Empowerment of Mothers of Single Headed Family for Child Development
—Action Research (2)

Yukiko HASHIMOTO*, Neha SATHE**

Abstract

This article reports the result of the action research of the support programme for single mothers run by one of NGOs in Pune, India. The programme was revised according to the pre-test survey in 2010 (Hashimoto 2011) and carried out together with the programme for their adolescent daughters and sons. The post intervention survey in 2011 shows clear improvement to the mothers’ empowerment level and generates better understandings of their children. Although the programmes were same for everyone, there is different level of achievement in each case. Some of the factors are external where as some are internal. However, as per operational definition there is positive change in the level of empowerment. Some of the respondents who were highly inspired and motivated have progressed in other areas whereas those who were at very low level have also moved forward. We cannot say that it is the sole effect of the intervention programmes but it can be seen that it has accelerated their efforts to gain faster control of their life situations.

Key words: women’s empowerment, female household, adolescent children

Introduction

Objectives of the Action Research

To design and implement programmes for empowerment of mothers based on the baseline data and to test the effectiveness of the programmes in terms of overall change in the attitude, lifestyle and family situation of the respondents.
Method

This research is qualitative in nature but quantitative methodology also has been chosen. As the author reported in the Action Research (1), pre-test was given to 21 mothers who had adolescent children. The findings showed they suffered: 1. Psychosomatic health issues, 2. Stressed out—being the sole bread winner for family, 3. Poor decision making and lack of self-confidence, 4. Unable to fulfill needs of family—self blame and guilt feeling, 5. Disciplining children—feel inadequate to handle them, frictions in interactions with adolescent children, 6. Work life balance—lack of time to spend with children, cook nutritious food, guide children, 7. Sore interpersonal relationships with parents in-laws and siblings, some reported to have no friends. All the issues are associated with one another and hence intervention programmes were planned for mothers as well as children separately.

An Overview Programmes

For children, three types of programmes were arranged, including motivational programs in the form of prize distribution, preventive and awareness/information, family life education, summer/winter camps, and excursion tour. For mothers the organization had arranged awareness programme on nutrition and family health, parenting skills—handling adolescent children, handling stress of single parenting, excursion tour for unwinding, visit to a NGO in the field of women empowerment, and vocational training in ironing.

Programmes for Mothers

*Nutritional Guidance and easy recipes

Some of the respondents had shared that they were HIV positive and on Anti Retroviral Therapy. Adequate nutrition, which is best achieved through consumption of a balanced healthy diet, is vital for health and survival for all individuals regardless of HIV status. Hence one session by one nutrition expert was organized for mothers. Some of the key messages were:

- How to cook food without losing the essential nutrients
- Importance of salads, leafy vegetables and fruits in diet
- Interrelationship of Health and Nutrition
- Nutrition for women and children
- Time and cost saving recipes

*Handling Adolescent Children—importance of communication

Another point that they get stressed out handling adolescents, face difficulties in disciplining children, gave a lot of guilt feelings for not being able to give proper time and having strained relationships with their children. One expert who has been working extensively in the field of adolescent education and guided adolescent girls in summer camp took a session with mothers. She discussed dos and don’ts in handling adolescents and gave some tips to improve communication with adolescent children. Major thrust should be given on healthy relationship and need of open positive communication with adolescent
children (Nayak, 2007).

*Single Parenting for Mothers of Adolescents*

Pre-testing had revealed that around 90% mothers are under stress. Around 60% felt helplessness due to absence of support system and lack of self confidence. One expert on child welfare addressed the mothers and explained them stress management techniques, importance of leisure time which acts as stress buster, healthy relationship with self. She also gave them the reassurance that they are doing a great job of doubling as mother as well as father to boost the morale and elevate their self esteem. This session was interactive as some of the women shared how they enjoy life in spite of having problems to tackle. It was quite an eye opener for some of the women who kept on talking about their difficulties.

