

Case Study

Unlikely Leadership: Lessons from Rural Women's Self-Help Groups During COVID-19 Management in Karnataka

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Abstract: COVID-19, the global health crisis, deeply impacted local communities and jeopardized the socio-economic framework. While governments and international agencies struggled to manage the pandemic, grassroots organizations and rural women from marginalized sections stepped up to steer their communities through the crisis. Wave after wave of leadership emerged from unexpected places across talukas and villages, from the most vulnerable sections of women self-help groups under Karnataka State Rural Livelihood Promotion Society (KSRLPS). These leaders took stock of the situation and came up with meaningful interventions for their communities. They created general awareness about COVID-19 and its management, tailored masks, manufactured sanitizers and surgical gowns, opened community kitchens, and distributed ration and essential commodities to the needy. While

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the world battled with the pandemic and the ensuing economic crisis, thousands of self-help group women in Karnataka earned between Rs. 300 and 500 every day and kept the fires burning in their kitchens. The global COVID-19 pandemic has caused enormous challenges that continue to impact the lives of millions around the world. However, poor and vulnerable women from the hinterlands of Karnataka show us a bright example of leadership in these difficult times. These inspirational stories highlight the impact of women from self-help groups as they networked seamlessly with various wings of the government and helped their communities overcome challenges posed by the pandemic.

Introduction

The spread of COVID-19 has shown that any public health crisis requires community cohesion, strong communication and resilient ground-up leadership to mount an effective response. In years to come, the current crisis will be remembered for showcasing how women in poor, rural communities, rather than requiring government handouts, were critical stakeholders in the comprehensive COVID-19 response.

This case study highlights examples of how women across Karnataka, in collaboration with government officers and NGO partners, provided exemplary leadership in responding to the challenges of the COVID-19 pandemic. These stories of leadership from unexpected places and unexpected people give us hope that there is the capacity to handle any crisis when people and government work towards a common goal in the human spirit. Be it the case of women's self-help groups making masks and surgical gowns or working in micro-enterprises to support their families during the lockdown, women in Karnataka have

demonstrated committed leadership of the ordinary people.

Unpacking 'Unlikely Leadership'

To tackle rural poverty and empower communities in the 1980s, the NGO MYRADA, encouraged affinity groups of women to improve livelihoods through collective action. They focused on unleashing the potential of rural women to transform their communities. These early self-help groups (SHGs) were small, deeply rooted in their communities, and conceptualized to make rural credit readily available. In 2011, the National Rural Livelihood Mission (NRLM) was launched to transform informal SHGs through more significant credit linkages, regular training sessions, and participation within a federated structure. The experience of SHGs has been mixed, with nearly all of them accessing credit, but some states are more successful than others in maintaining social cohesion and effectively utilizing funds to enhance productive capacity.

In Karnataka, NRLM is implemented through the Karnataka State Rural Livelihood Promotion Society (KSRLPS or Sanjeevini). Karnataka had a population of 6.1 crores in 2011, of which 61.43% was rural (Census 2011). The population was estimated at 6.75 crores in 2020, according to UIDAI¹⁷, with the rural proportion decreasing steadily across successive censuses. As major urban centers are concentrated in the south and coastal regions of the state, socio-economic development skews poorly towards the north and interior. Karnataka has seen relatively successful implementation of NRLM as SHGs generally adhere to the *panch-sutras*, or best

practices of group management, and training programs are frequent, well-attended, and focus on building management skills. There is also a strong synergy between SHGs, local administrative officials, and elected leaders.

Faced with an unprecedented challenge during the COVID-19 pandemic, rural women in SHGs rose to the occasion and understood the need for flexible leadership, community mobilization, and optimizing support from the local administration and NGOs. SHG women worked hand-in-hand with district officials to mitigate the horror and uncertainty caused by the pandemic. Across the state, through the efforts of more than 3,000 self-help groups, there were great examples of problem solving and execution under high-stress and chaotic conditions. Despite the nationwide lockdown, SHG leaders organized networks of teams to undertake critical tasks. These leaders acted with empathy and consideration, often counseling members of their communities who were at-risk or had been exposed to the COVID-19 virus.

Working closely with other wings of the government, SHG women could be found across the length and breadth of the state, reaching out to vulnerable communities, and meeting their needs on multiple levels. During the twin crises of the COVID-19 pandemic and lockdown, SHG women demonstrated competence and effective management and social leadership in myriad ways.

Arenas of Action

From early March 2020, as COVID-19 cases began to rise, SHGs began to take on a range of new tasks to support their communities. Initially, they were part of a solid two-way information flow between officials at the district and taluka levels and villages across Karnataka. As cases began to rise, they supported frontline workers by producing

¹⁷ Data as of 31.12.2020 and can be found at: <https://uidai.gov.in/images/state-wise-aadhaar-saturation.pdf>

essential medical supplies. When many crucial public programs were not implemented, as usual, these women helped combat food insecurity and generated local small-scale employment.

The efforts of SHG women across various districts of Karnataka can be classified into five arenas which are described within this section.

