WOMAN BY WOMAN New Hope for the Villages of India (2001)

Time Code	Speaker	Dialog
00:43	NARRATOR	In many parts of India, poverty has been a way of life for generations.
00:50	NARRATOR	In recent years, there's been a shift from resignation to hope.
00:58	NARRATOR	At the heart of this change are women who are stepping forward to help shape the future.
01:15	TITLE	WOMAN BY WOMAN [01:18]NEW HOPE FOR THE VILLAGES OF INDIA
01:23	NARRATOR	One sixth of the world's population, more than a billion people, live in India.
01:31	NARRATOR	Within 40 years that number could double.
01:38	NARRATOR	Population growth and poverty are particularly acute in certain areas.
01:45	NARRATOR	Social programs and education address these conditions with some succe in urban area and in many Southern States.
01:52	NARRATOR	But in other regions, such as the rural areas in the North, numbers continue to rise, and extreme poverty persists.
01:58	NARRATOR	Those who suffer most are women and girls.
02:07	NARRATOR	Gender discrimination, in its extreme, has tragic consequences.

RRATOR RRATOR RRATOR RRATOR	Despite the law this practice continues. Female infanticide is carried out quietly by impoverished families desperately seeking sons. Brides perish in suspicious kitchen fires because the money or land the brought to the marriage was not enough. Violent acts do provide evidence of anti-female bias, but the most widespread source of suffering for women is still deprivation. Especially in the villages, females get less food and less healthcare that males.
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	Many organizations both international and community based with the support of the Indian Government, are helping India build a healthy full
	Programs range from improved farming techniques to loans for small businesses.
RRATOR	Some of these groups focus specifically on the needs of women.
	We'll look at the impact of one of these organizations, Janani, launched the state of Bihar in 1996.

03:37	NARRATOR	With funding from both international foundations and the Indian government, Janani provides family planning services.
03:47	NARRATOR	Their outreach includes training rural couples to offer contraceptives and counseling.
03:55	NARRATOR	Their butterfly logo is a symbol of positive change.
04:02	NARRATOR	We'll meet three village women who've been trained by Janani to becom Rural Medical Practitioners. [04:10]Sarita, Rekha and Damyanti
04:16	NARRATOR	All of these women were raised traditionally, and had lived in the seclusion of their homes.
04:23	NARRATOR	By becoming counselors, they are breaking new ground. [04:28] Each in her own way, they serve as role models for other women.
04:37	NARRATOR	Sarita and her husband Pawan grew up in a world where women are expected to serve men.
04:45	NARRATOR	They challenge that convention by working together as peers, at home are in their clinic.
04:55	NARRATOR	Damyanti wants her daughter, Kiran, to get a good education.
05:00	NARRATOR	Most village girls marry in their teens. [05:03]Damyanti hopes Kiran will stay in school, and then go to college.

05:16	NARRATOR	Rajkumari does not restrict her daughter-in-law. [05:21] Instead she encourages Rekha to go into the community and spe with their neighbors about family planning.
05:33	NARRATOR	Most village women are hesitant to talk about sexual subjects.
05:39	NARRATOR	The Women Practitioners themselves need to be comfortable with intimate issues before they can counsel others.
05:48	NARRATOR	This orientation begins with Janani staff members.
05:53	NARRATOR	Jaya is the Director of Training.
05:57	JAYA DIRECTOR OF TRAINING FOR JANANI	When I came into Janani When I saw people talking about condoms at oral contraceptive pills I was a bit shy and I used to giggle at –you know? [06:08]And, by and by I realized that uh, it was no longer taboo for me to speak about sex or about all this stuff, like speaking out condoms in Indis like, ""Oh what's she talking about?"" So, today it's not that with me. can con-confidently discuss these topics with any person, be it a female a male. [06:30]I can really go out and talk about it.
06:33	NARRATOR	Jaya trains Women Practioners to build hope in their villages by helping people plan their families.
06:43	NARRATOR	Having the freedom to make choices uplifts women who are born into a seemingly endless cycle of poverty, overwork, and continual childbearing
07:02	NARRATOR	From infancy on, females face a difficult life.