*Excursion tour*

One day picnic was arranged for mothers to Tulapur, a historical place around 35km away from Pune. Before visiting Tulapur, mothers visited an NGO Investment in Man Trust in Phulgaon. This NGO is working in the field of Children and Women. Their training Centre which caters to the underprivileged girls and women. The main objective of this centre is to train women to become aware of their potential and of their dignity (Mukherjee, 2006). They had displayed various hands made embroidery, stitching and designing work which has been done by trainees at the centre. In their catering unit they demonstrated ginger cookies.

Instead of preaching them for learning new skills or trying new income generation activities, it is better to show them what others are doing and inspire them indirectly to think of economic empowerment (Dighe 1995, Kumar, Paul 2007, Mitra 1997).

*Skill Training*

Pre-test findings showed that maximum respondents were working as domestic workers and those women who were working as farm labour or daily wage loaders at vegetable vendors shops wanted to acquire advanced skills. We chose to offer professional ironing course as it requires comparatively less investment, a little start up cost and they could offer it to their employers or start a side business in addition to their routine work.

**Programmes for Children**

*Prize Distribution Ceremony*

To encourage and motivate students to achieve greater academic success the NGO arranged Prize Distribution Ceremony for all children who have succeeded to pass their exam were felicitated. On this occasion one professional in the Child Development Field addressed the children and through various activities and games she touched upon topics such as addiction, physical fitness and exercise, urged to achieve something in life. To entertain the children it had organised Magic Show by the famous magician.

*One Day Picnic in and around Pune*

Excursion tour to museums, historical places, and zoo (Katraj Snake Park) in Pune was arranged with help of public transport in Pune. This has helped children to know their city and its rich heritage and
historical significance. The main objective was to add to their knowledge outside their world of school and home.

*Adolescent Education Camp--for girls

To give family life education and life skill orientation, adolescent education--a residential camp was organised for girls for one week duration in the summer break. Personality development and exposure to the changes during adolescent was the focus of this camp. In order to establish their own identity in the men dominated society, it is essential for every girl to be empowered (Singh, Vyas 1993).

Art of living people trained them in breathing technique and mediation for stress free life. Self image, managing emotions, importance of values in life, realistic goal setting, decision making were some of the topics in the personality development section this camp. In adolescence education section family life education, female reproductive system and its functions, difference between friendship, love and attraction, gender bias, sexual abuse, HIV-AIDs topics were covered.

Through lot of games/activities and role plays girls were subjected to various life situations and were asked to act upon. They were also trained in traditional painting and dance as an art form.

*Adolescent Education Camp--for boys

Adolescent education camp was organised in two parts, Part 1 was in the winter break while Part 2 was organised during Summer Break.

Part 1 covered topic such as what is adolescence phase, how it affects overall life of the person, opportunities and threats, understanding own emotions and managing emotions, how to gain back lost confidence, relationships management, and responsible behaviour. Part 2 covered topics such as importance of self discipline, self image and self esteem, needs and priority, manners and etiquettes, hygiene--personal and surrounding, communication skills, aggression and assertiveness, goal setting. Male-female reproductive system and important issues during adolescent age were covered. Feedback was collected from adolescent children and evaluation of the residential camp was done by them.

Post test findings

At the end of the intervention period, a post test was carried out by interviewing the mothers. 19 respondents were available for post test who passed the criteria of attending 2 or more programmes in the intervention period.

Attendance

It is interesting to know that programmes related to children have got maximum attendance. The Prize Distribution Programme is attended by almost 85% respondents. Next one is Parenting Adolescents and Single Parenting for Mothers of Adolescent which show more than 75% attendance. This programme has got a very good attendance and it has reflected in better parenting skills reported by respondents. Programme on Nutrition got low attendance as it was arranged on some particular day when people could not use public transport.
Reasons for irregular attendance: Major reasons cited were as follows:

**Not enough information**—Respondents get letters late or illiterate respondents cannot read. The organization should see that they receive the information in advance by letter and a reminder call can be made to confirm.

**Leave not sanctioned**—It is not easy to get leave from work hence sometimes they cannot attend the programmes. The organization has arranged programmes on Sundays as well as on weekdays but since some of the respondents are working as domestic help they do not have weekly off.

