



**WOMEN CENTRIC SELF HELP GROUPS AND SOCIO-ECONOMIC
DEVELOPMENT WITH SPECIAL REFERENCE TO THE STATE OF KERALA**

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Abstract

Self Help Groups are often seen in the light of women empowerment but seldom are seen from the perspective of judging the kind of impact that it creates on the social fabric. This paper does its humble attempt to explore the latter aspect. Women at the grassroot levels when enter the entrepreneurial setups, it not only makes them economically independent but reflects exceptionally well in the children health, nutrition, literacy, gross enrollment ratios in the region, child marriage, child labour, hate crimes, backward conflicts, minority empowerment and an explicable impact is seen especially on rural upliftment.

Keywords: Self help groups, women, women empowerment, Kerala model, Kudumbashree, Nutrition, social capital.

Self help groups, as the name suggests are groups of people who come together probably in an economic relation to primarily help the people who are members of such groups. Most of the time, these groups consist of around 10-20 people who belong to a similar kind of economic background. Though the journey of SHGs in India began with the induction of the Self Employed Women's Association (SEWA) in 1970, the real push to microcredit in the rural economy came a little later. Inspired by Bangladesh's Prof. Mohammad Yunus, his idea of Grameen Bank and how successful was Grameen Bank in the repayment of its debts, India came up with its SHG-Bank Linkage project under NABARD in 1992. And the very next year in 1993, the Reserve Bank of India in its bid to promote these associations allowed them to open saving accounts with the banks.

Starting from 1 SHG in 1970 to 3,625,941 in 2008 to more than 7 millions in 2021, SHGs in India have grown at a galloping speed. Though most of these SHGs consist of less than 20 members, in very rare instances it has been seen that the members involved are more than 20. While only 486



such SHGs exist in India, except for 2, all of these are in the state of Kerala. This makes one wonder if it has anything to do with the success of the Kerala model.

Most of the studies in the context of SHGs are focused on women's economic empowerment but SHGs play a role much beyond her economic independence. It is to say that when a woman is empowered, it does not only give her the knowledge to make better decisions but also the power to make decisions in a hitherto patriarchal setup and when a woman makes a decision, she makes better decisions for the family as a *kuladevi* and better decisions for children as a mother.

To rephrase Brigham Young's famous quote i.e, "you educate a man; you educate a man. You educate a woman; you educate a generation" to You empower a man; you empower a man. You empower a woman; you empower a generation.

SHGs have been particularly successful in Kerala under the KUDUMBASHREE programme that was started by the Kerala government. It was inducted with the major aim of eliminating poverty and empowering women after poverty had reached as high as 54% in the state. Kudumbashree, meaning "family prosperity" and so rightly was it named. Be it a garbage disposal mechanism or a papad enterprise, be it an IT collaboration or a pickle making endeavour, be it solid waste management or health awareness, Kudumbashree has done phenomenal work in the last 25 years bringing prosperity to homes of more than 4 million people in the state. It has taken the concept of Self Help Groups to Neighbourhood Groups i.e. from SHG to NHG.

Most of these SHGs are women centric especially rural women with 87% of these being based in rural areas. Not just that, 25.7% of these groups under Kudumbashree consist of members from SC/ST or minority communities making it an inclusive development project.

The impact of such grassroot and bottom up development in Kerala is well enunciated in the Kerala Model that the state has created for itself. This model not just reflects well on the GSDP i.e. economic variable but also social variables especially in rural landscape from child literacy to child nutrition and health, from women's economic power to women's social capital, from the numbers that NCRB shows of the state in relation to communal violence to caste conflict in the state, from immunization in the state to the enrollment of youth in higher education in the state.

Where the per capita income of Kerala was 12,718(Kerala Economic Review 2000) in 1996-97 before the arrival of Kudumbashree on the landscape of Kerala, it rose to 19,951 in 2000-01 i.e



approximately Rs. 7000 hike just after 3 years of its inception. Now that Kudumbashree is about to consolidate 25 years of its being, the per capita income of the state has risen to 1,62,610 in 2019-20(Kerala Economic Review 2021).

Kerala's literacy model is a structure that has gained much recognition in the country in the last decade. Kerala's literacy is highest out of all the states in the country i.e at 96.2% as opposed to just 77.7% average of the country. Unlike the rest of the country, where majority of this number comes from urban literacy, such is not the case for Kerala where 95.4% of population in rural areas is literate. According to NFHS-4 data, a total of 97.9% of women literate exist in the state as opposed to 68.4% for the rest of the country. There is not even one state beyond Kerala where the rural literacy crosses the 90% mark. Not just that, 97.3% of rural women are literate in the state where only 61.5% on the average are literate in rural India.

