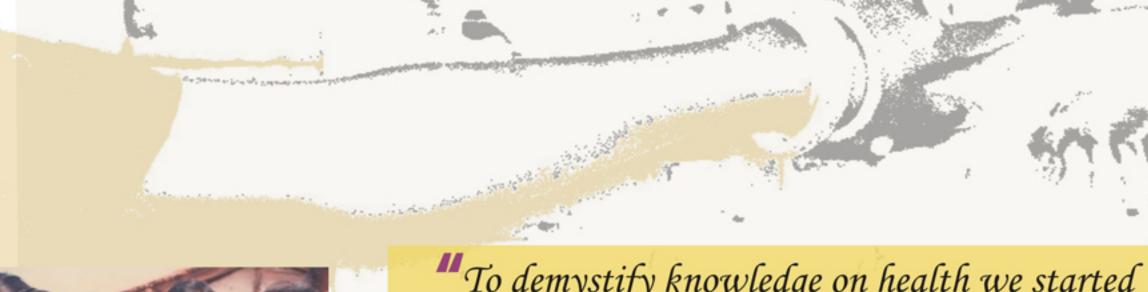
We often felt frustrated that a lot of illnesses and diseases could be prevented if communities had simple information and knowledge about them.

On going a little deep we understood the reasons. Health related knowledge and information was in the hands of few medical professionals and health care was highly mystified. This was beneficial to a few doctors."

4











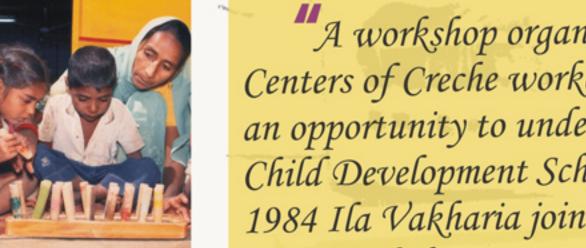
To demystify knowledge on health we started developing information packages for learning. The Bal Sevika (Child Care) kit, Anemia and Women's Health Kit were among the first information packages we developed."







A workshop organised for Training Centers of Creche workers in 1982 gave us



an opportunity to understand Integrated Child Development Scheme ICDS. In May 1984 Ila Vakharia joined as the fourth member of the team. Jyoti Gade, a trainer who had participated in the training, joined the team in August 1984."

## A project on Child survival 1984 onwards...

Indu's first step, challenging gender stereotypes laid the foundation for CHETNA. Her broad perspective, undeterred by negative energies, strengthend by her convictions, she has paved a road where few women could walk. Backed with the able support of Minaxi Shukla and Pallavi Naik there has been no looking back for CHETNA."



## **Sowing the Seeds of CHETNA**

In the summer of 1980 CARE, Gujarat, placed an advertisement for a nutritionist for their Community Development Program, in collaboration with The Vikram A Sarabhai Community Science Center (VASCSC). Not mentioned in the advertisement, the three criteria for selecting the candidate was willingness to travel 20 days a month to remote rural and tribal areas, knowledge of the local language and capacity to drive a four wheel jeep.

"UNICEF, Delhi approached us to

(GOBIFF) messages. We conducted extensive 🚒

develop an educational kit on childcare,

Family Planning & Female education

field testing in various districts of Uttar

the Hindi speaking belt.

Pradesh. It was basically to be prepared for

emphasising the Growth monitoring, Oral

rehydration, Breastfeeding, Immunisation,

Freshly graduated from M.S.V. Baroda, Indu Capoor, with a post graduate degree in Food & Nutrition immediately responded to the advertisement with enthusiasm, to which she was subsequently called.

When the administrator for CARE faced the 23 year old Indu Capoor to interview her, the criteria became his major concerns: Would such a young girl, be able to travel in the interiors of rural and tribal Gujarat?

Would she be able to drive a four wheel jeep?

Would she be able to pick up the local language?

A man could do it but a girl? Indu responded positively and enthusiastically to all three concerns. After a few days of consultation, with then director of VASCSC and senior scientist/evaluator who was handling the project at that time, she was called for the interview..

Indus first assignment was to coordinate the nutrition program developed by a senior scientist, which had started in 1978, for the slum children who visited the science centre. Minaxi Shukla was working for VASCSC and volunteered to assist Indu for translating into the local language. Indu raised many questions regarding the feasibility of the pilot program for replication in other rural and tribal areas. The confrontation was between traditional scientist vs. applied scientist. Being young and a girl at that, the traditional mind sets resisted accepting her views and suggestions, leading to frustrations and extreme delays. With a specialization in nutrition she could address problems and doubts, so she was frequently consulted when doubts arose. With the exception of a few senior scientists, who felt threatened by the presence of a nutritionist, her views and suggestions were frequently sought and incorporated into program implementation. Her involvement was encouraged and appreciated by others, particularly by the Mnaging Trustee, Nehru Foundation for Development, Dr. Kartikeya Sarabhai.

Indu's confidence grew, with extensive visits to rural and tribal CARE feeding centers in interior areas. She became certain, of the irrelevance of the top down nutrition programs if implemented all over Gujarat. In view of this, a pilot program was proposed, which would cover 100 villages, spread in ten blocks, all over Gujarat, including tribal,, rural and urban centers. This was proposed with the view to develop suitable educational strategies for all the three areas. The name given to the program was INHAP (Integrated Nutrition And Health Action Program).

With increase in workload, the need for an assistant was felt. A year later when funds could be organised, the post was filled by Pallavi Naik, who had been a junior associate of Indu's at MSU. Later, Minaxi who had started volunteering more time joined the project formally.

The team came to be known as the 'Trio.'

 ${f L}$ his phase was action oriented. In order to conduct meetings effectively, that were organised all over Gujarat, several resource materials in simple language with attractive visuals were prepared, related to information about programmes and activities on Nutrition and Health.

Several programmes were conducted in Ahmedabad with St. Xaviers, Non-Formal Education Trust at Gulbai Tekra (urban slum) and increasing awareness about nutrition in different housing societies among women managing homes.

The material produced during this course of time were mass produced by the Government of Gujarat for their supplementary feeding centers all over the state. This lead to greater publicity of the teams work and soon visitor's lined up the VASCSC, querying about their Health and Nutrition programs.



Until recently, spaces for women and men were clearly defined. The space, 'Inside' the house was for women.

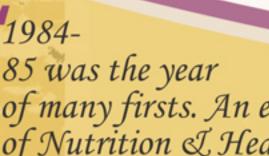
The world 'Outside' the house belonged to men.

Women who existed 'Inside' were given rights and legitimacy by the patriarchy - provided she 'belonged' to a male member in the house - father, husband, son.

As long as she stayed 'Inside' and 'belonged' to a male member she was 'protected'. In return she served as and for, the property of the man and took care of his needs. Women who existed 'Outside' the house were perceived as objects Of entertainment, pleasure giver or acquisition.

They had no legal status or legitimacy.

In either case - whether it was 'Inside' or 'Outside' - the woman did not have an identity of her own. She had no space or rights to follow her own dreams and desires.



CHETNA

of many firsts. An exhibition of Nutrition & Health material was showcased

in Delhi.. The first Maternal Care health training was conducted,, exposing the team to the existing delivery practices in rural and tribal areas. In her enthusiasm,

Indu sent the INHAP report to several agencies. One of them fell under the Ford Foundation Indian representatives eye. Impressed, he approached Kartikeya Sarabhai, Managing Trustee of Nehru Foundation, enquiring about the origin of

In August 1984, CHETNA received a core grant from Ford Foundation and moved to their own rented building on drive-in road behind drive-in cinema which we called Parde-ke-peeche.



