Destitute Women in Kerala: Psychological resources and psycho-social needs

M. S. Razeena Padmam

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1. Introduction

According to *Manusmrithi* and other ancient Sanskrit texts, the ideal women are those who do not strive to break the bonds of control and dependency. Indian girls grow up hearing stories of virtuous women like Sita and Savithri considered epitomes of proper wives. A girl child is trained to be modest, kind-hearted, and submissive. She is taught to suppress her feelings and emotions. She is not allowed to have rest, recreation or work of her choice. Besides, cultural devaluation of girls influences their life-long behaviour.

Most married women learn to suffer silently and bear with any type of cruelty perpetrated on them without resent. Men and the society at large, exploit the modesty and helplessness of women. Broadly speaking, men intentionally and covertly scheme to keep women subservient to them in matters of power and finance, and undermine social reforms to improve the status of women. Men also use Machiavellian techniques to keep their wives under command. The traditional patriarchal structure of families gives husbands the privilege of power over their wives. Men benefit from the subordinate position of women (Eisenstein, 1979). And it is the innate biological differences between the sexes that give patriarchy its legitimacy.

Relations in the family, class status, and the ideology of the social group to which they belong affect women's status. All these are part of inheritance. Among the ideologies underlying inheritance is patriarchy. In its narrower sense, patriarchy is the rule by the father within the family and the consequent subordination of his wife and children. In the broader concept, patriarchy is used as a term for characterising the society that reproduces male dominance in all areas: education, work, and socio-political institutions. Safa (1996) mentions three crucial sites of women's subordination, family, workplace, and the politics, and maintains that patriarchy is manifested in all the three sites. Walby (1966) has given a clear picture of women's status in a patriarchal society: "Women's household labour is expropriated by their husbands, fathers or cohabiters. Within the economic level, women are excluded from the better forms of work and are segregated to jobs which are less skilled". Male violence is another patriarchal behaviour routinely experienced by women, generating fear that has a restrictive effect upon the actions of most women.

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M. S. Razeena Padmam is working at Department of Behavioural Sciences, MG University, Kottayam.

The sexual double standards, prostitution, and pornography are practices common in patriarchy, which again devalue the status of women. The *purdah* system, *sati*, female infanticide, polygamy, and child marriage have played significant roles in bringing down the status of women (Majumdar, 1961). Strangely, religion, education, and media represent women in a patriarchal gaze. Operating in some or all of these senses, patriarchy as an ideology is deeply embedded in the society, culture, and institutions as well as in the minds of both men and women.

The ruthless customs of patriarchal society and male arrogance leave long-lasting scars on womanhood. Statistical profiles provide us with a wealth of information that leaves no doubt about the disadvantaged position of women in the patriarchal society. Hidden behind these demographic figures and the jargon of developmental specialists are women who are helpless and are overwhelmed by the problems they face. Women are given poor education and subjected to poor living conditions, strained family relationships and specifically oppression, violence, sexual abuse, subordination, and devaluation inherent in patriarchal oppression (Jeffreys, 1990). As Bachrach (1988) stresses, women typically experience a variety of social disadvantages as a consequence of the oppression that contributes to their social disablement. Other social disadvantages may be seen as a consequence of the problems themselves. Poverty, homelessness, stigmatisation, exclusion from many aspects of 'normal' life, and disrupted family and social networks are just a few of them. The question is not merely of women being exploited and harassed, but of women thrown out of their houses as well.

The Kerala society has a significant presence of a large number of socially disowned women such as widows, abandoned Muslim divorcees, and victims of deceit and cheating; besides a number of women and their parents or husbands discard young girls after becoming victims of rape. Cases of women who are single mothers pushed out of their houses into the street are numerous. The number of homeless women is increasing day by day. Female children, teenagers, and older women who flee their homes for fear of severe battering, sexual abuse, and mental torture are also on the increase.

Thus destitution must be understood in the context of heterosexist patriarchal oppression. Within the patriarchal organisation, the roles of women are defined in relation to men. This organisation is extremely resistant to change. Child marriage, infanticide, foeticide, wifebattering, *sati*, widowhood, beggary, prostitution, sexual harassment, physical fatigue, mental torture, rape by intimates or strangers, police and army, dowry extortion, and dowry murder have become customary practices in the society. Attempts to resist the atrocities generally end up in desertion of such women. They are considered unable to perform adequately in their male-defined roles.

The plight of destitute women has remained for long a matter of concern to the society. Serious efforts have gone into the salvaging of destitute women, both from the part of the government and the non-governmental agencies. Together with welfare activities, research too has, occasionally, gone into the causes and consequences of destitution.

An analysis of the history of institutions for care and protection of destitute women and

children would throw light on the attempts made by various agencies at different periods of time for salvaging these helpless women.

History tells that all religious and social reformers have taken up the question of violence against women and rendered services based not only on ideologies but on prejudices and preconceptions as well. Since women constituted the major suffering group together with other 'down-trodden' sections of the population, they naturally became the targets of reform measures.

Reformers advocated kind and humane treatment towards women. But they themselves subscribed to the anti-women ideology prevalent during their times. For instance, while Buddha's compassion for women is well recorded, his advice to his disciples was to keep away from women since women are by nature evil and seductresses. The same may be said of Christianity also though it had helped in improving the status of women within the Jewish society. However, the concept of 'Eve, the seductress' who caused the 'downfall of man' continues to prevail. St. Paul also advocated obedience and total submission of women to husbands even when the husbands are non-believers and forbade women from speaking in the church. Islam, which tried to deal with the blatantly violent practices against women in tribal Arabia, tried to elevate their status by viewing marriage as a contract and by giving property rights to women. While these were radical measures when Islam emerged, they too proved to be mere reform measures in course of time as polygamy and the right of oral divorce only to men reinforced women's inequality and strengthened male superiority within home and in society at large. Sikhism and Jainism also endorsed women's subordinate status within home and society.

There are two equally strong viewpoints about the causes of destitution. The first view is that it is the cruelty against women in various forms such as sexual abuse, neglect, battering, divorce, and male chauvinism that is responsible for destitution. Equally important is the argument that it is the deviant personality of the women concerned that makes them destitute.

However, it has been realised that there is no single cause that lucidly explains 'destitution'. There are several theories, which explain the social problem of destitution. Value-conflict theorists define destitution simply as conditions that are incompatible with group values. In the feminist perspective, destitution is understood in the context of heterosexist patriarchal oppression. It is also argued that it is the emotional immaturity, maladjustment, and other 'deviant' behaviours of some women that make them destitute. Because of the diversity in views in explaining the causes of destitution, the problem of the destitutes residing in the shelter homes also remains undoubtedly complex. Any effort to improve their conditions, therefore, should include an assessment of their problems and an identification of their needs.

Several investigators have undertaken research on the socio-economic aspects of destitution. Notwithstanding these efforts, there still remain large uninvestigated and unexplained areas. We have only scanty facts and information regarding the actual personality profile and psychological resources of a destitute. A perusal of literature reveals surprisingly that little well-documented, competent, and controlled research exists on this problem in Kerala. The present study is an attempt to contribute to the unravelling of this problem. The psychological

resources and psycho-social needs of destitute women living in *Mahila Mandirs* in the State of Kerala are enquired into. The study also examines the implementation of the various rehabilitation programmes of the Social Welfare Department of the State. An attempt is made to probe into the problems being faced by the inmates as well as the home authorities that implement the programmes. It is hoped that the findings of the study would be useful for restructuring and redesigning the functioning of such homes.

Area, method, and scope of the study

The study pertains to the *Mahila Mandirs* of Kerala and their inmates. The major objective of the study is to document the personality profiles and understand the levels of emotional maturity and adjustment capability of the inmates of the *Mahila Mandirs*. An attempt is also made to compare these three attributes between the inmates and a control group of destitute women living in slums and belonging to the socio-economic status comparable to that of the inmates. Case studies are made of a few inmates, classified according to the causes of their destitution. The study was conducted during 1999-2000.

The field enquiry was preceded by discussions held by the investigator with the personnel of the Social Welfare Department including Regional Directors, District Social Welfare Officers, Superintendents of *Mahila Mandirs*, and teachers imparting vocational training. The field survey was conducted in (1) the *Mahila Mandirs* in Kerala, on (2) the personality variables, emotional maturity, and adjustment capability of the inmates of the *Mahila Mandirs* in comparison with those of slum dwellers in similar socio-economic situations, (3) the problems of the inmates under study, as perceived by the inmates themselves and by the functionaries of the homes, and (4) the psycho-social needs of the inmates.

Personality variables and psychological resources

The personality variables selected for the study are Extroversion-Introversion and Neuroticism-Psychoticism. The psychological resources selected are Adjustment and Emotional Maturity. A brief description of each variable is given below.

Extroversion

According to Yung, Extroversion is an attitudinal construct of an externally-oriented person. Eysenck (1968) sees Extroversion as a more or less stable and biologically determined personality trait. Extroverts are outgoing, impulsive, and uninhibited and have many social contacts, and frequently take part in group activities. Extensive research gone into extroversion suggests that it has a biological origin. According to Eysenck (1968) Extroversion-Introversion dimension of personality is determined by the cortical arousal of the individual. Introverts are easily aroused by low threshold stimuli while extroverts need higher threshold to be aroused. Owing to this difference in arousal level extroverts and introverts behave differently.

Neuroticism

The central characteristic of this dimension of personality is the frequent experience of

negative affect states including anxiety, depression, and hostility. The kind of symptoms or psychological difficulties a person is likely to develop are related to his basic personality characteristics and principles of nervous system functioning. According to Eysenck, a person develops neurotic symptoms because of the joint action of a biological system and experience that contributes to the lowering of strong emotional reaction to fear-producing stimuli.

According to Eysenck, neuroticism score indicates the emotional stability-instability of the individual. Neuroticism is determined by the activation of visceral brain or limbic system coordinated with the autonomous nervous system. Activation of this system makes a person feel nervous, tense or distressed.