Napoleon rightly said, "Give me an educated mother, I shall promise you the birth of a civilized, educated nation."

The NFHS-4 indicators show how well Kerala has done not just on the mark of mother health but also child health in the rural aspect. Where the total replacement rate lies at 2.4 for Rural India, the rate for rural Kerala lies at 1.6.

While Infant Mortality Rate and under 5 mortality rate of rural India stands at 46 and 56 respectively, that of Rural Kerala stands at impressive numbers of 5 and 6 which are even less than the urban dynamic of the state. 82% of the rural children aged 12-23 months in Kerala are fully immunized under Universal Immunization Programme of Government of India whereas this number stands at 61.3% for the rest of rural India.

A healthy mother always makes healthy choices for her children not just in postnatal stages but also in prenatal and perinatal stages. Maximizing Institutional delivery has been an aim for the government of India for many decades that have passed. From schemes such as Janani Suraksha Yojana to Matru Vandana Yojana, RMNCH+ health has always been a priority in all sectors of government. No doubt the country has done amazing in the field to bring institutional deliveries in rural India to 75.1% but Kerala is the only state that has been able to reach a stage where 99.9% of the deliveries even in rural and remote areas happen through formal institutions.



Talking about prenatal well being, the percentage of women going for at least 4 antenatal checkups is 91.7% in rural Kerala as opposed to a dismal number of 44.8% on an average for rural India.

An economically independent woman is a socially empowered citizen of the society. 7.5% of the women aged 20-24 years in rural areas of Kerala were married before the age of 18. Though this does not show a very pretty picture where child marriage still exists in the society, but this number is 31.5% for rest of the rural India showing a positive impact of women independence on women's power of decision making. Building on that, 92.4% of married rural women participate in household decisions in Kerala, a variable that lags most of the time. This is well enunciated by John Hoddinott's study of Indonesia and Philippines.

New Education Policy, 2020 aims to take the Gross Enrollment Ratio(GER) to 50% for higher education by 2035. According to Reserve Bank of India data, India has crossed this mark reaching 51.4% for the country making a remarkable progress from 30% in 2016-17. Kerala, on the same hand, making an even larger progress according to the same data has now reached 83% GER in higher education with 87.1% enrollment of women.

NCRB Report, 2020 accounts for 353.68 lakh population in Kerala. While dowry deaths recorded in the country for the year were 10,346, those in Kerala were down to 3. The crime rate for rape under IPC Section 376 is 3.5 for Kerala as compared to 4.2 for the country.

Higher prosperity of the country not just reflects in the health and educational data but also the social fabric of the state. Zero cases of communal violence and caste conflict were reported in the state while in the country these were 336 and 736 respectively. Offenses relating to religion were also down to 3 out of 1687 in the entire country. Even the cases of bonded labour, against SC/ST were also zero.

Child and women literacy always reflects well in child nutrition and same was the outcome seen in the case of Kerala as enunciated by the data above. Moreover, it also reflects well on how well a child is able to live and sustain its childhood. This attests well in the Child labour data recorded by NCRB, 2020 for the state where no such instance was recorded for the year.

Now with the inception of AmritaSHREE SHGs in the aftermath of 2004 tsunamis, such structures just keep on adding. One cannot help but wonder if the economy of scale that such structures use in the state is the way future Self Help Groups need to be structured.



This is not to say that SHGs alone are the means of success of the Kerala model but they have in the last 25 years been the mobiliser of the economy in the state and Pierre Bourdieu's economic, social and symbolic capital that rests with the women of the state.

This capital that is positioned with the women no doubt empower women in all aspects of their own life but this power reflects in the social fabric of the state as positioned in low hate crime instances of the state seen in the NCRB data.

Maximum of these women coming from rural backgrounds has remarkably differentiated the rural development at the basic level of Kerala with the rest of the country. This manifests explicitly in the rural data from the state both from NFHS-3 as well as NFHS-4 data. The country needs a model of investment whereby it invests in women i.e the resource of the demographic that invests in everything and everyone else.

The above research implies that the impact of SHGs is not just limited to empowering women economically, rather has far reaching impact in terms of their active participation in decision making in all aspects of not just their own lives but also on health, nutrition, education and value inculcation of their children. However, the geographical concentration of SHGs with the number of members higher than 20 which have scaled the economy and its social environment is an eye opener and a lesson to not just be learnt but implemented countrywide.

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