**No conveyance**—Respondents stay far from the city. Sometimes they do not have enough money to travel by local transport.

**Ill health**—As mentioned earlier, most of them had health issues, out of nineteen respondents some respondents who HIV Positive. Almost all of them find it difficult to travel when they are not well hence they are restricted to home to rest.

**Prior Commitments**—Many times, due to domestic reasons like guests, marriage/death in the family, appointments for ART medicines, school meeting, they are unable to attend the programs.

**Learning through the Programmes**—Around 84% of respondents shared that the programmes gave them the inspiration to be independent and now they are confident to be independent economically. Though they need support they are successful in running the house confidently and independently. Near about 70% respondents have shared that their attitude toward life has become more positive and they are looking at in a more positive way. Due to this positive outlook their home atmosphere is more enjoyable.
and lively. Around 63% respondents have reported better parenting skills than before. They are trying to give equal opportunities for their children irrespective of their sex.

Chart No 3–Learning through the Programmes

Now they are better informed about the adolescent changes and hence can understand children better. Earlier they used to get worked up easily now try to discuss and understand children’s problems and guide them instead of restricting them for no reason due to sheer anxiety. At the same time there are some mothers near about 40% who still need help. These respondents are to be given guidance on case to case basis and this can be best possible through case work rather than workshop for parenting. One of the respondents has shared problem wherein her elder son who has been attending adolescent education programme is behaving much better than the younger son who is making her life miserable. Certain cases are best dealt on individual level as not all problems can be shared by mothers in common platform. Around 60% respondents have said about change in better living for them. This includes taking care of self, giving time for exercise and leisure, stopped worrying about future and enjoying small achievements, change in work which suits health. They have made changes in the diet, started making more healthy food.

Around 60% respondents have shared to have acquired vocational skills. Most of them have spoken about rakhi/jewelry making apart from ironing. Looking at the individual attendance record, only 30% of the respondents have attended training in ironing. They have referred earlier years skill training hence there is higher number of achievement. Only two women have tried to use ironing on a commercial basis and one of them could not continue as she does not have her own meter for electricity and pays rent to landlord for electric connection. The other one who has started ironing on commercial basis is successful in earning Rs 50-60/day. She has now invested in steam iron to expand her work.

Empowerment (based on operational definition)

Women’s empowerment is the process by which women gain greater control over the circumstances of their lives (Sen and Batliwala 2000). On the other hand, it can also be conceived as a process that women undergo, which eventually leads to changes (Mukherjee 2006, Hashimoto, 2009). As this particular action research is concerned, we had defined empowerment which talks about major indicators and its
expression as per table:

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Expressions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision-making</td>
<td>Controlling/spending money, participation and taking decisions on allocation of resources on housing, health, education, employment, marriage, life style change. Enhanced status in the family and not dominated by others.</td>
</tr>
<tr>
<td>Being hopeful</td>
<td>Looking forward, not giving up, plans for the future, taking future-oriented actions</td>
</tr>
<tr>
<td>Emotional Stability</td>
<td>Not overwhelmed by anger or uses it inappropriately which damages personal and professional relationships. Coming to terms with loss/unpleasant memories. Free from unrealistic worries.</td>
</tr>
<tr>
<td>Self Confidence</td>
<td>Belief that having capacity to accomplish goals and dealing with challenges of life.</td>
</tr>
<tr>
<td>Positive Self-image</td>
<td>Viewing the positive attributes of oneself, good opinion about talents and abilities in self</td>
</tr>
</tbody>
</table>

1. Decision Making

In case of decision making capacities, at the time of pre-test around 50% had said that they can take independent decisions and 25% had said that they depend on family and friends while taking important decisions and 25% lacked decision making capacity. Now at post test almost 80% have acquired the decision making, they do involve others but ultimately they are the final decision makers.