07:15	NARRATOR	Research shows that females have more fractures and severe back pain than males.
07:24	NARRATOR	Girls continue to work at home and on the farm.
07:28	NARRATOR	They get less schooling than boys.
07:33	NARRATOR	In the Northern states only one in four girls can read compared to more than half the boys.
		From infancy on, females face a difficult life.
07:43	NARRATOR	While the poorest village women work outdoors from dawn to dusk to survive, women with some resources, however meager, often enter "Purdah," virtual seclusion.
07:58	NARRATOR	These women are not to leave the house without an escort, and when the do go out, they must cover themselves.
08:10	NARRATOR	Their saris are often their richest possessions.
08:16	NARRATOR	Until recently, little attention has been given to the impact of rural life o women.
08:25	NARRATOR	One study determined that a village woman inhales the equivalent of twenty packs of cigarettes every day.
08:37	NARRATOR	What gender inequality means is that women and girls do not have equa
		access to information and resources.
08:51	NARRATOR	Throughout India, the goal of programs like Janani's, is to improve living conditions for villagers by offering them the tools for family planning.

09:04	NARRATOR	Janani's outreach began by approaching men, Rural Medical Practitioners RMPs, who are not licensed physicians, but are trusted as healthcare workers by villagers. [09:18] These men provide most of the non-hospitalized medical care in Bihar.
09:25	NARRATOR	Soon after they began, Janani realized that village women were not able to speak openly with male practitioners.
09:34	NARRATOR	One of Janani's boldest efforts was to invite village women usually the wives of Rural Medical Practitioners to work as partners with their husbands.
09:45	NARRATOR	Enabling couples to work as equals, is what makes this approach unique.
09:52	NARRATOR	These practitioners begin their work w Janani by attending a training in Patna, the capital city of Bihar.
10:01	JAYA DIRECTOR OF TRAINING FOR JANANI	Most of the women who come along with their husbands for the training it's the first time they're coming out of the kitchen and the household. [10:10] Coming to the city is a very big thing for her. [10:15] She's taking a bold step to step out along with her husband.
10:22	JAYA DIRECTOR OF TRAINING FOR JANANI	On the first day she's keeping quiet and just listening. [10:26] Second day she's started analyzing things and asking questions on that. [10:30] And by the third day most of them have a confidence in them, like "Yes, I can go back and start up something." [10:36] They are still shy, but even then there is a flicker of hope and confidence inside them that has been lightened up here in the training center, like, "Yes, I can do it.""
10:51	NARRATOR	Even though the Medical Practitioners selected to work with Janani live in the villages they serve, they often have more resources than many of the neighbors.

11:03	NARRATOR	They are in a position to help in their community.
11:08	NARRATOR	RMP couples usually own some land and can read, at least a little.
11:15	NARRATOR	Even though their homes generally have no plumbing and no electricity they've managed to establish simple clinics.
11:25	NARRATOR	Janani is setting up similar programs in states beyond Bihar and has not trained more than 10,000 couples.
11:37	NARRATOR	The contribution they make to their villages is needed.
11:41	NARRATOR	But when a man works side by side with his wife, that departure from traditional roles provokes controversy.
11:51	SARITA WOMAN MEDICAL PRACTITIONER	[11:55] My husband and I work together. [11:58] Some people, the relatives and our neighbors, think I'm right in what I am doing, and they think he is correct in supporting me. [12:08] Some in our village don't think that we have equal rights. [12:12] They say, "A woman is a woman." She is something that should pressed under our feet.
12:21	PAWAN RURAL MEDICAL PRACTITIONER	[12:26] I don't know what other women think of Sarita working with m [12:32] But I know that many women in the village give her respect. [12:38] They regard her as someone who can solve their problems.
12:53	SARITA	Whatever they ask me, I answer their questions, like about abortion, to ligation or contraceptive pills.
13:13	NARRATOR	Pawan and Sarita's relationship is modern. But their marriage began w ritual of generations past.