Emotional maturity

According to Smithson, emotional maturity is a process in which the person is continuously striving for greater sense of emotional health, both intra-psychically and intra-personally.

According to Kalpan and Beren, the characteristics of an emotionally mature person are the following: has the capacity to withstand delays in satisfaction of needs; has the ability to tolerate reasonable amount of frustration; has belief in long-term planning, and is capable of delaying or revising expectations in terms of demand of situations.

An emotionally mature child has the capacity to make effective adjustment with self, members of family, and peers in school, society, and culture. But maturity means not merely the capacity of such attitude and functioning but the ability to enjoy them fully as well. Cole (1944) says that emotional maturity is indicated by a person's ability to withstand tension. An emotionally mature person persists in the capacity for fun and recreation. Such a person enjoys both play and responsible activities and keeps them in proper balance. Therefore, the emotionally mature individual is not one who necessarily has resolved against all conditions that are around him but one who is continuously in the process of seeing himself in clear perspective and involved in a struggle to gain healthy integration of feeling, thinking, and action.

Adjustment

Adjustment is a continuous process of satisfying one's needs rather than something fixed and static. And it involves virtually all aspects of human behaviour. No organism achieves a complete adjustment, at least not for long.

Adjustment is regarded in terms of the positive characteristics that individuals display. A well-adjusted person has some awareness of his own motives, desires, ambitions, and feelings and has high self-esteem. A person who is emotionally mature and stable will be well adjusted and mentally healthy.

Capacity to adjust well socially with other persons and ability to get along with others in any situation are also indicative of adjustments and mental health.

A well-adjusted person has the courage for facing failures in his life and is self-confident and optimist. He leads a well-balanced life of work, rest, and recreation. Adjustment is essential to lead a wholesome mentally healthy life. The investigator has selected four areas of adjustment to be studied. They are family adjustment, health adjustment, social adjustment, and emotional adjustment.

The report is presented in the following order. Section 2 surveys the literature on the institutionalisation of destitute care and on the functioning of such institutions in India. The analysis of the field data collected is given in Section 3. In the next section, a few case studies of inmates of *Mahila Mandirs* based on a classification of their major cause for destitution are presented. The major conclusions and suggestions of the study are given in the final section.

2. Institutions for Destitutes: A survey

Institution or care home is a place where a number of dependent persons are looked after. It is also understood as a physical structure with its inner and surrounding, material and non-material, environment. There are different types of institutions. In most of the institutions, the care provided is observed to be inadequate and primitive.

This type of care merely provides shelter, food, and clothing, which is far from rehabilitation. Several women share a large dormitory, dining room, and living room. This type of care implies regimentation of routine and loss of identity. In such institutions, most of the inmates do not like to talk to their superiors about their problems. Only physical illness is being consulted. Inmates are not shown love and affection by the institution authorities. The maturation process of people involves the integration of their personality and their ego function depending on a healthy establishment of identity. In the case of institutionalised women, the majority fails to maintain an identity of their own.

The inmates of these institutions are not treated as individuals, and are, as a routine, categorised into groups in order to carry out certain activities in the institution. Individual talents, skills or potentials are not considered at all. All the inmates are treated in the same way. Such shortcomings of the institutions make inmates isolated from everyday life with their 'rigid routines' and 'block treatment'. The de-personalising and handicapping effects of institutionalisation on their residents are well-documented by social scientists like Barton (1959), Goffman (1961), and Wing and Brown (1970). According to them, prolonged periods of stay in any institution are found to create identity confusion among the inmates, which in course of time manifests itself in feelings of insecurity, and inferiority.

Absence of a normal inhibitory pattern, emotional hunger, emotional superficiality, and absence of normal tension and anxiety are some of the personality traits exhibited by battered and neglected women who end up in such institutions.

An early study by Goldfarb (1945) delineated psychological aspects of emotional disturbances found in adolescents whose infancy had been spent in institutions. Absence of normal inhibitory pattern, affect hunger, emotional imperviousness, superficiality of relationship and absence of normal tension and anxiety are reported as characteristics of the adolescent destitute girls. Toufexis (1981) analysed the behaviour of battered women who were institutionalised and found that these women subsumed their identities to their husbands' and lacked self-esteem. Schuetz (1960) is also of the opinion that battered women are basically sado-masochistic; that is why they enjoy being abused and have a need to be abused.

If the general environment of the after-care homes and institutions is examined, one may find that in most cases institutionalised atmosphere is characterised by lack of personal care, inadequate number of caretakers, frequent change of caretakers and routine care with no sensitivity to individual's needs and over-conformity to rules and regulations with no flexibility. This is even truer of governmental institutions.

Studies have found that institutionalisation affects the development of social concepts and positive ethnic attitudes adversely. Studies by Ram (1983) and Lakshmi (1980) have shown that institutionalisation brings about problems in personality growth and self-concept development.

Studies of institutional environment call attention to the fact that variation in amount and quality of sensory stimulation may affect total development (Caster, 1968).

Singh (1988) in his study on institutionalised children reported that 52 percent of children do not like to talk to their superiors about their problems except about physical illness.

Several other studies conducted on children have revealed the damaging effect of custodial type of residential care. Devastating effects of institutionalisation on emotional development are reported in studies by Goldfarb (1945), Yarrow (1964), and Reddy (1989).

The congregate system of care is the typical institutional care and is primitive in nature. This type of care merely provides shelter, food, and clothing that is far from skill development and rehabilitation.

Studies by Goldfard (1945), Yarrow (1964), and Provence & Lipton (1962) have shown that this type of care results in various forms of deprivation.

Several studies have reported constant change of officials, lack of adequate space and physical infrastructure, group routine activities with little scope for flexibility, routinised care with no adaptation to individual needs, lack of psychological interaction and absence of specialised care as disadvantages of most institutions. Such conditions, no doubt, hinder the development of personality.

Other studies have found that the women living in care homes consistently presented a profile of low self-esteem, lack of self-confidence and a tendency of withdrawal reflected in their general apathy, lack of self-care, poor adjustment to routines in residential institutions and poor adjustment to staff and co-inmates, etc. Many preferred to remain aloof, adopt critical and uncompromising attitudes, and express a sense of discomfort while relating to others. Such behaviours should be examined against the possibility of poor relationships in early life. Some genuine states are anxiety and situational stress about finances, household responsibility, and employment.

Institutions for destitutes in India

Social work in the form of mutual assistance, charity, and philanthropy is as old an activity in India as in other parts of the civilised world. The existence of residential services for the care and protection of destitute children and women may be traced back to the pre-Independence period. Religious and secular organisations had come to the rescue of destitutes through institutional care. Roman Catholic Christians were the first to start institutions for destitute children in India. They opened such institutions in Hyderabad in 1850 and in Madras in 1855. Religion gave them the impetus for starting orphanages and care homes. Gore and

Soares (1960) have given a picture of the Indian society in which religion emphasised the values of charity, philanthropy, and mutual help. Alms giving and feeding and care of destitutes were long considered in this country as acts of religious merit. Temples gave shelter to the homeless. Social institutions provided mechanisms to meet the needs of the old, the sick, and the homeless. But most of these institutions were run without any specific objectives or systematic patterns.

Natarajan (1959) refers to a large number of social reform movements started between 1906 and 1912. Several Hindu widows' homes were found throughout the country, the prominent among them being the 'Widows Home' in Mysore, the *Mahila Silpashrama* in Calcutta, the 'Widow Home' in Bangalore, Mrs Dutta's widow hostel in Chennai, Dev Samaj at Ferozpure and Bhatinda, Arya Samaj in Jalandhar, and Digambar Jains in Bombay. The Depressed Classes Mission of India was started in 1906 and the Women's Indian Association was started in 1917. A large number of local institutions have come up since then and they render welfare services like orphanages and widow homes.

Together with several local-level agencies, a few national institutions that render assistance to local institutions have also come into existence. The All-India Women's Conference, the National Council of Women in India, the YWCA, the Kasturba Gandhi National Memorial Trust, the All-India Women's Education Fund Association, the Federation of University Women, and the Trained Nurse Association are some of them.

The social reform movements of the nineteenth century addressed specifically issues such as *sati*, widow remarriage, and women's education. But their efforts have in no way changed the power balance within the family. Similarly, Mahatma Gandhi who drew women out of their homes during the nationalist struggle also viewed women as 'marginal' and 'peripheral' and laid great emphasis on the women's chastity and moral superiority. The question of equal status within the home was not raised at all. But a few women in the reform movements as well as in the freedom struggle raised the question of equal status within the home. Women's organisations such as AIWC and Arya Mahila Samaj tried to evolve support structures. They set up hostels and rescue homes to deal with the problem of violence against women in their homes. Though individual women like Pandita Ramaabai questioned the status of women within the home and tried to provide alternatives, their efforts did not grow into a strong movement for questioning the patriarchal values. Over the course of time, all the care institutions turned into mere service-giving agencies. They continued to follow the patriarchal ideology while rendering services to individual victims and went on branding them as 'fallen' and viewed them as destitute.

Kasturi (1966) has pointed out in one of her articles that institutions based on religious and social traditions are opposed to women's equality, dignity, and status. Women's rights have been increasingly subjected to social and religious oppression to such an extent that they are unable to avail themselves of the minimum protection given to them under existing secular, criminal, and civil laws.

Alternatives for the care of destitutes

Since violence against women is an undisputed fact whether it takes the form of dowry death, homicide or wife-beating, one has to first look for alternatives while dealing with the problem. While dowry death is the extreme manifestation of the same problem, wife-beating is a day-to-day phenomenon affecting millions of women. Even the dowry victims themselves undergo beating for long periods before they are murdered ultimately. Women allow themselves to be driven to this state precisely because there exist few viable alternatives. In this context we need to evaluate critically the existing alternatives for women in such situations, which may be broadly classified as shown below:

- (a) The older institutions and rescue homes for women;
- (b) The counselling centres which evolved from the women's movement in 1980; and
- (c) The response of the State-Legislature, the Executive, and the Judiciary.

