

**Poonthaleer**  
Project for rescuing girl babies from being infanticide  
In  
Edapadi Taluk, Salem District – Tamilnadu, India.

**An A NGO intervention's – in addressing Girl's infanticide**

I. Introduction:

India has witnessed steady decline in its population sex ratio, reaching its lowest ever recorded ratio of 927 female per 1000 males in 1991. While 2001 point to a slight improvement in the overall sex ratio, the proportion of boys to girls or sex ratio of 0 – 6 continue to decline, This ratio has fallen from 976 in 1961 to 927 in 2001.

In the Tamilnadu, southern state of India, The 0- 6 sex ratio has fallen from 985 in 1961 to 942 in 2001. Some district of tamilnadu (Salem District) recorded most unequal (0 – 6) sex ratio of the country – below 850 females / 1000 males.

Centuries of old traditional practices of Female infanticide has been practiced in Few district of Tamilnadu (i.e) Salem, madurai, Theni, Dharmapuri, Namakkal, Erode district, could also be taken as reason for sex ratio imbalance in these district compared to overall sex ratio of tamilnadu.

Prior to 1992 -93, the government has denied the Existence of female infanticide in tamilnadu, the sustained media attention and reports on female infanticide. In 1992, the government has taken several initiatives to prevent female infanticide, in addition to this several NGO's have taken initiatives to

fight against this traditional burdens and to bring attitudinal change among the community.

Our pilot study Terre des hommes core in Salem district in early 1998, shows Edapadi Taluk recorded the high prevalence of female infanticide (Female IMR 166% Source from Salem Department of Public health ). The prevalence of Female infanticide is mainly among the Gounders community but it also exist in other communities of this region.

“Poonthaleer” - Project for rescuing / preventing girl babies from being infanticide has been started by Terre des hommes core on **October 12th 1998** to fight against female infanticide practices and to bring attitudinal change among the community in Edapaid Taluk, **Salem District, Tamilnadu.**

Poonthaleer started working in 5 Primary health center of Edapadi Taluk covering 72 villages of edapaid taluk :

1. Chithoor Primary health center.
2. Chettimakurichi Primary health center.
3. Thevoor Primary health center.
4. Arisarimani – Primary health center.
5. vellalapuram – Primary health center.

Poonthaleer has the experience of different infanticide cases. Death is given to the female baby by the parents or the mother in law through different ways: use of poison (poison plant milk), and use of wet towels on the head,

no health care, no food, suffocation, use of paddy or tobacco in the milk, use of sleeping tablets in the milk.

The broad strategies of Poonthaleer– in prevention of female infanticide & to bring attitudinal change in the community are :

I. Prevention of female infanticide & rescuing female babies :

- Identifying High risk Pregnancy mother (Those with more than one daughter or No son) – with the help of Village Health Nurse / Community Nutrition workers / Village volunteers.
- Regular counseling of pregnancy mother and their families – From the 6<sup>th</sup> month of pregnancy.
- Intensive monitoring – against any attempt at female infanticide ( after the girl baby born)

II. Follow up of saved children & support service

- Regular follow up of rescued babies & family counseling provided by poonthaleer.
- Direct economical support to the families with Girl children and family willing to keep the girl babies (i.e) milk support, medical support for the families, Educational support for the girl children, Financial support for family development.

III. If the parents are not willing to keep the babies – direct the babies to CBS ( Cradle baby scheme) or adoption agencies

IV. Threat of police action / Legal action against the practices of female infanticide by poonthaleer.

V. Community Awareness / Sensitization Programme.

- Various training programme to Women's group, Pregnant mothers, Adolescent girls group on various aspects of gender discrimination (i.e) female infanticide, status of women's and girls children, Women rights, etc.
- To take vow by the village elected authorities and village public against female infanticide as infanticide free village

**The activities done by Poonthaleer on the field to fight against female infanticide (I) and impact in Edapadi taluk, Salem District (II).**

**I) Actions done by Poonthaleer on the field to fight against girl babies infanticide – Rescue Team :**

Team consist of 2 women social worker – covers One Primary Health centre – Area / region. Every day social worker team goes around the villages with mopeds. popularly so called as “ Moped Messiahs” – visits hospital, Nursing home -:

First, to collect the Data's of High risk pregnant mother from Government Public health department – VHN (Village Health Nurse), From Community nutrition worker and volunteers.

From the 6<sup>th</sup> month of pregnancy, Social worker meet the Pregnant mothers and their families and try to assess the reason for possibilities of infanticide ( Our experience shows, family perform infanticide due the poor economic condition, Often we come across the infanticide due to community influence, superstitious beliefs and Astrological reasons) ) and give counselling accordingly.

Very intensive follow up and monitoring during the delivery time ( to avoid any attempt of infanticide.

