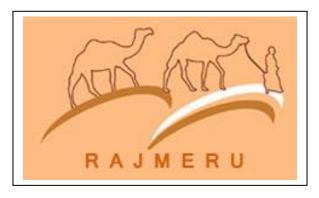


GENDER ANALYSIS

A STEP TOWARDS GENDER INTEGRATION IN PROGRAM AREAS OF RAJMERU



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Preface

RAJMERU operates across various districts of Rajasthan and has successfully broadened its work to include over 300 Community-Based Organizations (CBOs) and their collectives/Peoples Organisations (POs). These Pos are active in different regions of the state, addressing a wide range of issues and concerns. Through this extensive group of POs, numerous key issues affecting local communities have been identified for further action. The project is supported by a sensitive and visionary international donor Brot für die Welt (BfdW). This gender analysis was initiated by the Rajmeru and conducted in nine districts of Rajasthan, to understanding the gender dynamics in one of India's most culturally rich and diverse states.

The objective of gender analysis was to examination and understand the nuances and the dynamics, of the lived experiences of women, men, boys and girls across the region. By leveraging both qualitative and quantitative research methods, the analysis offers a nuanced perspective on issues such as access to education, economic opportunities, healthcare, and participation in decision-making processes.

Our first step for the gender analysis started with orientation of the volunteers and the fellows on understanding gender in the context of Rajasthan followed by an orientation on data collection. The formats for the gender analysis reports were developed in consultation with the team to ensure that they are contextualised and relevant for the data collectors. The report is a based on the analysis of the data collected by the active volunteers and fellows of Rajmeru who supported the initiative and were the torchbearer for finalisation of the report.

We extend our heartfelt gratitude to the women, men, girls and boys from the community who participated in this study, sharing their insights and experiences. Their voices are central to this report which has been also reflecting the secondary data from relevant government sources.

This report is intended to serve as a valuable resource for Rajmeru and its associated POs to integrate gender in their work and address issues of gender based discrimination and violation. It provides actionable insights and recommendation that we hope will inform strategies and initiatives aimed at fostering a more equitable and inclusive society in Rajasthan and beyond.

As we move forward, we remain hopeful that the findings of this report will catalyse meaningful dialogue and drive impactful change, ensuring that the principles of gender equity and social justice towards advancing gender justice by the Rajmeru.

Acknowledgement

The Gender Analysis Report emerges from the Rajmeru and its associated PO member's strong commitment to ensuring that the Rajmeru's interventions are gender-inclusive. Rajmeru promotes collective of CBOs that work on issues of integrated rural development in Rajasthan. Rajmeru envisages changing social scenario via information, awareness and empowered the rural populace. In its endeavour to bring social change it identified gender as a core area for inclusion and bringing systemic changes around gender norms that often acts as a barrier in advancing gender justice and a transformative process.

The gender analysis study team developed a comprehensive understanding of various gender indicators using a life cycle approach, focusing on health, education, livelihoods, participation, and access to services. The report aims to evaluate how these aspects influence or enhance women's and girls' rights.

In close collaboration with gender consultants, the Rajmeru team dedicated themselves to producing this in-depth gender analysis report. The analysis scrutinizes the Harvard Analytic Framework also known as Gender role framework to understand the distribution of productive and reproductive tasks, access and control over resources, and the benefits derived from activities, highlighting the factors contributing to gender role disparities.

The development of the gender analysis framework and the finalization of the report benefited significantly from the contributions of the Rajmeru team members—fellows, volunteers, and key functionaries from various supporting organizations, as well as external experts.

The report was prepared by Dr. Komal Ganotra, Director of Safetitude, and Ms. Moitrayee Mondal, in close consultation with the Rajmeru team. We extend our gratitude to Mr. Dinesh Chandra Vyas, Executive Operations, Rajmeru and Ms. Shweta Tripathi, Assistant Programme Manager, Rajmeru conceptualizing the need for this gender analysis as a foundational step toward integrating gender perspectives into the Rajmeru's programs.

We also appreciate the efforts of Mr. Suresh Lunkad, Fellow from Jodhpur region, Mr. Dharamraj Meghwal Fellow from Udaipur region, and Mr. Murlidhar Kumavat from Jaipur region, who coordinated the data collection and ensured the timely completion of both qualitative and quantitative data.

Our sincere thanks go to the visionary donor Brot für die Welt (BfdW) for their support, which has been instrumental in initiating and advancing work on gender inclusion and women's rights within the Rajmeru.

Finally, we are deeply grateful to all the women, men, boys, and girls who shared their valuable insights during the study. Their contributions have provided a critical understanding of the existing gender dynamics at both macro and meso levels, encompassing family, community, and societal impacts.

List of abbreviation

Abbreviation	Full Form
ASER	Annual Status of Education Report
ANM	Auxiliary Nurse Midwife
Bf	Brot für die Welt
CSO	Civil Society Organisation
СВО	Community Based Organisation
COVID 19	Corona Virus Disease 19
DISE	District Information System for Education
FY	Financial Year
FGD	Focus Group Discussion
GBV	Gender Based Violence
GER	Gross Enrolment Rate
MMR	Maternal Mortality Rate
NAS	National Achievement Survey
NCRB	National Crime Record Bureau
NFHS	National Family Health Survey
NREGA	National Rural Employment Guarantee Act
NGO	Non-Government Organisation
OOPE	Out of Pocket Expenses
PMMY	Pradhan Matri Matritwa Yojana
PO	People's Organisation
SHG	Self Help Group
UDISE+	Unified Districts Information System for Education Plus
VIC	Voter Identity Card

Maya Angelou

~ Still I Rise ~

You may shoot me with your words

You may cut me with your eyes

You may kill me with your hatefulness

But still like air I rise

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Introduction:

Gender analysis is crucial for understanding the dynamics between men and women shaped by societal and cultural norms. In Rajasthan, India, this analysis provides valuable insights into the gender relations, roles, and disparities, affecting social, economic, and political participation of men and boys. Despite major progress through legislative reforms and development initiatives, gender disparities persist in education, healthcare, employment, and political representation.

Rajmeru's gender analysis offers a comprehensive framework to understand power, privilege, and inequality among men and women, girls and boys in Rajasthan. By examining norms and structures through a gender lens, stakeholders can work towards an equitable society where all individuals, regardless of gender, can thrive and fulfil their potential.



Figure 1 Photo taken during Women's Day celebration as "Mahila Sabha" at a Gram Panchayat in Dudu district.

The gender analysis was conducted in 9 districts of Rajasthan that is Jaipur, Dudu, Ajmer, Balotra, Jodhpur, Kuchaman, Udaipur, Salumbar, Phalodi and Sawai Madhopur. The researchers covered at least 1 block in each districts and where there was a presence of the Rajmeru. As a part of the methodology, it was decided that in each of these districts atleast50 women will be covered as part of the quantitative survey and to understand the issues of single women at least 5 women from each districts will be covered.

The preliminary social demographic data shows that 71% of the respondents were women who were presently married, 3% of the women were single, 19% were women who had lost their husbands and 1% were women who are divorced. Rest all were either adolescent girls, women in living in relationship or women who have been deserted by their partners.

As part of the gender study, it was found 40% women mentioned that they live in a household where women are head of the household. This is also to be known that there are household where men often migrate to different place and women stay back to take care of the elderly and children thus increasing the burden of women's unpaid carework. 57% of the women mentioned that they live in household headed by men and 4% of the households are headed by children. 95% of the women who were surveyed lived in their own home and 4.6% of them lived in a rented home.

Based on the analysis, several key recommendations were developed to enhance gender integration in Rajmeru's interventions. The first step involves increasing the recruitment of women fellows and volunteers, alongside collaborating with organizations and Community-Based Organizations (CBOs) that have a clear focus on gender mainstreaming and addressing gender-based violence. Additionally, it is crucial to strengthen the capacity of staff, volunteers, fellows, and CBO members to better understand gender issues within the projects. This can be achieved by developing specific gender action plans with clearly defined and timely outcomes. Another important aspect is to create and implement campaigns that address context-specific gender issues, ensuring that the broader community is actively involved in the process. This approach not only raises awareness but also fosters a collective effort toward gender equality. Finally, greater emphasis should be placed on the collection and analysis of gender-disaggregated data. This data is essential for monitoring progress, learning, and refining interventions to better address gender disparities. By focusing on these areas, Rajmeru can significantly strengthen its efforts to integrate gender considerations into its work, leading to more inclusive and effective outcomes.

Methodology of the gender analysis

Methodology for conducting a gender analysis in Rajasthan was comprehensive, participatory, and contextually sensitive, taking into account the diverse socio-cultural, economic, and political landscape of the state.