My two daughters got opportunity to study in well-known private school in Pune. Looking at their bright future, I decided to admit them in that school. I had to arrange for an additional expenditure of Rs 16,000/- which was difficult but I could arrange it by taking an advance from work. Another problem cropped in, I had to go in for appendix surgery and change my place of residence due to some reason at the same time. I had to make quick decisions without help from others.  

Age 30, mother of 2 children (aged 14 and 11)
2. Being Hopeful

At the time of pre test around 50% respondents had feeling of hopelessness. It was largely due to their inability to provide enough for their family. Post test data shows that almost half of the balance 50% could overcome this feeling and have started looking at future with hope. Almost 75% of respondents reported to be hopeful or optimistic and are trying very hard to change their situations.

"When you can not even afford smallest things which I want, why the hell you gave me birth? You wanted your children to suffer like you' When my youngest child verbally abuses and questions me like this I really feel powerless and loose my self confidence. I curse my destiny but then I realize that this is the way he is reacting to the situation. I should support him. I overcome my feelings and I do not let it affect me and I go to work. I am sure that one day he will realize.

…………………………..Age35, mother of 3 children (aged 17, 15 and 12)

3. Emotional Stability

Another very important indicator is capacity to control emotions, especially the ones which lead to destruction like anger, over expressing grief and finding it as an excuse for not trying to change the situation is a very big hurdle in development. At the time of pre-test around 60% of respondents had a good emotional stability and around 40% had no control over their emotions. At post test, more than 80% of respondents have shown that they are equipped to have better control over emotions.

First I lost my husband then my mother. Did not know what to do, where to go? I was completely shattered. Later on I thought if I loose hope what about my children? To whom they will look up to. I decided to control my mind and stopped mourning. Re-established my relationship with in-laws and they consoled me, helped me a lot.  ……………………………..Age 35, mother of 2 children (aged 14 and 12)

4. Self Confidence

In pre-test 40% of respondents were confident of themselves. At the time of post test, more than 70% were found to be very much confident and feel powerful. In pre test it was evident that they have limited capacity to fulfil the demands of life. In the post test the number increased to almost 70% that they feel they are capable to handle demanding situations.

Sometimes I feel that I am not confident enough. I feel I should have some masculine support by my side. But within moments I work on those thoughts and explain myself that this is my duty. If I don't do, who will do? No one is there with me but, I myself is there to support and I go ahead. This keeps me motivated to be independent.  ……………………………..Age 30, mother of 2 children (aged 14 and 10)

5. Positive Self Image

At the time of pre-test, it was very good to see that more than 75% respondents had positive regards for themselves. In post test this was seen to be up by 20%. Except for one respondent, all the other are
having positive self image. This is the very important indicator as all other indicators are based on this.

To summarize it can be said that the respondents were at 60% level of empowerment on average at the time of pre-test and now at post test they are at 90% level.

**Empowerment using scale**

This Readings of pre-test and post test based on the above mentioned indicators were taken. One point was added for each indicator and it was totaled. A scale was developed using the readings where in zero or one indicator of the above shows lowest level of empowerment and so on. If a person shows all 5 indicators, it is considered to be the highest level of empowerment.

![Chart No 5–Scaling of Empowerment](image)

From the graph we can make out that there were almost 20% of respondents who were at the lowest level and at the time of post test they have moved upward. There is not a single respondent at the lowest level. Rest of the graph shows gradual northward movement and almost 60% of respondents are at the highest level. This scaling has been done based on only 5 indicators. We still have other indicators to look at. If we compare the post-test findings with pre-test findings we can see the clear cut difference in health issues, decision making capacities and feelings of stressed out.

**Other indicators**

6. Health Problems

At pre-test around 70% respondents had mentioned health issues where as in post test the number has reduced up to 50%. This may be due to the psychosomatic problems are not reported at post test and only genuine health issues are reported. Around 40% respondents are HIV positive and are on ART (Anti Retroviral Therapy). When they talk about the health issues, their language has also changed from cranky health complaints to how they are taking care of their health and trying to be fit.
7. Stress Level

At the time of pre-test, around 90% had responded to be stressed out due to double burden (being the sole bread winner) where as in post-test only 30% have responded to be under such stress. This change is unbelievable and now the question arises, what has brought this change? Is their elevated self esteem, improved relationships or capacity to withstand stress has increased over a period and now they are confident enough to handle the situation single handedly and started feeling much relaxed. Let’s look at the response given by respondents in their own words.

