



## POLICY RESEARCH ON MATERNAL HEALTH

### INTRODUCTION

Total 2, 89,000 maternal deaths were estimated worldwide in 2013 and India's contribution to the global burden was the highest at 17 percent with 50, 000 deaths (WHO, UNICEF, UNFPA, The World Bank and the United Nations Population Division, 2014). Though India has been successful in bringing down the MMR from 437 in 1991 to 178 in 2010-12 but still the reduction has been not enough to achieve the target of 109 deaths per one lakh live births by 2015 as laid down under 5th Millennium Development Goal (MDG, 2015). India as a whole and most states within it lag behind this target considerably.

The part of the problem lies in the fact that several important issues affecting the health of women are not even addressed due to India's very narrow focus on reducing maternal mortality. The broader framework of reproductive and sexual health as prescribed under International Conference on Population and Development in 1994 which is to include family planning, antenatal, safe delivery and post natal care, abortion care, etc as part of primary health care, is often overlooked. Thus there is a need to depart from fragmented and myopic approach of addressing maternal health and instead adopt a more comprehensive and rights based approach which will guarantee optimum quality maternal health services to all which in turn will help in reversing the appalling condition of maternal health in the country.

CEHAT (Centre for Enquiry Into Health and Allied Themes)

#### Important Links

- [Ministry of Women & Child Development Government of India](#)
- [Akshaya Poshan Nutrition Resource Platform](#)
- [National Institute of Public Cooperation and Child Development](#)
- [Public Health Department of Maharashtra](#)

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**"Maternal Health is a Human Right  
"Women's rights are human rights and this is clearly a human rights issue, which is a great opportunity for us to get more people involved. This is not one of those issue that only involves mothers. It's an issue that involves every single person"**

- Chrosty Turlington Burns  
Founder, Every Mother Counts.

## POLICY RESEARCH ON MATERNAL HEALTH

**Primary data-** It is collected by the local NGOs in the intervention districts and has two components

- I. **Management Information System (MIS)** - It broadly records information on
  - **Demographics of the intervention districts**
  - **Antenatal Care (ANC)-** Coverage and services offered, number of pregnant women registered below 19 years of age, referrals by government/private vehicle
  - **Delivery-** Place of delivery, involvement of skilled birth attendant in case of home delivery, involvement of ASHA/AWW in delivery, whether given JSY and JSSK benefits, referral via government/private vehicle
  - **Postnatal Care-** proportion of women receiving various components of PNC by ANM/Doctor on the day of delivery, 3rd day, 7th day and 42nd day of delivery, referral via government/private vehicle
  - **Abortion and maternal deaths, Family Planning** (Proportion of eligible couples using any temporary methods, proportion of males and females that underwent sterilizations), number of Village Health Nutrition Days VHNDs planned and organized, Village Health and Sanitation Committee (GKS) meetings held, adolescent girls meetings organized, and lastly child marriages that took place and proportion of BPL population that received any of the Public Distribution System (PDS) benefits
- II. **Community Based Monitoring (CBM)-** Total 9 tools are developed and details of it are as follows
  - **Integrated Child Development Scheme (ICDS) monitoring tool** – It contains general information regarding the Anganwadi Centre (AWC), interviews with expectant mothers as well mothers of a new born about care provided to them at the AWC's Monitoring of facilities.
  - **Village Health Nutrition Day (VHND) monitoring tool** – It comprises of survey and interviews with AWW, ASHA and ANM regarding the VHND, availability and functioning of the equipments required to provide ANC, supply and availability of medicines. The tool has a survey for assessing the maternal health services like pre- and post-delivery care,





## POLICY RESEARCH ON MATERNAL HEALTH



**“You cannot have maternal health without reproductive health. And reproductive health includes contraception and family planning and access to legal, safe abortion”.**

- Hillary Clinton

facilities provided to adolescent girls as well and maintaining of various records/documents like maternal security booklet, etc.

- **Interview for assessment of maternal health services with women who had undergone childbirth in the preceding three months** - It contains general information about ANC, delivery and PNC services provided to the woman, services/benefits given under the provisions of maternal healthcare schemes like JSY and JSSK, any shortcomings in the care provided to them and lastly satisfaction with the quality of care (QoC) given, like service given on VHNDs, behaviour of ASHAs, etc.
- **Interview for assessment of maternal health services with women who had children in the age group of 12-23 months** – This tool was to understand the behaviour and practice of women with respect to Abortion and Family Planning.
- **PDS monitoring tool** – A survey of the fair price shop and an interview with members of the community who either has a ration card, Antyodaya card or an Annapurna card.
- **Abortion tool** – This tool is to survey all health facilities designated to provide Medical Termination of Pregnancy (MTP) services against Indian Public Health Standards (IPHS) standards.
- **Facility Survey** – This tool in the form of checklist is to survey all the facilities like Sub centres (SCs), Public Health Centres (PHCs) and Community Health Centres (CHCs). The checklists consists of questions related to the general condition of the facility, facilities available, information and communication, essential guidelines, prevention of infection, supply and availability of medical equipments and services provided. Marks are given for each question and grades are drawn based on the total marks obtained. The grading of the facility is done in the following manner: Grade A – 76 and above; B - 51-75; C - 26-50; D - upto 25.
- **Village Health Report Card (VHRC)** – It contains general information about the village, PRI, GKSs. A group discussion is arranged with male members of the community on VHNDs, health services provided by health workers from outside,



## POLICY RESEARCH ON MATERNAL HEALTH



work done under GKSS and funds utilized and lastly sanitation. A separate discussion with women is conducted in each village to assess maternal health services, sexually transmitted diseases (STDs), knowledge of ASHA's responsibilities, and quality of services provided to them.