After the deliver, Poonthaleer team try their level best to integrate the baby with their own family. If the reason for avoiding the baby is for economic reason, Poonthaleer commit itself for Support to the family and baby. Poonthaleer provide also house construction for homeless or house renovation to the poor rescued family, if necessary.

In example I will present you three cases of rescue child

Case study : 1

Chockammal – Women activist, fighting against female infanticide for the last 9 years – come from chithoor village, remote village of Edapadi Taluk, Salem district”. Everyday morning 8.00 AM, after sending her 3 daughters to school, Chokkammal starts her mopped and goes around the surrounding villages to meet the high risk pregnant women’s to give counseling about importance of girl child.

“Chockammal says “ From the day I become 3<sup>rd</sup> time pregnant – my mother in law, very strictly informed me that I have to kill the baby if I give birth to a girl baby. Though I always felt guilty of killing my own baby, I had no choice in front of my husband Mani, who still blames me for not brining more and more dowry from my mother family.

On 10<sup>th</sup> Dec 1998, I gave birth to my 3<sup>rd</sup> daughter, I was under tremendous pressure of the family ( husband and mother in law ) to kill my new born 3<sup>rd</sup> daughter Harani. My husband says, I have to leave him, if I don’t allow killing the baby.

I really don’t know, how I decided to keep my baby. I think confidence and counseling – Given by Sharmila and Aruna of poonthaleer – made me to save my 3<sup>rd</sup> daughter Harani. Now I am very happy with my 3 daughters”.

Chockammal was one among the first high risk pregnant mother, counseled by poonthaleer. Chockammal family’s economical situation was very poor. Husband is a barber (hair dresser). After the birth of 3<sup>rd</sup> daughter Harani - With the small support / guidance extend by Poonthaleer – chockammal completed her beautician course, runs a part time beauty parlor in chithoor village and works full time in poonthaleer, as a social worker on the prevention of female infanticide.

### Case study : 2 Muthammal

"I have already three girls my husband and my mother-in-laws were expecting a male child. I delivered a fourth girl baby in my house on 2<sup>nd</sup> April 2001. My family members didn't welcoming the new born girl baby and they forced me to kill the child I have no other way so I feed h " TOBACCO" juice to my new born baby after one hour she was died and buried her behind my house. The same day at 8 .00 pm in the night group of poonthaleer people came to my house we were fight against poonthaleer team saying we have not killed the baby she was sick and died. Finally I accepted that I have killed my daughter by giving tobacco juice. She cried that I am an uneducated lady I fully depend on my husband if I have not killed my child I will be in big trouble. So I have killed my daughter.

In 2003 I was again pregnant, my family expectation are the same for male baby . I got again a female child on 9<sup>th</sup> sep-2003. I had many pressures from my family to kill the child. But I didn't allow any one to touch my daughter. I brought my child to poonthaleer to give adoption, poonthaleer people understood my family position and promised me to support my daughter. I was very happy to keep my daughter, now my daughter is 6 years old. She is very active and good in education. She financial support from poonthaleer.

### Case study: 3 : Gomathi:

I am 3<sup>rd</sup> daughter in my family and I have three younger sisters and two eldest brothers. The last two sisters were saved by poonthaleer. I belong to scheduled cast community, mostly in my community going for higher studies is very rare. I dropped out my studies in 8<sup>th</sup> std due to poverty, after poonthaleer guidance / intervention I completed my 12<sup>th</sup> class in 2007. There was a long pressure from my family side for the marriage, relatives are starts de-motivating my parents not to go for higher education. Poonthaleer sisters counselled my whole family and makes them convinced, now I am doing my under graduate course ( B.Com) 2<sup>nd</sup> year. Where poonthaleer is take care of all my educational expenses. Three of my younger sisters are regularly going to school, supported by poonthaler. I start explaining the community about necessary of girl's education. Still there are many girls have not enrolled in school due to poverty and family problems I advised those girls to approach poonthaleer to get support.

Like Gomathi, Poonthaleer support 308 girl children to go to school.

## II) Impact of Poonthaleer programme in Salem District

Poonthaleer's actions / activities show very positive result in the working Region in reducing female infanticide. To give you data :

**In 10 years of Poonthaleer's existence from 1998 to 2008** – Poonthaleer had Direct intervention with High risk pregnant mother from Oct 1998 to July 2008 in Edapadi region.

Total Number of high risk pregnant mother identified & counseled by poonthaleer : 5564

**Out of this**

No of female babies rescued by poonthaleer : 1169  
( 861 babies integrated with their own biological families & 308 babies directed / referred to CBS or Adoption agencies)

Female infanticide reported (in this period ) : 29

Impact on the sex ratio (Live birth) and mortality rate (Infant death) – Sources from Health department:

You will find below comparative data between the year 1999 and 2006. We see that presence of Poonthaleer's programme in this reason in addition to government intervention's - We can see through eight years difference that the female live birth is not balanced with the male live birth. This is an indication of elimination of female foetuses before birth. This non balanced sex ratio is more seen in 2001 and less in 2006 for Poonthaleer's areas.