Desk Review and Contextual Analysis:	Stakeholder Consultation:	Quantitative Data Collection and Analysis:	Qualitative Data Collection and Analysis:
The study team conduct a comprehensive review of existing literature, reports, and data related to gender issues in Rajasthan. This includes government publications, academic research, NGO reports, and international development studies.	As part of the gender analysis process, the team conducted a two day meeting in Jaipur with the Rajmeru volunteers and fellows with the objective of orientation around gender issues and facilitate understanding on qualitative data collection.	As part of the gender analysis, collected quantitative data on key gender indicators such as education, health, employment, income, political participation, and violence against women. The data was analysed to identify patterns, trends, and disparities across different socio-economic and demographic groups in Rajasthan. The study team utilize google form to collect the data across the 9 districts to assess the magnitude and significance of gender gaps and inequalities.	A semi structured Focus Group Discussion was developed which was provided to all the volunteers for conducting the meetings with the women and men in the community. The focus group discussions were around the issue of health, education, gender based violence participation and livelihood. The semi structured focus group discussion formats were used by the fellow as a ready reckoner while conducting the focus group discussions.

Sampling frame and sample size

As part of the study the team selected 9 district from the 3 region where Rajmeru had its PO member were considered for the data collection process for the gender analysis. Based on the nature of intervention by Rajmeru, a matrix was developed to captured to meet the objective of the endline survey. The matrix below will provide an insight on the sampling frame and size

Region	District	Focus Group Discussion Women	Focus Group Discussion Men	Focus Group Discussion Adolescent Girls and Boys	Individual Survey
_	Sirohi	2	2	1	50
nd:	Salumbar	2	2	1	50
Udaipur	Udaipur	2	2	1	50
	Kutchaman	2	2	1	50
l pur	Phalodi	2	2	1	50
Jodhpur	Balotra	2	2	1	50
Jaipur	Chakshu	2	2	1	50
	Dudu	2	2	1	50
	Sawai Madhopur	2	2	1	50

Focus group discussion

The survey involved conducting focus group discussions (FGDs) to gather qualitative data on knowledge, attitudes, and practices. Each FGD included 10-15 women or men, boys or girls. Participants were identified with the support the members of Manch. The volunteers led the FGDs using discussion guides with open-ended questions. A total of FGDs were conducted in the 9 districts This approach aimed to capture diverse perspectives and insights members from different socio economic structure.

Quantitively Survey

A survey was taken up with close ended questions to understand various aspects of the women's life and also to gauge the challenges around health, education, livelihood, decision making and gender based violence. A total of 50 survey formats were filled in from each district. Altogether 450 formats were filled along with addition 5 format from each district of single women were also filled in. The formats were designed with the support of google form which helped us to gather the information direction in a consolidated manner.

Ethical consideration

All activities involved in this study have taken into consideration of ethics in research principles. Description of the main study objectives and confirmation of free consent was provided to all potential respondents involved in the actual study. Respondents were entitled to stop responding or participating in the study at any time. Photographs were taken with permission from the respondents during the study.

Findings of the Gender Study

Education of women and girls

During the gender analysis it was found that 43% of the women have never gone to school, 21% of them could only sign or read or write basic literature. 8% of the women have studies less than primary education. Only 2% are graduate or have studies above, 7% of them have completed primary education but not finished studying beyond VIII standard.

Enrolment and Access:

Data from sources such as the District Information System for Education (DISE) and government surveys reveal positive trends in enrolment rates for girls in primary and secondary education in Rajasthan. However, disparities in access persist, particularly in rural areas due to socioeconomic factors and cultural norms. According to DISE 2019-20, the Gross Enrolment Ratio (GER) for girls in primary education in Rajasthan was 94.68%,¹ indicating an improvement over previous years. Similarly, the GER for girls in secondary education was 78.86%, demonstrating increased access to schooling.

Eighty-nine percent of children age 6-17 years in Rajasthan attend school (92% in urban areas and 88% in rural areas). School attendance is 95 percent age 6-14 years, but drops sharply to 73 percent at age 15-17 years. There is no much gender disparity in school attendance in the 6-14 year age group; however, in the age group 15-17 years, 68 percent of girls compared with 78 percent of boys are attending school. ²

During the focus group discussions with adolescent girls, it became evident that while young boys are afforded the opportunity to pursue education outside their villages or place of residence to follow their aspirations and select specialized courses, girls are restricted to studying in schools nearby. Furthermore, families tend to prioritize boys' education, considering it primary, while viewing girls' education as secondary. Consequently, there is a disparity in the allocation of resources, with boys often attending private schools where more financial investment is made for admission and ongoing education, while girls typically enroll in government schools. This perception persists despite the prevailing notion that private schools offer superior education.

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¹ <u>UDISE+2021 22 Booklet.pdf</u>

² National Family Health Survey (NFHS-5) 2019-21: Rajasthan (ruralindiaonline.org)

During the FGD, a group of men said that "girls who have access to education is exercising their right to choice". They said "parai bigar rahi hai". Now most girls have access to mobile which is supposed to be providing them access to education but it is giving them the scope to interact with men and boys. Such situation is leading to diversion from education and promoting child marriage and choice of spouse out of their community.

During a meeting with men and boys in the village, it was revealed that 50% of the boys discontinue their education after completing the eighth grade. The primary reason for this is the lack of opportunities available to them in the village. With limited access to higher education, vocational training, or employment prospects locally, many boys feel compelled to leave school at a young age. As a result, most of these boys seek work as daily wage labourers in nearby cities or even in different states. The absence of educational and economic opportunities in the village forces them to migrate in search of better livelihoods, often at a significant cost to their personal development and future prospects. This trend not only hinders their educational growth but also perpetuates the cycle of poverty within the community, as these boys are unable to access the skills and knowledge necessary to improve their socio-economic status.

The situation highlights the urgent need for improved educational facilities, vocational training programs, and economic opportunities within the village to ensure that these boys can continue their education and build better futures for themselves and their families.

~ Men and Boys meeting, Khagara, Malpura, Salumbar

Dropout Rates and Retention:

Despite improvements in enrolment, data from the Annual Status of Education Report (ASER) highlight significant dropout rates among girls, particularly in rural areas. Factors such as early marriage, household responsibilities, and lack of support contribute to girls leaving school prematurely.

During the FGDs it was found that they girls have to finish all household work before going to school and on returning from school have to complete the household work. Parents often refer to the future of girls which is basically to take care of household and not any further aspirations. A girls during the meeting said that her parents said " pad leekh kar kya karegi ghar ka kaam hi to karna hai".

ASER 2020 data for Rajasthan revealed a dropout rate of 11.3% among girls aged 15-16, emphasizing the need for targeted interventions to improve retention and completion rates.

During the FGDs it was also found that boys beyond standard VIII dropout specially in the bordering districts to migrate to different states for livelihood or work.

Quality of Education:

Data on learning outcomes and school infrastructure underscore challenges in the quality of education, especially in rural schools. According to the National Achievement Survey (NAS) 2017, learning levels among girls in Rajasthan were below the national average, indicating the need for improved teaching standards and educational resources.

Ratio of female teachers in the school and girls' education

In Rajasthan, the ratio of women teachers in schools plays a significant role in shaping girls' education. While there has been progress in recent years, with efforts to increase the number of female educators, disparities persist. Despite the importance of female role models in education, especially for girls, the ratio of women teachers in many schools across Rajasthan remains lower than desired.

Furthermore, the shortage of female teachers may also act as a barrier to girls' access to education. In conservative communities, families may be reluctant to send their daughters to schools where there are few or no female teachers, due to cultural or religious norms. This reluctance can hinder girls' enrolment and retention in schools, perpetuating gender disparities in education.



Figure 2 Girls participating in the women's day celebration raising their concerns on lack of lady teachers in school in front in the panchayat.

As per the UDISE+ 2021-22 flash data shows that the number of female teacher is 287350 and male teacher is 437175. This shows that the number of female teacher is relatively less than female teacher whereas the girls' enrolment in the school is higher that the boys.

Social norm and its impact on education

The quality of education is extremely poor, and the education system often affects men and women differently. Schools are located far away, leading communities to restrict girls' access to education under the guise of safety, while boys are not subject to the same restrictions. According to the women's group of Thar Vikash Manch, there is a clear disparity in the education and employment opportunities available to boys and girls. This is largely due to prevailing social norms that limit girls' mobility and the lack of adequate transportation connecting villages to schools. Additionally, the absence of proper toilet facilities and female teachers in schools further exacerbates the issue. These factors contribute to lower enrolment rates for girls in higher education and an increase in dropout rates and child marriage.

Issues of harassment in the schools

During the Focus group discussion with adolescent girls, it was found that there are more issues of harassment in the girls' school as compared to coeducational schools. Once probed it was found that boys often stand outside the girls' school and tease them during recess or after the schools. The girls are extremely fearful to share such incidences of harassment with the parents. It was found that even if they report it back to the families, the girls are only to be blamed and often stopped going out for education.

NFHS-5 (2019-20) data indicate that the median age at first marriage for women in Rajasthan was 19.1 years, reflecting the persistence of early marriage as a barrier to girls' education.



Figure 3 Rajmeru Executive Committee member Sushila Chouhan, interface with women in Kutchaman District.

Government Initiatives:

The Government of Rajasthan has implemented various initiatives to promote girls' education, including cash transfer schemes and awareness campaigns. One such initiative is the scheme to provide cycles to adolescent girls after completion of standard VIII. It was found that in majority of the cases girls do not use those cycle as cycling by the girls is not in practice. Often the community make fun of the girls who cycle. The cycles are either used by the boys or the fathers for their commutation. On the other hand, it was also shared that the quality of the cycles distributed were very poor.