**Secondary data-** This consists of Annual Health Survey (AHS) 2011-12, Census 2011, Sample Registration System (SRS) of various years, state specific Common Review Mission Reports of various years, District Project Implementation Plans, etc along with various published research studies and articles related to maternal health.

### **Work completed:**

National Policy Paper and state specific policy papers for Bihar, Odisha and Jharkhand have been prepared on the basis of secondary sources. Various lacunae both at policy and programme levels, implementation level issues along with hardships faced by the population in accessing and availing a variety of maternal health services is discussed in these papers.

### **Some of the issues discussed are:**

- ∞ Dearth of infrastructure and staff, under supply/irregular supply of equipments and drugs affecting the quality of services in public health facilities
- ∞ Inadequate and low quality ANC and PNC services
- ∞ Over emphasis on institutional deliveries and neglect of women opting home deliveries
- ∞ Out Of Pocket Spending (OOPS) despite of various schemes for its prevention
- ∞ Lack of abortion facilities
- ∞ Focus only on sterilization, especially Tubectomy and high unmet need for temporary methods of contraception
- ∞ Allotments under maternal health budget

### **Work remaining**

The papers are to be revised based on the MIS and CBM data of the project. The data is for the period February 2013 to September 2014. Role of intervention activities in addressing the maternal health issues in the project areas will be explored through this data.

**"We cant talk about Maternal Health without talking about gender equality"**

- Julia Wiklander



## CEHAT RESOURCES

## ABORTION

## Books / Reports

- ∞ Saha, Shelley; Duggal, Ravi and Mishra, Manasee. **Abortion in Maharashtra: Incidence, Care and Cost**, xiii,126 p., January 2005 [ISBN 81-89042-32-7]

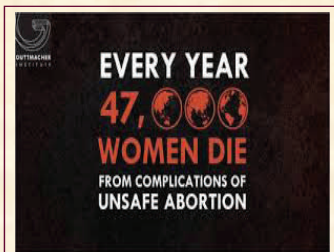
This report consists of findings of one of the two household based studies conducted under Abortion Assessment Project India (AAP-I) in Maharashtra. The main objective of the survey was to study pregnancy outcome analytically in the state with a focus on abortion incidence, care received and costs incurred. The study aims at providing inputs to society at large and to different stakeholders including policy makers to facilitate women's access to safe, legal and affordable abortion care services. [Download Report](#)

- ∞ Bandewar, Sunita; Saha, Shelley and Khaire, Bhagyashree. **Research Ethics in Practice: A Documentation of Study Design and Methodology of Abortion in Maharashtra: Incidence, Care and Cost**, xiv,262 p., December 2004 [ISBN 81-89042-33-5]

This report documents in detail the processes involved in large-scale community-based health surveys in general and abortion incidence surveys in particular. The methodological issues in undertaking such research are discussed thread bear with a critical perspective. This publication is a unique documentation in conduct of research, which will benefit tremendously the research community undertaking such studies.

- ∞ **Abortion Assessment Project-India: Research Summaries and Abstracts**. CEHAT and Healthwatch Trust (Including complete reports and papers on CD-ROM), 136 p., December 2004 [ISBN 81-89042-36-X]

This report contains summaries of all research studies and papers written under the aegis of the AAP- India project. Abortion is the prime health concern of women but it is increasingly being governed by patriarchal interests, which more often curb the freedom of women to seek abortion as a right. Given the official perspective of understanding abortion within the concept of contraception, it is important to review abortion and abortion practices in India. This summary report also includes a CD, which was produced under this project. The CD includes press clippings related to AAP- India project. A film on Abortion produced by CEHAT is also included. [Download Report](#)



"The Reproductive unit is where students learn the essentials of women's health," says one faculty member. That means menstrual problems and sexually transmitted infections, but not abortion.

