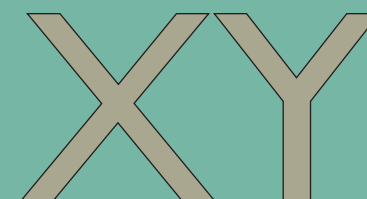
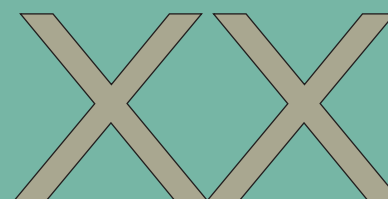


LEST MORE GIRLS GO MISSING



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Initiatives of UNFPA India to address gender-biased sex selection



The United Nations Population Fund: Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.

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This publication captures the journey of the United Nations Population Fund (UNFPA) India. It reflects upon the experiences of UNFPA in addressing the issue. The publication may be quoted, in part or full, by individuals or organisations for academic or advocacy and capacity building purposes with due acknowledgements. For other uses and mass distribution, prior permission is required from UNPFA. This compilation is for information only, and is not to be sold or used for commercial purposes.

LEST MORE GIRLS GO MISSING
Initiatives of UNFPA India to address gender-biased sex selection



United Nations Population Fund - India

FOREWORD

It is estimated that between 2001 and 2008, 5.7 lakh girls have gone missing at birth annually as a consequence of gender-biased sex selection. This takes the cumulative missing toll to 4.5 million in just 8 years¹. Pre-natal sex selection, also referred to as gender-biased sex selection, is the practice of determining the sex of a foetus and eliminating it if found to be female. Steeped in patriarchy, a complex nexus of socio-economic factors that have gained strength over centuries nurture and promote the malady of gender discrimination. The cliché of valuing a son as an asset and de-valuing a daughter as a liability dictates and perpetuates this inequity. In the last few decades the misuse of technology has offered an impetus to gender-biased sex selection within India.

The United Nations Population Fund (UNFPA) strives to address discriminatory practices that impede gender equality and impact on the reproductive health and well-being of women and girls. Gender-biased sex selection is one of the blatant manifestations of the subordinate status of women in society, with far reaching socio-demographic consequences. Thus, this subject falls within the ambit of UNFPA's core priority areas.

In the light of the 2001 Census findings of a deteriorating child sex ratio, UNFPA India began work to address this imbalance. Initiating change on an issue that had already found firm roots in the fabric of society promised to be a challenging process. It required an understanding of perceptions and patterns of discrimination, undertaking evidence based advocacy, and orienting multiple stakeholders to work collectively on the issue. Partnering with the government, medical community, religious groups, judiciary, media and civil society was integral to the approach.

Initially, efforts were focused on raising awareness about the problem. Over the years, the work transitioned to learning and sharing information about solutions. This document bears testimony to the efforts initiated with multiple stakeholders to synergise action against gender-biased sex selection.

One of the challenges facing a drive of this nature is the process of consolidating and dovetailing such initiatives into already existing institutions. While actions coming from multiple quarters may ostensibly seem sporadic, a glance at the larger canvas would affirm that every hue matters and every stroke counts! The efforts are nascent, but it is a definitive and necessary beginning.



Frederika Meijer
UNFPA Representative, India & Bhutan

May 2013

1. This estimate has been obtained following the methodology described in a paper by Kulkarni, P. M. (2007). "Estimation of missing girls at birth and juvenile ages in India" Paper presented at the XXIX Annual conference of the Indian Association for the Study of Population, Banaras Hindu University, Banaras, October 2007".. This methodology has been extended to the period 2001-08.

ACKNOWLEDGEMENTS

The United Nations Population Fund has been working dedicatedly to address the issue of gender-biased sex selection in India. The initiatives captured here mirror the untiring efforts of UNFPA staff in New Delhi and the states of Bihar, Madhya Pradesh, Maharashtra, Orissa and Rajasthan. Of particular mention are the insights of Anuja Gulati, Dhanashri Brahme, Ena Singh, Prakash Deo, Priyanka Ghosh, Rajat Ray, Sunil Thomas Jacob, Sushil Chaudhary and Vidya Krishnamurthy who contributed to the development of this publication. We would like to acknowledge all who graciously agreed to undertake this journey, from where the memories, lessons and the following pages emanate.

List of Abbreviations

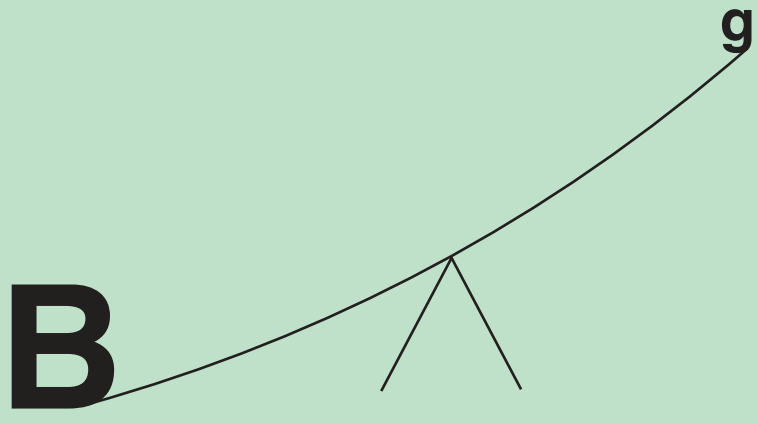
AA:	Appropriate Authority
AIILSG:	All India Institute of Local Self-Government
ANM:	Auxiliary Nurse and Midwife
AOL:	The Art of Living Foundation
BBC:	British Broadcasting Corporation
CAPED:	Citizens Against Pre-Birth Elimination of Daughters
CCT:	Conditional Cash Transfer
CEHAT:	Centre for Enquiry into Health and Allied Themes
CHETNA:	Centre for Health Education, Training and Nutrition Awareness
CSB:	Central Supervisory Board
CSO:	Civil Society Organisation
CSR:	Child Sex Ratio
CYDA:	Centre for Youth Development and Activities
DASS:	Doctors Against Sex Selection
FAQ:	Frequently Asked Question
FOGSI:	Federation of Obstetric and Gynaecological Societies of India
IAPSM:	Indian Association of Preventive and Social Medicine
ICPD:	International Conference on Population and Development
IEC:	Information, Education and Communication
IIPS:	International Institute for Population Sciences
IMA:	Indian Medical Association
IPHA:	Indian Public Health Association
IRIA:	Indian Radiological and Imaging Association
MASTACON:	Indian Medical Association Maharashtra's 51 st State Annual Conference
MASUM:	Mahila Sarvangeen Utkarsh Mandal
MMC:	Maharashtra Medical Council

List of Abbreviations

MLSA:	Maharashtra State Legal Services Authority
MOHFW:	Ministry of Health and Family Welfare
MWCD:	Ministry of Women and Child Development
NCC:	National Cadet Corps
NCEA:	National Creative Excellence Awards
NGO:	Non-Governmental Organisation
NHRC:	National Human Rights Commission
NIMC:	National Inspection and Monitoring Committee
NLIU:	National Law Institute University
NLU:	National Law University
NRHM:	National Rural Health Mission
PACE:	Partnerships for Action in Education
PCPNDT Act:	Pre-Conception & Pre-Natal Diagnostic Techniques Act, 1994
PIL:	Public Interest Litigation
PIP:	Programme Implementation Plan
PSBT:	Public Service Broadcasting Trust
RCUES:	Regional Centre for Urban and Environment Studies
RGI:	Registrar General of India
SHSRC:	State Health Systems Resource Centre
SSB:	State Supervisory Board
UNFPA:	United Nations Population Fund
USCON XX:	Ultrasonologists' Conference XX
WAYE:	World Alliance for Youth Empowerment
WPC:	WomenPowerConnect
YES!+:	Youth Empowerment Seminar Plus

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Despite sustained economic progress, deeply entrenched traditions of gender discrimination continue to prevail in India. Sons are preferred over daughters for reasons of inheritance, family lineage, status, economic security, old age support, birth and death rituals and beliefs about religious duties and salvation. The practice of dowry, compounded by the belief that the daughter becomes *paraya dhan* (another's wealth) after she gets married, further perpetuates son preference. A complex web of socio-economic and cultural factors results in discrimination against girls, which manifests in acts of gender-biased sex selection. Patriarchal mindsets, a rapid decline in fertility, the desire for a small family but with sons and misuse of technology together perpetuate this malpractice in India.

INTRODUCTION

Introduction

The 1991 Census reported a child sex ratio (CSR) of 945 girls per 1000 boys. This declined to 927 in the 2001 Census and now stands at 919 as per the 2011 Census. Skewed sex ratios are already exerting their effect on gender relations. States with disturbing ratios have reported incidents of polyandry, bride trafficking, exchange marriages and honour killings. The men in these states enforce stringent control over choices available to women and expect strict adherence to patriarchal norms. It is evident that a paucity of girls does not enhance their value in a society where they already suffer from a subordinate status.

