# SELF HELP GROUPS: A PATHWAY TO WOMEN EMPOWERMENT

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### **ABSTRACT**

Self-Help Groups are voluntary congregation of persons who share needs or problems that are not being addressed by existing institutions or other types of groups. It is an informal association of 10 to 20 poor women belonging to same village and sharing a common socio economic background who are organized around saving and credit facility. Funds for credit activities come through regular saving deposited by all of its members. Group members meet regularly at some common place and share information and plan to improve their skills. Strength of these groups is its members. At present, SHGs play a major role in poverty alleviation in India. In India, as on 2015, the total number of SHGs directly linked to bank stood at 69.53 lakh In the United States Self-Help Groups participation amounted to 10 million in 1996 and recently it is noted that more and more Americans are joining to make SHGs to change their 'socio economic' condition. In some countries, Self-Help Groups exist for every medical requirement listed by World Health Organization The present paper tries to explore the impact of SHGs in women empowerment. Two indicators of women empowerment e.g. Decision making and Freedom of movement have been taken for analysis. Primary data have been collected, coded and analyzed with the help of SPSS.

KEYWORDS: Self Help Group, Women Empowerment, Poverty Alleviation, Decision Making.

## Introduction

Self-Help Groups are voluntary congregation of persons who share needs or problems that are not being addressed by existing institutions or other types of groups. It is an informal association of 10 to 20 poor women belonging to same village and sharing a common socio economic background who are organized around saving and credit facility. Funds for credit activities come through regular saving deposited by all of its members. Group members meet regularly at some common place and share information and plan to improve their skills. Strength of these groups is its members.

At present, SHGs play a major role in poverty alleviation in India. In India, as on 2015, the total number of SHGs directly linked to bank stood at 69.53 lakh<sup>1</sup> In the United States Self-Help Groups participation amounted to 10 million in 1996 and recently it is noted that more and more Americans are joining to make SHGs to change their 'socio economic' condition. In some countries, Self-Help Groups exist for every medical requirement listed by World Health Organization The present paper tries to explore the impact of SHGs in women empowerment<sup>2</sup>. Two indicators of women empowerment e.g. Decision making and Freedom of movement have been taken for analysis. Primary data have been collected, coded and analyzed with the help of SPSS.

### Methodology

Two important indicators of women empowerment – (1) Decision making and (2) Freedom of movement have been exercised to analyze the same To select Self Help Groups from study area, long discussions were made with Project Officer, Pracheta, Aanganwadi Worker, Helper, Asha Sahyogini and Sathin. During discussions it came out that Self Help Group formed with the help of Pracheta or Sathin, is a homogenous group of women not more than twenty. Members of the group meet either every week or every month. They discuss about social and community programmes, group saving, bank loans and rotation of loans. On the basis of their working, these SHGs are of three types:-

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- Those Self Help Groups in which members are encouraged to make voluntary thrift on a regular basis. This regular saving may range from Rs. 25/- to Rs. 1000/- and these pooled resources are used to make small loans to their members.(WB<sub>1</sub>)
- Those Self Help Groups which show mature financial behaviors, banks are encouraged to make loans to the certain multiples of the accumulated saving of SHGs. At present the ratio of loans to deposits is 1:10. These group members are not engaged in any entrepreneurial/productive activity (WB<sub>2</sub>).
- Those Self Help Groups who have taken loan from bank more than once and are actively involved in some entrepreneurial activity e.g. Bag making, Pickle making, Badi- Papad making, Shoe making, Tailoring, embroidery etc. (WB<sub>3</sub>)

Thirty SHGs of each type have been selected and 5 to 6 women from each Self Help Group were requested to fill the questionnaire. Efforts have been made to cover all those women in sample which are associated with Self Help Groups from last 5-6 years. Total 508 women participants were selected as respondents. In the absence of baseline information, changes in all socio-economic indicators have been analyzed on the basis of their responses about pre intervention and post intervention only.

