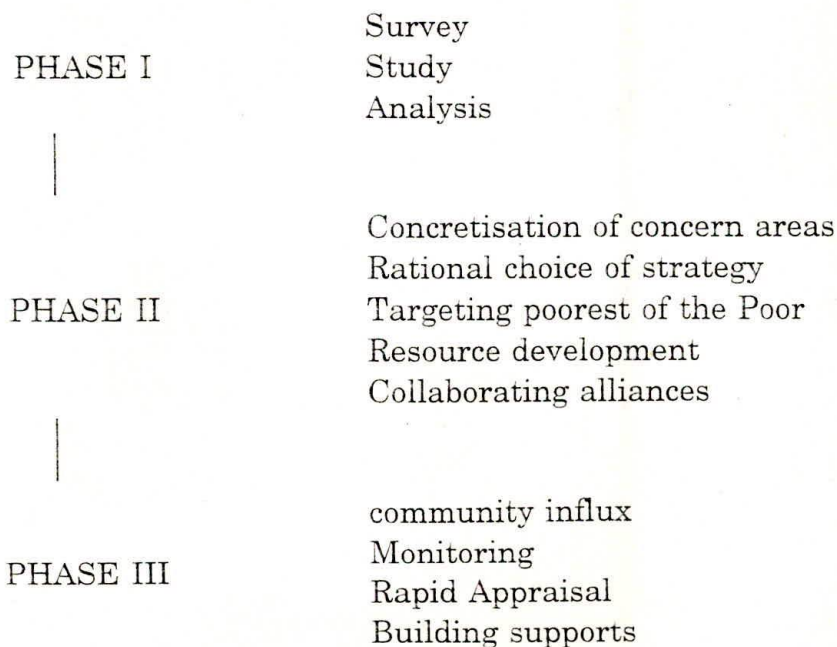
6. **Medium of change** : Awareness, training, education, manipulation of formal organisations, creation of leadership.
7. **Boundary definition** : Segment of the population-poorest of the poor, Total community for sanitation, water drainage and drinking water.

APPROACH

Participatory approach to development. The strategy aims to promote the capacity of the Māya Bazaar Community to plan, implement and maintain physical and social improvements through a participatory process. Towards this the women should be mobilised and organised to form groups. It is through these groups that action should be initiated and carried on. Thus a real process of empowerment will simultaneously be experienced.

The Process is based on Triple A (assess, analyse, action)

FLOW OF THE PROCESS



A process is an ongoing dynamics. These are not contained in watertight compartments - Analysis → action → evaluation is on going. Much depends on the participation and response of the community. **Their can be no blueprint** drawn for operation without the involvement of the community - especially the women groups and the alliances (other NGOs). Hence in-build of a flexibility plan of action must be envisaged which acts more as guidelines.

The following index to target the poorest of the poor has been structured on the basis of the analysis of the data.

THE POOREST OF THE POOR INDEX (PPI)

1. More than 3 dependents below 15 years
2. Average family income below Rs.2,000 p... (for a family of 5)
3. Thatched/asbestos roofing houses
4. Women headed families
5. Families with an alcoholic
6. Families with no access to safe drinking water
7. Both parents illiterate
8. Whole families which migrate seasonally
9. Families with a child labourer (below 15 years)

This has been structured with easily observed indicators for identification - Income data cannot be relied on hence externalities of poverty need to become the indicators.

Any family with 5 and more of the above indicators can be termed as Poorest of the poor.

Reduction of indicators can be easily evaluated.

Prioritise according to the maximum indicators and order the families accordingly so families with 10,9,8,7,6, etc.

No.of Families

No.of Indicators

10

9

20

68 etc.

A time-bound period to be fixed for the execution elimination of the number of indicators, leading to elimination of poverty.

ALLIANCES

Alliances should be formed with NGOs and Government kindly keep in perspective (page 31) Action Aid Strategy Paper (under NGOs and the Government).