'Planning Families, Planning Gender', a study by Action Aid², reported that the trend in India is not as much about son preference as it is about an active aversion towards daughters. An underlying bias in favour of sons coupled with reasonable access to technology makes all the areas fall in high-risk zones for gender-biased sex selection. Even with girls being better educated, the CSR continues to be low. In a patriarchal setup, the economic independence of women does not automatically translate into a better life for daughters. The institution of marriage is viewed as compulsory, normative and 'correct' for girls, with patrilocality being widely prevalent. Higher education, later marriage, and even an unreliable marriage lead to daughters being considered as liabilities for a lengthened period of time.

The practice of gender-biased sex selection, earlier seen as a problem of the urban middle class, is now cutting across caste, class and region. Gender-balanced families are a preferred choice with many desiring smaller families with at least one son. It has been observed that more families are prone to resort to gender-biased sex selection for their second born. Provoked by the findings of the 2001 Census, the following decade has seen efforts made by multiple actors to improve the CSR. Among these were the efforts of the United Nations Population Fund (UNFPA) to reach out to a wide spectrum of stakeholders who had the potential to influence change.

A primary mandate of the UN is to support governments in achieving national development goals. The issue of decline in the sex ratio rested with the Ministry of Health and Family Welfare (MOHFW). Hence, the first priority for UNFPA was to respond to the needs of this Ministry, other ministries and departments of the government. UNFPA provided support to the MOHFW by helping to build capacities to enable implementation of the Pre-Conception & Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act (PCPNDT Act).

2. John Mary E., Ravinder Kaur, Rajni Palriwala, Saraswati Raju, Alpana Sagra 2008, *Planning Families, Planning Gender: The Adverse Child Sex Ratio in Selected Districts of Madhya Pradesh, Rajasthan, Himachal Pradesh, Haryana and Punjab.*

Introduction



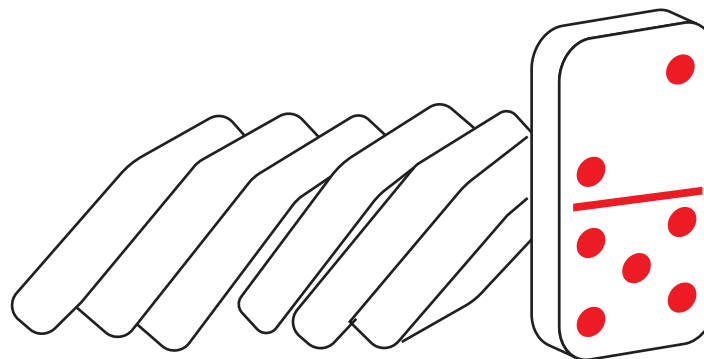
THE PRACTICE OF GENDER-BIASED
SEX SELECTION
EARLIER SEEN AS A PROBLEM OF THE URBAN MIDDLE CLASS, IS NOW CUTTING
ACROSS CASTE, CLASS AND REGION



Introduction

These efforts included a modest team of consultants to help initiate work at the national level and within some states. The MOHFW was provided with technical support to strengthen its functions relating to the law. UNFPA further worked with the MOHFW to build capacities and train the 'Appropriate Authorities' (AA) who had a key role to play in the implementation of the law. Technical assistance was also provided to integrate the issue of gender-biased sex selection into the National Reproductive and Child Health (RCH) Programme, various district plans, training initiatives and other efforts of the MOHFW.

Support was provided not only at the central level, but also at the state level. For example, in Rajasthan, the government made efforts towards implementing the Act whereby, UNFPA collaborated with the state government and the MOHFW to design and develop an application for a website that allows online reporting of violations of the PCPNDT Act. Once a complaint is lodged, a unique complaint registration number is allotted. Simultaneously, an auto-generated intimation is emailed by the software to the concerned district Appropriate Authority and reports are generated to help senior officials at the state level to monitor the action taken. The complainant may use the electronically generated number to check the status of the complaint. After its successful pilot launch in Rajasthan, other states have also expressed the desire to host similar sites.

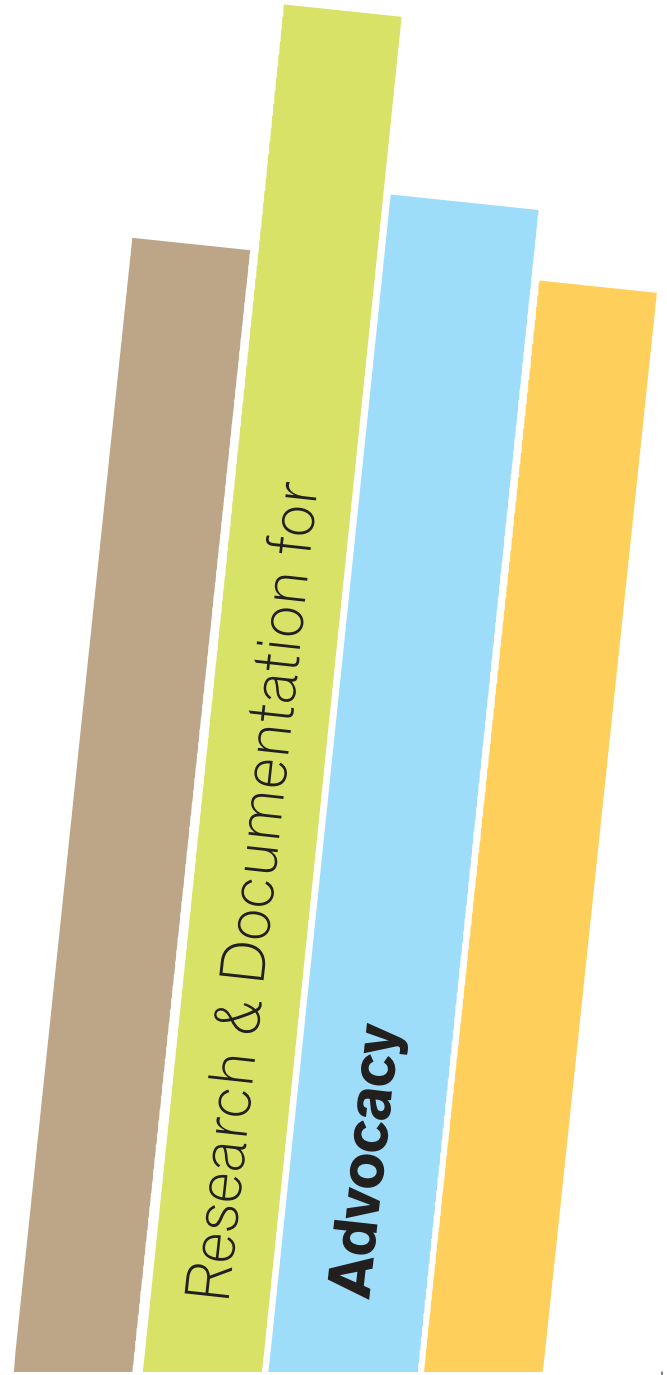


Introduction

Though legislation is a crucial element in curbing the menace, a law by itself cannot offer a complete solution. Nor is the issue one that can be tackled by a single ministry. Hence, the collaboration extended to enabling other government partners such as the Ministry of Women and Child Development (MWCD). Opportunities were identified to enhance the value of girls and address the issue of gender-biased sex selection in the ongoing programmes. Moreover, UNFPA teamed up with MWCD to invite other ministries to work on the issue. In 2008, joint briefings were convened in the presence of the Ministry of Defence, Ministry of Youth Affairs and Sports and the Ministry of Panchayati Raj.

As an outcome of this dialogue, the Ministry of Defence hosted a series of sensitisation workshops for the state level trainers of the National Cadet Corps (NCC). Consequently, the issue was absorbed into their regular stream of training programmes for new trainers as well as refresher courses. In light of the fact that the issue demands a dynamic and a multi-pronged response, these were only modest beginnings. Unless convergence is brought about through the initiatives of different sectoral programmes aimed at communities and girls, cross-cutting action cannot be achieved.

While, government actors intensify their efforts, civil society also has a role in galvanising the movement against gender-biased sex selection at the grassroots. More NGOs must come forward to deepen their engagement with the communities. Similarly, existing networks and platforms must be leveraged and new ones should be created so that a coordinated campaign against the malpractice can be initiated and sustained. These multiple forums would be bound by a vision of bringing together multiple ideologies and perspectives on the issue to collectively focus on a common minimum aimed at gender equality. The issue needs to be kept alive through everyday conversations and public debates so that its fundamental link with various aspects of life is not lost. This publication captures the journey of a decade with different stakeholders, and documents the challenges and successes along the way.



Despite the 2001 Census reporting a decline in the CSR, the issue had yet to be brought to the forefront of public discourse. It was essential to decode and simplify available data for widespread dissemination and to support research to generate evidence for advocacy against gender-biased sex selection.

The first step in this direction included lending technical support to a partnership group that was constituted to work on the issue. This multi-stakeholder group was chaired by the MOHFW. Acceding to a request from the group, UNFPA took on the task of disseminating the findings of the 2001 Census. This was done primarily through a booklet entitled - 'Missing... Mapping the Adverse Child Sex Ratio in India'. Through the collaborative effort of the MOHFW, the Office of the Registrar General of India (RGI) and UNFPA, this publication successfully mapped the districts with adverse CSRs within the country and depicted how the sex ratio had deteriorated between the 1991 and 2001 Census. Released by the Ministry in 2003, it continues to be widely quoted as a tool for advocacy. Translating yet another suggestion into action, in 2002-03 a National Advocacy Strategy on the issue was commissioned by the Ministry and was circulated amongst state governments, though not actioned.