There is a huge number of girls across various district who have not yet received the cycle despite of the state government announcement of allocation of budget for

Women and Health

Maternal Health:

NFHS data highlights improvements in maternal health indicators in Rajasthan, yet challenges persist. According to NFHS-5 (2019-20), the maternal mortality ratio (MMR) in Rajasthan stands at 201 per 100,000 live births,

reflecting progress compared to previous surveys. However, regional disparities and access barriers to maternal healthcare services remain significant concerns, particularly in rural and remote areas.

There has been a significant increase and preference for institutional delivery in the community. This is primarily due to the initiative provided under PMMY, Janani Suraksha Yojana and the Chiranjeevi Yojana³ that includes insurance for maternal health care. The Chiranjeevi Yojana acknowledges this reality by focusing on comprehensive maternal care, ensuring that every expectant mother receives the care she deserves.

Child Health:

The NFHS data underscores the importance of addressing child health disparities in Rajasthan. While there have been notable improvements in child health indicators such as immunization coverage and infant mortality rates, challenges such as malnutrition persist. NFHS-5 data reveals that 37.5% of children under five in Rajasthan are stunted, indicating the need for targeted interventions to improve nutritional outcomes among children, especially girls.

Reproductive Health:

Reproductive health remains a critical area of concern, with NFHS data highlighting gaps in access to family planning and reproductive healthcare services. While there has been progress in contraceptive prevalence rates, disparities exist, particularly among marginalized communities and rural populations. NFHS-5 data indicates that only 48.4% of married women in Rajasthan use modern contraceptive methods, emphasizing the need for comprehensive family planning programs and reproductive healthcare services. Women health issues include anaemia, excessive bleeding during period, calcium deficiency, body pain and low body weight. Majority of the women suffer from white discharge and often such issues are not given adequate importance. During the FGD it was also shared by the women that ASHA worker do not reach out to them or create any awareness around reproductive health. It was found that 56.8% of the respondent rely upon the Primary Health Centre, almost 9.9% of the women reach out to the local sub centre for their health issues which are mostly around gynaecological issues. 11.3% of the women have accessed the district hospital. Around 7% of the women reach out to private doctor or any small clinic, apart from that 2% women approach private doctor, and around 5 % women approach local quacks and traditional healers. During the Group Discussion it was found that women reach out the hospital only when it is a major concern and cannot be delt with heath issues. 58% of the women are accompanied by their husband or male whereas 37% of the women are able to go directly.

Menstrual Hygiene and Health Management

During the FGD it was found that majority of the women face major issues related to menstrual health. Often women do not reach out to medical practitioner for recovery. It was found that generally they come with complains of heavy bleeding or irregular bleeding. As part of the ANM at the sub centre mentioned that when they come to them for treatment the illness had become serious. It was also found that the women who are undergoing menopause also major challenges. It was found that women and girls feel uncomfortable to share such "womanly" "private" issues to men who are supposed to take them to the doctors. The three major issues related to menstrual health are heavy or irregular bleeding and pain during menstruation. Women often take medicine themselves and or use homely treatment to addressed such concerns.

During the FGDs with the adolescent girls it was found that there are almost negligible facilities around menstrual management at school. It is to be noted that the ration of female teachers in comparison to male teacher is skewed. Often toilets do not have running water or there are no facilities for disposal of sanitary pads in schools. Knowledge development around menstrual hygiene is poor in the school and also at home.

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³ Chiranjeevi Yojana (MMCSBY) 2023: A Universal Health Insurance Scheme for Rajasthan - sarkari neethi

The Government of Rajasthan had earmarked Rs200 crores in the budget for FY 2022-23 to provide sanitary napkins to adolescent girls through various channels . Supply orders have been issued to provide free sanitary napkins to over 1.15 crore beneficiaries at 60,361 Anganwadi centres in 33 districts, and 26.48 lakh beneficiaries in 34,104 government schools in the state. ⁴ However, another data shows that there is a deficit of almost 50% where adolescent girls and women are unable to access sanitary products.

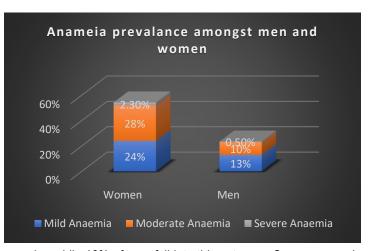
Several women expressed concern over the absence of services for menopause management, highlighting the significant health challenges they face during this stage of life. They noted that the lack of targeted healthcare support leaves them without essential guidance and care, exacerbating the difficulties associated with menopause.

In addition to the lack of services, the women also pointed out the absence of awareness programs specifically designed for older women. This gap in education and outreach means that many are left uninformed about how to manage the physical and emotional changes that accompany aging, particularly menopause. The women emphasized that addressing these issues is crucial to improving their overall well-being, as the current lack of resources and information leaves them vulnerable to health complications and a diminished quality of life during this critical period.

Nutritional Status and underweight:

Nutritional status is a key determinant of women and girls' health outcomes, with NFHS data revealing persistent challenges in Rajasthan. While there have been improvements in nutritional indicators such as underweight prevalence among women, disparities exist based on socioeconomic status and geographic location. NFHS-5 data indicates that 26.8% of women aged 15-49 in Rajasthan are underweight,⁵ highlighting the need for targeted interventions to improve nutritional outcomes, particularly among adolescent girls and women of reproductive age. During the Focus Group Discussion, it was found that women generally do not eat on regular interval and often eat only what is left after feeding everybody. Nutritional discrimination starts much early in the lives of girls and women which further becomes a generation issues related to malnutrition.

Anaemia can lead to maternal mortality, weakness, reduced physical and mental capacity, increased vulnerability infectious diseases, perinatal mortality, premature delivery, low birth weight, and in children, impaired cognitive performance, development, motor and academic achievement. In Rajasthan, anaemia is a significant health concern, particularly among women and children. Data reveals that nearly 64% of women in Rajasthan are anaemic, compared to 29% of men. Of the anaemic women, 24% suffer from mild anaemia, compared to 13% of men.



Additionally, 28% of women are moderately anaemic, while 10% of men fall into this category. Severe anaemic

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⁴ Rajasthan Government Sanctions Rs 200 Crore For Free Sanitary Napkins To Women (ndtv.com)

⁵ NFHS-5 Phase-II 0.pdf (mohfw.gov.in)

affects 2.3% of women and only 0.5% of men. These trends highlight a gendered pattern in anaemia between men and women.⁶

Women access to health services:

Women take more time to seek support from doctors in case of any health issues. Also, they take support only when the situation is worst and has gone beyond any further ignorance. Women generally take medicine that is available at home and often wait for male members to take them to the doctor and as a social practice women's visit to doctor is considered as the most neglected area. During the FGD it was shared that is a married women falls ill the expenses are borne by women's family.

During the Quantitative Survey it was found that 50% of the women who are associated with the women's group of SHGs have increased accesses to health service and health awareness programmes specially around reproductive and child health. Most families in the village live in poverty, and it is primarily the men who have access to healthcare services. Women typically only seek healthcare when they experience a serious illness, and decisions regarding healthcare are mostly made by men. Women's health issues are often overlooked

There are numerous myths and concerns surrounding reproductive health within the community, and women frequently bear the brunt of these societal pressures.

~ FGD with women's group. Samudayik Pairavi Manch, Samdari, Balotra.

Women and access to WASH facilities

The surveyor assessed the availability of the toilets in their home. It was found that 42.1 % of the household do not have a toilet as a result of which open defecation is common. 10.7 % mentioned that they use community toilets, and 25% of the household have dry toilets. 19% of the household have pit toilet and only 3.5% household have with toilet with flush.

71.8% women mentioned that they had to face various challenges to maintain their privacy while defecating. They mentioned that they have faced major challenges in maintaining their privacy and dignity. Often, they had to wait till it gets dark to relieve themselves and sometimes they had to wait till others leave the place and nobody is around.

⁶ National Family Health Survey (NFHS-5) 2019-21: Rajasthan (ruralindiaonline.org)

Social norms related to reproductive health

The women shared that at one hand there is almost no awareness amongst women and girls, around reproductive health, on the other hand the health seeking behaviour for women's health is further poor. Women often face pressure from the family members to conceive immediately after marriage. It was shared that lower the girls age at marriage the more they are pressured for pregnancy. Further there is a societal pressure on the women to bear a male child. Decisions related to pregnancy or number of children a women should have been taken by the elders of the family or the husband.

The top health concerns faced by women are

- ✓ Anemia
- Excessive bleeding during menstruation
- ✓ Calcium Deficiency
- ✓ Body Pain
- ✓ Low Body Weight

Women's group Kutchaman, at Sub Centre



Figure 4 Women NREGA workers discussing livelihood issues in Salumbar district.

Contraception

It was found that 90% of the time the responsibility of contraception is on the women and men hardly take any responsibility. Failure of contraception is also blamed on women. Rajasthan, like many parts of India, faces challenges regarding the use of contraception due to a combination of cultural, social, and economic factors. In rural areas, traditional gender roles and the preference for male children often influence family planning decisions. Women in Rajasthan frequently bear the primary responsibility for preventing unwanted pregnancies, yet they often have limited autonomy in deciding on the use of contraceptives.