I was very much worried if I will be able to provide the life’s necessities to my children. I was in dark about our future. Slowly I learnt to struggle and feel good, much relieved even in adverse conditions.

…………………………Age 33, mother of 2 children (aged 15 and 13)

8. Strained Interpersonal Relationships

As regards to the stress in relationships, at the time of pre-testing 50% had reported to have strained relationships and at post-test around it is at 40%. As the question was tricky, it was asked if they see any improvement in the relationships. Some of the respondents have reported improvement in relationships as they have learnt not to take stress even if certain relationships are sore and not working. Due to improved family situations as regards to children’s academic success, some respondents have shared that their relationships are improving and they have better social acceptance.

Earlier my in laws used to harass me. Now I have developed friendly relationship with them and they have also accepted me. Due to my changed status, I can enjoy my existence and I can definitely say that my relationships are meaningful now with people around.

…………………………Age 35 widow, mother of 15 year old

Now the question is—is it acceptance from the relatives’ side or respondent’s side or mutual? This point has not been probed but we can give benefit of doubt and say that certain gestures of family members are more visible in positive way due to changed positive outlook and attitude of respondents.

9. Occupational Comfort

In Pre-test around 60% of respondents were having comfortable jobs and in post test more than 70% have reported that they find their jobs comfortable. They do get physically tired but still can manage it very well. Many of them have preferred job of domestic helper over company worker as they can decide their own work time and are at home with children by finishing their work early. Couple of respondents have changed their jobs and have found a better employment as community worker/health worker of NGO rather than working as farm labor. These kinds of opportunities were open for them due to their association with other NGOs such as Manavya, SOFOSH and NMP.
10. Job Satisfaction

In the Pre-test around 55% respondents had said to be having job satisfaction. Now at Post-test more than 60% have said that they are satisfied with their jobs and do not want to change. Other 40% are ready to try out different jobs. Some of them have shown their readiness for additional work and are ready to learn new skills. This shows that even now they still feel that the organization should suggest change in the job and should arrange for training or should help in initial investment amount.

11. Self Development

Around 45% of respondents were ready for thinking about different areas for self development, at post test also there is slight change and around 40% of them are keen on developing themselves. More than half of the respondents are happy as they are and not very positive for thinking about self development or learning new skill.

12. Parenting Concerns

This entire action research is one of the efforts towards child rights. Every child must have a family which supports the overall development of children. Balsangopan and Sponsorship program of non institutionalized services for children in distress. For the holistic development of every child there should be parents or parent figures who can nurture the child. The focus is empowering mothers so that they can provide conducive environment for child development. Thus enhancing parenting skills of the mothers of adolescents was a big task at hand. The pre-test and post-test results can be compared in a tabular form.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Pre-test Finding</th>
<th>Post-Test Finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty in Handling-disciplining</td>
<td>Mothers are finding it difficult to cultivate moral values and disciplining due to absence of male role model.</td>
<td>Younger ones are still difficult children. Children do not listen, quarrel, stubborn.</td>
</tr>
<tr>
<td>Role and Responsibility</td>
<td>As they are working throughout the day, not able to give proper perspective about the roles and duties of children.</td>
<td>Those who attended camps, behave in more mature way. They are aware about their family situation and try to fulfill the expectation of mothers. Some of them ones are still do not follow routine, need to be told be responsible in everything.</td>
</tr>
<tr>
<td>Guidance</td>
<td>Due to less exposure and education, cannot guide children</td>
<td>About changes during adolescent. Some of them cannot guide in academics difficulties where as some do guide about which subjects they should chose for their 10th standard. (career guidance)</td>
</tr>
<tr>
<td>Decision Making</td>
<td>Feel threatened to take independent decisions about children</td>
<td>Most of them shared collective decision making about children, they involve children in the process and this makes it easy.</td>
</tr>
</tbody>
</table>
### Communication Gap