In 2006, UNFPA felt the need to commission a study to take stock of its own initiatives and those of others to develop a roadmap that would guide its future advocacy efforts on the issue within the larger campaign. UNFPA collaborated with the Centre for Youth Development and Activities (CYDA), to carry out the assessment. In 2007, the findings from the study were consolidated into a publication entitled 'Looking Back and Looking Forward: Reflections on the Campaign Against Sex Selection'.

The Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994, amended in 2003 to the Pre-Conception & Pre-Natal Diagnostic Techniques (Prohibition of sex selection) Act (PCPNDT Act), is a crucial legislation to curb the practice of gender-biased sex determination and sex selection. Increased awareness of the provisions of the Act was expected to help check the misuse of medical technology for sex selection. Appropriate Authorities who were assigned the responsibility of implementing the law, medical practitioners who operated diagnostic centres, and the general public who sought the service, had various queries regarding the PCPNDT Act. Responding to this need, three separate handbooks entitled 'Answers to Frequently Asked Questions', were published in 2007 to demystify the law for medical professionals, implementing bodies and the public.

In the same year, UNFPA collaborated with the MOHFW to develop a resource CD that packed reference and communication material on gender-biased sex selection in India. The CD contained information on the law, the extent of the problem and responses from various agencies. It also included a selection of research material on the subject.

In 2009, UNFPA partnered with the Centre for Development Studies to release 'Declining Child Sex Ratio (0-6 years) in India - A review of literature and annotated bibliography'. As the title suggests, this review exercise brought together studies, undertaken on the declining CSR in India. The compilation provided an insight into evolving perspectives on the issue.

While CSR is principally determined by the sex ratio at birth, it is also influenced by a host of other factors such as under-registration of girls, differential infant and child mortality and misreporting of age. Therefore, an imbalance in CSR cannot be entirely attributed to the practice of prenatal sex selection. A comparison of the observed sex ratio at birth with the normal sex ratio at birth gives an idea of girls missing at birth. In July 2010, the need to systematically use data on sex ratio at birth, to increase birth registration and strengthen the Civil Registration System, was documented in a UNFPA publication entitled 'Trends in Sex Ratio at Birth and Estimates of Girls Missing at Birth in India' (2001-2008).

In order to challenge the perception of girls as a liability, various financial incentive schemes have been launched by the national as well as state governments. These schemes offer monetary security to the girl and her family. In the short run, these schemes aim to promote the survival and well-being of girls in India. In the long run, they attempt to influence social perceptions about girls. While, conceptually, the Conditional Cash Transfer (CCT) programmes offer incentives to those who meet certain defined behavioural criteria, the premise of financial benefits actually ensuring the survival and the consequent well-being of girls must be verified. UNFPA engaged Dr. T. V. Sekher, known for his research work on sex ratio decline and currently working with the International Institute for Population Sciences (IIPS), to carry out a desk-review of incentive schemes. This led to the detailed report 'Special Financial Incentive Schemes for the Girl Child in India', 2010. The review pointed to the on ground bottlenecks in implementation. It highlighted some of the perceptions of government officials and civil society regarding the usefulness of such incentive based initiatives. It highlighted some of the perceptions of government officials and civil society regarding the usefulness of such incentive based initiatives and thereby contributed to the policy discourse.

Research that has been recently commissioned and is ongoing, includes a study with Breakthrough³ to unpack attitudes and beliefs in the context of examining the effectiveness of existing communication materials on preventing gender discrimination. It is expected that the findings would help develop a strategy that could guide future communications. Another ongoing study examines existing laws, which inadvertently influence son preference. This analysis will also explore the manner in which such laws have been interpreted by the courts and implemented by the state and other actors.

This mosaic of research and documentation helped fill some critical gaps in knowledge, or presented available data in a manner easily usable for policy advocacy. In the initial stages of the work on this issue, the greatest demand was for information on trends in the sex ratio, and demystification of the law against sex determination. As the subject became more established as an issue of concern, the emphasis has shifted to research that would help address the underlying gender discrimination, and ensure more effective and nuanced communication. The ongoing and proposed research initiatives in this area are aimed at strengthening the pool of resource materials available for advocacy against sex selection.

3. Breakthrough is a global human rights organisation that uses the power of media, popular culture, and community mobilisation to inspire people to take bold action for dignity, equality, and justice.



Each time a doctor, radiologist, sonologist or a geneticist says 'yes' to sex determination for the purpose of gender-biased sex selection, the vows of ethical medical practice lie desecrated. As members of a respected profession, it is the responsibility of the medical community not to indulge in the malpractice of sex selection. Medical practitioners form a critical link between the demand and supply of illegal sex determination services. UNFPA strategically reached out to orient the medical community on their crucial role and inherent responsibility in preventing gender-biased sex selection.

It was, and is, a reality that not only quacks, but also many doctors and paramedics were involved in the unethical but highly lucrative business of gender-biased sex selection. Criticism of the medical community by civil society, media and others served more to raise defences than to self-correct. At the same time, there were many within the medical community who recognised that this malpractice flourished, but continued to be fence sitters or silent bystanders. UNFPA was urged by government counterparts and others to engage in a dialogue with the medical community.

Around the same time, Dr. Prakash Deo, an erstwhile senior officer with the Public Health Department of Maharashtra, who later joined UNFPA, initiated a dialogue with Dr. Ashok Adhao, President of the Nagpur branch of the Indian Medical Association (IMA), to forge one of the earliest associations between UNFPA and the medical community on this issue. The President, was far from convinced that the issue of sex selection deserved his immediate attention. Not one to give up, Dr. Deo, continued to engage his colleague over many a deliberate debate. Little did he know that these "coffee conversations" were slowly chiseling the path for a change that was about to transform the mindscape of many in the medical community in India. On one ordinary day, a newspaper report led to an extraordinary response. An article was published about the misuse of 25 ultrasonography machines in the city of Nagpur. This provoked the President to quit the comfort of conversations and plunge into action. He began by pitching for the issue at various workshops within the medical community.

Multiplying smiles. Doctors for Daughters.

Doctors for daughters



In 2005, as the designated President of the Maharashtra branch of the IMA and later as the National President of IMA, Dr. Adhao's circle of influence expanded. His deliberate efforts at advocacy brought gender-biased sex selection under the national spotlight at various IMA consultations. In 2006, a national-level workshop with key IMA representatives from across the country was organised to articulate the concerns and the role of the medical community in addressing the issue. With doctors themselves speaking up on the issue the initial hesitation to accept responsibility turned into a desire to set the record straight. The IMA members decided to create awareness and self-regulate through peer monitors to squarely address the misuse of technology.

In 2007, prolonged efforts resulted in the adoption of a resolution at the IMA National Conference in Patna. The pledge not only condemned doctors who engaged in such malpractices, but also laid emphasis on the need to orient the medical community. In 2008 UNFPA organised four regional workshops and 48 district level workshops across the country to sensitise medical practitioners on the issue. While this process did not lead to much beyond sharing of information and views, it did have one unexpected benefit: a handful of participants stood out who demonstrated an energy and commitment to the cause.

The endorsement and the efforts together offered an impetus to work more proactively on the subject. Based on their interest, IMA selected active members to become ambassadors for its work against sex selection. They were about 50 in number, and many from amongst the participants of the 2008 workshops. To institutionalise this within the organisation, a National Mentoring Group was constituted that also guided IMA's work on the issue as well as the efforts of the ambassadors to continue building awareness and monitoring compliance with the Act.

IMA Resolution to Fight Against Sex Selection

81st Central Council Meeting, S. R. K. Memorial Hall, Dr. A. K. N. Sinha Nagar, 27th December, 2006, Patna

IMA expresses its concern over the declining male to female child sex ratio in the country and its adverse consequences on the society. Pre-natal sex determination needs to be strongly condemned. Members of the Association are advised to desist from such illegal, unethical and unsocial practice of pre-natal sex determination. IMA is committed to work on this issue proactively, for reversal of declining child sex ratio and ensuring a gender balanced and healthy society. IMA resolves that national, state and district branches:

Will constitute Monitoring Cell for curbing sex selection at all levels of IMA with representative of ultrasonologists, gynaecologists and other related specialties or their organisations.

Will continue to sensitise doctors at different forums on this issue especially on gender, legal, ethical and rights dimensions being compromised by perpetuation of this heinous crime.

Will initiate voluntary monitoring on legitimate use of sonography techniques by registered centres in preventing misuse of technology.

Will collaborate and cooperate with Appropriate Authorities for effective implementation of PCPNDT Act.

Will engage with civil society group/members by constitution of 'Doctors Forum Against Sex Selection' (DASS) to create awareness regarding PCPNDT Act and dwindling and decreasing female child ratio.