#### Data

Total 15 aspects of decision at house hold level have been taken and these are further grouped into four. These are as follows:

- Economic Decision
  - Taking Loan
  - Giving Loan
  - Asset purchase / sale
  - Repair / Construction house
- Social Decision
  - Social visit to women's family
  - Social visit to husband family.
  - Social visit to neighborhood / friends
  - Family planning
  - Marriage decision
- Education / Health Related Decision
  - Kid's education
  - Children medical care.
- Political Decision
  - To cast vote
  - To contest election
  - To support any candidate (election)

All the above dependant ordinal variable measure the extent to which women's preferences are reflected in decision making process. Their responses are scaled at 1 to 4 scale. '1' indicating that her preference never reflected in their household decision. While '4' indicates that her preference are always taken into account. '2' and '3' indicates that her desire is rare (25%) or sometimes (50%) reflect in household decision. However, to test the significance of change, Z value have been calculated taking the hypothesis.

Ho: No significant change is found in response before & after joining SHG

Ha: Ho is not true

Where

 $_1$  = S.D. of responses before programme

<sub>2</sub> = S.D. of responses after programme

 $x_1 - x_2 =$  Standard error of the difference of mean between two sample means

if  $x_1 - x_2 > 3$  S.E. than change is highly significant otherwise non-significant

if  $x_1 - x_2 > 1.96$  then change in significant at 5% level of significance otherwise non-significant

if  $x_1 - x_2 > 2.58$  then change in significant at 1% level of significance otherwise non-significant

# Results

Table 1 represents Mean and S.D. of the responses of treatment group and control group about the change in 'say' in household decision making

Table 1: Outcome Indicator - Change in 'say' in HH Decision Making

	Treatment Group N=508				Control Group N=122				
Dependent Variable  •	Mean and SD* of Responses of Women of SHGs		Change & S.E. of Difference of Mean	Z value	Respo Control	nd SD* of nses of group of men	Change & S.E. of Difference of Mean	Z value	
	Before	After			Before	After			
<b>Economic Decision</b>				Į.		ļ.			
Taking Loan	2.63 (0.685)	3.08 (0.579)	0.25 (0.616)	4.05* *	2.61 (0.80)	2.82 (0.74)	0.21 (0.84)	0.25	
Giving Loan	2.88 (0.715)	3.00 (0.74)	0.12 (0.0721)	1.66	2.49 (0.81)	2.51 (0.89)	0.02 (0.105)	0.19	
Big expenses	2.87 (0.707)	2.93 (0.765)	0.06 (0.713)	0.84	2.69 (0.81)	2.73 (0.906)	0.04 (0.107)	.307	
Asset purchase/sale	2.66 (0.728)	2.91 (0.756)	0.25 (0.072)	3.47**	2.84 (0.83)	3.15 (0.906)	0.31 (0.108)	2.87	
Repair/constructor of house	2.88 (0.725)	2.97 (0.696)	0.09 (0.069)	1.30	2.69 (0.811)	3.03 (0.808)	0.34* (0.105)	3.23	
Social Decision				·					
Social visit to women's family	2.81 (0.715)	2.89 (0.746)	0.08 (0.071)	1.12	2.60 (0.81)	2.78 (0.89)	0.18 (0.105)	1.71	
Social visit to husband family.	2.63 (0.71)	2.77 (0.73)	0.14 (0.071)	1.97*	2.69 (0.81)	2.74 (0.89)	0.05 (0.103)	.48	
Social visit to neighborhood / friends	2.44 (0.72)	2.60 (.75)	0.16 (0.071)	2.25*	2.69 (0.81)	2.81 (0.89)	0.12 (0.105)	1.14	
Family planning	2.61 (0.71)	2.84 (0.755)	0.23 (0.07)	3.28**	2.6 (0.81)	3.01 (0.91)	0.41* (0.106)	3.86	
Marriage decision	2.89 (0.729)	2.98 (0.714)	0.09 (0.06)	1.5	2.97 (0.83)	3.08 (0.856)	0.11 (0.104)	1.05	
Education/Health Rela	ated Decision	on							
Kid's education	2.78 (0.717)	2.93 (0.716)	0.15 (0.07)	2.14*	2.60 (0.81)	3.03 (0.870)	0.43* (0.104)	4.13	
Children medical care.	2.64 (0.737)	2.88 (0.691)	0.24 (0.07)	3.42**	2.69 (0.83)	2.83 (0.83)	0.14 (0.103)	1.35	
Political Decision		- <del>)</del>		•					
To cast vote	2.87 (0.75)	3.03 (0.673)	0.16 (0.07)	2.28*	2.57 (0.83)	2.68 (0.81)	0.11 (0.101)	1.08	
To contest election	2.77 (0.739)	2.97 (0.76)	0.20 (0.07)	2.8*	2.82 (0.83)	3.05 (0.99)	0.23 (0.113)	2.03	
To support any candidate (election)	2.79 (0.717)	2.94 (0.78)	0.15 (0.08)	1.8	2.80 (0.81)	3.08 (0.91)	0.28 (0.106)	2.64	