Approximately 72.3 % of married women aged 15-49 in Rajasthan use some form of contraception of which 62% of the women use some modern method. 42.3% cases are of female sterilisation whereas only 0.3% are cases of

male sterilisation.⁷ The unmet need for family planning in Rajasthan is approximately 7.6 %, indicating women who wish to delay or stop childbearing but are not using any contraceptive method.

Men's participation in family planning is generally low, and there is a reluctance to use male contraceptives, such as condoms. Female sterilization remains the most common method of contraception, reflecting the societal expectation that women should manage reproductive responsibilities. There are various myths like men hysterectomy leads to weakness. Women also informed that there are experience often men hysterectomy fail.

Moreover, the use of modern contraceptive methods is often hampered by limited access to healthcare services, lack of awareness, and prevailing myths and misconceptions. Government programs and NGOs are working to promote family planning and reproductive health, but challenges remain, particularly in reaching marginalized communities and changing deeply rooted attitudes toward contraception.

There is very poor awareness about health also there are no targeted awareness towards adolescent girls in the



Figure 5Women sharing experiences of child marriage in Salumbar district.

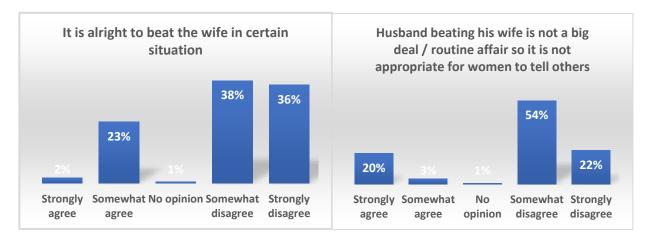
schools. The poor and destitute women face major financial issues while accessing health and often have to pay from out of the pocket expensive (OOPE).

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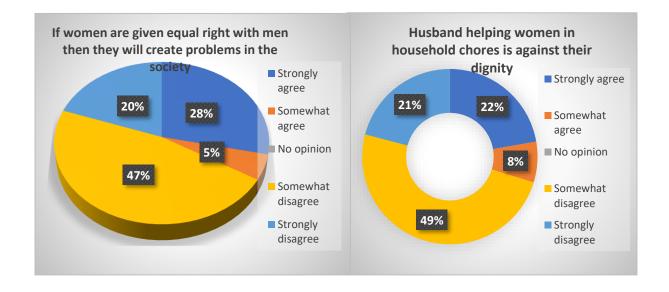
⁷ NFHS-5 Rajasthan.pdf (im4change.org)

Gender based violence:

Gender-based violence (GBV) continues to be a pressing issue in Rajasthan, impacting the lives of women and girls across the state. By examining data from the National Crime Records Bureau (NCRB) and the National Family Health Survey (NFHS), a comprehensive understanding of the prevalence, trends, and dynamics of GBV in Rajasthan can be gained. This section delves into the insights provided by NCRB and NFHS data, shedding light on the multifaceted nature of GBV in the state.



During the survey, it was found that almost 23% of them somewhat agreed that it is alright to beat the file in certain situation however 36 % of them strongly disagreed and similar percentage women somewhat disagreed that husband beating a wife is normal. 20% of them also felt that it is not a big deal and women should not tell others. However, 54% of the women somewhat disagreed and only 22% strongly disagreed on the statement. NFHS 5 data from Rajasthan shows that almost 24% ever married women in the age group of 18-49 years have experienced spousal violence. 8



Almost 47% of the women respondant mentioned they somewhat disagreed that if women are given equal right with men then they will create problems in the society and more that 28% of the women strongly agreed that equality with men creates problem in the society. 5% of the women agreed to that it will create problems, this shows that even women do not consider equality between men and women is considered normal that people find

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⁸ NFHS

it to be a reason to create problems in the society. Almost 22% women strongly agreed that husband helping women in the household work is considered as indiginified. Almost 49% somewhat disagreed and 8% somewhat agreed to the statement. It is very clear that in a patriarchal society there is a clear division of roles and responsibilities of women and men in the community. Often the opposite of it often considered as abnormal or indiginified and that may create problems in the society.

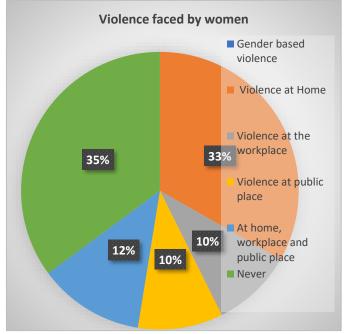
Crime Against Women:

NCRB data reveals a concerning trend of crimes against women in Rajasthan. Incidents of rape, dowry deaths, domestic violence, and cruelty by husbands and relatives are reported regularly, highlighting the pervasive nature of GBV. The data indicates both the prevalence of violence against women and the challenges in reporting and

addressing such crimes effectively.

During the quantitative survey, it was found 33% of the women respondent mentioned that they have faced violence at home, 9% of them mentioned that they have faced violence at the workplace. This is to be noted most of the women who were part of the survey were agricultural labourer. Therefore, women have also faced violence at the worksites. 9% of the women had mentioned that they have faced violence in public places whereas almost 12% mentioned that they have faced violence in all their domains.

During the survey, the women respondent were assessed on their understanding around the various nature of violence against women. It was found that mostly women are able to identify various acts of violence against women

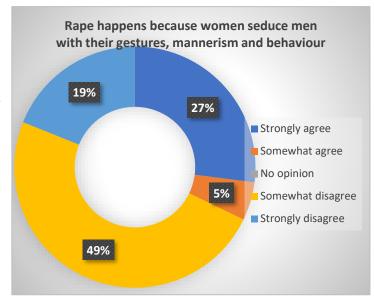


however few still did not know the nuances of gender based violence. 82% of the women identified physical violence and sexual violence as a form of gender based violence. Around 76% of them considered verbal abuse and control over mobility and denial of right to earn a livelihood as various nature of gender based violence.

Rape Cases:

Rajasthan has witnessed a significant number of reported rape cases, reflecting the vulnerability of women and girls to sexual violence. While official statistics provide valuable insights, it's important to acknowledge that many cases go unreported due to social stigma, fear of reprisal, and distrust in the justice system, indicating a gap between reported and actual incidents.

India registered, 31, 677 cases of rape in the year 2021. An average 86 daily — while nearly 49 cases of crime against womenwere lodged every single hour, according to the latest government report on crimes in the country. Amongst the states, Rajasthan registered almost 6337 cases



and was followed by Madhya Pradesh, Maharashtfra and Uttar Pradesh. 9

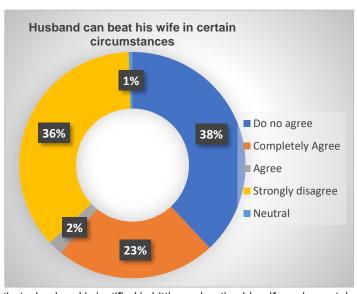
As part of the gender analysis, participants were asked about their views on rape and its causes. It was found that 49% of women somewhat disagreed with the notion that rape occurs because women seduce men through their gestures, mannerisms, and behavior. However, 27% of women strongly agreed that women are responsible for inviting sexual abuse, including rape, through their actions. Only 19% of women strongly disagreed, rejecting the idea that women are responsible for or invite rape

Domestic Violence:

NFHS data provides insights into the prevalence of domestic violence in Rajasthan. A significant proportion of

women report experiencing physical, sexual, or emotional violence by their intimate partners, highlighting the urgent need for interventions to address this pervasive form of GBV within households

As part of the gender analysis the researchers assessed the gender perspectives amongst women and it was found that almost 23% of the women felt that husbands can beat up their wife in certain circumstance however there almost 38% do not agree that husbands can beat up their wives and 36% strongly believed that it is not at all acceptable that husbands can beat their wives.



According to the NFHS, 35% of women believe that a husband is justified in hitting or beating his wife under certain circumstances. The most common justifications among women include showing disrespect for in-laws (26%), arguing with the husband (18%), and neglecting the house or children (15%). Men are slightly less likely to agree,

⁹ NCRB data: India witnessed 86 rapes every day, 46 offences against women every hour in 2021 - India News | The Financial Express

with 31% believing wife beating is justified, particularly if the wife shows disrespect for in-laws (23%), if the husband suspects her of being unfaithful (14%), or if she argues with him (12%).

NFHS data shows that in Rajasthan around 23% of the women in the age group of 18-49 years have experienced physical violence and around 5% of them have faced sexual violence.

Dowry-related Violence:

Dowry-related violence remains a persistent issue in Rajasthan, despite legal provisions against dowry harassment and dowry deaths. NCRB data highlights the prevalence of dowry-related crimes, including harassment for dowry, dowry deaths, and abetment to suicide, underscoring the need for targeted interventions to address this form of GBV.