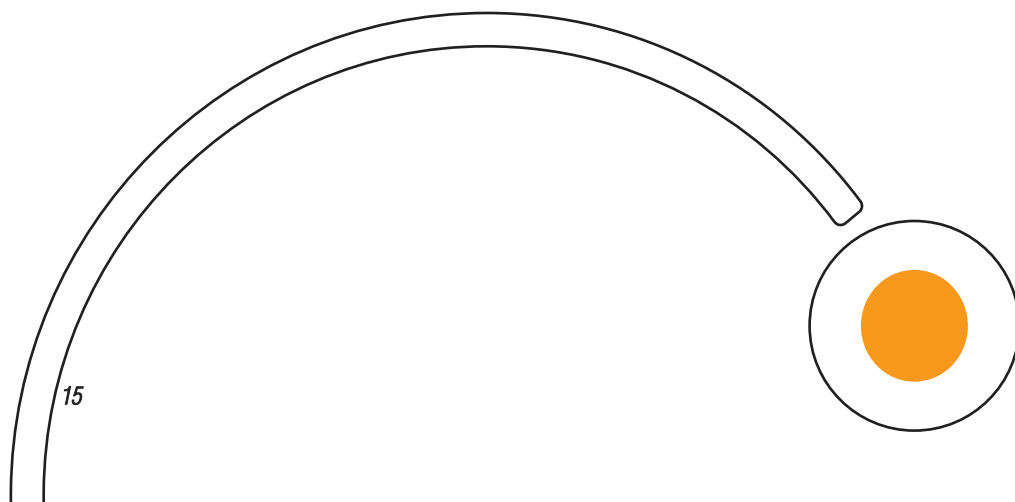
National IMA will provide necessary guidance to branches to act on the implementation of this resolution.

Indian Medical Association

In 2009, IMA proposed a strident four-step approach to deal with the erring members of the medical community. The first step *Baat* (talk) suggested the orientation of the medical community through workshops and meetings. This was followed by *Mulaqat* (individual meetings), where a core group of dedicated IMA officials counselled practitioners who were allegedly engaged in gender-biased sex selection. If these efforts failed then the next step could be *Hawalat* (lock up) for breaking the law. The final step of boycott would result in the suspension/termination of IMA membership if a practitioner was found to be guilty under the PCPNDT Act, 1994. This provocative conceptualisation was acted upon only in a modest way.

In Maharashtra a series of planned trainings had been organised for identified master trainers who, in turn, could orient other members of the medical community. In 2004, UNFPA trained seven IMA master trainers and shared advocacy materials with them. Similarly, a day-long orientation programme for 45 doctors in Mumbai was backed by a campaign to sensitise medical practitioners in 10 districts of the state. Doctors who had undergone the first round of training were expected to identify others and spread the reach of the campaign.

From the workshops that had been hosted across the country in 2008 to orient the state and district IMA branches, one other outcome was the formation of 'DASS' Fora - 'Doctors Against Sex Selection', who continue to champion the cause in various districts with active IMA branches. Over time, advocates from various states have worked at the grassroots level. For instance, two determined advocates from Gujarat ensured that all clinics in Jamnagar were streamlined to comply with the PCPNDT Act. A compliance checklist for clinics was distributed amongst 250 doctors of the region. Similarly, the successful pilot testing of the checklist developed by UNFPA to monitor ultrasonography clinics in Indore, Madhya Pradesh, led to its demand in other states. The president of the local branch of the IMA, who is also an ambassador against sex selection in Vanamdurai village of Tamil Nadu, influences his peers to refrain from this malpractice.



Doctors for daughters

In addition, an attempt was made to influence the doctors of the Art of Living⁴ (AOL) community so that they in turn could build peer pressure within the larger medical group. Tapping the reach and commitment of the organisation, a two-day national workshop for doctors was held at the AOL Centre in Bangalore. Active IMA doctors as well as those who were followers of AOL forged a motivated medical community to spearhead change. They interacted and strategised ways to address the issue of gender-biased sex selection. UNFPA collaborated with AOL's World Alliance for Youth Empowerment (WAYE) to reach out exclusively to medical students. A module on gender-biased sex selection was introduced in their Youth Empowerment Seminar PLUS (YES!+) courses aimed at students of select medical colleges in Maharashtra.

Direct mailers have also played a role in generating awareness. A joint campaign was launched by IMA, State Government of Rajasthan and UNFPA comprising official IMA letters and resource material for doctors. As part of this campaign, participating doctors added to their name stamps the message *Badlenge Soch Beti Nahi Bojh* (We will change the perception - Daughters are not a burden.)

During the course of these interactions, the specific needs of the medical community were identified. The dilemma of gender-biased sex selection, faced by doctors in their daily practice, was addressed. The materials used at various stages of this orientation process were compiled into a tool-kit, 'Doctors for Daughters' that responded exclusively to the requirement of doctors. This was an attempt to help doctors get a firmer grasp of the law, influence attitudes and explore values. The toolkit consisted of a compilation of Frequently Asked Questions (FAQ) on the Act, a sample checklist to monitor the legal compliance of the ultra-sonography clinics, and a brief on the law itself. The moral predicament of doctors was addressed in a booklet entitled 'Doctors' Dilemmas'. It relied on the experiences of doctors themselves, the provisions of the law and concepts of equality and non-discrimination to deal with difficult questions around gender-biased sex selection.

4. Founded in 1981 by His Holiness Sri Sri Ravi Shankar, the Art of Living Foundation is a not-for-profit, educational and humanitarian NGO that operates globally in 151 countries.

Doctors for daughters

Since the effectiveness of the PCPNDT Act rests with members of the medical community who often find themselves grappling with its protocol for compliance, UNFPA, in collaboration with the Indian Medical Association (IMA), Federation of Obstetric and Gynaecological Societies of India (FOGSI) and Indian Radiological and Imaging Association (IRIA) has developed an interactive CD for a self-learning certification course on the Act.

The work with the medical community has also spanned across organisations other than the IMA. It has included the Indian Association of Preventive and Social Medicine (IAPSM), Indian Public Health Association (IPHA), IRIA, FOGSI, surgeons performing non-scalpel vasectomy and the faculty and students of various medical colleges.

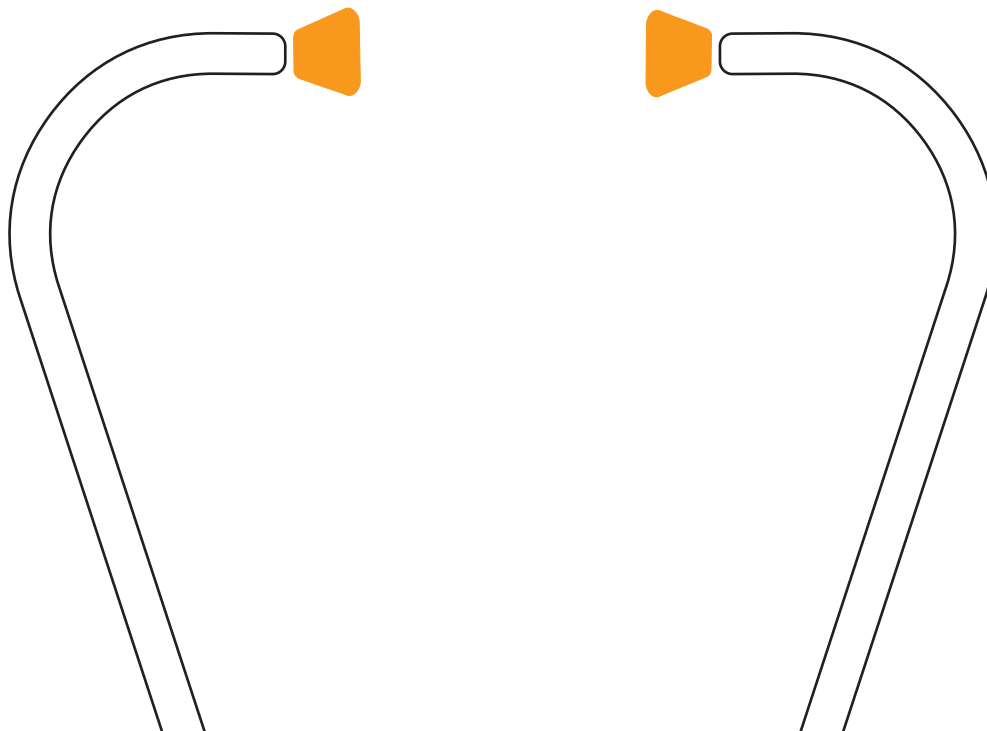
In 2011, sessions on gender-biased sex selection were facilitated at USCON XX, a national conference of ultrasonologists organised by the Indian Federation of Ultrasound in Medicine and Biology, in Indore. Since most of the participants were working professionals in obstetric sonography, it was a fitting platform to discuss issues pertaining to gender-biased sex selection. Similarly, sessions on the subject were also conducted in the 3rd South-Central Zone and 13th MP State Chapter of the IAPSM in Jabalpur. The Maharashtra IMA's 51st State Annual Conference (MASTACON-2011) held at Chandrapur also provided an opportunity to advocate against gender-biased sex selection.