- <http://www.chatelaine.com/living/features-living/abortion-education-canada-medical-schools-smarten-up/>





## CEHAT RESOURCES



**Safe Abortion  
is a Human  
Right. No  
matter what  
your income**

- National  
Network of  
Abortion Funds

Duggal, Ravi and Barge, Sandhya. **Abortion Services in India: Report of a Multicentric Enquiry**, 48 p., December 2004 [ISBN 81-89042-34-3]

This study is the synthesis report derived from state level studies of providers of abortion services. This multicentric study using standardised methodology and protocols was conducted in six states and within each state 2 districts were covered. The study is a comprehensive enquiry into the various dimension of provision of abortion services. [Download Report](#)

∞ Hirve, Siddhivinayak. **Abortion Policy in India: Lacunae and Future Challenges**. CEHAT and Healthwatch Trust, 88 p., May 2004 [ISBN 81-89042-30-0]

The publication constitutes the “Policy Review” component of the AAP-India project. The paper analytically reviews abortion legislation and related policy implications, including the recent amendments and the complexities arising due to the PNDT Act. The paper concludes with a discussion on opportunities for change and possible advocacy issues to bring abortion policy within the rights domain. [Download Report](#)

∞ Anand, Anita. **Sexuality, Abortion and the Media: A Review of Adolescent Concerns**. x,22 p., September 2003. [ISBN 81-89042-19-X]

This paper throws light on the adolescent sexuality, whether adolescents are practicing safe sex, girls and young women are experiencing unwanted pregnancies? Where are they going for termination of pregnancies? How today's adolescents perceive their sexual needs and what are their sources of information and levels of awareness? How much do the media influence their sexual attitudes and how do the media reflect adolescent attitudes? [Download Report](#)

∞ Barnes, Lindsay. **Abortion Options for Rural Women: Case Studies from the Villages of Bokaro District, Jharkhand**. Mumbai, CEHAT, viii,20 p., September 2003. [ISBN 81-89042-18-1]

This paper aimed to document poor, rural-women's experience of abortion in a backward part of the Bokaro district in Jharkhand. The paper highlights the total lack of accessible, affordable and safe abortion services. The study also shows that in a system dominated by private practitioners, abortion care becomes a lucrative source of profit and women's overall health and well-being is a low priority. [Download Report](#)



## CEHAT RESOURCES



**ABORTION  
IN INDIAN  
LAW**  
“Abortion in  
India is legal  
only up to  
twenty weeks  
of pregnancy  
under specific  
conditions”

- ∞ **Batra, Sangeeta and Rabindranathan, Sunanda. Abortion Training in India: A Long Way to Go.** Mumbai: CEHAT, x, 18 p., October 2003. [ISBN 81-89042-23-8]

This paper looks at the current state of abortion training in India, tracing its evolution from the earlier system to the recent Reproductive and Child Health (RCH) Program. The number of training sites is inadequate to meet training needs. There are gaps in the training system that need to be covered to make the program a success. The paper recommends that there should be change at both the policy and implementation level. [Download Report](#)

- ∞ **Ghosh, Swati. Professional Abortion Seekers: The Sex - of Kolkata.** Mumbai: CEHAT, vii,20 p., October 2003. [ISBN 81-89042- 24-6]

This paper is on the practice of abortion and prevention of pregnancy among the sex-workers in Kolkata. The paper is based on in-depth personal interview of brothel-based sex-workers, information regarding abortion services, contraceptive devices and childbirth are collected from traditional red light areas. The paper also examines the access to abortion services, prevailing patterns of contraceptive use and family structure of the sex workers. [Download Report](#)

- ∞ **Mallik, Rupsa. Negative Choice Sex Determination and Sex Selective Abortion in India.** Mumbai: CEHAT, xii, 28 p., September 2003. [ISBN 81-89042-21-1]

This paper is a three-part analysis of Sex determination and Sex Selective Abortion. The factors that affect the practice are son preference, growth in the political economy and diagnostic technologies and enforcement of a small family norm. The second section talks about various campaigns undertaken to advocate for laws that regulate diagnostic technologies and ban sex determination. The third section talks about the various debates between activists who spearheaded the campaign and the role of the medical community. [Download Report](#)

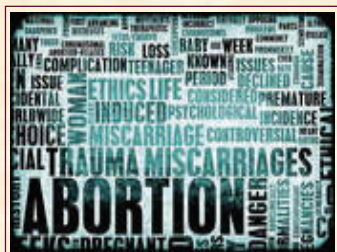
- ∞ **Mishra, U. S. and Dilip, T. R. Assessing Potential for Induced Abortion Among Indian Women.** Mumbai: CEHAT, x,18 p., November 2003. [ISBN 81-89042-25-4]

This paper is based on National Family Health Survey-II (1998-99) data and is intended to provide an indirect assessment of the magnitude of induced abortion practice within marriage in India in order to attain the desired sex composition of children and to avoid unplanned pregnancies





CEHAT RESOURCES



Abortion Stigma is a barrier to access Safe Abortion information and service make abortion safe. Make abortion Legal

\_ International Planned Parenthood Federation (IPPF )

This paper also highlights the high level of use of abortions as a contraceptive method in the country and the serious implications for health policy in general and women's well being in particular. [Download Report](#)

∞ Saha, Shelley. **Methodological Issues in Abortion Estimation.**, Mumbai: CEHAT, xii, 24 p., October 2003. [ISBN 81-89042-22-X]

This paper reviews the methodological issues that are peculiar to abortion estimation using community-based surveys. Many of the abortion estimation surveys suffer from reporting errors, both non-intentional and intentional. This review suggests that there is a need that surveys undertaken to estimate abortion rate should be sensitive to elicit better information. Besides survey questionnaire, other data collection methods like use of randomized response technique or self-administered questionnaire have also been reviewed. The paper concludes with information on further strategies that might be adopted for future research on this subject. [Download Report](#)