Child Marriage:

NFHS data also sheds light on the prevalence of child marriage in Rajasthan, which contributes to various forms of GBV, including early and forced marriage, sexual violence, and limited agency for young girls. Despite legal prohibitions, child marriage persists in many communities, necessitating comprehensive strategies to address this harmful practice. The NFHS 5 data shows that 25% of the Women age 20-24 years married before age 18 years and 28% Men age 25-29 years married before age 21 years. The NFHS-5 survey revealed that in Rajasthan, the percentage of women aged 20-24 who were married before the age of 18 dropped to 25.4%, marking a 10% decrease from the NFHS-4 figures from 2015-16. A similar decline was observed among men aged 25-29 who were married before the age of 21, with 28% falling into this category in 2020-21, compared to 35% in 2015-16. Child marriage continues to be higher in rural areas with 28.3% of age of 18 years as compared with 15% in case of the urban counterparts. 10

During a FGD with adolescent girls, it was found that 25-50% of the girls get married between standard 8th standard 12. Also, it was shared that the cultural practice "aata saata" often increases the incidences of child marriage.

During the survey it was found that almost 81% of the agreed that marriage of children below the age of 18 should be considered as a crime whereas till now 19% women still believe that child marriage is not a crime but a social norm.

In terms of knowledge about various laws related to gender based violence, 310 out of 373 women mentioned that they are aware of Protection of Women from Domestic Violence Act, 316 out of 373 were aware of Dowry Prohibition Act, 294 out of 373 women were aware of their right on natal family property, 231 out of 337 women were about Equal Remuneration Act and 275 out of 373 women were aware of the child marriage prohibition act.

Despite of awareness and knowledge about acts, women are still resistant to register a case with the police or fight in the court of law.

Access to Support Services:

NFHS data underscores the importance of enhancing access to support services for survivors of GBV in Rajasthan. Despite the existence of legal frameworks and support mechanisms, many survivors face barriers in accessing medical, legal, and psychosocial support, highlighting the need for improved service delivery and awarenessraising initiatives.

Only 13% of women aged 18-49 who have experienced physical or sexual violence sought help, while 9% confided in someone but did not seek help. Alarmingly, 78% neither sought help nor told anyone. Among those who did

¹⁰ Rajasthan: Child marriages in Rajasthan fall by 10% in last five years: Survey | Jaipur News - Times of India (indiatimes.com)

seek assistance, the primary sources were their own family (66%), their husband's family (26%), or a friend (21%). Only 14% reached out to the police for help.

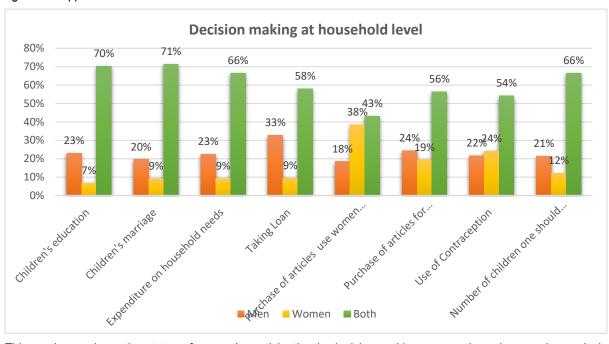
There is still a high dependency and trust of the community at a community based violence redressal system. In case of violence against women, the community members as part of the panch set up a council to address the concern. The council if founds any party guilty, a fine of 51,000/- is imposed on them. However, it has been observed that the council generally held up traditional cultural and social practices.

There are social practices that allow a man to take a second wife if a woman is unable to bear children. This practice, known as "nata pratha," often provides women with children the opportunity to remarry. However, while their daughters can accompany them, their sons are required to stay with the previous family.

In some communities, violence against women may be normalized or trivialized, perpetuating a culture of impunity. Domestic violence, for example, may be viewed as a private matter to be resolved within the family, leading to underreporting and lack of accountability for perpetrators.

Women's Participation in Decision-Making Spaces: A Gender Analysis

Women's participation in decision-making spaces is a critical aspect of gender equality and empowerment. Access to and influence within political, economic, and social decision-making structures are key indicators of women's rights and opportunities for advancement.



This section explores the status of women's participation in decision-making spaces through a gender analysis lens, examining both the progress made and persistent challenges faced globally.

The survey revealed that only 7% of women solely participate in their children's education, while in 70% of households, this responsibility is shared between men and women. However, focus group discussions highlighted that women are primarily responsible for daily tasks like sending children to school, while decisions related to selecting schools, subjects, and continuing education are often made by male members. Women tend to be executors rather than decision-makers in the family.

Regarding children's marriages, 71% of respondents indicated that decisions are made jointly by both men and women. However, discussions with women and adolescent girls revealed that critical decisions, such as selecting

a spouse, determining dowry, and setting wedding dates, are often made by men. In many cases, women are not allowed to be present or speak during these decision-making processes.

During the focus group discussion with men from the Samudayik Pairavi Manch, they noted that women are highly involved in social activities, particularly during marriage ceremonies where they actively participate in cultural practices like mayra, as well as in cultural dances and songs. However, due to the parda pratha system, women are largely confined to the home and do not speak in the presence of male members. Their involvement in decision-making processes is considered contrary to cultural norms.

The data also shows that 54% of couples jointly decide on contraception use. However, focus group discussions with women across various locations revealed that in 99% of cases, the responsibility for preventing unwanted pregnancies falls entirely on women, with minimal contraceptive use among men. Additionally, men often do not prefer using condoms. Decisions about the number of children are typically made by men and elders in the family, and due to a preference for sons, women are sometimes pressured to conceive multiple times, regardless of their own wishes. This often leads to severe health issues for women and reproductive health concerns.

Adolescent girls' participation in decisions related to choose their partner:

During the focus group discussion, it was found that decision making related to marriage or their right to choose do not exist at all. Girls are often unable to express their point of view and often forced to accept their family decision. However, it was found that with time now the girls are able to share that they do not like the choice made by the family but still cannot express their own choice. It was also shared that if the girls share their choice of partner, they might face violence at home or forced marriage. Sometime they are also prevented to attain schools further to continue their education.

Electoral Representation:

Despite incremental progress, women continue to be underrepresented in political decision-making bodies worldwide. During the focus group meeting, women informed that that participation of women in gram sabha is negligible or almost nil. The social norms or perception is that "lugaiyon ko kya samajh ayega, unka dimag kamjhor hai". Due to reservations, some of the positions of panchs are reserved for women. However, it was found that most of the time the male members of the panch (women) selected manages the daily work of the panchayats. It was further observed that women presently the daughters are given the responsibility to contest election where the positions are reserved for women instead of the wives or the daughter in laws. However, the female elected representatives only come for specific programmes or important incidents.

When the women were enquired if they have Voter Identity Card, it was found that around 95% of the women had VIC. Only 4% of the women did not have a VIC. Since there was an election, recently it was found that 94% of the women have voted in the latest election. 5.4% women had not voted in the



election. It was found that 26% women voted because their husband had requested them to vote, 70% of the women respondent were self-motivated to be voted. 2% of the women said that they voted because of the financial support given by the representative. The major reason for not voting during the election was primarily because their name was not enlisted in the voter list. Some mentioned that the voting centre was far away and it was difficult to reach out. 2.9% mentioned that they were not allowed to go out to vote.

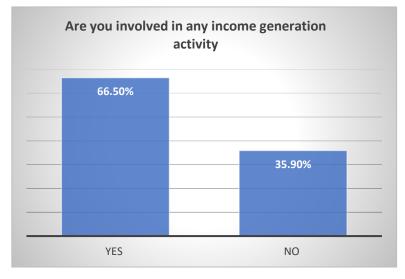
As part of the gender analysis, when the researchers asked them if they have participated in the panchayat meeting and found that almost 40% of the women do not participate in the meetings. 60% of the women participate in the panchayat meeting. It was also found that 30% of they get information through community awareness, 23% of them get information from fellow community members, 22.8% get the information from panchayat leaders or members. When the respondents were asked why they participated in the meetings, it was found 33% informed that they participated in order to keep themselves updated about the various situations and schemes for the village and districts. 26% of them mentioned that they participated in such meeting in order to raise their own concern. 6% of them mentioned that their husband had encouraged them to join the participate in the meeting.

57% of the women have raised specific concerns in the gram panchayat and 42% have participated or not raised any women centric issues in the local panchayat. When the researcher enquired with the respondent whether they have seen other women participate in the panchayat meeting. It was found that almost 64 % women participate in the meeting and 35% women do not participate in the meetings.

Women and Work

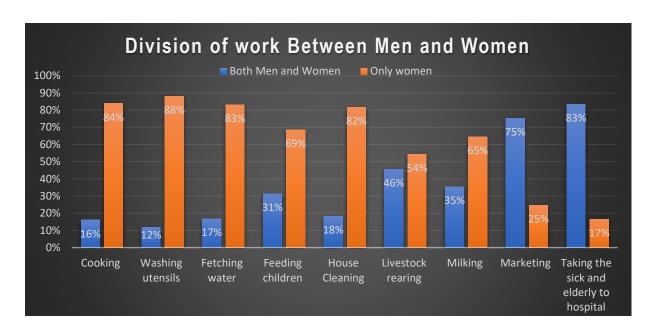
Women's participation in the workforce and their access to livelihood opportunities are central to gender equality, economic development, and poverty reduction. However, persistent gender disparities in employment, income, and access to resources continue to hinder women's economic empowerment. This section conducts a gender analysis of women's livelihoods, exploring the challenges, opportunities, and implications for gender equality and social justice.