While it is important to take advantage of all opportunities for dialogue with medical practitioners, it is equally if not more important to ensure that the next generation of medical and paramedical students engage with the issue. In November 2011, a symposium, 'Sex Selection Issues and the Role of Medical Teachers', was organised during a regional conference by the IAPSM. Most of the members were teachers in the Department of Community Medicine from various medical colleges. A senior official from UNFPA participated and facilitated sessions on the role of teachers in furthering action against gender-biased sex selection. As a result of a series of discussions, it was agreed that circulars on the subject would be disseminated amongst undergraduate students. Efforts would also be made to sensitise other faculty members on the subject. Post graduate students would be encouraged to opt for research topics related to the issue for their dissertations.

Acknowledging the need to integrate the above efforts into a standard medical curriculum, the Maharashtra Nursing Council has agreed to include components pertaining to sex selection and the PCPNDT Act in their basic training module for nurses. Further, discussions are ongoing with the Maharashtra University of Health Sciences to integrate issues on gender and sex selection in the medical curriculum.

In spite of orientation, awareness and introspection, some doctors continue to violate the law. The leadership in the medical community is mandated to take action against such individuals. An elected chairperson of the Maharashtra Medical Council (MMC) and a former president of the Nagpur Branch of IMA supported UNFPA in reaching out to the members of the MMC. The meeting attempted to sensitise the participants on the issue of gender-biased sex selection and the role of the organisation in strengthening the implementation of the PCPNDT Act. To date licenses of five medical practitioners have been suspended by MMC. It is one of the few instances where the Medical Council has taken action as per the law and suspended the licenses of erring doctors.

UNFPA's work with the medical community has evolved over the years. Initially, the emphasis was on dialogue with medical practitioners, and bringing them up to date on the provisions of the PCPNDT Act. Partnering with medical associations ensured a stronger foothold in the medical community. Over time some medical professionals have taken ownership of the issue. However, there is much to be done, particularly as the profits from this illegal practice remain high.





CHANGING ROLE OF MEDIA

During the last couple of decades the impact of media on everyday life has grown exponentially. It influences our thoughts and consequently impresses upon our actions. Media is shaped by, and in turn shapes, the larger socio-cultural framework and structures. Therefore, to mobilise various sections of media, in the face of a growing grim reality of missing girls, was an obvious move. The work with the media followed a two-pronged strategy. First and foremost, was the need to draw the attention of the Indian media to the gravity of the situation. Second, it helped to reach out to the youth through programmatic interventions. The latter were targeted at urban youth, since the phenomenon of gender-biased sex selection was initially a largely urban malady.

A picture is worth a thousand words and more so when it narrates a story. In 2005, supported by UNFPA and a media fellowship from the National Foundation of India, Ruhani Kaur, a young photo journalist, captured the silent stories of individuals from Haryana, Gujarat and Punjab, who were driven to make choices that mirrored the inconvenient truth of gender-biased sex selection. The photographs not only won her the 2006 photo journalism Grand Prix from Days Japan but continue to serve as a potent instrument for advocacy in India. In the early days, the photographs went a long way as the most impactful tool for UNFPA to orient policy makers, media professionals, medical practitioners and multiple civil society actors about the nuances and gravity of the situation.

As work on this issue progressed, it became evident that the drive must focus on those who are currently in their reproductive prime, as well as those who would soon join that age bracket. Therefore, a series of youth interventions were strategised. These included partnering with educational institutions, mentoring budding journalists and instituting gender-sensitive media awards for promising professionals.

Educational institutions such as the Rajasthan University not only integrated the issue in their ongoing journalism course but agreed to consider its integration in the curriculum itself. Likewise, various workshops for the English and vernacular media as well as orientation programmes for students of journalism were supported in partnership with the Asian College of Journalism, Chennai and A. J. K. Mass Communication Research Centre, Jamia Millia Islamia, New Delhi.

Changing role of media

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To orient media professionals, *Dainik Jagran*, the largest daily read Hindi newspaper in India and UNFPA co-hosted a series of workshops. The merits and challenges of reporting on sex selection were taken up and select journalists across various newspapers were invited to join the drive. But there was a need to deepen the discourse. The impetus came, in 2009, from a postcard written by a young girl asking for a platform to voice her thoughts. This spurred the idea of *Sapno Ko Chali Choone* (Chasing her dreams) - an empowerment programme for the college going girls of Bihar. This innovative college-level intervention began as a joint initiative of UNFPA and *Jagran Pehel* (a strategic social initiative wing of Jagran Prakashan Ltd., one of the leading media conglomerates in India). The programme covered thousands of girls in 21 colleges of six districts of Bihar, orienting them on gender issues through activities such as, essay writing, poster making competitions and other means.

Forty eight talented girls were felicitated as 'Champions of Change'. These winners were mentored by the District Bureau Chiefs, *Dainik Jagran*, and encouraged to write for the newspaper. They interacted with professionals who had pushed the boundaries of convention in their respective fields and were given many opportunities for personal and professional growth. Now *Sapno Ko Chali Choone* is being integrated into the Government of Bihar's health programme and is also supported by the Department of Women and Child Development, Government of Bihar. *Sapno Ko Chali Choone* is not just a dream realised, but also a reminder to others that it all begins with a dream.

While voices on the issue gained strength, it was time to leverage the prevailing reach and strengths of the advertising industry. Five decades of work with landmark successes have made Bobby Sista a legendary figure in the country's advertising landscape. UNFPA collaborated with his NGO, Population First, and took up the mantle of orienting this powerhouse industry on a subject that was often dismissed. It was time to 'Celebrate her life'.

In keeping with this thought, the Laadli (a common term of endearment for a young girl) campaign was born. UNFPA supported Population First in organising the Laadli Media Awards for Gender Sensitivity, which felicitates professionals in the fields of advertising, print, electronic media, films and theatre for challenging gender stereotypes and highlighting women's concerns. The awards promoted gender-sensitivity in reporting and advertising. It also helped inculcate gender sensitivity as a core professional value among media persons. The Laadli Awards were instituted regionally and nationally, and organised annually. The competition not only inspired professionals to engage with the subject but also brought into the limelight the work done by professionals from regional newspapers.

Changing role of media

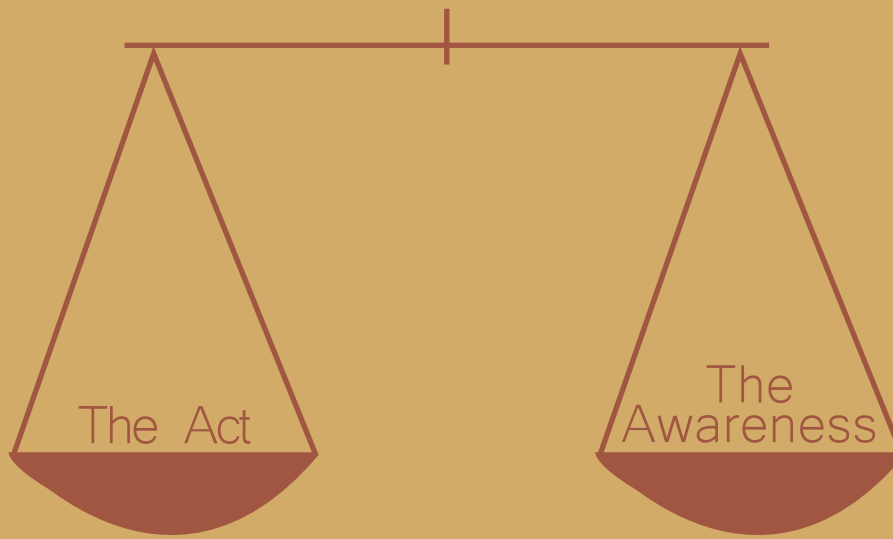
A study undertaken by UNFPA in 2007 entitled, 'Reflections on the Campaign Against Sex Selection and Exploring Ways Forward' identified a lack of sensitive communication on the issue. By the end of the year, it prompted the launch of the UNFPA-Laadli National Creative Excellence Awards (NCEA) for Social Change, a nationwide initiative aimed at creating a pool of communication material that could be used for various campaigns against gender-biased sex selection. NCEA for Social Change received a whopping 900 entries for the year 2010-11. With each passing year, these awards have inspired an increasing number of budding creative freelancers and advertising professionals to develop refreshing work on various aspects of sex selection. The winning entries have been popularised as, 'easy-to-download' and 'ready-to-use' and copyright-free artwork for collateral⁵.

It is envisaged that, in the coming years, the Laadli initiative will run independent of UNFPA's support. After months of engaging in dialogue with advertising agencies, it is no longer about integrating gender into a single campaign. The advertising professionals now filter their campaigns using a gender-sensitive lens.

Under the Laadli initiative, constant interactions were held with established and budding journalists. Despite rounds of discussions on gender-sensitive writing, there was a need to demonstrate how it actually translates into reporting without compromising the readability or relevance of the story. Reporting on gender-biased sex selection demands a certain degree of sensitivity. The key to successful communication depends on the reporter's understanding of the issue and the language or motif through which it is articulated. 'Missing: Half the story - Journalism as if Gender Matters', a compendium on gender sensitive writing was published by *Zubaan* Publications.