∞ Sundar, Ramamani. **Abortion Costs and Financing: A Review.** Mumbai: CEHAT, x,30 p., September 2003. [ISBN 81-89042-20-3]

This paper looks at the cost of abortion. A woman undergoing abortion has to incur expenditure in various forms, both direct and indirect. A review of the available literature indicates that there is very limited data on the cost of abortion in the country and hence there is an increased need to do research in this critical area of financing for abortion care. There is not only a need to know the abortion charges at the various types of MTP centers, but also the household dynamics like the source of financing the abortion etc. Also, a much better regulation of private medical practitioners as well as dissemination of information to them so that women seeking an abortion are not exploited financially. [Download Report](#)

∞ Bart, Johnston Heidi. **Abortion Practice in India: A Review of Literature.** viii,24 p., May 2002 [ISBN 81-89042-10-6]

The first paper in this series advocates need for expanded community-based education to address issues of women's reproductive health specifically and the issues of women's right to high quality health care services in general. This literature review draws attention to the fact that abortion and associated morbidity and mortality from unsafe abortion are common problem and need to be given top priority for safe motherhood issues in India. [Download Report](#)

## CEHAT RESOURCES



- ∞ Bandewar, Sunita, Sumant, Madhuri. **Quality of Abortion Care: A Reality.** iv,216 p., 2002 [ISBN 81-89042-13-0]

The report is based on the study of the abortion care facilities and providers in two districts of Maharashtra. The study covered registered and non-registered, government as well as private abortion care facilities in nine tehsils of two districts. The study found that the quality of abortion services available to women is substandard, poor implementation of the law and rules for quality care by the government and low compliance with the legislations by the medical professionals. Quality of Abortion care should be a part of the strategy of general improvement in the health care delivery system.

- ∞ **Health Panorama No. 2 - Abortions in India.** iv,88 p., June 2001

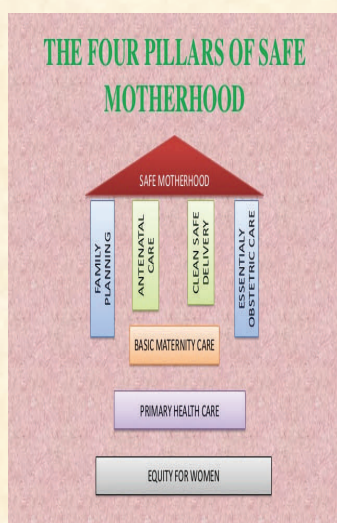
This is a systematic compilation of articles on abortion. Selected newspaper clippings and abortion statistics indicates current public interests on this issue. This document carries MTP Act 1971.

- ∞ **Access to 'Safe and Legal Abortion' Issues and Concerns: Summary Report of the State Level Consultation.** Mumbai: CEHAT, viii,16 p., 1998

This report is a summary of the state level consultation highlighting the issues and concerns related to access to safe and legal abortion care with reference to the MTP Act. Recommendations evolved through the discussion for improving the prevailing status of abortion care during this consultation are also documented in this report. [Download Report](#)

#### Articles / Papers

- \* Jasani, Amar (2014). [Amar Jesani Interview published on PCPNDT & Safe Abortion.](#) *Girlscount Newsletter* October - December, Quarter 4(3). pp. 5 - 7.
- \* Contractor, Sana. [Abortion and sex selection: Contentious issues in the campaign against sex selection.](#) *The Urban World, Special issue on sex selection and PCPNDT act.* 4(3), July-Sep 2011, pp. 13-17
- \* Duggal, Ravi. [The political economy of abortion in India: Cost and expenditure patterns.](#) *Reproductive Health Matters*, 12(24), November 2004 (Supplement) pp.130-137.
- \* Duggal, Ravi and Ramachandran, Vimala. **The abortion assessment project- India: Key findings and recommendations.** *Reproductive Health Matters*, 12(24), November 2004 (Supplement), pp. 122-129
- \* Duggal, Ravi and Ramachandran, Vimala. [Urgent concerns on abortion services.](#) *Economic and Political Weekly*, 39(10), 6 March 2004, pp. 1025 -1026.