Most of the existing alternative systems have outdated rules and regulations that prevent them from catering to the needs of the present-day women. Among the 15 rescue homes in Mumbai, the *Shraddhananda Mahilaashram* specifically caters to victims of violence in marriage, as they cannot take shelter here as 'destitute' by virtue of their marriage. The home was initially set up for the "rehabilitation of Hindu widows" and over the years has broadened its rules to include all destitutes. The home offers training to those women who are admitted here and tries to make women independent but it does not cater to the needs of women who face violence within marriage.

The other home *Bapnu Ghar*, which specifically deals with problem marriages, has 'reconciliation' as its main aim. The strict rules and regulations of the *Ghar* prevent the women from going out of the institution unescorted. These women are viewed as deviants who have to be counselled to deal with the problems, a view which almost implies that it is they who are the cause of the problem. While the *Ghar* has the capacity to house 100 women, the number of women in it has declined steadily. The *Ghar* in no way helps to bring down the suicide rates in the city. Apparently women do not see it as a viable alternative to the solution of their problems.

Sukh Shanthi and the Government Reception Centre mainly cater to young destitute girls as well as girls who are rescued from brothels. *Asha Sdaan* houses only minor girls. Some of the homes provide education to the girls and some provide training but, by and large, the education and the training imparted to them do not help the women to become economically independent.

There are certain common features in all care homes. Firstly, the women are viewed as 'morons' and dependents who are in need of constant supervision. Secondly, the training imparted to the inmates does not lead to economic independence. The women who run the institutions deal with the inmates with extreme contempt and consider them 'fallen women' who are in need of rescue. Great emphasis is laid on the women's chastity and morality.

For instance, *Bapnu Ghar* that caters specifically to the needs of battered women justified its rule regarding cloistering of women on the ground of preserving their chastity. The authorities of the *Ghar* explain that "this way at least the husbands will not suspect their chastity while they are away from home and hence will not hesitate to take them back". So the husband's wishes are respected and the patriarchal norms are strictly maintained even when the husband had driven the women out of his home. The patriarchal ideology is based on the understanding that the ideal women are those who do not strive to break these bonds of control. Moreover, the salvation and happiness of women, it is averred, revolve around their virtue and chastity as daughters, wives, and widows. These themes are not reflected merely in the laws of ancient Sanskrit texts; they continually reappear in latter writings and classics. Sita is considered the epitome of the proper wife. Thus the society, the religious authorities, her parents and in-laws – everyone expects her to become her husband's shadow. Even those who claim to be progressive do not flinch when women are portrayed as a merely enjoyable object for her husband.

According to Pagelow (1981) and Dobash (1979), patriarchy legitimises intra-family violence and gives men right to hit and assault their wives. Therefore, women are counselled to be submissive and docile. The women who seek shelter in care homes are advised to live according to the whims and fancies of their husbands. They are taught to obey what their husbands say. They are also given training on how to avoid getting beaten up. The women are counselled as to how to please their husbands and make them happy. They are in fact motivated to go back to their husbands and lead submissive and docile lives. On the whole, the homes only endorse the patriarchal ideology that is prevalent in the society and hinders the women's growth as independent members of the society. The only aim of the homes is to provide temporary shelter to distressed women until they can either be reconciled with the family or married off. This is the only message they give and their training only facilitates this process. Overall, the homes have not provided a viable alternative to deal with the problems of violence against women.

Counselling and support centres

Hardly any place existed where a woman with marriage problems could go till the 1980s. But women's movement of the late 1970s tried to focus specifically on the problem of women within homes. The Government of India appointed a national committee on the status of women in 1947. The committee pointed out that the processes of social change had affected different sections of women in different ways (ICSSR, 1976). The report also revealed that large masses of women in this country remained unaffected by the rights guaranteed to them by the Constitution and the laws enacted since Independence. Thus, for the first time, the patriarchal social structure and subordination of women therein were questioned. Support and help to women was viewed not merely as rescue and social work but more as a political question of power balance between the sexes within home and in society. Providing support and help to individual women was just one aspect of the struggle against patriarchy.

Several support centres were started by various groups to fight against the ruthless customs of patriarchy. The groups mainly resorted to agitation and dealt with the questions of rape, wife murders, dowry deaths, and exploitation of women. When individual women began

approaching these groups for advice and help, many groups were forced to start counselling centres. At this point, every political party started taking up these issues through their affiliated women's groups. The problem of women within marriage received wide media publicity. Today there exist around six counselling groups or party-affiliated women's groups in Kerala. *Anweshi* in Kozhikode, *Sahaja* in Thrissur, *Thanal* in Kottayam, and *Abhaya* in Thiruvananthapuram are some of them. The groups offer services such as counselling, legal aid, and referral services. Their main contribution has been, however, to help women understand their problem in a broad perspective and gain confidence. In some cases, they have also evolved strategies to help women retrieve their personal belongings from their husband's homes. These groups also help in reconciliation but only when the woman herself wishes for it. Reconciliation is not the aim and is done only when it is possible on the woman's terms.

The major limitation of these centres is that none of them has a shelter home. So they have to either send women to existing rescue homes and women's hostels or provide temporary shelter to them in their own homes. Over the years, this arrangement has turned problematic since older rescue homes are rigid in their rules and have a different approach for helping women. The society and the media and more specifically the individual women who go to them for help are increasingly pushing these homes into viewing themselves as 'rescuers'. Socialised into a dependent mould, women who seek help view these centres as alternative families that would take care of their problems. Since women approach them with high expectations and there is no easy way out of their problems, the efforts often result in frustration both to the women and to the activists concerned. Also the groups have dealt mainly with individual women who approach the groups for help and support but are not in a position to deal with the attitude of the community from where they come. The grassrootslevel organisations that work within the community have not taken up this issue at the local level. Their main role is to act as a liaison between the individual woman and the counselling centre. Hardly any pressure is built up against men who commit violence against women; as a result no real change takes place in the attitude towards women in the community.

These organisations have not taken any serious efforts to change the attitude of men towards women or to build up a social force against violent men in the society. The agitational groups have taken up marches in cases of dowry death and bigamous husbands. But these have mainly been one-time actions with very little follow-up at the local level. So while agitations help to publicise the issue both within the community and the media, absence of systematic follow-up within the community has remained as their main drawback. Unlike the older institutions that own large buildings and infrastructure, the new groups have to grapple with the problems of inadequate resources and infrastructure and lack of full-time activists. These groups have only limited membership. While the newer groups have helped in questioning the ideology at the individual level, they have not really been effective in changing the power structure within homes and at the community level.

Present system of care for destitute women

At present there are a large number of after-care homes and institutions in India for the care and protection of destitute women. The social welfare department of all the States of the country as well as the Central Social Welfare Board run *Mahila Mandirs* under the

government's direct control. In addition to the institutions run by the governmental agencies, there exist several other homes run by non-governmental agencies for the care of destitute women and orphan girls.

The Central Social Welfare Department was created in August 1953 by the Government of India for administering programmes of grant-in-aid to voluntary welfare organisations and sponsoring and assisting the development of new welfare services through non-official organisations.

State welfare agencies have been created for rendering financial assistance to social welfare agencies and starting new agencies in the State. The State Social Welfare Department of Kerala started several after-care homes throughout the State to render services to women who come from correctional and non-correctional institutions. Homes were also set up to provide temporary shelter, organise production units, and give guidance and help to women who come out of such institutions.

A scheme for setting up centres with the objective of training destitute women between the ages of 18 and 50 years in marketable skills was started by the Government of India in 1977. During the period of training, the women and their dependent children are provided residential facilities and care. The scheme was implemented through voluntary organisations by giving them financial assistance. *Mahila Mandals* were started by the Government of India with the aim of taking up socio-economic programmes for providing wage employment opportunities for rural women (IV-Five Year Plan, 1969).

Now, Kerala has after-care homes and *Mahila Mandirs* run by the Social Welfare Department in all the districts. There are also shelter homes and several other similar institutions run by voluntary organisations across the State.

3. Mahila Mandirs and their Inmates in Kerala

The present study covers eleven of the 14 *Mahila Mandirs* and their inmates. Information could not be collected from the *Mahila Mandirs* in Idukki and Wayanad districts due to non-response to the communications about the importance of the study and the dates of visit of the investigator sent officially from the Offices of the Director of Social Welfare. In Pathanamthitta, the investigator was unsuccessful in her attempts to locate the *Mahila Mandal* supposed to be functioning in that district.

Information about the number of inmates is furnished in Table 3.1. The ages of the inmates ranged from 6 to 56 years. Of the 13 mental patients identified (one epileptic, one mentally retarded, and the others psychiatric), two were from Kozhikode, two from Malappuram, one from Thrissur, and one from Thiruvananthapuram. A large number of the inmates suffered from various psycho-somatic illnesses.

Table 1.1 Number of Inmates in the Mahila Mandirs

Districts	Adults	Children	Total
Thiruvananthapuram	20	5	25
Kollam	14	2	16
Alappuzha	10	-	10
Kottayam	8	-	8
Ernakulam	4	-	4
Thrissur	14	3	17
Palakkad	10	2	12
Malappuram	7	1	8
Kozhikode	29	-	29
Kannur	20	3	23
Kasargod	5	4	9
Total	141	20	161

A total of 161 destitute inmates were staying in the 11 *Mahila Mandirs* of the State. Of them, 141 were adults and 20 children below the age of 12 years.

Details on the religious, educational, and socio-economic status of the inmates could be collected only from 121 inmates. Psychiatric patients, persons who could not recollect the details, and children were excluded. The religious composition of the inmates is given in Table 3.2.

It was seen that the inmates belonged to the three major religious groups, more or less in proportion to their proportions in the total population.

Table 3.2 Religious Composition of Inmates in Mahila Mandirs

Sl. No.	Religion	Number (percent)
1	Hindu	75 (62.5)
2	Christian	28 (23.3)
3	Muslim	17 (14.2)
	Total	120 (100.0)

It was found that a large number of inmates had educational qualification of less than SSLC (Table 3.3). Surprisingly, nearly three percent of them had educational qualification of graduation or above.