<sup>\*</sup> Significant at 5% level of significance
\*\* Significant at 1% level of significance

All the dependant ordinal variables measure the extent to which women's preference are reflected in decision making process, 1 indicating that her preferences are never reflected in these decisions while 4 indicates that her preference are always taken into account.

Table 1 represents mean and S.D. of responses of women members of SHGs and control group about their 'say' in household decision making before and after joining SHGs Mean responses ranges from 2 to 3, these are never found less than 2 or more than 3. It indicates that women 'say' in household decision making is rare or sometimes heard. Apparently, change in decision making is found at all types of decision among treatment group as well as control group but major changes are found in economic decision among treatment group and it can be understood easily. Now women can arrange finance easily due to loaning facility provided by the SHGs. Changes in economic decisions among control group is less than in treatment group.

On the basis of the above, it is clear that change in decision about taking loan and asset purchase or sale is found significant (Z > 3) among treatment group but while giving loan or while asset purchase/sale, their choices are not taken into account. Change in social decision is not found significant except family planning or children's medical care. In fact, change in social decisions depend upon mindset of people and change in mindset is very slow process, it can be observed in long-run only. Change in decision making related to family planning or children's medical care are also due to group activity and this change is significant. Further, no significant change is observed in 'say' in political decisions. In fact, women's 'say' in decision making at all level in household is improved but this improvement is marginal and not found significant on applying test of significance.

To analyze impact on women empowerment with the help of logit regression analysis, women's responses were further classified into two groups, 0 represents the same condition as earlier and 1 represents improvement. Again, three dummy variable for different types of SHGs women have taken as independent variable and one dummy variable is taken for control group. 6 other explanatory variable e.g. women's education, women's employment status, type of family, husband's education, husband's employment and land holding level of household are taken as explanatory variable.

Table 2: Logit analysis of Empowerment Status

Dependant Variable - Improvement in Empowerment Status of Respondents

Explanatory Variables	Coefficient	Standard Error		
WB <sub>1</sub>	.007 (.159)	.038		
WB <sub>2</sub>	371 (.013)	.555		
WB <sub>3</sub>	789 (.012)	.593		
Control	376 (.614)	.745		
Women's education	.018 (.623)	.036		
Women's employment	.376 (.614)	.035		
Joint family	029 (.428)	.037		
HUS <sub>edu</sub>	111 (.767)	.377		
HUS <sub>emp</sub>	.415 (.002)	.412		
Land holding	.627 (.245)	.539		
Constant	.691 (.010)	.246		
Nagelkerke R square	.275			
No. of Observations		630		

Figures in parentheses show level of statistical significance of the coefficients