## CEHAT RESOURCES



### Other Indicators of Safe Motherhood:

- Infant Mortality Rate
- Total Fertility Rate
- Contraceptive Prevalence Rate
- ANC coverage Rate
- % delivery assisted by SBA
- % of women took iron during pregnancy
- % of institutional delivery & of caesarean section
- Obstetric case fatality Rate

- \* Duggal, Ravi. [Abortion economics- cost and expenditures](#). *Seminar*, 532, December 2003, pp.47-52
- \* Shelley, Saha and Manasee, Mishra. [Offering contraceptive choices post-abortion: The ignored link by service providers](#). *Symposium on Expanding Contraceptive Choices: International and Indian Experiences and their Implications for Policies and Programmes*, Mumbai 7-10 December 2003, 8 p
- \* Balaji, Rajeswari. [Women's Access to Good Quality Abortion Care Services](#) 1st International Conference Medical Sociology, Health, Illness and Society in the New Millennium organised by the Madras Medical Mission, Institute of Cardio-Vascular Diseases, May 25 – 26, 2002, 5 p.
- \* Bandewar, Sunita. [Abortion Legislation and Access to Safe Abortion Care Services: The Indian Experience](#). In *Advocating for Abortion Access: Eleven Country Studies*, Johannesburg, Klugman Barbara and Debbie Budlender (eds.), University of Witwatersrand, 2001, pp. 135-155
- \* Bandewar, Sunita. [Unsafe Abortion](#), *Seminar*, Issue 489, May 2000, pp. 39-43.
- \* Saha, Shelley. [Safe and Legal Termination - A Distant Reality](#), *Humanscape*, Vol. VII(IX), September 2000, pp. 32-33
- \* Saha, Shelley. [Unsafe Abortion](#), *Frontier*, Vol. 33(1), July 30 - August 5, 2000, pp. 13-14.
- \* Bandewar, Sunita. **A Quarter Century of Legalised Abortion Services: A Country Situationer for India**. *International Dialogue on Reproductive Choice Organised by Likhaan, Manila, Philippines*, 1999, 22 p.
- \* Bandewar, Sunita. [Menstrual Regulations as an Abortion Method: A Socio-Medical and Legal Evaluation to Explore its Promotion in India](#). *State Level Consultation on Issues Related to Safe and Legal Abortion*, June 1998, 22 p. (Paper Accepted for Publication in the *Radical Journal of Health*).
- \* Bandewar, Sunita; Lele, Mugdha and Pisal, Hemalata. [Apramedics in MR Practice: A Feasibility Evaluation](#). *State Level Consultation on Issues Related to Safe and Legal Abortion*, Pune, June 7, 1998, 27 p.
- \* Bandewar, Sunita. [Abortion: Cause for concern in India, Even 25 years after legalisation](#), *Paper Prepared Sixth National Conference of Women's Movement at Ranchi, Bihar*, December 28-30, 1997, 7 p.
- \* Gupte, Manisha; Bandewar, Sunita and Pisal, Hemalata. [Abortion needs of women in India: A case study of rural Maharashtra](#), *Reproductive Health Matters*, No. 9, May 1997, pp. 77-86.



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- \* Gupte, Manisha; Bandewar, Sunita and Pisal, Hemalata. **Women's Role in Decision Making in Abortion: Profiles from Rural Maharashtra**, Paper Prepared for XIV International Conference of the Social Science and Medicine at Peebles, Scotland, September 1996, 23 p.
- \* Jesani, Amar. [Abortion: An alternative to family planning?](#). 1995, 2 p.
- \* Jesani, Amar and Iyer, Aditi. [Women and Abortion](#). *Economic and Political Weekly*, 27 November 1993, pp. 2591-2594.

## FAMILY PLANNING

## Articles / Papers

- \* Duggal, Ravi. [Population and family planning policy: A critique and a perspective](#). Paper Presented at International Conference on Population and Development, Cairo, September 1999, 6 p.
- \* Duggal, Ravi. **Population meet: Poor impact of NGOs**. *Economic and Political Weekly*, 29(38), 17 September 1994, pp. 2457-2458.
- \* Duggal, Ravi. **Trends in family planning policy and programs**. Paper Presented at Seminar on Trends and Perspectives for FP in the Nineties, Mumbai Union of Journalists, August 1992, 15 p.

## REPRODUCTIVE HEALTH

## Books/ Reports

- ∞ Bandewar, Sunita and Saha, Shelley **Studies in Reproductive Health Services in India (1990-1991): Selected Annotated Bibliography**, December 2000, Pgs.165 [ISBN 81-89042-07-6]

References cited in this compilation are helpful to identify research gaps and sharpen the perspective for future research in reproductive health. This volume is must for researchers, health activists, programme implementation agencies working on reproductive health care and is an indispensable reference tool born out of the rich experience of the compilers of this study. [Download Report](#)

- ∞ CEHAT, **Report of the Regional Consultation on Responding to the Target Free Approach**, January 1997, Pgs. 20

This regional consultation report highlights on policy level foundation and its implementation effectiveness of the target free approach to reproductive and child health care, also mentioned complete revamping of health policy. The report mentions team deliberations on, role of public health workers, basic curative care, women's health, socio-economic situation, population control programme, gender sensitivity, violence, medico legal aid, role of NGOs etc.



Family  
planning  
enables us to  
create bright  
future for our  
children

- [http://  
www.overpopul  
ation.org/  
abstractmachin  
es/index3.html](http://www.overpopulation.org/abstractmachines/index3.html)



## CEHAT RESOURCES

## SEX DISCRIMINATION

## Books/ Reports

- ∞ Bali, Kamayani; Rashmi and Pankaja, **A Compilation; Monitoring of Pre-natal Diagnosis Technique Act – 1994 As Amended in 2003: Towards a National Campaign Against Sex Selection**, October 2005, Pgs.4+120.