		[13:22] They met each other for the first time on their wedding day.
13:26	PAWAN	[13:30] There is a custom where, before the engagement, family members from both sides visit each other. [13:36] So one of my uncles brought a picture of Sarita with him. I was a little embarrassed at first to look at the picture. [13:44] One of my best friends actually forced me to look. And I liked the picture when I saw it. [13:53] After the ceremony, I saw my wife for the first time. Even during the wedding I could not see her clearly because of the veil. [14:04] She was fine; no problem.
14:10	SARITA	[14:11]When I met my husband on our wedding day
		[14:14] Because I was young, I didn't know the rules about behaving in my husband's house. [14:22] When I saw him for the first time, I was shy but at the same time happy.
14:30	PAWAN	[14:32] As it is often said about a partnership between a husband and wife
		they are incomplete without each other. [14:42] Like a bicycle with two wheels. One may be in front of the other, but without each other they can't function. [14:54] Why should we not share each other's tasks?
15:03	NARRATOR	Just as Pawan supports Sarita, Rehka could not work in the community without the support of someone in her family.
15:14	NARRATOR	One of the reasons progress for women has been slow, is that daughers-in- law are often treated by their in-laws as unpaid laborers.
15:26	NARRATOR	Rheka's mother-in-law, Rajkumari, wants Rekha to have meaningful work in addition to her household duties.
15:38	RAJKUMARI REKHA'S	[15:39] I find myself very different from the Indian mother-in-law. [15:43] Hence, I understand that our daughter-in-law is not even a little bit
	MOTHER-IN- LAW	less than a son. [15:50] As much as possible, we give her a chance to advance.

15:56	REKHA	[15:57] First I used to stay in the village all the time.
	WOMAN	[16:01] Then I went for the training.
	MEDICAL	[16:05] When I came back I went from house to house, and I was happy.
	PRACTITIONER	[16:10] I could be of some use to people.
16:14	RAJKUMARI	[16:15] If every mother-in-law were to be less selfish and help out with t
10.14	KAJKOWAKI	housework, then the daughters-in-law can also serve the community by working outside the home.
		[16:30] For our family, she is the one to advance the light.
16:34	NARRATOR	When working outside the home becomes a real choice, then a woman
		decide if this is what she wants to do.
16:40	REKHA	[16:41] Women should have rights to go out and work just like men.
		[16:47] By going out of the house one learns how everyone else lives. [16:53] Without freedom, women become like trash.
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17:01	NARRATOR	Damyanti & her husband hope their example will be an inspiration for
		their daughter, Kiran.
		[17:09] Kiran, who is now 17, still lives at home.
		[17:14] Most girls her age are already starting their own families.
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17:19	KIRAN	[17:21]I see my parents working. I like the work very much.
	STUDENT	[17:27] When I grow up, after my studies, I would definitely do this world
		[17:33] I have been wanting to be a doctor for a long time.
		[17:36] If you study, you could become a doctor. If you don't study, you
		would have to get married earlier.
17:46	NARRATOR	Kiran sees that the people who come to her parents receive more than
		information about contraceptives.
17:55	NARRATOR	Women Practitioners also address any fears their clients may have.

18:01	DAMAYANTI WOMAN MEDICAL PRACTITIONER	[18:03] They tell us that in the villagers don't want an intrauterine device or anything like that. [18:11] People are afraid of it. [18:15] So then I explain to them with love, "You will be fine and you will have fewer children." [18:24] Some have daughters and are trying for a son. This is how they end up having ten or twelve children. [18:33] I tell them, "You don't even have enough food for them. They don't have clothes." [18:42] Things are changing. Our conversations are changingchanging for the better. [18:54] The atmosphere is changing.
19:03	NARRATOR	If family planning is to succeed in India, a change in attitude for both men and women is essential.
19:11	NARRATOR	Women Practioners learn how to help villagers overcome long-held prejudices.
19:18	JAYA	What if a, uh, female who is not married gets pregnant? Back in the village, if people come to know, they want to literally throw stones on her. Like, ""Why did you get into a sexual relationship?"" But, you have to take her as a human being with normal desires. [19:39] You have to deal like, "Okay it's fine if you have got into a relationship. But now decide what you have to do. Do you want to keep the pregnancy? And if you want to keep the pregnancy you should keep certain things in mind like nutrition, And after that, if you don't want to continue the relationship, learn to say, 'No' to the man, and if you want to continue think about contraception." [20:02] So we tell them, like, "You are not supposed to be judgmental about any person coming to you."
20:10	NARRATOR	As Women Practitioners build trust, and encourage their clients to make choices, they then help the women find the resources they need.
20:23	NARRATOR	This woman, the mother of two, is one of Sarita's clients. [20:29] Sarita and Pawan will accompany her to Janani's clinic in Patna, where the woman plans to get a tubal ligation.