<table>
<thead>
<tr>
<th>Communication Gap</th>
<th>There is increased communication gap between mother and children. Children prefer not to or very little sharing is being done.</th>
<th>As mothers explain their difficulties in language children understand, communication channel is open.</th>
</tr>
</thead>
</table>

### Behaviour

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>They are too stubborn and adamant with their mothers. Irresponsible behaviours, lack of efforts and motivation are seen in many cases.</th>
<th>Some mothers reported aggressive behaviour of children. Most of them spoke about responsible behaviour of their children.</th>
</tr>
</thead>
</table>

### Relationship

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Due to increased working hours, distancing from children.</th>
<th>Almost all of them reported to have improved relationship with their children</th>
</tr>
</thead>
</table>

### Peer Pressure

<table>
<thead>
<tr>
<th>Peer Pressure</th>
<th>Peer group pressure exists</th>
<th>Children compare themselves with others and are materialistic. Mothers are worried about wrong company, addiction. They are anxious about issues which they cannot control.</th>
</tr>
</thead>
</table>

### Case Studies

#### Case Study 1

A, 35 years old widow, mother of two children aged 14 years and 12 years, lives with her mother in law 60 years old who gets family pension. She runs the house by tailoring work. She studied up to standard 9th. She is associated with the organization for last 5 years. She is a member of small saving group. She attended all the programs except excursion tour. She was dependent on her in-laws for decisions about everything as she stays in their house. She had good relationship with them but worked on to further improvise it. Now she involves them in the decision making but empowered to take her own decisions. She had a big question—how to discipline children, now she has learnt how to deal with her adolescent children and knows how to support them. She had complained that her children are stubborn and if they insist something she used to give up to their unnecessary demands. Now she tries to understand their needs and if she finds it necessary she makes them ready to be patient and if it is unnecessary she tries to explain them and make them aware of the fact. She used to get very upset quite often but now she does not punish her children when they commit any mistake for the first time. When she guides her children in academics or any school matter, her children told her that she talks like an educated mother. She feels that this confidence is a gift of the Shishuadhar who trust her and her capabilities. In the pre-test she had asked Shishuadhar to suggest a better work for her but now at post test her expectation from Shishuadhar is to help her to get a better sewing machine and loan for hosiery business. She has worked on her relationships with her in-laws and also tried parenting tips while interacting with her children. Now she has understood what she can do better with her skill of tailoring and thinking of expanding her business which supports her core skills and also has realistic plan.

#### Case Study 2

B, 38 years old widow, stays with a son aged 13 years. She has been associated with the organization for last 10 years. She was staying in a joint family with her in-laws with whom she had strained relationships. She got separated from them just 3 months before the pre-test. Earlier she had the family
support and last one year she is on her own. She was under tremendous stress as she was finding it difficult to meet both ends. Also she was very anxious about the future of her child as she was on ART. She has also changed her job and has taken a comparatively less strenuous work than before. She is working with a family to take care of the house (only cleaning and dusting). This shows that she is concerned about her own comfort which she used to give last priority. She did not face much problem in dealing with her son. In the post-test interview she shared that she used to feel that she cannot survive alone but now confident that she can work and feed herself and her son. Recently she had to undergo a surgery for hernia. She has taken an important decision about going in for surgery when no one was with her and bravely faced the situation. She was not sure to go for surgery but thought that if she does not go for it may affect her health adversely. She had risk either way so she decided to face the situation. When her son asked her if he can choose General Math instead of Algebra and Geometry, she was against him taking general math. She explained him how he will lose on the opportunities of higher education in those streams where math is a pre-requisite. She has also developed her skills as a parent and is able to guide her own son about future academic goals. She has helped him to choose right path considering future prospects instead of working on short term goal of passing math as a subject.

This is another example of empowered mother, with giving right advice with confidence.