Table 3.3 Distribution of Destitute Inmates Based on Educational Level

Sl. No.	Educational Level	Number (percent)
1	Below SSLC (including illiterates)	85 (72.5)
2	Above SSLC and below Degree	30 (25.0)
3	Degree or above	3 (2.5)
	Total	120 (100.0)

Table 3.4 shows that more than 90 percent of the inmates came from homes of low socio-economic status and that none had a background that could be considered high.

Table 3.4 Distribution of Destitute Inmates Based on their Socio-economic Status

Sl. No.	S.E.S	Number (percent)
1	Low	111 (92.5)
2	Average	9 (7.5)
3	High	0
	Total	120 (100.0)

In order to probe the personality variables, emotional maturity, and adjustment ability of the inmates, we conducted the following psychological tests: (1) personality inventory, (2) adjustment inventory, and (3) emotional maturity scale.

The psychological tests were administered to each of the inmates individually. As many of the inmates were not able to read or write, the instructions given in the tests were read out to each separately. Instructions were explained and doubts cleared. Each statement included in the psychological test was read out to them and the investigator marked the response to each of the items. It took about three hours on the average to get the psychological tests completed for each individual.

Although an attempt was made to collect data from as many inmates as possible, the investigator could collect data only from 56 inmates. Very old women, children, mentally retarded individuals, epileptic patients, and mentally ill patients were excluded from the study.

The psychological tests were also administered to a control group, which consisted of slum-dwelling women. The samples for the control group were selected from the 11 districts where the *Mahila Mandirs* were situated. They were women who lived in slums or slum-like conditions. It was observed that most of these women had some means of earning on their own. A good number of them, after several unsuccessful attempts to find employment in the vicinity of their dwellings, had opted for some kind of self-employment in areas near the cities. It was indeed difficult to obtain slum-dwelling women who were in socio-economic conditions similar to those of the inmates of *Mahila Mandirs*. It should be noted here that the average allowance for an inmate of a *Mahila Mandir* is only Rs 300 per month.

However, the investigator was able to identify 50 family women who belonged to comparable socio-economic conditions as those of the inmates. Data from the slum dwelling women were also collected in the same manner in which they were collected from the inmates. The personality data collected from the inmates and the slum-dwelling family women were scored and entered in coding sheets. The coded data were analysed using the 't' test.

Test of significant difference (t-test) was done to find out whether the destitute women and the slum-dwelling women differed in their personality variables, emotional maturity, and adjustment ability; family adjustment, health adjustment, social adjustment, emotional adjustment, and occupational adjustment. The results obtained are presented in Table 3.5.

Table 3.5 Mean SDs and 't' values of Personality Variables, Emotional Maturity, and Adjustment Ability of Inmates of *Mahila Mandirs* and Slum-dwelling Women

Sl	Variables	Mean of Scores				
No.		Destit- ute N-56	Slum- N-50	Desti- tute	Slum	't' val- ues
1	Extroversion	10.93	12.78	3.06	3.27	3.00**
2	Neuroticism	16.20	16.08	3.33	4.48	0.1527
3	Psychoticism	5.43	4.80	2.81	2.51	1.21
4	Family Adjustment	28.2	31.06	5.46	5.569	2.67**
5	Health Adjustment	31.52	32.16	5.37	5.18	0.623
6	Social Adjustment	25.78	29.88	4.42	5.599	4.20**
7	Emotional Adjustment	26.6	26.56	5.85	6.61	0.041
8	Occupational Adjustment	32.29	32.76	3.82	7.86	0.398
9	Emotional Maturity	11.7	52.14	33.77	25.48	11,055**

^{**} P<0.01

The 't' values show that destitute women and slum-dwelling family women differ significantly in respect of extroversion. The family women score higher in extroversion than the destitute inmates. Significant differences were observed between the two groups also in family adjustment and social adjustment. Family women scored significantly higher than destitute in both.

The 't' value for emotional maturity also showed significant difference between the two groups. As a lesser score in emotional maturity scale indicates a higher level of maturity, destitute women are found to be emotionally more mature than slum dwelling family women.

The values, however, showed that destitute women and family women do not differ significantly in Neuroticism, Health Adjustment, Emotional Adjustment, and Occupational Adjustment.

The authorities of after-care homes and institutions who were consulted had, in general, a contemptible picture of the destitute inmates. They were of the opinion that a majority of the destitute women were highly extroverted, easily suggestible, irresponsible, unskilled, disobedient, and highly emotional. According to them, they were maladjusted in nature and their coping skills were extremely poor. The home authorities explained that these women had histories that prove that they had failed in making proper adjustments in their own homes and at other places. They were persons who failed to conform to the traditional attitudes of accepting roles in accordance with the conventional values of the community.

On the other hand, the inmates could not find happiness in submerging their identity by adopting the feminine roles ascribed to them by the society. Lack of social skills, competencies, and other required potentials made these women maladjusted and paranoid. Statistical data also show that a good number of women destitutes who were rehabilitated in the form of marriage, job placement, etc., have found their way back to institutions or streets again.

It is a common notion that the destitute women have major deep-rooted personality disorders and psychological difficulties. Having had to lead the lives of destitutes, they frequently have a sense of futility, expectations of failure, and general depression. They become easily frustrated and anxious and find frustration and anxiety unbearable. It is usually observed that when these destitute women happen to end up in care homes (*Mahila Mandirs*), the authorities tend to keep frequent, although unnoticed, control over them. This leads to their punitive attitudes and behaviour, which in turn accelerate the vicious cycle of mutual antagonism, distress, and anxiety. The consequence is a failure in the effective implementation of the various rehabilitation programmes of the Social Welfare Department. Thus, it has to be understood that there is an increasing uncertainty about the purpose and the meaning of their existence together with feelings of insecurity, frustration, and helplessness among the destitute women inmates of the care homes.

The conditions of after-care homes make these women feel miserable. The institutions and the care homes have not given any importance to rehabilitation of these women in the areas of health, education, and self-employment that would make them self-dependent. The institutions hardly make attempts in the area of distress management and legal aid for the abandoned and deserted women. Moreover, the inmates have frequent complaints about the manner in which they are treated in sheltered homes. They feel that the home authorities always exploit their pervasive sense of powerlessness and helplessness. The inmates are often made to feel de-personalised and sub-standard. The home authorities are said to behave in ways so authoritative and inhuman that the destitute inmates are forced to feel more and more destitute and depressed.

For finding out the socio-economic problems of the destitute women as perceived by them and as perceived by the officials, separate Need Evaluation Checklists were used. Brainstorming sessions were also held for both the groups to probe into the implementation of welfare programmes. The checklists were prepared by the investigator.

Brainstorming sessions were organised in every *Mahila Mandir* separately for the inmates as well as the authorities. In the brainstorming session, the inmates and the authorities were introduced to the various welfare programmes of the Social Welfare Department and were asked to comment on them and give their opinions regarding the problems faced by them during the implementation of the programme. As many as 14 authorities and 56 inmates took part in the brainstorming sessions.

The views of the officials obtained from the checklist and the brainstorming sessions are the following:

- (i) Insufficient funding from the Social Welfare Department. (Maintenance grant is only Rs 300 / month / head) Authorities of all homes were of the opinion that if it were for non-governmental organisations the inmates would have starved.
- (ii) Rehabilitation is not being done at all.
- (iii) Inadequate staff.
- (iv) Poor living conditions old buildings not maintained properly for years, lack of facilities and lack of provision of water in some of the *Mahila Mandirs* (Palakkad). Lack of security (e.g., Kasargod and Kannur).
- (v) Mentally ill patients, epileptic patients, and mentally retarded patients, are also admitted as inmates but no provision for medical care is provided by the government.
- (vi) No counselling service is made available for the inmates who have been sent from police stations and those with criminal tendencies.
- (vii) No professional help to deal with various problems like homosexuality, kleptomania, and emotional, behavioural, and psychosomatic problems found among the inmates.

The problems as perceived by the inmates are the following: (i) insufficient food; (ii) insecure living conditions; (iii) lack of vocational rehabilitation; (iv) inadequate staff; (v) quarrels and teasing among inmates, and (vi) poor opinion from the public.

The authorities as well as the inmates presented similar problems. All the officials were unanimous in their opinion that the funds allotted for the institutions were grossly inadequate and that the inmates were saved from starving only because other non-governmental institutions helped these institutions with food and clothing. The inmates invariably complained about insufficient food.

According to the officials and the inmates, living conditions were extremely poor. Most of the homes are housed in dilapidated buildings, which are unsafe for living.

Both the groups were of the view that no steps were being taken to rehabilitate the inmates. Even in homes in which teachers for vocational training are posted, no vocational training does take place.

Complaints were raised by both the officials and the inmates about inadequacy of supervisory personnel and professionals to deal with the medical and psychological problems of the inmates.

The need checklist administered to the inmates and the officials of the *Mahila Mandirs* had items on physiological, psychological, and social needs of the inmates. As many as 57 inmates and nine officials filled up these checklists. Their responses are furnished in Table 3.6.