During the survey, 66% of the women mentioned that they are involved in any income generation activity where



as 35% of the women shared that they are involved in some form of livelihood initiative. 39% of the women are engaged are farming and agricultural activity whereas 18% of them are involved in non-farm related activities. Another 16% work as agricultural labourer.

During the survey we also assessed the perception of women, and it was found that 290 out of 373 mentioned that it is extremely essential for women to work and earn a livelihood whereas almost 83 of them do not agree with the statement. It was found that 333 out of the 373 women agreed that women should receive equal amount of payment as compared to men for equal work.



During the survey, researchers explored the division of labour between men and women. They found that 84% of women take responsibility for cooking, while only 16% of households share this task between men and women. Similarly, 88% of women are primarily responsible for washing utensils, with just 12% sharing this duty with men. When it comes to fetching water, 83% of women take on this task alone, while in 17% of households, both men and women participate. In 82% of households, women are responsible for cleaning the home, compared to 18% where this task is shared.

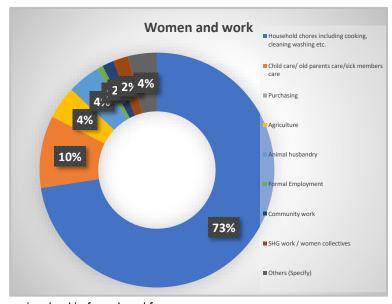
Interestingly, the survey revealed that livestock rearing is typically a joint effort between men and women, but the primary responsibility for tasks like milking falls on women, with 65% of them handling this duty. Additionally, 75% of men are responsible for marketing, and 83% of men take charge of bringing the elderly and sick to the hospital. The data clearly shows that women perform the majority of household caregiving work, while men are more involved in external tasks. This trend highlights how traditional gender roles often limit women's mobility due to their caregiving responsibilities.

Unpaid Care Work:

The unequal burden of unpaid care work disproportionately affects women's participation in economic decision-

making. Gendered expectations around caregiving responsibilities limit women's ability to engage fully in paid employment, entrepreneurship, and leadership roles, perpetuating economic inequalities and hindering their participation in decision-making spaces.

On enquiring about the various work done by women at home, it was found that 73% of the women spend their time doing household chores including cooking cleaning, washing etc. Apart from that 10% also mentioned that caring for the children, old and the sick is mostly women's responsibility. It was also found that there are almost 8 % women who are involved in agriculture



and livestock rearing. Only 1 % women were involved in formal workforce.

During the survey it was found that 47% women spend almost around 1-5 hour every day, around similar percentage of women i.e., 47% of the women spent less than 1 hour every day, around 6 % women spend more than 5 hours of the day towards domestic work like cleaning, cooking and washing. Women spend around 40% of their time for less than 1 hour, 48% women spend 1-5 hour and 12% women spend more than 5 hours towards caring for the children, elderly and sick.

Women are actively involved in various forms of work, yet their unpaid contributions often go unrecognized. Notably, 36% of women spend less than one hour on farming activities, while another 36% dedicate between one to five hours daily. Additionally, 28% of women report spending over five hours on farming. This is particularly interesting considering that only 19% of women have land ownership, yet more than 70% contribute one to five hours or more to farming tasks.

Occupational Segregation:

Women often face occupational segregation, with a disproportionate concentration in low-paid and informal sectors such as agriculture, domestic work, and informal retail. Gender analysis of employment data reveals entrenched stereotypes and discriminatory practices that limit women's access to higher-paying and male-dominated industries, perpetuating wage gaps and economic inequalities.

During the gender analysis we found that 39% of the women are engaged in agriculture however it is very interesting to check that only 17% women are land owners. Almost 16.6% women work as agricultural labourer. 12.1% women work as daily waged labourer. There are others who work have small business and or work as frontline government functionaries. There are almost 18% women who mentioned that they are not involved in any income generating activities.

NREGA 100 days of work

On probing with women workers under NREGA, it was found that mostly the young men migrate to other cities for work only those men who cannot go outside work under NREGA. Women also work as agricultural labourer however there is no rain so such work is also interrupted.

Women who go out to work as labourer are not given equal wages. Women who do the majority of the work are paid around 300 Rs whereas men are given 400 Rs whereas they spend most of the talking and chatting with others.

During the focus group discussion (FGD) with women, it was revealed that men often migrate to other states for work or to the nearest district headquarters for construction jobs. Most women reported that they do not participate in the NREGA planning process, resulting in projects that primarily focus on road and water tank development. Additionally, the women mentioned they rarely receive the promised 100 days of work under the Act, and their

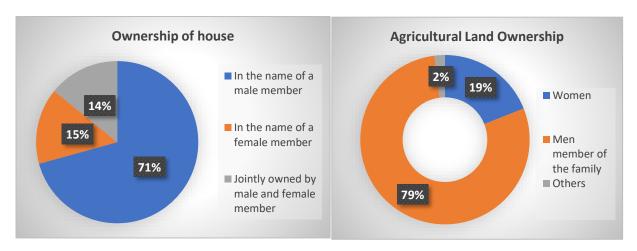
The women NREGA workers reported that they have not been provided with 100 days of work, and there is no fixed wage for the work they have completed. They also noted that women with small children are not given jobs or payments under NREGA. Additionally, only 5-7 men work under NREGA, most of whom are older or unable to seek work elsewhere.

Women NREGA workers, Srinagar, Kutchaman.

wages often vary. The supervisor attributed this to differences in work measurements upon completion. There is also a lack of awareness about unemployment wages under the Act. Furthermore, women with small children and pregnant women do not receive NREGA work opportunities.

Land and Property Rights:

Land tenure systems and property rights frameworks often discriminate against women, limiting their access to land, inheritance, and productive resources. Gender analysis of land ownership and property rights highlights the importance of legal reforms, awareness-raising initiatives, and community empowerment strategies to address gender disparities in land tenure and promote women's land rights. During the survey we found that almost all women (316) out of 373 women agreed that women should have right to property.



The survey also revealed that in 71% cases the ownership of the house is in the name of male member of the family. Only 15% of the ownership of the house is in the name of the female members. In the recent time there are certain changes and families are opting for joint ownership of house. Also, there are 14% women and men have joint ownership. It was found that almost 19% of the land ownership is on women and majority 79% of the ownership of land is with the male member of the family. It is very much evident that women's access and control over two important assets and property are very limited. Often this leads to poor negotiation in the family and lack of acceptance and participation in decision making processes.

Socialization and Gender Stereotypes:

From a young age, girls in Rajasthan are socialized to conform to traditional gender roles and expectations. Gender stereotypes portray women as caregivers, homemakers, and subservient to men, while men are expected to be dominant, assertive, and breadwinners. These stereotypes limit women's autonomy and agency while perpetuating unequal power dynamics that can manifest in various forms of violence.

As part of the cultural practice, the community needs to pay bride price of 2 kg silver in the tribal area. Often if the bride and groom wants to divorce each other, the community council provide mutual counselling and give them the separation right.

As per cultural programme, if married women are able to give birth to children, then the man can take a second wife. In case of " *Nata Pratha*" women are allowed to remarry and the children from the previous marriage only girls can be taken along with the women.

Addressing the root causes of violence against women in Rajasthan requires challenging these deeply entrenched social norms and promoting gender equality through education, awareness-raising campaigns, legal reforms, and community-based interventions. By challenging patriarchal structures, empowering women, and fostering attitudes of respect and equality, Rajasthan can work towards creating a society where violence against women is no longer tolerated or excused.

During the discussion it was found that there are various cultural practices which are extremely detrimental and derogatory for women and girls which starts from the

As part of the study, the researchers assessed the gender stereotypes prevalent in the community it was found that Boys should be given more opportunities for higher education as they are considered as future bread winners, 54% of the women greed to the statement whereas 46% women did not agree. 44% women mentioned that certain habits (*like..., Spending more time outside with friends, buying modern cloths they like to wear*) are deemed as appropriate for men but inappropriate for women in their community. Almost 39% of the women during the survey mentioned that women are intellectually inferior than men where as 61% women did not agree to the statement.

Access and control over income and resources

The survey data shows that almost 57% of the male members of the house control the household level income and expenditure whereas only 19% of the women members are able to do so in their homes alone. There are 23% household where both men and women are able to take joint decisions related to income and expenditure. Data also shows that women who are earing in Rajasthan, 53percent of the women can decide how to use money. The proportion of women who have money that they can decide how to use is higher among urban (59%) than rural (51%) women, increases sharply with age, is much higher among women with 12 or more years of schooling (64%), and among women who are employed for cash (63%) than any other group of women. About 38% of the women have improved accesses to credit source

NFHS data shows that Four-fifths of women have a bank or savings account that they themselves use. This percentage is particularly high among women who have 12 or more years of schooling (88%). The gender analysis data shows that almost 99% of the women have bank accounts and in their own name and 71% of them were opened under Jan Dhan Yojana¹¹. Despite of having the bank account in the name of the women, often women feel uncomfortable to use the account themselves. Men counterparts like husbands, son, son in law or other male member of the family or neighbourhood accompany them to the bank.