20:47	NARRATOR	When they arrive in Patna, Sarita and Pawan meet with the clinic direct while their client is being consult before she makes the final decision.
21:00	Dr. ARCHANA DAYAL CHIEF MEDICAL OFFICER	When the husband and wife meet the doctor, the doctor gets a chance speak to both of them and to counsel both of them for a contraceptive.
21:11	NARRATOR	After being counseled, this woman chose not to get a tubal ligation, while is a form of sterilization. Instead she selected a removable device, which gives her the option of having another child later. [21:27] For a woman who's made few personal decisions in her life, being able to plan her family is a turning point.
21:38	Dr. ARCHANA DAYAL	During the counseling, when they say that they have to consult their husbands or their in-laws, we tell them do you want a child or not? You decide because you have to look after the child, your in-laws will not. [21:54] Does your body allow, or do you have time? [22:00] And then she takes a few minutes to think and says, ""No, I don want,"" and I say, ""Go in for a contraceptive. [22:06] You are the one who has to take care of yourself first."" [22:09] So we give that thought to her. [22:12] She's the one around whom the whole family revolves, and it do make a difference to the woman when she walks out.
22:23	NARRATOR	When a woman is able to make choices that support her family's and he own health those decisions have a far-reaching impact.
22:35	NARRATOR	In the last five years, Janani has offered alternatives to sterilization to more than half a million women.
22:43	PAWAN	[22:46]What will be the effect of the increasing population in Bihar, in India, or in the world? [22:54] If we don't pay attention to this now, the situation will be so bat [23:01] It will be impossible to fix it.

23:07		As women acquire knowledge and gain confidence, they are influencing the next generation. [23:15] Their progress lays the foundation for young women to become agents of change in their own lives.
23:23	SARITA	[23:25]I have a daughter, and I hope that she gets more education than I did, so she can accomplish more than we have.
23:38	REKHA	[23:41]Which parents don't have hopes and dreams for the betterment of their children? [23:48] I'm hoping my daughter can move ahead and become a doctor.
23:46	RAJKUMARI	[23:47] Out here, the feeling many people have towards education is verbehind, especially in the matter of girls. [24:07] They will educate the boys, but not the girls. [24:12] It is necessary to educate the girls, too. [24:20] Until the girls are educated, they won't be able to move ahead.
24:30	NARRATOR	Education, along with access to family planning, frees women to begin to make the most of their lives.
24:40	NARRATOR	India is building new hope for its future, woman by woman.
24:48	NARRATOR	For a village woman to assert herself and speak out requires tremendous personal courage.
24:56	NARRATOR	She is standing up against centuries of subjugation.
25:01	SARITA	 [25:03] I don't care if people have doubts about my work. [25:07] I don't want to give in to other people's pressure and let them influence me. [25:14] If I listen to other people's opinions and judgments my confidence will be destroyed. [25:21] No matter whether or not other people think what I am doing is beneficial.

		[25:26] They will see the result and feel good.
25:38	JAYA	We started off with the village, females becoming aware about themselves. What is really important to them?
		[25:47] We are trying to bring in a change, we are trying to cultivate a practice and that needs time.
		[25:57] So this can be taken as a first step towards achieving a bigger thing.
		END