Table 3.6 Responses of 57 Inmates and 9 Officials to Need Evaluation Check-list

1 Food 5 4 45 12 2 Water 6 3 46 11 3 Bed 6 3 41 16 4 Safe Building 6 3 46 11 5 Time for rest 9 0 51 6 6 Love from Authority 9 0 51 6 7 Consideration 9 0 45 12 8 Personal Security 9 0 44 13 9 Freedom of Expression 9 0 41 16 10 Dignity 9 0 43 14 11 Communication 9 0 46 11 12 Recreation 6 3 44 13 14 Acceptance 6 3 34 24 15 Status 7 2 37 20	PSYCHOLOGICAL PHYSIOLOGICAL NEEDS
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1/	
10 Work Outside 6 3 31 26	
19 Artistic Expression 5 4 30 27	
20 Job Opportunities 3 6 32 25	
21 Freedom to Use Income 9 0 35 22	
22 Freedom in Running Institute 8 1 42 15	SOCIAL NEEDS
23 Job Training 5 4 31 26	E
24 Recreation Facilities 5 4 30 27	z
25 Religious Freedom 9 0 47 10	
26 Religious Facilities 8 1 45 15	717
27 Visit to Religious Places 7 2 30 27	
28 Security 7 2 45 15	N N
29 Security Outside 7 2 47 10	
30 Freedom to Express Needs 9 0 41 16	
31 Opportunity to Discuss Problems 9 0 40 17	
32 To see Visitors 8 1 46 11	
33 Send & Receive Letters 7 2 46 11	
34 Maintain Inter-Personal	
Relationship 7 2 45 12	
35 Meet Higher Officials 9 0 36 21	

All the officials who responded were satisfied with the duration of time for rest given to the inmates. Most of the inmates (51 out of 57) also expressed satisfaction with the duration of time they received for taking rest.

Five out of the nine officials who responded expressed dissatisfaction regarding the quality of food provided for the inmates. Surprisingly, the majority of the inmates who gave their opinions (45 out of 57) were satisfied with the food they were given in the *Mandirs*. In the case of the other physical facilities also (safety of the building, drinking water, bed for sleeping), nearly three-fourths of them were satisfied.

While all the officials expressed satisfaction about the way they catered to the psychological needs (love, consideration, personal security, freedom of expression, dignity and communication) of the inmates, more than 70 percent of the inmates reported satisfaction with the treatment meted out to them by the officials.

The officials were of the unanimous view that adequate freedom was being given to the inmates for using their income, pursuing their religious practices, discussing their needs, and for meeting and presenting their grievances to higher officials. Not all inmates did, however, concur with this view. There were a sizeable number of them, ranging from 18 to 28 percent, who were dissatisfied with the freedom they were allowed in these respects by the officials in charge of the *Mandirs*.

However, in the case of all the items under social needs (items 13 to 35), the majority of the inmates expressed satisfaction.

Though some of the officials and the inmates expressed dissatisfaction with the provisions in the *Mandirs* for satisfying the physical and psycho-social needs of the inmates, the majority in both the groups reported satisfaction. These findings were found to be contradictory to the statements and opinions given by the higher authorities of the Social Welfare Department. It is hoped that the results of the present study would be of help to bring changes in the prejudice of scholars, the higher echelons of the officialdom and the general public against inmates of the *Mahila Mandirs*.

The study attempted to find out the reasons why the inmates ended up in the *Mahila Mandirs*. The reasons reported by the inmates are given in Table 3.7 in the order of importance.

Table 3.7 Reasons reported for seeking shelter in Mahila Mandirs

Sl. No.	Reasons
1	Financial reasons
2	Family problems
3	Love failure / victims of deceit
4	Problems with husband
5	Sexual abuse
6	Discarded due to illness
7	Own decision to leave home

Most of the inmates hung their heads in shame and hesitated to talk. In general, they seemed lost in their own private worlds of dread and despair with little hope for the future. "I have lost faith in God," said a middle-aged woman in disgust. "This institution is my home," said another girl of 20 years. However, most of the women appeared to be satisfied in the sheltered environment of the *Mahila Mandir* as they had come to these institutions due to serious problems for which there were no solutions.

Destitution of women was found to be due to several social disadvantages that either reflect pre-existing ones or are the consequence of serious problems with cognition, affect, and behaviour in our society. Pre-existing disadvantages include poor education, living conditions and family relationships, specifically oppression, violence, sexual abuse, subordination and devaluation inherent in patriarchal oppression. As Bachrach (1988) stresses, women typically experience a variety of social disadvantages as a consequence of social oppression that contributes to their social disablement. Other social disadvantages may be seen as a consequence of the problems themselves: poverty, homelessness, stigmatisation, exclusion from many aspects of 'normal life' and disrupted family and social networks all of which make destitute women marginalised and render them powerless. Personality disorders, sexual dysfunctions, and other types of maladjustment were also seen to be reasons for destitution. Such psychological problems have been viewed as a product of oppression. The stress imposed by oppression can, and undoubtedly does, precipitate socially disabling disorders of cognition, affect, and behaviour. Much of what has been labelled as depression, anxiety-based disorders, eating disorders, and alcoholism might be understood in these terms.

The present study shows that among the innumerable reasons cited for destitution, financial problems at home are found to be the major one followed by disrupted family relationships.

4. Causes for Destitution: Case studies

Unemployment, alcoholism, irresponsible behaviour, and related vices keep the lower classes in the society in abject poverty. As a result, the youngsters among them, including women, have to fend for themselves. In most of the cases they would be unsure even of their next meal. This state of insecurity leads them to take risks and deviant ways of life, as a result of which they land themselves in the world of crime or corruption. A girl child growing in such a social milieu would fall victim to allurements and seduction for sex abuse and finally finds herself in police custody and rescue homes. There are also instances in which the parents in abject poverty and penury themselves leaving their children in *Mahila Mandirs* in order to ensure them two meals a day. Another reason for keeping the girl child in care homes by the mother and close relatives is to save them from the atrocities of drunken fathers, brothers or brothers-in-law.

In the following sections, we give a few cases of inmates, classified according to the major cause for destitution. The classification is not watertight, as in the majority of cases destitution is the result of a complex of causes.

Poverty and insecurity

Nirmala, a 28-year-old woman, was left at the *Mahila Mandir* by her poverty-stricken mother and elder sister. "I am not at all angry with my mother for leaving me here. This is the only way my mother could have saved me from my alcoholic brother. Even my sister's husband was not good to me. Now, I am safe here and glad that I need not depend on any of them for food and clothing". Though she expressed happiness over being at home, she was found sobbing at the end of the narration.

Renjini (19 years) had spent her entire childhood in a convent ignorant of her home or parents. Renjini said: "I was living in a convent as a maidservant when a lady came to the convent and introduced as my mother. She then forcefully took me to the After-Care home and from there I was later sent to this *Mahila Mandir*". Even now, Renjini does not believe that the lady was her mother and is at loss to explain why the lady did so.

Jameela (20 years) said that she wanted to live with her parents. But they were starving for most of the days. Her father was ill and her mother used to work as a maidservant in a private home. A family of five had to survive on her meagre income. Jameela tearfully told the story. "My parents left me at a Muslim orphanage so that I would not starve at home. One day they came to see me and I begged them to take me home with them where I would gladly starve together with them. But they did not listen to me. After my parents' departure, I made my way to the bus stand in search of them. I could not find them; I did not know the way to my house. Later, I went to the railway station. I could not find them there either. It was late at night. I did not know the way to the orphanage. I sat on the roadside crying when the police caught me. They kept me in the station for a day and then sent me to the *Mahila Mandir*", Jameela was only 11 years old when she had to undergo this ordeal. Now she considers *Mahila Mandir* her own home.

Suvarnini (28 years) and **Ajitha** (26 years) had come to the *Mahila Mandir* quite early in their childhood. They grew up there and were good in studies. Both passed the SSLC examination and are currently employed in private firms. "I am happy that I have a job. I tell other inmates to study well and get some jobs," Suvarnini said. She has an elder sister who is physically handicapped. She also stays at the same institution. Suvarnini's younger sister, who was at the *Mahila Mandir* for 14 years, had the rare privilege of getting married. She is living happily with her husband now. "At least one of us could find a life," said Suvarnini smiling.

Ajita and her mother had been living in the *Mahila Mandir* after the death of Ajitha's father. "My mother and I were thrown out to the street by our relatives after my father's death. It was this *Mahila Mandir*, which gave us shelter. The authorities of the *Mandir* sent me to school and I passed SSLC. One of the well-wishers of this institution, a businessman of Kozhikode, was kind enough to give me a job placement". Ajitha spends her salary to buy medicines for her mother who is ill. She gives a portion of her salary to the *Mandir* for its activities besides depositing a small amount in her Post Office Savings Account.

There were several cases of more than one member of the same family staying at the *Mahila Mandirs*. **Mini** and her mother, **Fabiola** and her two sisters, **Glady** and her young sister are a few among such cases. They had taken shelter in the *Mahila Mandir* owing to financial problems. In all such cases, the man of the house or the father was either bedridden or had passed away. In some cases, an alcoholic or anti-social brother or brother-in-law was the cause of the family's taking shelter at the *Mandir*. One of the inmates, a girl of 18 years, who did not want to reveal her name, said that she and her sisters had to leave home because they were afraid that their own brother would abuse them sexually. "He would have even sold us for money. Now we are safe here, but our bedridden father is all alone suffering at home," she said with tears rolling down her cheeks.

Together with the problem of penury and insecurity, there are problems of space and privacy in many of the households that compel people to send their daughters to the *Mahila Mandirs*. Most of the families from which the inmates had come had only a single room other than the kitchen. Father, mother, grand parents, and children shared the room. Even married couple shared a room with other members of the family, including their unmarried sisters and brothers. Sometimes relatives and friends and other people also shared the room. Such situations created anxiety on the part of parents regarding the safety and security of the girls and other womenfolk in the family.

The case of **Jaliat** is one of the many cases of women who have become victims of space constraints. Both the father and mother of Jaliat are alive and she claims that her parents are fond of her. The parents are working as servants in two different houses. They stayed in the houses in which they were working and the small child, Jaliat, became a problem for them. They did not have either a land or even a hut to live. So they sent Jaliat, though unwillingly, to the *Mahila Mandir*. Jaliat says: "My parents are working hard so that we will be able to buy some land and build a house some time. Then only can all of us live together".

Jayakumari is another inmate of the Palakkad *Mahila Mandir* who was put into the institution

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by her parents as they did not have a home of their own. They thought that Jayakumari would be safer at the *Mahila Mandir* than in any other place, of relatives or friends.