Positive coefficient of SHGs beneficiary of type 1 (WB<sub>1</sub>) indicates improvement in women empowerment due to SHGs but it is very low and almost insignificant. Coefficients of other beneficiaries is found negative. This indicates that joining SHG will not help women in feeling empowered. Although their economic, social and health awareness status is improved yet their role in important house hold decisions do not change. In fact, male dominance in this region is very much and they hardly accept the role of women. Moreover, coefficient of husband's education is also negative indicating that education among male members of society will not help in women empowerment but coefficient of women's education is positive indicating positive association between women's education and empowerment. Coefficients of husband's employment and land holding is positive indicating that if husband is employed somewhere or household have land holdings, women feel themselves more empowered. Negative coefficient of type of family indicates that in joint family women are less empowered than in nuclear

family. The result of this analysis is quite different than earlier ones and can be understood only by knowing social set up of this area. Here, women can work at home as well as can go outside to earn money but do not take part in decisions of the house, either of any type. So by getting benefitted with any of scheme, their economic or social status may improve but their voices are not heard and their role in decision of the house does not improve.

### Freedom of Movement

This is an important indicator of women empowerment. In Western Rajasthan women generally stay at home and they cannot move outside without seeking permission from husband or any other elder member of the family. To analyze women empowerment on the basis of freedom of movement, women were asked that how much freedom of movement they are enjoying. Whether they can move upto market or health/education institution or outside the village and whether they can go alone or with some else or not at all. At first their responses have been collected in Yes or No and percentage of responses are presented in table 2

**Table 3: Freedom of Movement** 

Particular	% of respondent reported Yes							
	WB <sub>1</sub> (N= 168)		WB <sub>2</sub> (N= 180)		WB <sub>3</sub> (N=160)		Over all (N=508)	
To the market	Before	After	Before	After	Before	After	Before	After
Alone	48.1	96.2	62.5	93.8	36.8	68.4	59.5	100
With some one else	51.9	3.8	37.5	6.2	57.9	28.9	40.5	0.0
Not at all	0.0	0.0	0.0	0.0	5.3	2.7	0.0	0.0
To Health/Education								
Alone	56.4	94.7	62.5	87.5	28.9	63.2	64.3	100.0
With someone else	43.6	4.5	37.5	12.5	68.4	34.2	35.7	0.0
Not at all	0.0	0.0	0.0	0.0	2.6	2.6	0.0	0.0
To outside the Village			•				•	
Alone	53.8	86.8	68.8	93.8	31.6	63.2	52.4	100
With someone else	45.3	13.2	31.2	6.2	65.8	34.2	47.6	0.0
Not at all	0.9	0.0	0.0	0.0	2.6	2.2	0.0	0.0

Source: Computed from field survey.

Table 3 represents distribution of beneficiaries responded 'yes' while asking about freedom of movement before joining SHG. 48.1% women reported that they enjoy freedom to go alone to the market but after joining SHG, this increases upto 96.2. there is not any women who reported that they don't have any freedom of movement. As data indicates, percentage of women beneficiary enjoyed freedom of movement 'alone' is increased due to programme. Now more women can go outside alone to the market or hospital or school or even outside the village. Scholar as well as survey team also observed that women's freedom to go outside home is increased due to getting benefitted with these programmes. Actually, when women go outside to earn income, they interact with other women also and this increases their awareness about government schemes as well as about village. This awareness help them enjoying the benefits of government schemes and they feel themselves more empowered.

If we have a look upon social set up of this region, it is found freedom of movement is not very good indicator of women empowerment. In fact, this region is quite safe for women and women can go outside freely as and when. Here shops remain open till late night and early in the morning old people come out for walking etc. People concern and care each other and due to this reason, It is quite safe to go outside alone. However, women in this region remain very busy and she hardly get any time to go outside without any reason.

### Conclusion

The above analysis indicates that joining self Help Group and participating in some income generating activity inculcate confidence in women but these are not enough for empowerment of women. Although income earned by women is important for household but this is not enough for improving status of women in family. Concerted efforts at all levels are required to make women empowered.

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