The misuse of pre-natal diagnostic techniques for the purpose of sex selection and sex-determination has led to decline in the country's female population. The legislation which prohibits sex-selection and regulates pre-natal diagnostic testing is the Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act 1994 (The PNDT Act) as amended in 2003. A National Consultation on the monitoring of the PNDT Act, organised by CEHAT, was held between November 27th and 28th, 2004 following the Supreme Court's judgment on the Act. This document is the compilation of the presentations made during this consultation on the status of implementation of PNDT in different parts of India. It is useful for those who are fighting to save the missing girls.

- ∞ Contractor, Qudsiya; Menon, Sumita and Duggal, Ravi **Sex Selection Issues & Concerns: A Compilation of Writings**, August 2003, Pgs. 4+188 [ISBN 81-89042-16-5]

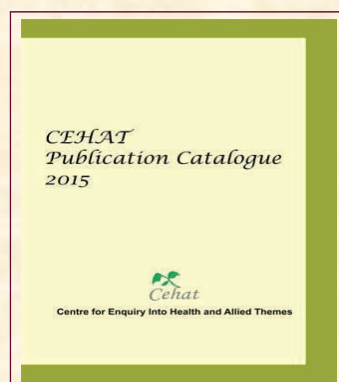
This document is a collection of papers, articles and news reports on the issue of Sex Selection. The purpose of the compilation is to bring together various points of view and voices that have shaped the sex selection debate. The document has four sections first, sex selection and the campaign, second, the role of state and the law, third, social impact of sex selection practice and the political economy of sex selection. [Download Report](#)

## WOMEN HEALTH

## Books &amp; Reports

- ∞ Khanday, Zamrooda & Tanwar, Yavnika. (2013). Exploring Religion based Discrimination in Health Facilities in Mumbai. Mumbai: CEHAT. [ISBN : 978-81-89042-66-0].

This study is an attempt to explore religion based discrimination in health facilities based on perceptions of women from different communities. The study reports that women accessing health facilities are discriminated on the basis of class, caste, language, region and religion. Health professionals and health systems need to recognize that women face multiple forms of discrimination based on caste, class and community and therefore take additional steps to ensure unbiased delivery of services. [Download Report](#)



[To see the Publication Catalogue click](#)



**POLICY RESEARCH ON MATERNAL HEALTH****CEHAT RESOURCES**

- ∞ Nandraj, Sunil; Madhiwalla, Neha; Sinha, Roopashri and Jesani, Amar **Women and Health Care in Mumbai: A Study of Morbidity, Utilisation and Expenditure on Health Care in the Households of the Metropolis**, September 2001, Pgs.77 [ISBN 81-89042-09-2]

The study report made an attempt to understand and document analytically the perceived morbidity patterns, the problems faced by women in accessing health care facilities in connection with their utilization and expenditure incurred by households on women's health care with special reference to socio-economic differentials. [Download Report](#)

- ∞ Madhiwalla, Neha; Nandraj, Sunil and Sinha, Roopashri **Health, Households and Women's Lives: A Study of Illness and Childbearing Among Women in Nasik District, Maharashtra**, June 2000, Pgs.141[ISBN 81-89042-06-0]

This report covers most of the health problems of women in rural as well as urban areas in Nashik district of western Maharashtra. The study throws light on health care services, health expenditure, across gender, age and other so-

**LIBRARY RESOURCES**

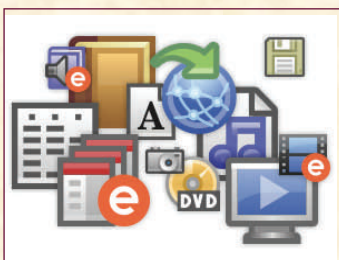
cially important factors. [Download Report](#)

CEHAT's library has sizeable collection of resources in varied areas, including [Women's Health](#), [Maternal Health](#), [Maternal Mortality](#), [Reproductive Rights](#), [Reproductive Health](#), [Family Welfare](#), [Child Health](#).

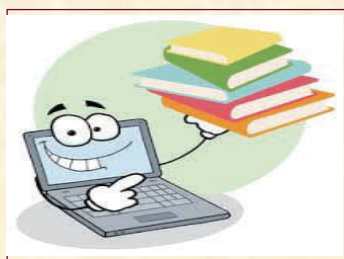
- ◆ **Types of Resources:** include books, Journals, articles, films, CD's, Posters, Documentaries, Reprints, other print & Non-print materials, Reports of other institutions, Government publications-Reports, institutional unpublished documents. Statistical data etc.
- ◆ **Training materials:** includes Course materials of Health & Human Rights course, Violence against women and role of health care providers course, Comprehensive Healthcare Response to Survivors of Sexual Assault Course, Responding to Violence Against Women through Feminist Counseling Course, Integrating Gender In Medical Education Training.
- ◆ **Health database:** It covers Information on various aspects of the health sector in India is spread over numerous sources. The main objective of the database was to bring information of health sector in India together under one umbrella and to use it to promote research and advocacy.