It was also found that almost 60% of the women are involved in microcredit programmes running in rural Rajasthan. 34% of women mentioned that their association with SHG and women's group had ensured asset building, increased family income. 51% mentioned that there has been substantial increase in mobility outside the home and interaction with outsiders which has ensured confidence building. 46% of them mentioned that due to the association with women's groups and leadership programmes which are either run by the government and the NGOs there has been improvement in literacy and skills development. 33% women had taken loan which is either from bank , NGO or other lending services. However, in most of the cases i.e., 44% of the loans were taken after persuasion by the husband and in-laws. 29% women were able to take loan based on their own decision and almost 29% took joint decision to take loan.

Women and Girls access to digital medium

Girls and Mobile use:

During the focus group discussion (FGD) with adolescent girls, it was revealed that boys generally have greater access to mobile phones compared to girls. During and after the COVID-19 pandemic, parents often provided boys with mobile phones, sometimes even taking loans, to continue their education. However, many girls had to abandon their education due to the lack of mobile access. In the FGD with men, participants expressed concerns

¹¹ Pradhan Mantri Jan-Dhan Yojana | Department of Financial Services | Ministry of Finance (pmjdy.gov.in)

that mobile phone use among girls leads to chatting with men, which they believe results in dishonour behaviour. Consequently, there has been an increase in child marriages to prevent girls from choosing their partners and to avoid bringing dishonour to the family. Education after marriage depends on the in-laws, and often, these girls are unable to continue their education once married.

Generic Recommendations:

Gender sensitive human resources: The Rajmeru team and PO should prioritize the inclusion of more women, with a particular emphasis on those from marginalized communities. Expanding the representation of these women within the team is crucial for ensuring that diverse perspectives are heard and that the needs of all groups are adequately addressed. By actively seeking to involve women from different backgrounds, the Rajmeru team can better understand and respond to the unique challenges faced by marginalized communities.

In addition to increasing representation, it is essential for the current team to undergo regular training focused on gender sensitivity. Such training will help team members develop a deeper understanding of gender-related issues and how they impact the communities they serve. Regular gender sensitivity training will also equip the team with the tools necessary to create a more inclusive and supportive environment, both within the organization and in its external interactions.

Designing a gender action plan and a road map for the POs: The each PO should develop a gender action plan that defines the plan for the next 5 years on the pathways for reaching the desired gender outcome. The gender action plan should be based on the two pillar of the PO's internal structure and its plan of action.

Gender Mainstreaming at the Rajmeru level: Incorporate gender considerations into all initiatives and activities within the Rajmeru to ensure that gender perspectives are central to planning and implementation. This approach will help address the unique needs and challenges faced by different genders, fostering a more inclusive environment. Additionally, implement gender-responsive budgeting mechanisms to guarantee that resources are adequately allocated towards gender equality priorities and women's empowerment initiatives. By aligning budgets with these goals, the Rajmeru can effectively support programs and activities that promote gender equity, ensuring that both women and men benefit equitably from the resources and opportunities available. This integrated approach will strengthen the Rajmeru's commitment to fostering gender equality and empowering women.

Capacity Building: Strengthen the capacity of volunteers, fellows, organization members, and the Rajmeru on gender issues by offering targeted training and resources. Provide issue-based training sessions and develop action plans focused on gender analysis, gender mainstreaming strategies, and gender-sensitive programming. These efforts will equip participants with the knowledge and skills needed to effectively address gender-related challenges and integrate gender perspectives into their work. By building this capacity, the Rajmeru can ensure that its initiatives are more inclusive, equitable, and responsive to the diverse needs of all genders

Community based plans on raising gender issues: Enhancing community engagement, especially among women and marginalized groups, is crucial for ensuring their active participation in decision-making processes. By involving these groups in discussions at panchayat or other local platforms, specific gender-related issues can be effectively raised and addressed. Establishing dedicated platforms for dialogue, consultation, and collaboration will amplify women's voices, allowing their needs and priorities to be heard and considered. This approach not only empowers women but also fosters inclusive and participatory governance, where diverse perspectives contribute to more equitable and responsive policies. By promoting active involvement, the community becomes more aware and supportive of gender equality, leading to sustainable and inclusive development.

Campaign and Awareness programme during specific moments: Develop campaigns aimed at challenging harmful social norms and practices that contribute to gender-based violence and limit women's participation. These campaigns should also address key issues like women's political involvement, girls' education, and child marriage to tackle the broader context of gender inequality. By focusing on these interconnected issues, the campaigns can promote a more inclusive environment that empowers women and girls to participate fully in society. Additionally,

these efforts will help shift societal attitudes, reduce violence, and encourage the adoption of practices that support gender equality. Integrating these critical areas into the campaigns will ensure a comprehensive approach to dismantling barriers that hinder progress toward a more just and equitable society.

Data Collection and Research: Enhance data collection efforts and invest in gender-sensitive research to support evidence-based policies and programs. Focus on collecting gender-disaggregated data and conducting intersectional analyses to better understand the diverse experiences and perspectives of women and girls in Rajasthan. Prioritize participatory research methods that involve women and girls directly, ensuring their voices are heard and represented. Implementing a robust Management Information System (MIS) with gender-segregated data will further aid in identifying gaps and shaping targeted interventions. By improving data collection and research, policies and programs can be more effectively tailored to address the specific needs and challenges faced by women and girls.

Documentation of stories of change: Teams and volunteers should document and share stories of change across various platforms. These narratives can inspire and encourage other women to challenge gender stereotypes and take proactive steps in their own lives. By showcasing real-life examples of women breaking barriers, these stories can serve as powerful tools for motivating broader societal change and fostering a culture of empowerment. Disseminating these stories widely helps create a ripple effect, encouraging more women to defy stereotypes and pursue their goals with confidence.

Issue specific recommendation

Issues	Recommendation
Limited Access to Quality Healthcare for Women and Girls	 Conduct a mapping study/ assessment of availability and accessibility of health care facilities for women and girls and the challenges and barriers in accessing them. Leaders of the POs, fellows and volunteers should conduct issues specific health care meetings for women and girls on a quarterly basis and develop action plans for resolving the issues. Develop community level health score cards involving women and girls. The finding of the score care should be regularly shared and updated with the Village Health and Sanitation Committee and raised with government functionaries and local panchayat for resolution. Create awareness around the various health rights of women and girls on important days like women's day, mother days, breast feeding week, nutrition week etc. Develop a ready reckoner for various schemes and facilities that are targeted towards women and men from marginalized communities.
Educational Disparities Between Genders	 Design a campaign on girls' education and linkage with other major campaigns of girls right and education. This can include issues of child marriage, child labour and girls' excess burden on care work at home. Identify girls who have dropped out of school, develop individual plans for supporting the girls to return to education. Linkage established with skill development program.

	Raise issue through media advocacy and engagement with department of education at the district.
Economic Inequality and Limited Livelihood Opportunities for Women	 Identify most marginalized and vulnerable women in the community and link them with the existing government schemes and services. Collectivize women interested in engaging livelihood initiatives and develop a plan for micro entrepreneurship development. Link women and girls with various government
Low Female Participation in Decision-Making	 Ensure that increased number of women participate in the gram sabha meetings Ensure that women are able to raise their issues in the local panchayat and women issues are raised and discussed, added in the panchayat resolution book. Meetings with ward member and women's group to discuss the gender issues.
Gender-Based Violence and Lack of Support Services	 Develop a women's vigilance group in each of the village where the PO members are operational. Conduct training of the Rajmeru PO member, leaders and identified women with leadership quality. Support women and girls by providing them linkage with various GBV services. Promote awareness campaigns and training programs to address and reduce instances of violence within communities.
Cultural and Social Norms Restricting Gender Equality	 Design a campaign on gender equality that raises issues around various social norms specially with focus on child marriage, girls' education, discrimination between boys and girls at home. Women leaders to conduct village level campaign and submit resolutions at the panchayat. Use of folk media, music and other locally available crafts to raise awareness on gender issues. Public awareness through posters and wall writings.

Conclusion:

In conclusion, addressing gender inequalities and promoting women's empowerment is essential for achieving a gender equal and just society. Furthermore, in order to achieve the Sustainable Development Goal 5 of Gender Equality, it is important to ensure gender at the heart of everything one does. This can be done through ensuring a gender analysis lens, by understanding the relation between men and women in a specific community with key challenges, disparities, and opportunities for action across various sectors. By implementing the recommendations outlined above, Rajmeru Rajmeru can take an active role in advancing a process in the community where women and girls can fully realize their rights, potentials, and aspirations.