It is inevitable to Alliance with the Karnataka Government Departments in the following areas.

- | | | |
|----|--|--|
| 1. | Drinking Water | Bangalore Metropolitan Water Supply & Sewage Board |
| 2. | Drainage & Sanitation | |
| 3. | Housing | Karnataka Slum Clearance Board |
| 4. | Urban Poverty Alleviation Programmes (Like NRY) | Corporation of Bangalore Social Welfare Department |
| 5. | Health - Mother & Child Care | Health Dept & Corporation of Bangalore and hospitals around the area |
| 6. | Leadership training module for training | NGOs |
| 7. | The Schools where the children of Maya Bazaar are attending. | |

TIPS FOR AREA WORKERS

- Calendar of activities
- Minute maintenance of records by each one.
- quick everyday review
- Teamwork calls for sharing sessions
- Detailed plans

People are not recipients - but partners - do not take them for granted.

"The whole process is based on the premise that "eradication of absolute poverty is an attainable goal.

We have a significant part to play in this process.

We will do this carefully, without fear of failure and reaction".

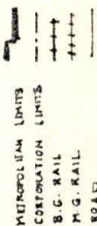
(Action - Aid. India, Strategy Paper 1993-1997, P-29)

By

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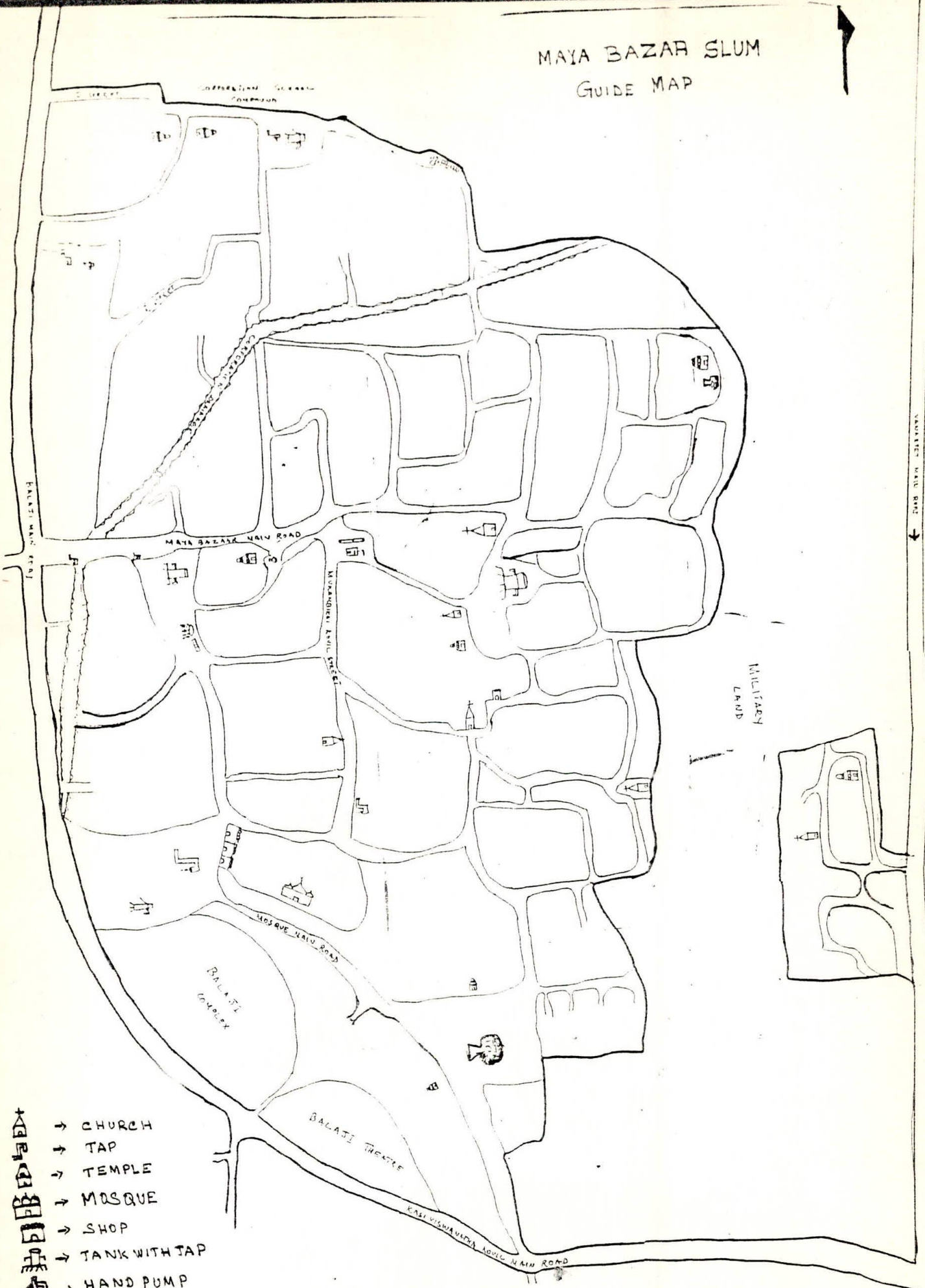