The book was written by journalists for journalists. Using examples from the media, and from their own experiences, the contributors looked at a series of subjects and set out simple ways of using the gender lens in day-to-day reporting. The publication is currently being used as a reference book at various Colleges of Journalism. In the initial years UNFPA had, in many small ways partnered with academic institutions that were already running educational programmes for young people. The National Institute of Information Technology agreed to work out a module to orient young entrants. Along similar lines, 100 teachers and 200 peer educators of the Delhi Public Schools Society underwent orientation on life skills and gender equality (including gender-biased sex selection) and integrated these issues into their school curriculum. Hindustan Times PACE (Partnerships for Action in Education) and UNFPA collaborated to organise a national level debate competition for senior school students covering over 1,200 schools of Delhi, Lucknow, Chandigarh, Bhopal and Jaipur.

Under this partnership, a series of theatre workshops were also organised to highlight the concerns of gender-biased sex selection. These theatre workshops were held across 850 schools of Delhi with Feizal Alkazi, one of India's leading theatre personalities encouraging young adults to script and perform skits/plays on the issue. Lady Shri Ram College for Women in New Delhi also highlighted the complexities of sex selection at *Tarang*, its legendary college festival. Thus UNFPA worked with various sections of the media to sensitise them not only to gender-biased sex selection, but also about the underlying issues of gender discrimination. Through such initiatives, both small and large, an effort was made to reach out to young people, especially in urban areas.



The Judgment Day

Three decades after independence, in 1978, the Government of India issued a directive banning the misuse of amniocentesis in Government hospitals/laboratories. This was aimed to prevent the rampant misappropriation of diagnostic technologies for sex determination. The efforts of activists in Maharashtra led to it becoming the first state that enacted a law against sex determination for non-medical purposes – the Maharashtra Regulation of Pre-Natal Diagnostic Techniques Act, 1988. In 1994 Parliament enacted the Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act. Following a Public Interest Litigation (PIL), the Supreme Court of India passed an interim judgment in 2001 requiring stricter enforcement of the law. The Act was amended in 2003 with a view towards making it more effective and comprehensive and renaming it the Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of sex selection) Act, 1994 (PCPNDT Act)⁶.

In 2009, UNFPA partnered with the National Human Rights Commission (NHRC) to study the effectiveness of Act implementation. It revealed that very few cases were filed, the penalties imposed were not commensurate with the nature of offense, and that conviction rates were low.

This underscored the importance of strengthening the work that had already started, viz. deepening the understanding of the relevance of the PCPNDT Act amongst the judiciary and legal professionals including lawyers, advocates, public prosecutors and law students. Working through judicial academies and legal authorities, UNFPA facilitated a process by which the legal community could unpeel the complexities surrounding the subject of gender-biased sex selection. The objectives of engaging with the members of the judiciary were to deepen their understanding of the issue and its social implications, to have priority given to registered cases and re-examine leniencies.

UNFPA worked with various states to strengthen the capacity of the judiciary to address this subject. In instances where cases were already pending in courts, the intervention proved to be well timed. A state level judicial colloquium on the PCPNDT Act was held in Gujarat in 2007 and with UNFPA support, the Himachal Pradesh Judicial Academy held workshops with district-level judicial officers and public prosecutors in 2009. The learning from these charted the path for the upcoming workshops and initiatives to orient the judiciary in other states.

6. <http://pndt.gov.in/writereaddata/mainlinkfile/File22.pdf>

The judgment day

UNFPA and the Maharashtra Government's Department of Health collaborated with the Maharashtra State Legal Services Authority (MSLSA) to hold a state level colloquium on the PCPNDT Act in 2007. At that time, Maharashtra had 121 cases registered under the PCPNDT Act, with 94 cases pending in the courts. Amongst the 27 resolved cases, monetary penalties of as low as Rs 1,000 had been imposed. The participants of the colloquium drew attention to the fact that the process of sensitisation needs to percolate to judicial officers and prosecutors practicing at the district level. In line with this recommendation, UNFPA collaborated with the State Health System Resource Centre and the MSLSA to host judicial colloquia in all 33 districts of the state.

Raising awareness about the Act and orienting the judiciary about the issue of gender-biased sex selection and its social consequences, resulted in convictions leading to both incarceration and monetary penalties for violations within the state. Three violations of the Act - advertising sex selective services, improper maintenance of records and revelation of the sex of a foetus to a decoy client led to three path breaking convictions that set judicial precedents. This prompted the High Court to pass orders for speedy redressal of pending cases, refuse bail to the doctors who had already broken the law, and to reopen an old case clarifying that the implementing authorities could search the premises as well as seize and seal ultrasonography machines used for the purpose of sex selection. The Maharashtra Medical Council, in its first such action, suspended the licenses of five medical practitioners after they were found guilty of sex selection. As a step towards institutionalising these efforts, the PCPNDT Act and the issues surrounding gender-biased sex selection were integrated into the Induction and Refresher Programmes of the State Judicial Academy. In fact, the National Commission for Women has requested the Maharashtra Judicial Academy to organise a series of training programmes for judicial officers (newly recruited and already in service) on laws pertaining to gender.

The participants of the district colloquia and various training programmes expressed the need for a compilation of judgments under the PCPNDT Act. UNFPA and the Maharashtra Judicial Academy took up the task. In December 2011, the Chief Justice of Maharashtra High Court released a compendium of various path-breaking judgments on the PCPNDT Act entitled 'Compilation and Analysis of Case-laws (PCPNDT)'.



The publication provides an analysis of significant cases and presents the latest position in the interpretation of the provisions of the Act. It serves as a ready reference for judges, public prosecutors, legal practitioners and other stakeholders. This effort has been appreciated by many including the Principal Registrar, High Court of Madhya Pradesh. Similar orientation initiatives were undertaken in other states. In 2010, the Orissa State Legal Services Authority, held a state level colloquium on the PCPNDT Act for members of the judiciary. As a result of ongoing efforts in the state, cases are leading to convictions.

The training of lawyers emerged as an important component of UNFPA's work in Rajasthan. UNFPA collaborated with the National Law University (NLU), Jodhpur for conducting orientation programmes within the institute and at various other law colleges at regular intervals through the year. Twenty three young practicing lawyers from various districts in the state, were enrolled for a one and half year long programme under the aegis of the National Law University. The curriculum bolstered their understanding of gender related legislation including the PCPNDT Act. The expertise of these trained lawyers was availed to conduct decoy operations and file queries under the Right to Information Act, 2005⁷. Such checks helped increase the accountability of the authorities. The members of Bar Council and Bar Associations of districts that reported a rapid dip in sex ratios were oriented on their role in arresting the declining figures. The Supreme Court and the High Court judgment pertaining to the PCPNDT Act were meticulously documented and these were disseminated among senior officials and members of the judiciary, for ready reference in the event of future cases.

In Madhya Pradesh, the National Law Institute University (NLIU) trained 50 dynamic lawyers from 50 districts on the nuances of the PCPNDT Act. They, in turn, supported the district AAs for the filing of cases. In 2010, NLIU and UNFPA jointly organised workshops for the judicial magistrates and public prosecutors which helped to deepen the understanding of issues related to gender biased sex selection. A public prosecutor from Bhopal, who was also a participant at one of the workshops, decided to look into a case that had been pending since 2003. This led to the first ever judgment in the state where a judicial magistrate prosecuted a doctor for contravening the provisions of the Act. Subsequently the State Medical Council suspended the registration of the medical practitioner for a period of five years.

With the judiciary stepping up its efforts, the legal landscape around the PCPNDT Act is undergoing a transformation. More numbers of cases are being processed, and perpetrators are increasingly being brought to book. This strengthens one facet of the overall strategy that of limiting the misuse of medical technology.

7. Right to Information Act 2005 mandates timely response to citizen requests for government information.

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TOGETHER WE CAN ROLE OF CIVIL SOCIETY

Civil society organisations hold a strategic position in society. Perched on the threshold of volunteerism and activism they have the capacity to influence change. A robust and participative civil society influences policies, monitors execution and is an active participant in good governance. While they play a critical role in addressing the issue of sex selection, their impact can only be enhanced through synergies. UNFPA sought to partner with civil society towards this end. In 2001 a national partnership group meeting on sex selection was convened by the MOHFW. This group comprised members from academia, media and civil society. In its nascent stages the objective was to capture voices from the ground to inform the process of amendment of the Act. After 2003, the Population Foundation of India and Plan International took up the role of convening the committee.

In the process of ICPD+5⁸ reviews, UNFPA was advised by civil society partners to play a more active role in tackling gender-biased sex selection. The contours of an existing partnership between Population Foundation of India and UNFPA were adjusted to enable several leading NGOs to intensify their work on the issue. Sutra in Himachal Pradesh, CEHAT in Maharashtra, the Voluntary Health Association of Punjab in Punjab, the Family Planning Association of India in Haryana, CHETNA in Gujarat and Prayas in Rajasthan reached out to others in their respective networks to drive ground level action.