We can also see that the female and male mortality rate through infant death (which is an indicator to understand the incidence of female infanticide and neglect of female babies) in 2006 is almost nil or stable for Poonthaleer's areas, in comparison with other areas of salem district.

**Arisarimani -Primary health centre:**

Year	Population	Male birth	Female birth	Total infants birth	Male infant death	Male IMR Percentage	Female infant death	Female IMR percentage	Total death	IMR Percentage
1999	22774	273	252	524	25	91.57%	68	269.84%	93	177%
2000	23040	260	238	498	18	69.23%	54	226.89%	72	145%
2001	25012	236	233	436	12	50.84%	25	107.29%	37	79%
2002	25012	227	209	436	7	30.83%	7	33.49%	14	32%
2003	25012	226	186	412	4	17.69%	3	16.12%	7	21%
2004	25012	204	204	408	4	19.60%	3	14.70%	7	17%
2005	25012	177	164	341	6	33.89%	4	24.39%	10	29%
2006	25012	177	164	341	0	0.00%	0	0.00%	0	0%

### Chettimangurichy -Primary health centre

Year	Population	Male birth	Female birth	Total infants birth	Male infant death	Male IMR Percentage	Female infant death	Female IMR percentage	Total death	IMR Percentage
1999	42667	530	408	938	28	52.80%	73	178.92%	101	107%
2000	43684	462	370	832	19	41.12%	79	213.51%	98	118%
2001	45741	473	412	885	8	16.90%	16	38.83%	22	25%
2002	44523	404	375	779	18	44.55%	22	58.66%	19	24%
2003	45741	382	362	744	14	36.64%	6	16.57%	22	30%
2004	45741	379	365	744	7	18.46%	10	27.39%	14	19%
2005	45741	462	394	856	10	21.64%	12	30.45%	25	29%
2006	45741	462	394	856	8	17.31%	10	25.38%	4	5%

### Chithoor - primary health center

Year	Population	Male birth	Female birth	Total infants birth	Male infant death	Male IMR Percentage	Female infant death	Female IMR percentage	Total death	IMR Percentage
1999	36,479	375	348	723	15	40%	51	146.50%	66	91%
2000	37272	403	310	713	19	47%	30	96.70%	43	60%
2001	37378	390	322	712	14	45.30%	12	37.26%	26	37%
2002	37578	332	297	629	8	24%	18	61%	29	46.10%
2003	37803	327	319	646	13	39.75%	8	25%	21	32.50%
2004	38686	356	304	660	9	25.28%	9	29.60%	18	27.27%
2005	38686	342	264	606	11	32.16%	7	26.51%	18	29.70%
2006	38686	339	316	606	8	23.59%	10	31.64%	18	27.50%

### Thevoor - Primary Health Center

Year	Population	Male birth	Female birth	Total infants birth	Male infant death	Male IMR Percentage	Female infant death	Female IMR percentage	Total death	IMR Percentage
1999	20202	193	161	361	18	93.26%	28	173.91%	46	126%
2000	19419	202	184	386	12	59.40%	44	239.13%	56	145%
2001	19585	198	169	367	10	50.50%	17	100.59%	27	74%
2002	20280	178	150	328	3	16.85%	7	47%	10	30%
2003	20280	144	131	275	4	27.77%	3	22.90%	7	25%
2004	20280	167	150	317	4	23.95%	2	13.33%	6	19%
2005	20280	145	148	293	4	27.58%	5	33.78%	9	31%
2006	20280	145	148	293	0	0.00%	0	0.00%	0	0%



## EDAPPADI - Primary health center

Year	Population	Male birth	Female birth	Total infants birth	Male infant death	Male IMR Percentage	Female infant death	Female IMR percentage	Total death	IMR Percentage
1999	28770	375	311	686	7	18.66%	32	102.89%	39	56.85%
2000	28770	376	271	647	6	15.95%	45	166.05%	51	78.82%
2001	50540	1015	931	1946	0%	0%	0%	0%	0%	0%
2002	50540	323	302	625	5	15.47%	8	26.49%	13	20.80%
2003	50540	284	262	546	0	0.00%	0	0.00%	0	0.00%
2004	50540	877	775	1652	2	2.28%	2	2.50%	4	2.42%
2005	50540	517	456	973	1	1.93%	0	0.00%	1	1.02%
2006	50540	375	346	721	1	2.66%	0	0.00%	1	1.38%

### Conclusion :

Grass root level Initiatives by NGO's like ponthaleer brings greater impact in the field in short period, especially in addressing the age old practices or traditionally deep rooted practices.

Our goal is to stop sex discrimination through infanticide, loss of care of female babies and to promote education of girls. **Also to "ensure rights of the child" to the rescued children .**

Report by : R. Chezhan,  
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