LOCATION OF SLUMS IN KSCB. 298



DeBasko
ASSISTANT DIRECTOR OF TOWN PLANNING
KAGAWA KAKUJIN CLEARANCE BOARD

MAYA BAZAR SLUM GUIDE MAP



- CHURCH
- TAP
- TEMPLE
- MOSQUE
- SHOP
- TANK WITH TAP
- HAND PUMP
- Drainage (corp)
- Public Toilet & Bathroom.

SOCIO-ECONOMIC SURVEY

Bangalore Slums

Date:.....

Address:.....

.....

1. Family Profile:

S nos	Name of the Members	Sex <i>a</i>	Rel. to H.O.H. <i>b</i>	Age <i>c</i>	Edu. Quali. <i>d</i>	Employment Status <i>e</i>	Occupation <i>f</i>	Marital Status <i>g</i>	Monthly Income <i>h</i>	Dropout 5-14 Yrs <i>i</i>		Health Status <i>j</i>	Language Known <i>k</i>				
										School Leaving Age	Leaving Reason						
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
	Total																

Coding

1 a. Sex:

Male - 1
Female - 2

1 b. Relation to the H.O.H.

Wife - 1
Son - 2
Daughter - 3
Father - 4
Mother - 5
Son in law - 6
Daughter in law - 7
Brother in law - 8
Sister in law - 9
Others (Specify) - 0

1 d. Education Qualification:

1 - 5 (Primary) - 1
6 - 9 (Middle School) - 2
S.S.L.C. - 3
P.U.C / H.Sc / Jc - 4
Diploma - 5
Graduate - 6
Post graduate - 7
Others (Specify) - 0

1 e. Employment Status

Permenant Employ - 1
Casual Employ - 2
Temperory Employ - 3
Un Employment - 4
Not Applicable - 5

1 f. Occupation

Tailor - 1
Carpenter - 2
Artist / Painter - 3
Hotel cook / Bearer - 4
Gate keeper - 5
Mason / Cooly - 6
Domestic Help / Ayah - 7
Attender - 8
Factory Worker - 9
Others (Specify) - 0

1 g. Marital Status

Married - 1
Un Married - 2
Separated - 3
Divorced - 4
Widow - 5

1.h Monthly Income

Below 500 - 1
501 - 1000 - 2
1001 - 1500 - 3
1501 - 2000 - 4
2001 - 2500 - 5
2501 - 3000 - 6
3001 - above - 7

1. i Dropout Reasons

Low Fly Income - 1
Lack of Interest /Parent - 2
Discouraged by Failure - 3
Employment - 4
Migration - 5
Sickness - 6