Annexure 1 – Household Survey

Identification Details

a.	Name of district	
b.	Town or Block	1 – Town 2- Block
C.	Name of Gram Panchayat / Ward No	

Section 1.a: Household Particulars

S. No	Questions	Respo	onse		
1.	Name of the respondent				
2.	Age of respondent in completed years				
			years		
3.	Marital status of respondent	Single			
			ntly Married		
		Widov			
		Divord			
		Separ Deser			
		Live ir			
4.	Educational status of respondent		te/never attended school		
	Educational status of respondent		ate - Can read and write (never attended school		
			ed till less than Primary		
			leted Primary but not Middle		
		Comp	leted Middle but not Secondary		
			leted Secondary (Class X)		
			leted Higher Secondary (Class XII)		
			leted technical diploma		
	T		mpleted Graduation and above		
5.	Type of Family	Joint	Joint Nuclear		
			uciear xtended		
6.	Type of household		an headed		
0.	Type of flousefloid		neaded		
		_	headed		
Q. No	Questions	1 0 1 111 0	Responses		
7.	What is ownership status of house?		Own		
	·		Rented		
8.	If owned, ownership of House		In the name of a male member		
			In the name of a female member		
			Jointly owned by male and female member		
9.	What kind toilet facility does your ho				
	have?		Flush/Pour latrine		
			Pit latrine (without flush/pour flush		
			Dry latrine		
10.	If open defecation, whether you have fa	cod any	Community toilet Yes		
10.	security or privacy issues?	c c u ally	No No		
L	security or privacy issues:		INU		

11.	What is the usual mode of transportation used by you to commute to nearest town/ city?	Walking Own bicycle Own van rickshaw Hired van rickshaw
	(multiple response possible)	Own motorcycle or scooter Hired/shared motorcycle/scooter Own car Hired/shared car Own tractor Hired/shared tractor Bus or any other form of public transport None as work from home
12.	Does your household own any agriculture land	Yes No
13.	If yes how much agricultural land does this household own?	In acres
14.	Who owns the agricultural land	Self Male Members of the family
15.	Who mainly control the spending of monthly household income?	Male members of the household Female members of the household Both male and female members

Section 2: Woman Participation in Household

		Activity in a day		Time in hours
16.	What all work do you	Household chores including cooking, cleaning wash	ning etc.	
	do and on an	Child care/ old parents care/sick members care		
	average how much	Purchasing		
	time you spend for	Agriculture		
	each?	Animal husbandry		
		Formal Employment		
		Community work		
		SHG work / women collectives		
		Community decision making		
		Others (Specify)		
17.	Readout only the	Activity	Women	Both
	relevant options	Cooking		
		Cleaning utensils		
	Read out the list of	Fetching water		
	activities performed	Feeding children		
	at home and asked if	Cleaning house		
	they are performed	Grazing animals		
	by men or women	Milking animals		
	members of the	Market purchase		
	house hold?(multiple response possible)	Paying electricity bills		
	τεορυποε μυσοινίε)	Attending community meetings		
		Taking ill family members to the hospital		
		Taking care of old parents/sick family members		

Section 3: Decision Making

18.	Questions on decision making	No Role	Sometimes participate	Significant
a)	Children's education			
b)	Marriage of children			
c)	Expenditure on household needs			
d)	Expenditure on health			

e)	Decision for taking loan for household expenditure and production		
f)	Purchase of articles use women personal use		
g)	Purchase of articles for household common use		
h)	Use to contraceptives		
i)	Number of children you should have		
19.	Do you visit the market (inside or outside) the village for buying stuff for yourself?	Always Occasionally Never	
20.	Do you go alone?	Yes No	

Section 4. Economic Empowerment (please tick the correct answer)

Q. No	Questions	Responses
21.	Are you presently involved in any income	Yes
	generation activity	No
22.	If yes which activity	Agricultural labourer
		Non –agricultural labourer
		Farmer
		Artisan
		Petty trader/shop owner
		Business person
		Private service
		Government service
		None
		Any other

Section 6: Economic Empowerment

23.	Are you a member of any group in the community?	Yes No
Α	SHG (NGO)	
В	SHG (Government Programme)	
С	SHG (any other specify)	
D	Mahila Mandal	
E	Any political group	
F	Any religious group	
G	Any social group	
Н	Any cultural group	
	Cooperative	
J	Producer company	
K	Watershed committee	
L	Village Health and Sanitation Committee	
M	Any other Specify	

24.	How has your joining the group changed or impacted the following?	Same	Increased	Decreased
A	Asset building, increased family income	1	2	3
В	Mobility outside the home, interaction with outsiders	1	2	3
С	Literacy and Skills development	1	2	3
D	Accesses to health service and health awareness	1	2	3
E	Accesses to credit source	1	2	3
G	Ability to voice your concern	1	2	3
Н	Decision making related to children and money	1	2	3
	Participation in gram sabha / Municipal Ward Meetings	1	2	3
J	Support from men in domestic work	1	2	3

25.	Do you have bank account in your name?	Yes
		No
26.	Whether the account was opened under	Yes
	Jan Dhan Yojana?	No

	27.	Do	you operate it independently?	Yes		
				No		
	28.	Wh	o come along with you to the Bank?	I go alone Husband Son Other male member of family		
				Other male member of family Take help from neighbourhoods		
	29. Have you taken any loans from SHG o Bank?			or a. SHG	Yes	No
			Daile!	b. Bank	Yes	No
				c. Other source (Specify)	Yes	No
	30. Who has decided to ta		Who has decided to take loan?	Self	II.	
				Husband		
				In-laws		

Section 5: Health Care

31.	Which is the health facility nearby your house where you	PHC
	always go in case of any health issues?	Community Health Centre
		Taluk Hospital
		District Hospital
		Medical College
		Private Hospital
		Sub Centre
		Traditional Healer
		Small clinics / individual practitioner
		Pharmacist
32.	Who accompanies you to the health care centre?	Self
	with accompanies you to the fleath care centre?	Male Members

Section 6: Political Empowerment (please tick the correct answer)

S.No	Question	Response
33.	Do you have a ration card?	Yes No
34.	Do you have an Aadhar card	Yes No
35.	Do you have voter identity card?	Yes No
36.	Did you cast your vote in last Panchayat / municipal elections?	Yes No
a.	If yes reason?	Asked by husband to vote Self-motivation/ consider voting as right Due to request from candidate Due to incentive given by candidate Others
b.	If no reason?	Was not in the village on the day of election Name was not listed in voter list Polling station was very far Not allowed by husband / family Other
37.	Did you attend last Gram Shabha meeting / municipal ward level meeting held in your village / ward?	Yes No
38.	How do you come to know about those meetings?	Public notice Village watchmen informed Panchayat members Other ways/sources There is no formal system to inform/invitation letter

39.	Why you attended the meeting	It's my duty Keep my self- updated about political happenings It's my right to share my views and concern My husband insists to attend the meeting Any other reason
40.	Have you ever raised your concerns in the meeting?	Yes No
41.	Do other women participate in gram sabha / municipal ward meetings?	Yes No

Section 7:	on 7: Legal Empowerment (please tick the correct answer)		
42.	Are you aware about various laws for the	Yes	
40	prevention and protection for women?	No	
43.	If yes please tell us which are the laws made for	Act	
	protection for women?	Prevention of domestic violence act	
		Dowry Prohibition Act	
		Right over parental property	
		Equal Remuneration Act (1976)	
		Child Marriage Restraint Act,(1976)	
		Immoral Trafficking (Prevention) Act	
		Child labour prohibition and regulation act	
44.	According to you which of the following are		
	violence against women		
	B	Yes	
a.	Physical abuse	No	
		Yes	
b.	Sexual abuse	No	
		Yes	
C.	Verbal abuse and mental torture	No	
		Yes	
e.	Denial of freedom to go out alone	No	
		Yes	
f.	Denial of permission to work and earn money	No	
	,		
g.	Denial of higher education	Yes	
	3	No	
h.	Other (please specify)	Yes	
	, , ,	No	
45.	Have you ever faced any of the above mentioned	Yes, only at family	
	violence?	Yes, only at work place	
		Yes, only in public place	
		Yes, at home, work and in public place	
		Other	
		Never Never	

Section 8: Gender stereotypes

Section 6. C	ction 6. Gender stereotypes		
1.	Boys should be given more opportunities for higher education as they are considered as future bread winners	Agree Disagree	
2.	Certain habits (like, Spending more time outside with friends, buying modern cloths they like to wear) are deemed as appropriate for men but inappropriate for women in your community	Agree Disagree	
3.	Women are intellectually inferior to men	Agree Disagree	
4.	It is important for women to work and earn money	Agree Disagree	

5.	Women and men be paid equally for the same position and job	Agree Disagree
6.	Women also should have inheritance right to family property	Agree Disagree
7.	Marriage of children below 18 years of age should be considered as a crime	Agree Disagree

Statement	Strongly agree	Somewhat agree	No opinion	Somewhat disagree	Strongly disagree
In some circumstances, husband can beat his wife	1	2	3	4	5
Husband beating his wife is not a big deal / routine affair so it is not appropriate for women to tell others	1	2	3	4	5
If women are given equal right with men, then they will create problems in the society	1	2	3	4	5
It is the duty of women to improve themselves if their husband beat them rather than telling others about it	1	2	3	4	5
Husband helping women in household chores is against their dignity	1	2	3	4	5
Rape happens because women seduce men with their gestures, mannerism and behaviour	1	2	3	4	5

Section 9 Awareness about various Government Schemes (please circle the correct answer) If availed benefits under the scheme record qualitative information in the space below the table

	46. Name a few schemes for women	47. Have you / your family members ever availed the scheme				
	Schemes	Yes	No			
1		1	2			
2		1	2			
3		1	2			
4		1	2			
5		1	2			

THANKS, AND CLOSE