Khadeeja (23 years) and Radhika (17 years) are girls who had been in the *BalaMandirs* (care home for children) and convents ever since they were small children. They could not recollect anything about their families or parents. They spent their childhood in the company of other orphans at the *BalaMandir*. It was from the *BalaMandir* that they were brought to the *Mahila Mandir*. Radhika had stayed in a convent and it was the sisters of the Convent who brought her to the *Mahila Mandir* and left her there "for a short time". Now she has got some training in handicrafts. "I wish the Convent sisters come and rescue me from here. I wish to get a job outside the institution", says Radhika. Khadeeja also mourns over not getting a job. "I am thankful to the authorities as well as the government for providing me all the essentials. In spite of all these, I feel unhappy and frustrated because I do not have a job here. I sit idle all the time." Khadeeja had seen her mother once in her lifetime. She says that no one has ever come to visit her. She thinks that she does not have anybody in the world to call her own, "*Mahila Mandir* is my home. I lived here, I am living here, and I will die here," Khadeeja says mournfully.

Elsamma is also of the same opinion. Both her mother and father are alive. "My father is a drunkard. He drinks everyday with the money he earns. He comes home late and tortures my mother. My mother, in turn, tortures me".

Jyothi (26) does not remember anything about her family. She has only the memories of the *Bala Mandir* where she grew up as a child. When she was 15 years old, she was sent to the *Mahila Mandir* "I do not like to be treated as an orphan. So I go to all the homes in the neighbourhood. I have many friends and I go to their homes also. These are against the rules and regulations of the *Mahila Mandir*. But, I continue doing such things. I do not know why." When asked whether she was not afraid of punishment, she replied that she was ready to take any punishment. She was sure, however, that she would not be sent out of the place because she had no other place to go. The words of Jyothi were the external manifestation of her internal emotional state. Her words were filled with hatred and vengeance to those who made her destitute as well as to the persons in authority of the *Mahila Mandir*. It seemed that she enjoyed herself by creating problems for others.

Mariamma, a girl of 14, looked small for her age and is pale and thin. "My mother was an inmate of the *Mahila Mandir*. She was married off from the *Mahila Mandir* itself. When she became pregnant, she was sent back to the *Mahila Mandir* where she gave birth to me," said Mariamma. Born and brought up at the *Mahila Mandir* itself, she has not seen the world outside. Mariamma says: "My father is in Tamil Nadu and my mother is a maidservant. One day we will have a house and we will live together". The 14-year-old girl spends her days with this hope.

Indira, a girl who is just 18 years old, lives in the *Mahila Mandir* because she does not have a house. She has a mother who works as a housemaid. "She comes to see me often. The *Mahila Mandir* authorities are sending me to school. Along with my studies, I work in a private firm. I give my salary to my mother. I will live with my mother when we will have a

hut of our own. But, I wonder whether we can ever dream of building a hut of our own," she said.

The inmates about whom we have been discussing are women who found shelter in the *Mahila Mandirs* owing to severe financial problems, poverty, unemployment, and insecurity.

Alcoholism and torture

Several inmates had ended up in the *Mahila Mandirs* due to unbearable mental agony, arising from family conflicts and disorganised family relationships, dowry problems, and divorce. Right from the moment of their stepping into their husband's homes, wives try to forget their own identity and adjust to the needs of the new place and the people living in them. The wives are kept under the constant watch of husbands and relatives. They are often criticised for not bringing money by way of dowry from their parents or for not having been trained properly for housekeeping. The society, the religion, the parents, the in-laws, and everyone else expect them to become their husbands' shadows. Unfortunately, all these come as a rude shock to the girls the moment they get married – the institution so highly glamourised in our society.

The amount of time, the energy, and the labour spent by women in performing their duties go unnoticed. The mental violence, the agony of suffering, and the lack of opportunities for married women have all become part of our societal structure. Such violence leaves no visible body marks. Nonetheless the wounds it inflicts on the mind are difficult to bear. However, the mental violence may be committed in such a subtle manner that others seldom come to know of it.

Violence

Elsamma (32 years) appeared to be a very bold woman. She said, "I could not adjust with my husband. He used to beat me almost everyday and abuse me both physically and mentally. I suffered a lot. Then I took a decision to suffer no more, I got a divorce and left him." Elsamma who got a divorce from her sufferings was not welcomed back to her parents' house. It was with the help of some other women that she could get shelter in the *Mahila Mandir*.

Ambika's (24) husband was an alcoholic who beat her every night. Finally, she got a divorce from her husband. Thereafter she stayed for three years with her parents and other members of her family. Ambika's mother and sister treated her badly and went to the extent of asking her to leave the house. "One day I left my house with my small child of three years. I wandered in the street and with the help of a lady who met me there I came to this place. Now I live just for the sake of my child. I will end my life when I feel that my child can stand on her feet," Ambika said in a determined voice.

Radhamani (26 years) is another victim of the cruelties of an alcoholic husband. Radhamani, abandoned by both her husband and the members of her own family, admits that her present condition is God's punishment. "I fell in love with a man when I was a student. One day I

ran away with him. We had a registered marriage. From the day of our marriage he started hurting me both physically and mentally. All the members of his family used to abuse me verbally and my mother-in-law used to beat me too. At night my husband used to come drunk and beat me. All the members of the family joined him in the torture. They laughed loudly and made fun of me whenever I cried or fell down. They asked me to leave the house and go anywhere else. As I had run away from my parents I did not have the courage to go back to them. But when my husband knew that I was pregnant, he took me to my parents' house and left me there. Even after I gave birth to a child, he did not come. My mother and brothers, though not willingly, took care of my child and me. One day when my husband came to see me my brother had a big fight with him and asked him not to step into our house. My husband said he was sorry for everything and wanted to see the child. I had pity for him and pleaded to my brother to allow him to see the child. From that day onwards he used to come to see us regularly. I became pregnant again. Then he said that it was his vengeance and he left me forever. When my brother knew what had happened, he dragged me outside the house, beat and kicked me and finally stabbed me. I was hospitalised and the police registered a case in the family court. It was the family court, which sent me to the Mahila Mandir. All this happened because I did not live according to the dictates of my parents. I wish my fate should never happen to any other girl."

Padmajam was only 20 years old when the person whom she loved and married threw her out into the street. Padmajam had neither parents nor relatives. Her husband and in-laws used to demand dowry and beat her. As she did not have any place to go she suffered all the tortures till the time she gave birth to a child. The day she was discharged from the hospital, she was asked not to enter the house. "It was with the help of the *Mahila Samajam* that I could come to this place", she said.

Alcoholism of husbands and the demand for dowry by them as well as their in-laws were the major causes for abandonment of wives. In the cases of Ambika, Radhamani, and Padmajam, they had brought no dowry as theirs had been love marriages. After the initial period of infatuation, the alcoholic husbands together with their family members started demanding money. As they found that their wives were unable to fetch them any dowry, they threw their wives out into the streets. Alcoholism and wife-battering co-exist in most of the cases.

The hazards of alcoholism are not confined to battering and mental torture of wives. Many of the alcoholic husbands are paranoid too. They develop suspicion about their wives' character. This happens especially when they have had registered marriage or had ran-away incidents.

Susheela, who got married at the age of 21, has gone through terrible experiences in her life. Susheela had no parents and she had a love marriage. The man was not only alcoholic and paranoid but was sadistic as well. He began suspecting her and accused her of having sexual relationship with other men. He did not limit his cruelties to beating and kicking her but went on physically torturing her in the most inhuman ways. The poor girl was tied to the bed and wounds and cuts were made throughout her body using knife and scissors. Neighbours had on several occasions hospitalised Susheela. It was the hospital authorities who put her at

the *Mahila Mandir*. "Everyday I cry thinking about my three children who are at home. I would better die for them than live like this. I am worried about them and I feel extremely sad."

Elikkutty (32 years) had an entirely different life story to narrate. Elikkutty was living happily with her husband when police arrested her husband for cultivating and selling marijuana (*Ganja*). He was imprisoned. During this period, one of the husband's friends raped Elikkutty who was living alone. "I was totally helpless. My mother had died and I was staying alone. The man who raped me blackmailed me saying that he would make the incident public. I did not know how to escape. I became pregnant and gave birth to a child. By this time, my husband came out of the jail but did not come to see me. I could not face him either. Then I decided to leave the place and seek shelter at the *Mahila Mandir*". Elikkutty has no hopes for the future. She said that she still loved her husband and felt guilty though she was not at fault for what had happened in her life.

The life of **Anitha** (37) reveals the true nature of the system of marriage and family in our society. Like in any other family, in Anitha's house also the stereotyped roles of men and women were rigidly defined. The work of the husband is always noticed unike the work of the wife. Anitha was leading the life of a typical submissive housewife and had two children. In spite of all her sacrifices, her mother-in-law was not satisfied. She used to find fault with everything Anitha did and Anitha's husband joined his mother in brutally punishing her. This type of treatment continued for years till Anitha's mother came to her rescue. It was with her mother's help that Anitha reached the *Mahila Mandir*. Anitha has been here for the past five years.

Now after five years, with Anitha's mother-in-law having died, her husband came to take Anitha back home. Even her daughter begs her to go back. But Anitha is in a dilemma. In Anitha's words: "For all these years, I had been dreaming about living with my husband and children. It was with this hope that I was living. But now I am not able to take a decision because I am emotionally tied up to a small child here. All these five years, I had been bringing up this child ever since she was born. I got her as an infant. She calls me mother and I feel that she is my daughter. If I leave her, she will become an orphan, which I do not want to happen. So I am not willing to go back to my house without this child."

Cruelty and betraval

Destitution has become a serious offshoot of family problems in India. Women seem to be always at the receiving end of broken families. This phenomenon shows up not only in the economically backward families but in the well-off ones as well. This study indicates that it was mostly against their will that women are resorting to the extreme step of taking shelter in some destitute home or other for succour and shelter. Case studies of a few more inmates would help better understand the actual problems taking place in families.

