Rural Women's Social Education Centre [RUWSEC] is a women's organisation working for women's sexual and reproductive health and rights. The organisation was founded by 13 women in the year 1981, and it is located at Karumarapakkam village, Thirukazhukundrum, near Chennai, Tamil Nadu, South

India. Achieving women's wellbeing through women's empowerment is the mission of RUWSEC.

RUWSEC's main focus of work has been on enabling women to gain greater control over their bodies and their lives, and achieving their wellbeing through the promotion of gender equality and sexual and reproductive rights. RUWSEC's overall approach has been to motivate, educate and organise women from poor and marginalised communities to stand up for their rights and become agents of social change. Over the years, our work has come to include not only women, but also men and adolescents and young people in the attempt of promoting overall wellbeing. The core values of our organisation's work focus on four important themes:

1) Right based 2) Empowerment 3) Participatory 4) Women centered. The strategies of our work are:



- Bringing forth the voices of women (and men) from the most marginalised sections of society, especially *dalit* and rural poor communities;
- Promoting leadership skills of the above groups so that they can effectively participate in existing governance and accountability structures and other spaces for community participation and
- Developing critical thinking and alternative models in health care provision, research and planning for social action.



During the three and a half decades of its existence, RUWSEC has implemented a wide spectrum of activities ranging from comprehensive community based reproductive health education and promotion, community-based interventions to prevent domestic violence against women and innovative work with young women and men on gender, sexual and reproductive health and rights. We have been working at different levels: community, schools, colleges, companies and health systems. We have school based life skills education for adolescent students, young women working in factories

and youth groups in the villages. We also work with public health system towards improving quality of health care services. Currently, our intensive filed programme activities focus on the following four major aspects:

- Promoting general health and wellbeing in the community,
- Promoting sexual and reproductive health and rights (SRHR) of adolescents and young people,
- Promoting sexual and reproductive health rights of adults with a special focus on women and
- Prevention of intimate partner violence against women.

In each of the above said we adopt four strategies namely, 1) Community capacity building 2) Providing health care services 3) Monitoring, research and bringing out popular health education materials 4) Advocating wider policy change. The following note briefly summarises the activities of RUWSEC during 2015 – 17

Highlights of activities during 2015 – 16 are as follows:

The programme on promoting general health and wellbeing in the rural areas focused on providing health awareness sessions on lifestyle changes and its impact on the occurrence of diseases like diabetes, blood pressure and anaemia. Every month, during house visits every diabetic and blood pressure patient in our project villages was counselled in person about the importance of a healthy diet and physical exercises. In our clinic, specialists, were invited to provide the services. A support group for diabetic patients has been formed, and the group met during the last Sunday of every month. Guidance and assistance were provided for them to manage their health problems; moreover, special health education sessions on diabetes and blood pressure were also conducted for the target audience.



At present, specialised out-patient care services are offered in our clinic. As a result, the number of patients who need regular, long term medical care and support, accessing our clinical services has increased considerably. Apart from Allopathic treatment, villagers accessed our alternative systems of treatment. During the financial year 2015 – 16, 12,659 patients have accessed our clinical services (Allopathy-6654, Siddha-3932 and Homeopathy-2073). There is a good response for the special services for treating diabetes and hypertension.



The programme that focuses on promoting sexual and reproductive health

rights among adolescents and young people has been implemented in 15 government schools, and sessions were conducted for students studying in 8th standard. Four sessions were conducted for these students and 386 students benefitted from this programme. Sessions were also conducted for 9th and 11th standard students; they too had four sessions, and 782 students benefitted from programme. A special summer camp was conducted for students in 8th and 9th standards in the villages in which 28 girls and 21 boys participated. An annual day celebration was also organised for the students who attended these sessions, wherein they exhibited their talents and won special prizes. Trainer's Training programmes were also conducted for the National Service Scheme students in colleges. They had sessions focusing on sexual and reproductive health rights for young people.



Under the programme of promoting sexual and reproductive health of women. Two refresher trainings for newly married couples were held. With an objective of providing the right information to the right people at the right time we are providing one on one counselling services to pregnant women, women with a single child and women with six month old infants in our adopted villages. The information that needed to be delivered to them was printed as counselling cards and provided at their door steps. Special training programmes were also organised for pregnant women. Women who had a single child had two training sessions this year and 15 - 23 women benefitted from event. During house visits, information and counselling were also provided for eligible couples on contraception and maternal health.