Case study 3

C, 30 years old single mother, stays with two daughters aged 14 and 10 years. She has been associated with the organization for last 6 years. She works as a domestic help for last 7 years. At the time of pre-test interview she appeared to be confident of herself but was under stress of being single bread winner for the family. Her major limitation was how to fulfill the needs of the family and that used to make her sad. At the time of post test, she shared that her confidence have boosted like anything and she has started feeling very powerful about her own life. Her confidence which has elevated to this extent is surely pointing the fingers to her changed belief system about self. Higher self esteem has given her high level of confidence and high confidence has given her opportunity to earn self respect and positive self image. Her health does not permit very physically tiring work. She had got an opportunity to work in packing department but she refused (due to fixed working hours) and continued her work as domestic help which is activity based and not time bound. Once she finishes the daily chores, she is free to be home to care for her children. She expects the organization to arrange for training in beauty care and would like to work as a beautician. This can fetch her good money. She has given a tough fight to life; she used to feel the vacuum of the male counter-part and used to feel very lonely. Looking at other’s problem, she thought that I should work like a man then I won’t need a man by my side. Since then she has taken a quantum jump. She has worked for the betterment of the entire family. She could take loan and pay for higher fees for her daughters to admit them in premier schools in Pune. She gives equal importance to other activities in school for her children. She never had problems for decision making.
but her level of independency has increased. She has now started thinking about acquiring new skills and ready to take training which shows that she has capacity to do better in life and is thinking about realizing her potential.

Case study 4

D, 35 years old widow, stays with her two sons (17 and 12 yrs) and one daughter aged 15 years old. She works as a loader in vegetable market and earns daily wages. She has been associated with the organization for last 4 years. At the time of pre-test she had shared she had detected as HIV +Ve, very anemic and at times she has to take rest for the entire day and used to lose that day’s earning. She was worried about her growing up children. She had been in very strained relations with her in laws as they used to blame her for the death of their son and her sister in law troubled her a lot. She had a general feeling of hopelessness as she was unable to meet both ends. On top of that she had no skills to handle adolescent children, there used to be tussles in between. She did not know how to adjust with them and hence was having constant fights. At post test she shared following status on home front. Recently she has started taking treatment of ART against HIV and has giving importance to her own health and diet. She is no more anemic and feels better due to medication. Her elder son and daughter both attended the adolescent education camp during vacation. Her son was very confident and intelligent; throughout the camp he was actively involved in all the activities. Two of her children have learnt to be more responsible and behaving in very mature way. As an individual she has graduated over but still need to work on other aspects of her role as mother.

Conclusions and recommendations

Women’s empowerment is the process by which women gain greater control over the circumstances of their lives (Sen and Batliwala 2000). On the other hand, it can also be defined as process that people undergo, which eventually leads to positive changes. In this study the project has successfully yielded in increasing level of empowerment of their respondents.

Factors contributing to success

1. Need based designing

The programs are need based and after studying their exact nature of their needs, and feedback taken at the end of the programmes. Programmes aiming at economic empowerment were planned in two stages, making them aware of different options for raising their income and actual training them to acquire vocational skill. Those who could make use of it on commercial level affected in sustainable income source but for those who could not start using the skill for commercial purpose can use it for the benefit of their family.
2. Reward and recognition

Programmes like prize distribution are attended by one and all the academically successful children. All mothers have stated how it has motivated their children to do better and inspired their siblings. Similarly if we can keep track of achievements of their target group and reward, this will help their clients immensely. There are some success stories where in women have enrolled themselves for higher education, found a better employment, guided their children well and in time which has resulted in their success, started studying recipes from recipe books, and helped needy people and many such others.

3. Reaching out

Some programs received almost hundred percent attendances as those were planned for mother and child together. This shows that mothers feel more responsible and connected if they have child component in it. They have given less importance to individual needs programmes but programmes related to parenting issue too had got the maximum attendance.