Family Situation - 7
School Factors - 8
More than one Factors - 0

1. j Health Status

Visually Handicapped - 1
Hearing Handicapped - 2
Locomotor - 3
Mentally Retarded - 4
Seasonal Illness - 5
Terminal Illness - 6
Others (Specify) - 0

1. k Languages Known:

Kannada - 1
Malayalam - 2
Tamil - 3
Telugu - 4
English - 5
Hindi - 6
Urudu - 7

1 c. Age

2. Mother Tongue: ☐ 3. Type of Family: ☐ 4. Religion: ☐ 5. Caste: ☐ 6. No. of dependents: ☐ 7. Ownership of the House: ☐ 8. Type of House: ☐ 9. Cooking fuel: ☐

10. Safe Motherhood:

S no	Name of Mother	Details	
1		a. Age at Marriage	
		b. Type of Birth	Live Birth
			Still Birth
		c. No. of Children born	
		d. No. of Abortaion	
		e. Place of Delivery	
		f. Current Status	
2		a. Age at Marriage	
		b. Type of Birth	Live Birth
			Still Birth
		c. No. of Children born	
		d. No. of Abortion	
		e. Place of Delivery	
		f. Current Status	

Con - conception; LB - Live Born; SB Still Born; P - Pregnancy;
SA - Spontaneous Abortion; IA- Induced Abortion.

Family Planning Method

S. No.	Couples Name	Any F.P Method Practiced	Type of F.P Method
		g	h
1			
2			

(F.P - Family Planning)

g. Family Planning Method

Temporary - 1
Permenent - 2

h. Family Planning

Condemns - 1
IUD - 2
Vasectomy - 3
Tubectomy - 4
Others (Specify) - 0

2. Mother tongue

Kannada - 1
Malayalam - 2
Tamil - 3
Telugu - 4
Others (Specify) - 0

4. Relegion;

Christian - 1
Hindu - 2
Muslim - 3
Others (Specify) - 0

6.No. of Dependents

1- 4 - 1
5- 8 - 2
9-12 - 3
above 12 - 4

8. Type of House

Thatched - 1
Tiles - 2
Sheet - 3
R.C.C - 4
Others (Specify) - 0

10 (e) Place of delivery

Govt./ Corporation - 1
Private Clinic - 2
Home delivery - 3

3. Type of Family

Joint - 1
Nuclear - 2
Extended - 3
Others (Specify) - 0

5. Caste

SC / ST - 1
BC - 2
FC - 3

7. Ownership of House

Leased - 1
Rent - 2
Owned - 3

9. Cooking Fuel

Fire Wood - 1
Kerosine - 2
Gas - 3
More than One - 4

10. (f) Current Status

Pregnancy period - (Actuals)
Nursing Mother - 0

11. Child Health					
Immunisation Details Children below 5 years					
No. of Child	Polio	B. C. G	Measle	D.P.T	Booster
1					
2					
3					
4					

Cash <i>a</i>	Movable Property <i>b</i>	Immovable Property <i>c</i>

13. Loan Details				
S No.	Source of Loan	Amount	Interest / ann	Reason for not availing Loan from Bank/Govt
		<i>b</i>	<i>c</i>	<i>d</i>
	Private			
	<i>a</i>			
	Bank			
	Govt			

A	Amount B

(Observation)					
---------------	--	--	--	--	--

[illegible]

0 - 1000	- 1
1001 - 2000	- 2
2001 - 3000	- 3
3001 - 5000	- 4
5001 - 8000	- 5
Above 8000	- 6

Cycle	- 1
TVS 50	- 2
Scooter	- 3
Others (Specify)	- 0

House - 1
Shop - 2
Others (Specify) - 0

- Relations - 1
- Friends - 2
- Agencies - 3
- Money Lenders - 4

0 - 1000	- 1
1001 - 2000	- 2
2001 - 3000	- 3
3001 - 5000	- 4
5001 - 8000	- 5
Above 8000	- 6