In the 25 adopted villages, community level workshops were conducted for women in self-help groups. Between 2015 and 2016 women had 25 such sessions in their villages. 830 women attended these workshops. Cancer patients who are presently continuing their treatment in our project villages were organised and a support group was formed, and they met once a month in the RUWSEC campus.

We have been working on combating violence against women through community committees in the villages since the inception of this programme in 1994. Members who are active and continue to support the women in the villages were invited to a training. These committee members have been explained about the vital role they play in the villages to combat violence against women and they too were explained about the sustainability of these committees. Victims of domestic violence are provided constant support and guidance; during the reporting period 28 women received our specialised women centred counselling services. International Women's Day was celebrated in our project villages, which was one of the highlights of this year's programmes.

ARROW, a women's organisation in Malaysia has supported us in carrying out research and advocacy activities on Sexual and Reproductive Health and Rights (SRHR). As a part of this programme, two research books on India's Country profile on SRHR and on SRR were published. This year, these publications were disseminated among various groups and individuals working on youth's and women's SRHR.





A research study on 'Religious Fundamentalism and its Impact on Implementing Comprehensive Sexuality Education in South India" was completed and the final report was submitted to ARROW, Malaysia. A workshop was organised in Chennai, to disseminate the findings of this study, wherein NGOs, academicians, researchers, parents and young people, numbering 30 participated. Following this the findings were also presented in the ARROW – partner's meeting. We also presented our research findings at an international forum like the 61th Commission on Status of Women that was held in New York. Our Executive Director took part in this meeting, made two presentations. Two of our research articles were selected for publication in popular journals.

Training youth volunteers to promote youth leadership. This year, 30 volunteers were selected and they underwent a ten day training focusing on leadership, sexual and reproductive health rights. As in the previous year, this year also there was an active participation by the young people. Eight persons with an active interest bringing in societal change have joined as part time staff and volunteers in our field based programmes.



We have posted important information and research reports in social media to generate discussions in our Facebook pages; SRHR India and RUWSEC India; share information on the activities of the organisation, presentations made by the young people and short videos so that various like-minded groups/individuals can benefit through this. Short videos depicting the activities carried out by RUWSEC have also been posted.

Highlights of the activities for the year 2016–17

The programme on promoting general health and wellbeing in the villages focuses on creating awareness on health problems like, diabetes, blood pressure and anemia as these are associated with lifestyle changes. This programme is carried out in 25 project villages. During the field visits to villages and families, counselling is provided on food practices, importance of exercises and physical activities, follow-up treatment and importance of taking regular tablets. Medical intervention is also provided by the specialists in our clinic for diabetics and hypertension. A support group for diabetic patients has been formed, and guidance and counselling is provided for them during the periodic meeting held on the last Sunday of every month. Special trainings on diabetes and blood pressure were also conducted. There were 425 diabetic patients, (210 men and 215 women); another 305 patients suffering from blood pressure (160 men and 145

women); a total of 144 anemic women and adolescent girls all of whom availed the counselling services, the last set being still under follow-up treatment.

During field visits the diabetic patients are classified under two categories: 1. Those who have been only diabetic for long years and taking regular treatment and 2. People who are diabetic with other health problems. The counselling services take in to account of the following factors; what should a diabetic patient eat? What should not they eat? Why is follow-up treatment necessary? and what are the health problems if diabetes is not treated? Forty counselling cards have been prepared with standardisd information and these were shared during house visits in the project villages. People with long term health ailments come to our clinic for follow-up treatment. A special health camp was conducted for diabetic patients, wherein the kidney function test and related laboratory tests were also carried out. People who



were diagnosed with problems were referred to private and public hospitals for follow-up treatment; they are also followed up by the staff during the field visits.

In our clinic, specialised services are offered as an outpatient service, people accessing our clinical services not only opt for allopathic treatment services, but also seek alternative systems of treatment, and these services are gradually improving. In the reporting period, 15,371 people have made use of the clinical services, 7,091 opted for the allopath services, 6,202 the Siddha and 2,078 the homeopathy.