Jan—Mar 2015



Library Collection

[Reference Sources](#)



## HIGHLIGHTS OF THE MONTH



Dr. Betsy Hartmann

**About Lecturer:**


**Dr. Betsy Hartmann,**  
*Professor of Development Studies, Senior Policy Analyst, Population and Development Program, Hampshire College, Amherst, MA USA 2015 Fullbright-Nehru Distinguished Chair*

[See K. R. Memorial Lecture Video](#)





Anusandhan Trust's Seventh Krishna Raj Memorial Lecture on Contemporary Issues in Health and Social Science

**Rethinking Population Education**  
 Challenging the Gender and Structural Violence of Prevailing Norms

By Dr. Betsy Hartmann  
 February 27, 2015 (3.00 pm to 5:00 pm)  
 Organised by

  
 Centre for Enquiry Into Health and Allied Themes (CEHAT)

With

eSocial Sciences, Department of Economics and Department of Civics & Politics, University of Mumbai P.G. Department of Economics, SNDT Women's University Tata Institute of Social Sciences (TISS)

Centre for Enquiry into Health and Allied Themes (CEHAT) with eSocial Sciences, Department of Civics & Politics, University of Mumbai, P.G. Department of Economics, SNDT Women's University and Tata Institute of Social Sciences (TISS) hosted the Seventh Krishna Raj Memorial Lecture on Contemporary Issues in Health and Social Sciences instituted by Anusandhan Trust.

The lecture took place on February 27, 2015 (3.00 pm to 5:00 pm), in Phero-zeshah Mehta Bhavan and Research Centre, University of Mumbai, Vidyana-gari, Santacruz (E), Mumbai 400 098.

The lecture highlighted, the way population issues are taught in schools, colleges and universities can have a profound impact on the development of students' worldviews, particularly regarding the root causes of poverty, malnutrition, ill health, and environmental degradation. In the United States as well as India, surveys of textbooks reveal extreme bias against poor people and poor women in particular, blaming their reproduction for a long catalogue of social and environmental problems. Limiting fertility is then put forward as the solution. Left unexamined are powerful structures of economic, political and gender inequality. In the case of medical education, such biases shape clinical practices that view women's bodies as objects that must be controlled, distorting, among other things, the delivery of family planning and other reproductive and sexual health services. Gender violence is often the result, as in the recent sterilization tragedy in Chhattisgarh. Neo-Malthusian understandings of population also legitimize other punitive measures such as the two-child norm, contributing to structural violence in food distribution, employment and electoral schemes as well as skewed sex ratios.

This lecture was addressed ways educators, researchers, activists and policy advocates can intervene in the process of population education to challenge neo-Malthusian views and promote justice-centered approaches to improving women's health and reducing inequality.

## HIGHLIGHTS OF THE MONTH

**PATIENTS RIGHTS***An Initiative towards better health care***WHAT'S  
NEW?**

**Patients' Right's portal is jointly developed and maintained by the team at CEHAT and IKF (Iris knowledge foundation).**

On occasion of World Health Day, CEHAT would like to announce the launch of 'Patients' rights' web portal. Patients' Right's portal would act as an informative as well as an interactive platform for patients and general public seeking information related to patients' rights and wanting to share their experiences with the health care and health insurance providers. It will be jointly developed and maintained by the team at CEHAT and IKF (Iris knowledge foundation). The website aims to empower people with the knowledge of their rights as health seekers vis-a-vis fair access to quality health care with an assurance of their confidentiality and a safe clinical environment along with participation in decisions regarding their treatment. Users can find information related to various Indian laws and regulations which protect their rights as patients and ensure their access to quality health care and seek grievance redressal. Research and reports around patients' rights and latest news and issues will be updated periodically on the website. People/Patients/Users can participate by contributing their experiences with health care providers and health insurance agencies and help others become aware of the unfair practices in the healthcare system and how they can be tackled by an informed health seeker. The redressal of the grievance will be in the form of providing support from an expert panel which will provide guidance to the patients to handle their queries.

For Website click here: [Patients' Right's portal](#)

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## HIGHLIGHTS OF THE MONTH

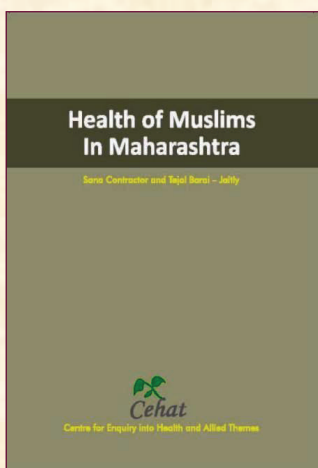
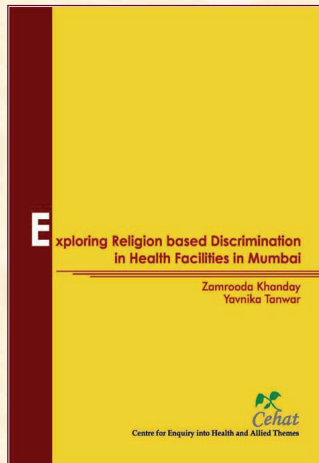
## NEW PUBLISHED REPORTS

- ∞ Khanday, Zamrooda & Tanwar, Yavnika. (2013). **Exploring Religion based Discrimination in Health Facilities in Mumbai**. Mumbai: CEHAT. [ISBN: 978-81-89042-66-0].

