



Gabrielle Ross

A Sterilisation Camp in Uttar Pradesh

ABOUT 30 women, most of them middle aged and poor, sat huddled on the grass behind the small cement clinic. Nervously, they hid their faces by covering them with their saris. They spoke in muffled voices to each other, as if they were afraid to be heard. Their dark sun baked skin looked like leather, their hands were calloused from continual hard work. Their feet were caked with mud from the long walk from their villages to the clinic. Their saris were faded. They wore the heavy silver anklets common among rural women.

These women are just a few of the thousands recruited by government health workers to sterilisation camps as part of a National Family Planning effort. Targets are fixed in each state. An intense publicity and education campaign is mounted some weeks before the camps are held at public health centres throughout the state.

The operations are free. Those who opt for it are offered Rs 125. Often, this is a greater incentive for poor rural women to be sterilised than is the education campaign.

The camp system of mass operations enables the state governments to meet their annual quota very quickly. States compete for the highest number of sterilisations in the shortest period of time. Adequate treatment, personal attention and follow-up medicine and care are secondary to winning the competition.

I sat down with a cluster of frightened women. When asked what they were told about the operation during the education campaign, they replied: "Nothing." The only clear information they had been given was that they would stop having children after the operation.

Some of them were misinformed by exaggerated stories told to them by neighbours and friends; others were completely ignorant. Many thought that sterilisation was the only way to stop having children.

The health workers had led me to believe that these women had made an informed choice for sterilisation over birth control. The women were attentive when I assured them it was a relatively simple operation, and that afterwards they would be all right. A health worker, who overheard us, told me not to ask the women questions because I would confuse them.

The health worker returned a few minutes later with consent forms for these illiterate women to "read" and "sign." Without a word of explanation, he distributed them, placed an ink pad on the ground and told the women to put their thumb impression on the bottom of the page. When they finished, he collected the forms and hurried off. The women were not aware that they had consented to having an irreversible operation.

Next, in what seemed like a production line, the women were herded past a group of loitering men—villagers, husbands and sundry medical staff—to the front of the clinic. A doctor, sitting at the entrance, rushed through a brief medical history with each woman: "How many

children do you have?... Sons?... Daughters?... When was your last period?..." The women answered meekly; they were embarrassed to answer a male doctor and, moreover, afraid of the impending operation.

Later, when the operations were underway, the head doctor stormed out of the operating room to reprimand the health worker for not filling out the medical histories accurately. A pregnant woman had been admitted, and the doctor had almost aborted the foetus. Another woman, who thought she was going to be operated for a collapsed rectum, was almost sterilised.

Following the interrogation, the women were ushered inside, given general anesthesia, and operated on in less than 10 minutes. As one woman was carried out on a wooden stretcher, the next was almost simultaneously led in, lying on the stretcher. The women looked like corpses. Their saris were pulled over their heads, and their arms and feet hung limply. All one could see of their bodies were splashes of iodine and bandages on their exposed abdomens. In this condition, they were carried past the other women to the back of the clinic and placed in even rows on the bare floor of a vacant building which looked like an airplane hangar.

I heard a health worker comment that it was perhaps an "anti-motivation factor" to parade the stretcher past the women awaiting their turns. But the staff was in a hurry and paid no attention. This cycle went on all day until 100 operations were completed. □