

Rural Self-help Group Members as ‘Change-makers’: Understanding Agency, Empowerment and Health Decision Making of Women in Rural Bihar

Sini Varghese¹, Malavika Subramanyam², Manisha Joshi³, Rosa Maria Perez⁴ and Sebastian Vollmer⁵

¹Student, MA in Society & Culture, Humanities & Social Sciences, Indian Institute of Technology, Gandhinagar (IITGN)

²Humanities & Social Sciences, IITGN

³School of Social Work, University of South Florida

³Departamento de Antropologia, ISCTE-University of Lisbon Institute

⁵Development Economics, University of Göttingen, Germany

E-mail: ¹sini.varghese@iitgn.ac.in, ²malavika@iitgn.ac.in, ³manishaj@usf.edu, ⁴rosa.perez@iscte.pt,

⁵sebastian.vollmer@wiwi.uni-goettingen.de

Abstract—Studies have indicated that Self-Help-Groups (SHGs) in India are an effective way to improve financial emancipation and decision-making among women. However, scarce attention has been paid to studying the sense of agency and empowerment in SHG members in matters related to health and sanitation. This paper is the outcome of a research conducted as a part of an impact assessment of Gram Varta, a health intervention programme among villagers in Madhepura, Bihar. The objective of this study is to understand how and why SHG members think and act in matters pertaining to health and sanitation of their family. The multidimensional nature of the sense of autonomy and agency among women SHG members in a patriarchal setting needs to be understood to see an effective transformation of women from passive agents to ‘change-makers’ in health of the community.

The research was grounded on qualitative in-depth interviews and focus-group discussions with various stakeholders associated with the SHGs, and observation of SHG meetings in three villages of Madhepura district in Bihar.

Three major themes were identified and explored in the study: a) SHG meetings, explicitly created to decide on financial matters, act as an indirect channel for sharing health-related information .b) Gender relations and caste hierarchies among SHG members, and its impact in the functioning of the SHG as well as the choices and autonomy of women to speak and decide on matters related to health and sanitation. c.) Amalgamation of traditional and western health practices in SHG members, who have relatively better financial autonomy.