

Improving women's health in India: human rights and ethical dimensions

Sarita Patil, Maya Porel, Neena Shah More, Dr. Armida Fernandez.

Society for Nutrition, Education and Health Action (SNEHA), Urban Health Centre, Chota Sion Hospital, 60 Feet Road, Shahunagar, Dharavi, Mumbai 400017, Maharashtra, India.

SP: cinh.community@gmail.com Correspondence

In spite of an extensive public health infrastructure, residents of Mumbai do not enjoy access to health care services. Women are the most vulnerable due to lack of information, resources and support systems. In the unsafe urban slum environment, women's rights such as their security, safety, freedom of movement and right to education, equality and access to information are denied despite available public services. Many obstacles persist in the realization of women's health rights despite elaborate laws and policies.

Mumbai's City Initiative for Newborn Health aims to improve maternal and newborn health in vulnerable urban slum communities, through a combination of municipal health service quality improvement and community mobilization to impact the care-seeking behaviour of mothers in slum localities.

We mobilize communities for better health care of mothers and newborn infants. A local *sakhi* facilitates women's *gulli* groups to conduct fortnightly, participatory meetings following a planned meeting sequence. Participation of women is ensured by the use of Appreciative Inquiry (AI) approach, which focuses on positives. Stories, games, exercises and picture cards are used to meet their information needs at their doorstep and build an understanding of their own potential to improve maternal and infant health. A total of 242 *galli* groups were formed and average of 36 meetings were conducted in each of these groups covering 3000 women in 24 slum communities. The intervention is evaluated using a randomized controlled trial with clusters.

Preliminary qualitative findings through the AI Valuation by women group members, show that women have gained fresh insights into their experiences, become more aware of their rights and increased their *agency* to seek appropriate and timely health care and allied services. Group members share information about problems from pregnancy to newborn care, concerns about home births, rational methods of care vis- a-vis home remedies and cultural practices with other women in their locality and relatives.