Various initiatives were supported so that work could be carried out at the grassroots level. In 2005, with the assistance of UNFPA, Action India in New Delhi brought together a network of organisations and individuals to launch the forum, 'Citizens Against Pre-Birth Elimination of Daughters' (CAPED).

To galvanise action on the ground in states such as Madhya Pradesh, where 10 districts reported a child sex ratio less than that of the state average (i.e. 932 in 2001), UNFPA assisted the Madhya Pradesh Voluntary Health Association to orient its network, comprising 110 NGOs, on the issue. Persistent advocacy efforts convinced the AAs at the district level to re-organise the District Advisory Committees. As a result, in at least 20 districts of the state, trained NGO members were inducted as members in these Committees, thereby translating intent into action.

8. The International Conference on Population and Development (ICPD) was held in 1994 in Cairo. Five years on from this event, at ICPD+5 over 170 government delegations and about 200 non-governmental organisations met again to review the progress made.

Role of civil society

2 + 2 = 5

The NGOs also checked the working of clinics using the monitoring tools developed by UNFPA and undertook a census of ultrasonography machines to record their location, type and purchase details so as to track misuse. Similarly, in Orissa, a series of capacity-building processes were initiated for various stakeholders. In Maharashtra, UNFPA supported the training of 127 NGOs appointed under the National Rural Health Mission (NRHM) for the effective implementation of the PCPNDT Act. Partners associated with the MOHFW's NGO Scheme were also oriented on the issue in Delhi. A few state NGO coordinators ensured that the orientation percolated to the state level NGOs as well.

In 2008, in an attempt to reach out to a larger number of grassroots NGOs, UNFPA partnered with WomenPowerConnect (WPC), one of the largest network of NGOs and advocacy organisations in the country. With a membership base of 1,400 in 28 states, WPC comprises women's groups and individuals committed to gender justice. Following bottom-up consultations with their members across the country, WPC identified sex selection as one of its priority areas of work. Under the UNFPA-supported project, WPC identified 31 NGOs in 11 states in low child sex ratios to reach out to and orient *Anganwadi* workers, Auxiliary Nurse Midwives, teachers, self-help groups and *Panchayats* on the issue of gender-biased sex selection.

The NGOs reached over 5 lakh households in far-flung areas, and forged links with over 400 *Gram Panchayats* in 69 blocks of 51 districts. Resource groups comprising agents of change were constituted within the communities. As a result of this initiative, many members of the WPC network joined the District Advisory Committees to support the work undertaken by the government. Two NGOs also teamed up with the State Supervisory Boards (SSBs) for effective implementation of the Act.

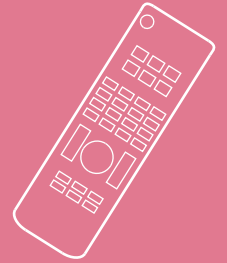
TOGETHER WE CAN

The grassroots efforts both challenged and leveraged the predominant cultural paradigm. Over time, in some villages, cultural practices have evolved to become more inclusive. The birth of a baby is an occasion to celebrate. Earlier, in many communities celebrations were reserved for the birth of a son. Deliberate engagements with communities helped bring about some changes. In select villages of Rajasthan, gifts that were traditionally distributed on the birth of a boy were given out to celebrate the birth of a girl.

While the project affirmed the intricacies surrounding the issue of gender-biased sex selection, it also provided pointers for future action. A wide range of stakeholders was addressed, with the objective that everyone who could potentially influence decision making within the family/community should do so in favour of girls. An umbrella approach was adopted to facilitate the orientation and capacity development of community groups, as well as galvanise community gatekeepers and health service providers. Ground-level implementation clearly revealed the need to revisit community attitudes, behaviour and practices. It was evident that clarity was required regarding access to safe and legal abortion, and legislative provisions that prohibit sex selection.

Similarly, rights based messages were required against the discrimination of girls and in favour of women's reproductive rights. Discussions were held with project partners to underscore the need for balanced and sensitive communication and at the same time identify entry points for dialogue at the community level that did not perpetuate stereotypes or misconceptions about access to safe and legal abortion. The project offered many lessons on the challenges of communication and identified opportunities to bring about behaviour change at the community level. It also helped experiment with community processes and provided evidence of ownership of the issue of gender-biased sex selection by various community groups.

To enable NGOs' access to government funds for working on sex selection, inputs were provided to MOHFW during their guidelines development process, which are now available for download at the MOHFW website. Over time, UNFPA contributed to building the capacities of organisations that were new to the issue and strengthened the network and advocacy efforts of NGOs that were already working on the subject. Civil society organisations were able to leverage the funds and work of other state actors, as well as build networks to continue work on the issue.



IN DAILY LIFE

POPULAR CULTURE & INFLUENCES

Popular culture is dynamic and mirrors society. It is symptomatic of larger social realities. While opinions may vary on the extent of impact of popular culture, it casts an influence that cannot be negated. In the initial years of the work, UNFPA reached out to iconic figures, as working with celebrities was a way of reaching out to their communities. In 2005, UNFPA got in touch with His Holiness Sri Sri Ravi Shankar, a humanitarian leader, spiritual teacher and founder of The Art of Living (AOL) Foundation. He was invited to join the drive against sex selection. As a result, a conclave of religious leaders, 'Faith for Action Against Gender-biased Sex Selection', was jointly organised in Delhi, where 70 leaders of faith-based organisations (Brahma Kumaris, Christianity, Hinduism, Islam, Jainism, and Sikhism) expressed their solidarity on the issue. In 2005, a 'Pledge by Inter-faith Religious Leaders' was signed with a solemn promise:

"As community of religious leaders, we recognise the declining births of girls as a matter of grave concern. This decline, threatens our very existence, and impairs the social, economic and moral foundation of our society. We believe that actions, rooted in discrimination must not determine the destiny of the daughters of India. We unanimously condemn misinterpretation of religion to deny daughters their equal rights. We appeal to the collective conscience of all people to desist from pre-natal sex selection. We appeal especially to medical professionals to stop this practice. We implore our devoted followers to restore the value of daughters and transform the mindsets that view them as a burden. As women and men committed to equality, we pledge ourselves to the cause of missing daughters, and offer them the love and care that is their due."

In addition to this, AOL used multiple routes to spread the message amongst its followers. The Chinmaya Mission also incorporated this issue into its youth programmes and family quiz initiatives, the aim being to promote values of equality and non-discrimination within the family. The religious festival *Ganesh Chaturthi*, marks the birthday of Lord Ganesha - one of the popular deities of Hindu religion. Cultural events coinciding with the celebration offered an opportunity to reach out to many people. UNFPA supported Population First in sensitising and convincing members of *Ganesh Mandals* (groups) to use *Ganesh pandals*⁹ as a platform for advocacy on the missing girls. Captivating audio visual presentations were screened and exhibitions were hosted on the issue. Elocutions and painting competitions were also held for young adults. The messages against gender-biased sex selection permeated amongst thousands of devotees across different age groups who visited these *pandals*. Young people were also inspired to support the cause through creative processes of puppetry and street theatre. Enthusiastic youth groups performed at these *pandals* to raise awareness on the issue. Pamphlets, pocket calendars with messages and *aarti* and *maahiti* booklets¹⁰ were distributed to the audience.

9. *Ganesh pandals* are aesthetically designed canopied tents that are constructed to house the *Ganesh* idols. These huge *pandals* are found along the roads during the festival of *Ganesh Chaturthi*.

10. Information on the issue was integrated into the devotional song booklet.

In daily life

Elected representatives occupy a common space that influences many. Those running public offices are often known figures who can be positive role models for their peers as well as the general populous. Until recently, gender-biased sex selection was more an urban phenomenon and even today the sex ratio continues to be more adverse in cities and urban towns. Therefore, it was decided that in order to address the issue in the urban areas of Maharashtra, the capacities of elected representatives must be strengthened. The idea was to encourage municipal corporators to pledge their allegiance to address this matter in the areas within their jurisdiction. Towards this end, the Regional Centre for Urban and Environment Studies, All India Institute of Local Self-Government, Mumbai (RCUES, AILSG) with technical and financial support from UNFPA, conducted a series of integrated orientation programmes for municipal elected representatives and municipal officers across the state. These initiatives were aimed at raising awareness, winning their commitment, catalysing community level action and strengthening the implementation of the law in these areas.

Leveraging the strengths of participatory theatre, UNFPA collaborated with Media Matters, an NGO, to support a 30-minute interactive play on gender-biased sex selection. UNFPA also invited Bhartiya Mahila Federation, a partner NGO, to put up a street play on the same theme. Developed in collaboration with the Experimental Theatre Foundation, this skit called upon stakeholders to take a stand on the issue. It was staged in Hindi and had more than 250 shows to its credit across Maharashtra. The contour of popular culture shapes perspectives in both explicit and implicit ways. Popular music has an instant connect with the youth. In 2008, the seven notes spun their magic when Rabbi Shergill's musical evocation *Ballo* (a common form of endearment for a young girl in the Punjabi language) and Suneeta Rao's *Sun Zara* (Just listen) addressed the spectrum from denial to possibility. Both songs were included by the artists in their subsequent albums *Avengi Ja Nahi* and *Waqt* respectively.