This study is an attempt to explore religion based discrimination in health facilities based on perceptions of women from different communities. The study reports that women accessing health facilities are discriminated on the basis of class, caste, language, region and religion. Health professionals and health systems need to recognize that women face multiple forms of discrimination based on caste, class and community and therefore take additional steps to ensure unbiased delivery of services. [Download Report](#)

- ∞ Contractor, Sana & Barai - Jaitly, Tejal. (2014). **Health of Muslims in Maharashtra**. Mumbai: CEHAT. [ISBN: 978-81-89042-67-7].

The report “Health of Muslims in Maharashtra” is an outcome of a project commissioned to CEHAT by the Maharashtra State Minorities Commission. It is based on a systematic review of existing studies and analysis of secondary data sources. What is evident is that a large percentage of Muslims in Maharashtra live in a context of alienation, deprivation and insecurity. The prejudice against the community, everyday experiences of discrimination and harassment impacts their overall well being, quality of life and access to public institutions. The poor availability of health facilities, poor access to clean drinking water and sanitation in the Muslim dominated pockets or ghettos reflects the systematic neglect by the state. Living in such conditions itself is a violation. An edited version of the report is published as chapter 7 of the Report on “Socio-economic and Educational Backwardness of Muslims in Maharashtra” published by the Government of Maharashtra. [Download Report](#)





**HIGHLIGHTS OF THE MONTH**



**CEHAT IN NEWS**

- \* [If you're in your second trimester and want to get an abortion in Maharashtra, good luck.](#)

**14th January 2015, Yahoo News.**

The laws in Maharashtra are pitting those who fight against sex selection and those who fight for abortion rights against each other. Meanwhile it's not fun times for women.

- \* [Crisis Intervention Centre for Women at ASILO Hospital Mapusa](#)

**13th March 2015, Goa Infomedia**

The Asilo Hospital Mapusa organized daylong activities for nurses, doctors and supportive staff, a workshop on Crisis Intervention Centre for Women on domestic violence on women in collaboration with CEHAT Mumbai

- \* [Union Budget: Allocation for Schemes for rape survivors given a miss, says CEHAT.](#)

**20th March 2015, The Indian Express.**

No Financial aid to states to implement Protection of Women from Domestic Violence Act or to set up one -stop crisis centres....



### HIGHLIGHTS OF THE MONTH

#### UPCOMING PUBLICATIONS

- ◆ Policy Paper on Maternal Health in Bihar
- ◆ Policy Brief on Maternal Health in Bihar
- ◆ Policy Paper on Maternal Health in Odisha
- ◆ Policy Brief on Maternal Health in Odisha
- ◆ Policy Paper on Maternal Health in Jharkhand
- ◆ Policy Brief on Maternal Health in Jharkhand
- ◆ Right To Maternal Health in India: are we there yet? A Report



#### CONFERENCE ALERT

##### 1. Global Health Congress Conference

**2015 Conference Theme: Improving Health and Health Services Through Research.**

**Date of the conference:** 25th to 27th June 2015

**Place:** Oxford, United Kingdom

**Contact person:** Charlie Zhou

**For More Details See the:** [Website](#)

The aim of the event is to highlight the link between research and practice by gathering together a wide range of papers on health and health services research close to practice and/or policy.

**Organized by:** Foundation for Knowledge Exchange

##### 2. PHC 2015 - Public Health Conference 2015

**Date of the conference:** 11th to 13th July 2015

**Place:** Bangkok, Thailand

**Contact person:** Vladimir Mladjenovic

**For More Details See :** Website

Public Health Conference 2015 will provide unlimited resources and opportunities to interact with prominent leaders in the field and greatly expand on your global network of scholars and professionals.



### About CEHAT...

CEHAT, is the research centre of Anusandhan Trust. CEHAT was established twenty years ago when a group of researchers and healthcare professionals decided to create an alternative health research institution which is at the interface of activism and academics. CEHAT comprises of a multi-disciplinary team such as doctors, lawyers, social workers, public health experts and counselors.

CEHAT through its research, intervention, education and advocacy, has been addressing issues of right to health care to all as well as preventing violence and caring for survivors. All projects are periodically reviewed for scientific rigour and ethical compliance by external review committees. A democratic mode of decision-making is the cornerstone of CEHAT's functioning.

### Head Office : CEHAT

Survey No. 2804 & 2805,

Sai Aram Society Road,  
Vakola,

Santacruz (East)

Mumbai - 400 055.

### Contact Details

Tel: 91-22-26673571/  
26673154

Fax: 91-22-26673156

Email: [cehat@vsnl.com](mailto:cehat@vsnl.com)

[www.Cehat.org](http://www.Cehat.org)



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