There is wide recognition for our specialised care services available on Sundays for diabetes. During the treatment, the doctors stress the importance of having

green vegetables, millets and pulses in their regular diet and reduce carbohydrate intake, but it came to be known that these food items are little expensive and people from the marginalised sections were unable to include in their regular diet. In order to make these food grains available in the public distribution system, we sent 100 post cards to the Tamil Nadu Chief Minister's Cell requesting her to provide wheat instead of rice. Ten similar petition letters were also sent to the Central Food Ministry in New Delhi with the signatures of the villagers. Now, our state government has started supplying 3 Kg of wheat in the PDS.

In the programme on imparting Sexual and Reproductive health rights among adolescents and young people, we planned to conduct life skills education for school students. As we were unable to get permission from the education department for this year, we approached the school head masters in our project villages and conducted the sessions. This year life skills education sessions were conducted in two middle schools. Four sessions were conducted, and 83 students benefitted out of these sessions. In the villages life skills education sessions were also conducted for students studying in the 8th, 9th and 11th standards. A total of 112 students benefitted out of these sessions conducted in the community. Similar sessions were conducted for college students and a trainer's training programme was also conducted for NSS volunteers in colleges. 20–23 students took active part in these sessions.



Young men and women below 30 years who were interested in contributing towards social change and taking up leadership initiatives from our project were selected and trained. A group of young leaders have been trained over a period of three years to continue with this initiative. During the reporting period 11 training sessions were organised for them and 20 - 34 aspiring young men and women took active part in these trainings.

A research report on Religious fundamentalism and its Impact on the Comprehensive Sexuality Education programme in South India was completed and printed after incorporating the reviewer's suggestions. The finding of the study was also shared in ARROW partners meeting in Kuala Lumpur, Malaysia.



With the support of ARROW-NORAD, a training manual on Comprehensive Sexuality Education was planned this year. A meeting with like-minded groups who work among adolescents was conducted during

May 2016. 29 participants attended this meeting and a list of 12 topics was finalised. Small groups were formed to complete compiling the manual with the support of two experts. After completing the manual, field testing of the manual was done by RUWSEC, WWTC-Thuthukudi, Buds of Christ Charitable Trust –



Nammakkal and SED – Chengalpattu. Around 100 adolescents took part in these sessions. After getting feedback from the

trainers and participants, modifications were made in the manual and now it is in the pipeline for publication.

We aim to develop the poetry and essay writing skills and the drawing skills of school and college students and youth volunteers who are beneficiaries of the programmes. In that initiative, we encouraged them to submit their entries and we selected the best ones and shared in our social media.

In order to promote gender equality and to improve the sexual and reproductive health rights of young couples, two trainings were organised for the newly married couples. To provide timely information and guidance to pregnant women and women with a single child a job card was prepared and information was disseminated to this target group continually,

In our project villages, during the reporting period, 127 pregnant women, 79 women with single a child and 47 mothers who have a six month old baby were provided counselling about the importance of spacing between the children. Seven women have made use of intra-uterine devices and five men have used condoms. A special camp on gestational diabetics – preventive measures and treatment was conducted in RUWSEC training centre. 25 women took part in this camp. This camp was conducted with the support of Dr. Usha Sriram, Chennai and Dr. Geetha of SRM University in the month of February 2017.

Community based workshops were conducted for women in self-help groups in 25 project villages and 25 such workshops were conducted in this year. 786 women attended these workshops. A support group consultation for cancer patients is conducted once a month, and 11 women and 4 men continue to attend these meetings. Support and guidance is provided for them during these meetings. Our research publication on India's Country Profile on SRR and SRHR –are disseminated widely through emails and postal dissemination is also under progress. We regularly post experiences of volunteers, short films, and blogs on SRHR photo stories in our social media page.

In the programme on combating gender based violence against women, we are in constant touch with the community committee members. They update us about the incidences of domestic violence in the community and seek guidance as and when required. Members who were interested in getting constant updates are given a special training. Constant counselling, support and guidance are provided for 32 women who were the victims of domestic violence.





The interest amount earned from the Ford Foundation's corpus fund was used to carry out the field work and to run the clinic. Research, publication and advocacy activities were conducted with the support of ARROW, Malaysia. We were also fortunate to receive small grants from individuals. Dr. Bagyam and Mrs. Maya lent their financial support for the field activities. Karunya Trust in Chennai also supported us in conducting a medical camp for diabetic patients.

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