4. Enriching Mother-child bond

Through their programmes have tried enhancing the capacities of mothers as an individual and at the same time, emphasis was given to improve their role as mother (parent) as they need to have both the competencies in order to have a contented life. From the analysis it is evident that most of the mothers are comfortable in handling their adolescent children and there are positive interactions between mother and children. This is the impact of giving inputs to both together. This practice can be continued but if we can arrange residential camps for mother and children together it would be a very good exercise. Both of them will be away from their regular routine and in good atmosphere free from worries and in open mental frame.

5. Capacity Building

The programme has given them an opportunity to look at themselves objectively and inspired them to bring in the desired change. When we say desired, that means one has to wish to change certain aspects of his or her life. These women have acquired that skill to understand what they can change and what they cannot. That’s the biggest achievement of this effort.

6. Peer learning

We recognised the strength of being together and hence specifically arranged programmes which enhance social interaction within their clients. This has given them a sense of togetherness which has resulted in greater psychological well-being, social competence, and self-esteem. This can be further utilised and some programs can be specially designed using peer learning methods.
7. Association with NGOs

These respondents are connected to the organization for the monetary benefit scheme for children. Monetary help is a major support to them, which keeps them motivated to achieve more and more day by day. Financial component has played a very significant role in their empowerment as it has taken care of some part of their expenses and made their life little comfortable at least in some areas and they can focus on their development. Individual case work inputs have also contributed in this to a great extent. Some of the respondents are working as health worker/field worker in different social organisations. Some of them who are HIV Positive are attached to NGOs working in that specialised area and that has created employment opportunity for them. It has given them lot of strength as they have got better social status. In addition to our programmes, these organisations’ internal training/association also must have contributed to higher level of empowerment (Swarnalatha1997, Devasia, Leelamma, Devasia, 1994).

Limiting Factors

1. Low attendance

There is definitely a decrease in attendance. They are due to no communication about programmes, no fixed schedule of programmes, no money to travel, ill health. It is studied that they usually borrow money from neighbors for travel which they can return once they are back home. If we can think of reimbursing the amount for attending the programme it will help the women to attend more programmes.

2. Apathy for learning new skill

Very few women wanted to add specific knowledge and skills. It seems they are more focused on children’s development and hence they do not want to think about it. If we look at it from a different perspective, we can also see that they are not ready to leave their comfort zone and try something very new which they are not confident. At the same time it was wonderful to know that those who have learnt basic tailoring have shown interest in Special Blouse Stitching, Fashion designing. We can develop tailor made programs or refer the particular client to network agencies who keep on running similar programs.

3. Less or no individualization

All the programs are designed considering common needs or issues and hence it does not leave a scope for individualisation depending on the individual capacities/limitations. All the clients are different and their responses are different although they posses similar characteristics. Some of the issues cannot be tackled through group work method and hence it should be supported by case work only. In one or two cases, major issues about behaviour problems of children could not be addressed.
**Objectives Achievement**

Although the intervention programmes were same for everyone, there is different level of achievement in each case. Some of the factors are external where as some are internal. However we can surely say that as per operational definition there is definitely positive change in the level of empowerment. Some of the respondents who were highly inspired and motivated have progressed in other areas whereas those who were at very low level have also moved forward. We cannot measure it in terms of individual growth as other factors were not controlled. Also, we cannot surely say that it is the sole effect of intervention programmes. At the same time, it can be seen that it has accelerated their efforts to gain faster control of their life situations.

**Effectiveness of programmes**

Any successful programme can be called successful only if it changes the level of knowledge, attitude and skill of the people for whom it was implemented. This action research has definitely highlighted the increased level of knowledge, changed attitude (positive and open) and better vocational, social and parenting skills of respondents. Programmes have definitely helped the respondents to act for better lifestyle, contentment, given positive attitude which is going help them forever. From the above discussion it is clear that the almost all the respondents have made an attempt to change their way of life or the way they look at it and clearly have taken first step towards sustainability. The programme has been successful in providing appropriate external support and intervention which fosters the process of empowerment.

**Reference**


*Yukiko Hashimoto Faculty of Social Welfare, School of Health Science and Social Welfare, Kibi International University.

**Neha Sath: Research assistant, NGO Shushiwadhar, Pune, India