Below 12%	- 1
13% - 17%	- 2
18%- 22%	- 3
23% - 27%	- 4
Above 28%	- 5

Difficult Procedures - 1
Political Patronage - 2
Bribe - 3
Others (Specify) - 0

a	Household Items	- 1
	Education	- 2
	Festival	- 3
	Health	- 4
	Marriage	- 5
	Cloth	- 6
	Others (Specify)	- 0

T.V	- 1
Mixi	- 2
Grinder	- 3
Table	- 4
Chair	- 5
Tape Recorder	- 6
Radio	- 7
Others (Specify)	- 0

Yes	- 1
No	- 2

0 - 6	- 1
7 - 12	- 2
13 - 24	- 3
25 - 36	- 4
37 - above	- 5

& 14 (b) Long Term	- 1
Short term	- 2

0 - 1000	-1
1001 - 2000	-2
2001 - 3000	-3
4001 - 5000	-4
5001 - 8000	-5
Above 8000	-6

Household Items	- 1
Education	- 2
Festival	- 3
Health	- 4
Marriage	- 5
Cloth	- 6
Others (Specify)	- 0

0 - 1000	-
1001 - 2000	-
2001 - 3000	-
4001 - 5000	-
5001 - 8000	-
Above 8000	-

0 - 300	- 1
301 - 600	- 2
601 - 1000	- 3
1001 - 2000	- 4
2001 - 3000	- 5
3001 - 4000	- 6
4001 - Above	- 7

0 - 300	- 1
301 - 600	- 2
601 - 1000	- 3
1001 - 2000	- 4
2001 - 3000	- 5
3001 - 4000	- 6
4001 - Above	- 7

0 - 300	- 1
301 - 600	- 2
601 - 1000	- 3
1001 - 2000	- 4
2001 - 3000	- 5
3001 - 4000	- 6
4001 - Above	- 7

S. no	Name of the Women	Nature of employment Interested	In House	How far away from House ?
1				
2				
3				
4				

19. Migration Details : Last two years

How long you are living in this Area a	Do you Migrate b							
		When c	Duration d	Where e	Why f	When do you return g	Where do you return h	Who in the family migrates i

19 Migration Details

19(a) How Long

0 - 1 - 1
1 - 3 - 2
4 - 5 - 3
6 - 10 - 4
11 - 20 - 5
21 - 35 - 6

19 (b). Migration

Yes - 1
No - 2

19 (c) When

Jan - March - 1
April - June - 2
July - Sept - 3
Oct - Dec - 4

19 (d) Duration

0 - 3 - 1
4 - 8 - 2
9 - 12 - 3
One Year - 4
Two Years - 5
& above

19 (e) Where

With in Bangalore - 1
With in Karnataka State - 2
Outside Karnataka State - 3

19 (f) Why

Employment - 1
Festival - 2
Others (Specify) - 0

19 (g) When do you return

0 - 3 - 1
4 - 8 - 2
9 - 12 - 3
1 Year - 4
2 Years - 5
No - 0

19 (h) Where do you return

Same Slum - 1
Other Slum - 2
(With in Bangalore)

Other Place - 3
Others (Specify) - 0

19 (i) Who Migrates ?

Family - 1
Child - 2
Male member - 3
Female member - 4
Others (Specify) - 0

20. Govt. run Urban Services utilised or not

Aminities					If No Reasons
	Yes	No			
Education (Primary)					
Dispensary					
Hospital					
Drinking Water Supply	Borwell Corporation				
Sewage					
Latrine	Individual Community				
Electricity House					
Street Light					
Road					
Police					
Judiciary					
Transport					
Others (Specify)					

20 c

Open space as toilet		Yes	No
1	Children		
2	Men		
3	Women		

21. d What is the Major Social Problem in your community ?

Name of the Investigator