K. A. Indirabhai (27) was only three years old when she lost her mother; consequently, her father remarried. The little girl was harassed by her stepmother. Life with the new incumbent and relatives became more and more painful with people turning indifferent to her. The

timely intervention of one of her teachers at her school saw Indirabhai ending up in a destitute home.

Ahyamala (33) is an orphan with impaired hearing and totally dumb. Ahyamala had two brothers and two sisters as kith and kin. Her sisters who were older than her continued to look for a suitable person to give her in marriage. Her brothers were government employees but so money-minded that they disposed off Ahyamala's share of property and deposited the sale proceeds in a bank. She became an easy pawn in the hands of her greedy brothers who started exploiting her assets and even maltreating her. Things came to a head when her plight caught the public eye that brought her to the destitute home through the intervention of the State Women's Commission.

Subha (25) seemed to have been better-placed economically than the earlier-mentioned cases. She has two cents of landed property in Kannur. But she has lost her parents and did not even know the whereabouts of her only sister who was younger than her. She was with her uncle up to the age of 13. At the crossroad of adolescence and puberty, her uncle who is employed in Kakkanad Spinning mill conveniently dumped her in a destitute home. Her relatives turned up at the home not to take up her welfare but to coerce her to sell away her property. She longs for a job that would make her free and independent.

Santha (18): It was a domestic quarrel that landed Santha in the destitute home at the young age of 16. Until then, she had lived with her mother and an elder brother who was employed in the Customs Department at Kozhikode. Little had she known that her quarrel with her mother over an earring would end up this way. On that day of quarrel she left her home in a huff; but on second thoughts and after much wandering when she decided to return home she fell into the hands of the police who brought her to the destitute home. Her mother has been visiting her off and on. She stoically declares that she has no problems at the institution.

K. G. Rani (30) confessed that she suddenly lost the sense of belonging with the death of her mother and her brother. She got no warmth and affection from her father while her sister-in-law ill-treated her. When home and hearth turned cold, Rani with the help of her friend sought shelter in the *Mahila Mandir*.

Sarika Beevi (49): It was love at first sight that forced Sarika, a Hindu by birth, to marry a Muslim. She even changed over to the Muslim faith. They have five children of which four were sons employed as *coolies*. Her husband too was a worker in a restaurant. They owned no property but that was not what ailed Sarika. Family conflicts and lack of peace at home disillusioned her to such an extent that she chose the destitute home.

Nirmala (24) had two children through an inter-caste marriage with her *coolie* husband who got murdered in a squabble over politics. Even after his death, Nirmala continued to live at her husband's place. But when she became pregnant through an illicit relationship with a Muslim, she was thrown out of the house. Her husband's younger brother and a neighbour brought her to the *Mahila Mandir*.

Fausia (22): The plight of Fausia makes one sit up and think. It was not wealth but love that kept the families together. Fausia's family was financially well-off with two of her brothers working in the Gulf countries. But she felt no warmth or security at home. There was no sense of belonging. The feeling that she was a burden weighed her down. Her folks married her off to a mental patient from whom she ran away and sought the warmth of the destitute home. Her parents, sister, and brothers are leading happy lives. She herself would love to settle down in life by remarriage but destiny is yet to carve a slot for her.

Subaida (18): A broken family and unhappy childhood brought Subaida to the Kozhikode *Mahila Mandir*. She lost her mother at the age of four. Her father, who was working in Valanchery (Malappuram), cared little for the family. Only the son continued to stay with the father and pursue his studies. Her two elder sisters remained unmarried and lived with her aunt while Subaida stayed with her uncle. The sisters met her once in a while but when the uncle became intolerant, Subaida was forced to seek shelter in the *Mahila Mandir*. It was Subaida's neighbour who helped her to get shelter in the *Mahila Mandir*.

Thankamani (38) was denied of motherly affection just because she was a female child. Thankamani became part and parcel of the institution at the weaning age of two. One fails to reconcile with the truth that Thankamani, who is now 38 years old, does not know the reason why she was left at the *Mahila Mandir*. She just knows that it was her mother who left her there. Thankamani assumes that it might have been because she was a girl.

Sexual abuse

A number of women become victims of rape at some point of time in their lives, in most cases during their adolescence. Other forms of sexual assault, abuse, coercion, and attempted assaults affect even greater numbers of women. Many of the female college students are subjected to some form of unwanted sexual activity. Published crime statistics do not tell the story because the majority of the sexual assaults are never reported. Women of all ages, races, and socio-economic conditions are vulnerable to rape. There is mounting evidence that early victimisation puts women at risk not only for psychological dysfunction but also for subsequent sexual re-victimisation.

It is a common misconception that most rapes are attacks by strangers. In reality the opposite is true. The present study finds that most rape victims know their attackers. Incidents in which the girls are raped by their fathers are plenty.

The plight of **Sreejini** is a case in point. She was a young girl of 15 years when her own father raped her. Her father who was a *coolie* used to leave for job together with her mother. He used to return to house and rape his daughter repeatedly. "I became pregnant when I was 16 years old. Mother was helpless. It was my mother who took me to the *Mahila Mandir*. I was ashamed to tell my mother about the rape because the person concerned was my father. Moreover, I was frightened because of the after-effects".

There are several other cases where rape victims experience guilt, shame, self-disgust, and

even self-hatred. Restricted lifestyle, emotional numbness, amnesia, intrusive thoughts, and nightmares are common features found among rape victims. The following case is typical.

Jancy was 15 years old when she was living with her father and stepmother. Her mother had left the house a few years ago. One day Jancy's stepmother assaulted her physically and threatened that she would be subjected to severe punishment when her father returned from work. Jancy left home and wandered in the street in search of her mother's house. A few men who followed her took her by force in an autorickshaw and she was gang-raped. The girl was left in a state of shock. Only next morning she became conscious, and was in the hospital with her father beside her. Her father lodged a complaint with the police. The culprits came to the hospital and threatened Jancy and her father. Jancy's father then took her to the *Mahila Mandir*. Jancy has not yet recovered from the brutality of the experience.

Sexual assault by relatives such as uncles, grandfathers, and cousins and brothers are not very rare in our society either. **Sabeena** was sexually abused by her aunt's son whenever he used to visit her house. When the family members came to know that she was pregnant she was sent out of the house. Her aunt's son also left her forever. Sabeena approached her parents for help which they refused. "My parents did not even allow me to enter the house. I had only the *Mahila Mandir* as a last resort. Now, I stay here with my child."

Several rape-like cases take place during love relationships. There are cases of sexual acts taking place with willingness coaxed out from the girl. The lover usually assures the girl that he would marry her. There are even cases in which the man threatened to end his life if the girl did not yield to a sexual relationship. There are also cases where the employer made amorous advances with girls to whom he had given employment, with the promise of marriage.

The case of **Thresiamma** is one such. Thresiamma was in love with her employer. "He was very dignified in his behaviour during the initial period of our love affair. It was only after five long years of love affair, he asked me to have sex with him. He assured me that he would marry me after his sister's marriage. So we lived like husband and wife. I became pregnant. Soon after he asked me to leave the place." Thresiamma could not face her parents. She found shelter in the *Mahila Mandir* where she gave birth to a baby with whom she now lives.

Magi, aged 26, is a native of Bangalore. She had no parents and was living in a convent. She had a love affair. The man used to take her to various places and abuse her sexually until she became pregnant. On knowing of her pregnancy, the man left her forever. Now she lives at the *Mahila Mandir* with her baby.

Some of the marriages in our society are just for convenient sex. **Betsy**, a 46-year-old woman, has been living at the *Mahila Mandir* for the past 14 years. She had eloped with her lover when she was 16 years old. After a few years of marriage with her, the man left her and began to live with his first wife and children.

Agnes Saji is an educated girl who ran away with her lover and entered into registered marriage with him. Although they approached both the families, they were rejected by both.

She says: "We stayed at different places for rent till all our money was spent. By the time, I became pregnant also. He began to torture me both physically and mentally asking me to bring money. Later, he began to develop suspicion about me and began calling me a prostitute. One night, two of his friends came to our house and tried to assault me sexually. I cried for help but instead of protecting me, my husband beat me throughout the night. Next morning, I found that he had left the house. He did not come after that. I went to the priest of the nearby church and told him everything." It was with the help of this priest that she could find a shelter at the *Mahila Mandir*.

Bhagyam (19 years) is another victim of cheating by her brother's friend who was a regular visitor to her house. She was first raped by him when she was just 16 years old. Later on, she had indulged in sex with him willingly. When he knew that she was pregnant he left the place. Then, her family threw her out of the house. "I gave birth to my child on the road. From there I sought shelter in the Malampuzha Providence Convent. Later the sisters of the convent took me to this *Mahila Mandir*, where I stay with my child".

Mini Joseph, who is 25 years old now, had lost her mother when she was eight years old. Since then, she grew up uncared for and unprotected. She had a love affair with a neighbour. He used to call her to his house and abuse her sexually. The man left Mini when he came to know she became pregnant. Her father and brothers drove the pregnant girl, who was then only 16 years old, out of the house. Now, Mini and her child live at the *Mahila Mandir*.

Illness

Rugmini is an arthritic patient. She suffers from asthma also. She had been suffering from these two illnesses since early childhood. Her father and mother died when she was a child. "My brother was very good to me till he got married. My sister-in-law did not like me. Then both of them began to behave as if I was a burden to them. I did not know where to go. They asked me to go to some orphanage. On enquiry, I got the address of this *Mahila Mandir* and came here. The *Mahila Mandir* is my home, the superintendent is my mother and other inmates are my sisters. I love them all and they all love me and look after me when I am ill," she says.

Jeela Rahim, a 24-year-old woman, had to end up in the *Mahila Mandir* together with the child due to the neglect of her family. Her mother had left the house much earlier. "When father was alive, I had no problem. But after my father's death, my brother asked me to leave the house". Jeela has four brothers and two elder sisters. Jeela's husband had died leaving behind a child. She also suffers from several chronic diseases. Even her mother is not ready to look after the invalid daughter and her child. Finally, Jeela found shelter in the *Mahila Mandir*.