In 2007, UNFPA reached out to the Public Service Broadcasting Trust (PSBT) to commission films on the issue. The MacArthur Foundation provided PSBT with additional funding for this. The Lucile Packard Foundation, the MacArthur Foundation and UNFPA jointly supported the British Broadcasting Corporation (BBC), to undertake audience-based research on the use of mass media to address gender-biased sex selection. This analysis laid the foundation for an FM radio drama, 'Life Gulmohar Style' by the BBC World Service Trust. Broadcast from 16 FM radio stations across the country, the Hindi radio drama poignantly addressed the issue of gender-biased sex selection, contextualising it in the larger debate of gender inequality. The radio drama chronicled the lives of five friends and through them, explored issues such as violence against women, sexual and reproductive health, and women's roles and responsibilities in a changing India. 'Life Gulmohar Style' had a positive impact on its listeners across various themes. Men, as well as women, found the programme relevant and appealing, but research revealed that it had a greater impact on women.

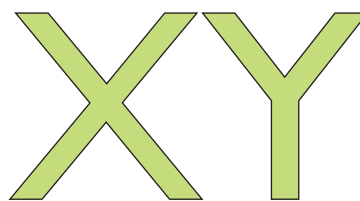
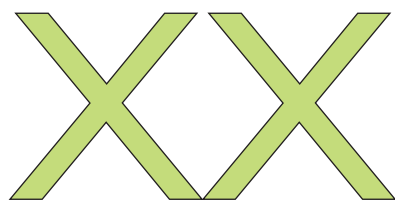
In daily life

The film industry saw UNFPA's goodwill ambassadors Shabana Azmi and Lara Dutta speak on the subject. A workshop for radio jockeys offered cues on ways to weave the issue into their popular airtime shows. Marie Claire and Outlook magazines inserted UNFPA's calendars with messages against the malpractice. The Indian Television Academy, in its annual Great Women Awards function in 2006, reflected on the social malpractice of gender-biased sex selection. In an effort to build public discourse on the issue of sex selection, UNFPA collaborated with the Centre for Media Studies to encourage Art for Social Change. A national painting competition with the central theme 'Delighting in Daughters' was organised for reputed fine arts colleges in India. Winners were felicitated and the entries were exhibited for a month at the India Habitat Centre, New Delhi. All 474 paintings received from students across 56 fine art colleges were published in an art catalogue. The paintings were given as special advocacy tokens to eminent personalities and organisations.

Der Na ho Jaye (fiction) a short documentary against gender-biased sex selection, supported by UNFPA and developed for the State Government of Maharashtra, was released in 2006. The storyline poignantly captured everyday events that ironically culminated with a little boy appreciating the value of girls unlike the adults around him. UNFPA supported the dissemination of 'Gender Bender', a documentary film portraying women across age groups bending occupational stereotypes. It was translated and screened at various colleges and fairs.

In an incisive documentary, 'No Country for Young Girls', film-maker, Nupur Basu, introduced Vaijanti, a woman forced to leave her husband's home for having given birth to daughters. The protagonist travelled across India, to understand the plight of women in varying circumstances and cities. The film oscillates between despair and hope, limitations and possibilities. Of all the people she met during her journey, Jasbir Kaur of Rajasthan stood out. Braving opposition from her family and tiding against all odds, including desertion, she, gave birth to triplets (three girls) whom she treasures as her biggest assets. Jasbir's life was an inspiring example not just for Vaijanti but for all who travel through the film with her. In fact, Jasbir Kaur was invited by UNFPA to share her experiences at the release of the State of World Population Report 2008, in New Delhi. Initiatives on gender-biased sex selection enabled the issue to become a part of everyday conversations and permeate daily life.





STEPPING BACK AND MOVING FORWARD REFLECTIONS AND REVELATIONS OF UNFPA INDIA

It seems like just yesterday that the booklet, 'Missing - Mapping the 2001 child sex ratio in India' was released. The Census 2011 jolts us into remembering that it is indeed almost a decade since UNFPA began its journey to address the issue of gender-biased sex selection. This document captures the many facets of UNFPA's work and while reflecting upon them, an attempt has been made to decode what went behind these efforts, what were the lessons learnt, and how have these altered the course of our work and the texture of our partnerships.

There were no pathways or precedents to follow while drawing up the strategies to work on gender-biased sex selection. Therefore, the initiatives were also about making a start and using opportunities that unfolded along the way. In the early days, the issue required visibility, voice and public discourse, and it became important to reach large numbers. High volume advocacy through celebrities, young people, faith-based organisations and the media was pursued. Over time coverage of the issue in the media increased, public opinion was galvanised through events and young minds were sparked into debate or discussion with their families and in neighbourhoods.

This phase also provided many insights - the issue had to be owned by people and communities; the energy and the treatment they bring to it is theirs and cannot be modulated by the concerns of any agency. The content of communication, the terminology, and even the collective discourse take on a life of their own and can rarely be controlled. Yet there is no other way to build work on the issue and get guidance for the future except for multiple actors to drive the change the way they see appropriate. The knowledge and insights that are available to people working on the issue, including UNFPA, would not have been possible without the trying and testing, the exploring and experimentation of diverse stakeholders guided by their own viewpoints, sensibilities and understanding of the issue of gender-biased sex selection.

Stepping back and looking forward

While benefitting from the work undertaken by others, UNFPA did focus on capacity-building in different areas - implementation of the law, communication, and community mobilisation. In the process, the agency was able to address a critical gap by developing and disseminating high quality resource material that helped facilitate awareness and advocacy on the issue. To further enrich collective learning on changing son-preferring attitudes and mindsets, grassroots interventions with communities were supported across the states with an adverse child sex ratio. There have been small successes: stories of communities and *Panchayats* committing to bring about a change in gender discriminatory norms. There have also been examples of women breaking stereotypes and becoming the support system for other women in the village. However, many questions remain unanswered: what models are replicable, how best can scaling up be done, how can change be attributed to specific factors or triggers? Indeed much more needs to be known about communities and communication and the manner in which they could influence thought process and decision-making.

The implementation of the PCPNDT Act has been one concrete strategy around which there have been many strong partnerships. UNFPA too, has supported capacity-building of the bodies implementing the Act and demystifying the Act to make its implementation more effective. However, it was found that when it came to the Act serving as a deterrent for this malpractice, the reality was that there were few cases and even fewer convictions. This prompted the focus to be shifted to the judiciary, sensitising them not only on the elements of the PCPNDT Act, but its social dimension and the gender construct within which the issue of sex-selection operates.

This strategy has yielded positive results. The involvement of the judiciary has brought the spotlight on the delay in the disposal of cases, as well as the weak preparation of cases. This has prompted the state to take initiatives to invest in the capacities of public prosecutors and AAs so that the various Sections of the Act are systematically applied to track violations. Engagement with the judiciary has shown the potential to create a spiral of change, motivating action from different quarters: government, media, civil society and the medical community. Going forward, a priority would be to work with judicial academies of different states to mainstream an understanding of gender laws and the PCPNDT Act into their curriculum. Turning to the experience with another major stakeholder, it can be said that the work with the medical community can never be considered to be complete. In a way, doctors are part of the problem as well as the solution.

UNFPA's work with this stakeholder group began early and it can be seen as an intervention that ebbed and flowed. Sensitisation through the IMA was necessary to engage with doctors as allies and not as adversaries. Along the way, the IMA itself made efforts to back its commitment to the issue with action - an organisation-wide resolution to work on the issue, formation of district level fora called 'Doctors Against Sex Selection' and inspiring champions of change within its members. UNFPA saw its role as that of a facilitator, and therefore when the IMA identified ambassadors to take the work forward in different states, UNFPA enabled a shift beyond the project mode. Today, the medical community is both engaged and alert. Several medical councils are more inclined than ever before to take action against offenders.

There is perhaps a natural boundary to the extent of work that can be done with any one stakeholder group, and it is wise to identify the point at which ownership can truly shift. In the case of the medical community, given their complex connect with the issue, such a boundary is hard to draw. Future interventions must keep in mind the need for continued work with doctors as they are a group that can enable son preference to be converted to gender-biased sex selection.

Overall, the UNFPA response to preventing gender-biased sex selection has evolved, shaped by gathering insights and learning from the efforts of co-travelers. The response has moved from high volume advocacy to one that has grappled with the complexities of defining the problem, its terminology as well as imagery. It has meant responding to the immediate concerns while keeping an eye on the long-term goal. Action on strengthening the implementation of the Act is visible, but there is no clarity as yet on where the tipping point lies for attitudes and actions to challenge the existing gender norms. Diverse interventions and the manner in which they have impacted the problem, have now made it possible to see the missing pieces of the jigsaw. Research is needed to provide answers about where the levers of change lie. Similarly, research is needed to guide policy processes to enhance the status of women and girls, for example, through laws, empowerment measures, or incentive schemes. For gender equations to be balanced, we need to know the triggers and creative methods of communication that can impact perceptions and beliefs about daughters, their value and their rights. UNFPA views the work of the last decade as exploring by doing. Its foundation was to connect with a range of stakeholders, so that collective learning could take place.