Smitha, a girl of 20 years, left her house because of her father's alcoholism. Smitha's parents are separated. But the harassment from the alcoholic father continued. He often came to the place where her mother was living and beat her cruelly. The mother and the daughters did not have anyone for support. Her father continued exploiting their helplessness. "I left my house for fear of death at the hands of my father," Smitha said. She finds no peace

even now. She is worried about her mother and younger sisters who continue to remain prey to the brutality of her drunkard father.

While analysing the reasons for destitution, the investigator found that among the women in the sample selected for case studies, the majority ended up at the *Mahila Mandirs* owing to severe financial problems. Most of them had been sent to the institutions because their parents did not have any other place to keep their daughters in security. There are cases of women who sought shelter in the *Mahila Mandirs* together with their children owing to financial crisis. The financial crisis, according to some of them, was the result of lack of planning, indebtedness, and alcoholism of their husbands.

The study also reveals that a few of the inmates take shelter in the *Mahila Mandirs* due to strained family relationships. They were either thrown out of their houses by their husbands or by their own children or came out on their own owing to cruel physical and mental torture. Wife-battering is reported by several women as reason for leaving home. Obduracy of in-laws, particularly of mother-in-laws, was one of the commonest of complaints of the women inmates. Alcoholism and wife-battering were found to co-exist to a significant extent, though not in a cause-effect relationship. A few inmates had reached the *Mahila Mandirs* consequent on abandonment both by parents as well as by lovers. Most of the women who fell in this category were either pregnant or were victims of rape or deceit or were unwed mothers at the time of admission to the *Mahila Mandirs*. A few others sought shelter in the *Mahila Mandirs* because they had been suffering from chronic illnesses and had no one to look after them at home.

Interviews with women living at the *Mahila Mandirs* have thus revealed that irrespective of the nature of the reasons behind their destitution, most of the women are socially disabled and unskilled. They are unable to negotiate the social world without help, support, and adaptation. Efforts must be taken in the institutional set-up itself to enrich their potentials and to improve their quality of life. In the efforts for improving the quality of their lives, attention should be focused not on ways in which the individual could be changed, but on ways of modifying their environment.

The need to educate the community regarding the need for bringing up girls and to care for women in the community is obvious. The women and girls who face the predicament of destitution have to stand up for themselves, find the strength within them, learn the coping skills, modify their own attitudes, and build self-regard and esteem to face adverse situations and family conflicts. Attempts must begin to make women assertive and defiant.

5. Suggestions

The present study suggests that the inmates of the *Mahila Mandirs* are much less extroverted and more emotionally mature than they are supposed to be; in fact they are found psychologically more balanced than women in families of similar socio-economic status. The general notion that it is their deviant personality and emotional immaturity that make these women destitutes found little support from the evidence collected and analysed in this study. These women too would be able to meet expectations, make intelligent decisions, and carry out tasks provided they are given adequate training and opportunities.

The destitute women were found, however, to be less skilled in adjustment to family and society. This may be due to the unfavourable family environment in which they were born and brought up. The study reveals that almost all the inmates had miserable family backgrounds, with severe economic and emotional problems. These women may be helped if a favourable environment is provided in the institutions. Moral training based on spiritual ideals must be given regularly to the inmates so that they would become virtuous and affectionate women and useful citizens.

Awareness training and short-term personality development courses may be given to the inmates so as to make attitudinal changes in them, which would help them accept changes willingly. Outcomes of desired changes would act as further incentives to break through their adjustment problems and complexes. The inmates may be encouraged to express and share experiences with experts in various fields.

The majority of the inmates and all the home authorities reported that inadequate funds and insufficient food were the two grave problems that they face at the *Mahila Mandirs*, followed by the problem of insecure housing. Food and shelter are the basic and primary needs of human beings. It is high time that the Social Welfare Department took note of these inadequacies. The destitute women cannot lead a dignified life if they go begging before voluntary agencies for support to meet their basic needs. This problem may be solved to some extent if the inmates are provided with job opportunities.

During discussions of the problems faced by the inmates, the majority of them stated that they were not given any opportunity at the institutions to develop their skills or talents.

It is hope, creativity, values, and self-fulfilment that make life worth living. Care homes and such other institutions have not succeeded in addressing many of the problems that are of crucial significance to the lives of orphans and destitutes. Humanistic psychologists strongly believe that every human being, when provided with favourable conditions, would be friendly, co-operative, and constructive. Selfishness, cruelty, and aggression constitute pathological behaviour resulting from denial, frustration or distortion of one's basic nature. Therefore, any welfare programme designed for destitute women must include activities to increase their capabilities for personal growth, choice, and fulfilment. Training must be given for fostering personal growth to maintain satisfying relationship with others. Freedom to express ideas and opportunities to exhibit talents must be given importance while planning welfare

activities. The very fact that the vast majority of inmates had expressed their dissatisfaction regarding this particular aspect is significant.

Vocational training centres must be started together with every *Mahila Mandir* in order to impart training to the inmates in various vocations. Such training centres could offer training to women living in families outside also. The inmates would thus get opportunity to mingle with other women and join the mainstream culture. This in turn would help in changing the public opinion about women in institutions for destitutes.

Training based on the skills, potentials, and qualifications would give the inmates access to a number of jobs like nursing assistants, housekeepers, social workers, primary schoolteachers and helpers.

The inmates of the *Mahila Mandirs*, after sufficient awareness training, should be allowed to seek jobs outside the institutions so as to live dignified lives and make decent earnings.

The inmates, while expressing satisfaction on the duration of the rest-time enjoyed by them, complained about the lack of rehabilitative measures and lamented their wasted lives at the institutions. This is indicative of their willingness to grow as individuals and to lead meaningful and socially constructive lives. It is highly essential that the officials realise the need on the part of the inmates to do work and earn income. The destitute women need to be rehabilitated not only materially, but socially and spiritually as well. They should be made to realise that the most important consideration is not what they can get out of life, but what they can contribute to it. The lives of these destitute women could be fulfilling only if they earn their living through socially constructive ways.

The study revealed that out of the 120 institutionalised destitutes in the sample, 75 were Hindus, 28 Christians, and 17 Muslims. There are large numbers of inmates in homes for the destitute run by non-governmental organisations of Christian and Muslim communities. Compared to the large number of orphanages run by these two communities, the number of homes run by the Hindu community is negligible.

Poverty is the major reason for girls landing up in *Mahila Mandirs*. Some of the girls are forced to live in the *Mahila Mandirs* because their parents do not own a house. Supportive services and sponsorship services are to be provided for the needy families in order to enable them to take care of their girls in their homes. Equally important is the economic emancipation of single women, sick women, and single-parent mothers. Job reservation for divorced women and unwed mothers and programmes for enabling the entry of these women into the job market are some of the measures which would have a long-term effect and could mend the power balance between men and women at the general societal level.

There are several women who are epileptic, mentally retarded, and mentally disordered staying at the various *Mahila Mandirs* of the State. These women were those who were not taken back home by relatives after their discharge from hospitals. The hospital authorities sent them to the *Mahila Mandirs*. The mentally-ill patients suffer without proper medical check-up and medication. Support services need to be organised to provide some relief to these

vulnerable groups rather than squeezing them 'to fit in' to an inherently oppressive social set-up. Steps should be taken up in the *Mahila Mandirs* to modify their environment and to improve their quality of life.

Many inmates who ended up in *Mahila Mandirs* were found to be victims of rape, cheating, and various types of sexual assaults. All these girls who had sex with their lovers prior to marriage, willingly or unwillingly, had been sure of their marriage with their lovers. Most of them came from uncared for and unprotected family backgrounds and were craving for love. These girls found it difficult to resist the temptations from their lovers. In such cases, problems are to be located within each individual case in terms of variables such as faulty learning, dysfunctional cognition, lack of assertiveness, skill deficits, and intra-psychic conflict.

The adolescent girls have to be provided awareness about their problems and on their skill-deficits; they are to be made aware of the consequences of being in 'love' and what they need to do to protect themselves. It has to be assumed that the girls falling prey to cheating are those who have lost certain skills or have never acquired them in the first place.

The Social Welfare Department may organise programmes for awareness-creation and assertive training for adolescent girls in small groups at school, college, and community levels. The women living in *Mahila Mandirs* may be asked to participate in such programmes. Sharing of experience would result in a spirit of solidarity. This would help to explode myths, which propagate and sustain domestic violence. This can give insight and courage to women to be assertive, to fight back, and solve their problems in their own initiative.

Media can play a crucial role to bring about social change. The government and the media - TV and Radio – that has great outreach may be instructed to take up women's issues seriously and educate women regarding their legal rights as well as the alternatives that are open to them. Programmes on TV and Radio on the changing status of women would make a positive contribution to changing the general societal attitude towards women. They could also become powerful organs to disseminate information regarding women's rights, developmental programmes, and shelters available for women destitutes.

The findings of the study thus highlight the need to rehabilitate the inmates of destitute institutions both economically and socially. The focus should not be on relief measures but on skill development, which would empower women and make them independent and hence less vulnerable to violence in the society. The programmes of the Social Welfare Department must focus attention on providing skill training as well as job training to the inmates, which would help them lead dignified lives in future, rather than limiting its routine activities of care and welfare.

Any welfare programmes must ensure that the socially disadvantaged and hence disabled persons are able to negotiate the social world without help and support. Such persons need to be provided with help and assistance till they become self-sustainable. Hence the Social Welfare Department should incorporate skill-training and counselling services as part of its welfare activities, in order to enrich the quality of life of the inmates.

The institutions for destitutes remain, in general, isolated from everyday life with their 'rigid routine' and de-personalising and disabling effects on the inmates. An environment in which the inmates have nothing to do creates unwanted anxiety and fear in their minds about their future. Therefore, together with administering institutionalised care, it is essential to initiate efforts for de-institutionalisation and promotion of community living for the destitutes.

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