Table 1: Arenas in which SHG women played a significant role in COVID-19 management

Building COVID-19 awareness	Build awareness Fight disinformation
Production of essential medical supplies	Produce masks, sanitizer, and medical-grade PPEs and face shields
Food Security	Community Kitchens, Distributed Ration Kits
Supporting families through local economic activities	MNREGA Vegetable vending Direct consumer sales of SHG COVID safety supplies
Channel of information to the local administration	Report on local migration Trace primary contacts Assist in Household surveys

(1) Building COVID-19 awareness

Towards the beginning of the pandemic, as government officials brainstormed ways to ensure that COVID-19 safety protocols and a basic understanding of this disease reached the remotest villages, women leaders in panchayats carried the message far and wide. In Bagalkot, SHG women helped form village-level Corona Village Warriors groups, jointly comprising ASHA workers, Anganwadi workers, and SHG members. These teams

prevented close public gatherings in villages, helped enforce social distancing, mask usage, and taught people to improve personal health and hygiene.

In the Shivamogga district, SHG women were trained to conduct a wide range of sensitization exercises, specifically to protect small children and the elderly against COVID-19. Under the guidance of the Panchayat Development Officer, women were inducted into a task force to visit the houses of migrants who had recently returned, to sensitize them on social distancing norms and other precautions to be followed during and after quarantine. They used various forums to build upon and reinforce safety protocols, engaging with the public at Gram Panchayat Level Federation (GPLF) meetings, ward level meetings, and weekly SHG meetings.

In the Mysore district, women motivated their family members and others in the community to challenge misinformation circulating on WhatsApp and other platforms. Before the national lockdown was announced, they advised neighbors to maintain personal distances even within the household, especially from anyone visiting from Bangalore or a larger city. Despite facing initial skepticism, these women remained firm and helped explain that COVID-19 was much more dangerous than a standard cough or fever and could have a life-long effect on critical organs. Communities were encouraged not to stigmatize recovered COVID-19 patients through their efforts.

Table 2: Details of SHGs activated, members involved, and community members sensitized by District

Name of District	No. of SHGs activated	No. of SHG Members Involved	No. of Community members sensitized
Bagalkot	230	2,330	1,70,800
Bangalore Rural	600	7,800	1,86,000
Bellary	1,416	14,160	98,930
Chitradurga	624	6,240	9,640
Dakshina Kannada	96	960	92,000
Gulbarga	1,610	35,956	97,000
Koppal	3,350	33,550	1,99,000
Mysore	10,983	1,09,830	99,229
Ramanagara	2,000	20,000	2,00,000
Tumkur	492	4,468	1,11,000

(This data has been collected until 31.05.2020)

Overall, 2,35,294 women members from across 21,401 SHGs became COVID-19 ambassadors. Over 1.2 million community members were beneficiaries of training sessions and house-to-house visits, ensuring that accurate, scientific information about COVID-19 was effectively disseminated across the state.

(2) Production of masks and essential medical supplies

At the outset of the pandemic, the production of face masks was one of the first activities to be initiated at a decentralized level. KSRLPS and associated SHGs made masks available through multiple sources: at Fair Price Shops, e-commerce platforms, and direct phone sales. Members initially acted as micro-entrepreneurs to create the new market for face masks,

educating their customers on the need and how to assess proper fit and quality. Once mask usage was made compulsory and enforced, this became an assured market, ensuring that SHG members were recognized as leaders in charge within their communities. Through their efforts, mask usage in Karnataka remained consistently high, many months into the pandemic.

“Once, we mandated the use of mask and sanitizers in all gram panchayats and villages in the district, the role of SHG members has been vital, and they have shown great social responsibility in keeping the Covid-19 pandemic under check,” according to Gangubai Manakar, CEO Bagalkot Zilla Panchayat (ZP).

In Bagalkot, in response to the shortage of masks, KSRLPS officials helped arrange training regarding mask preparation and personal hygiene by specialists and procurement of cotton cloth and raw materials from the Khadi Kendra, allowing local SHGs to produce around 3,000 masks every day. These were absorbed to fulfill the needs of the Zilla panchayats, gram panchayats, health department, Karnataka Electricity Board (KEB), local health institutions, medical stores, and the general public.

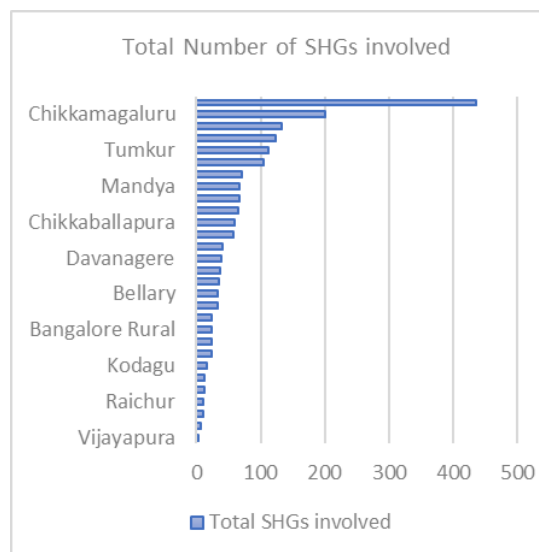


Figure 1: Details of SHGs involved in mask production

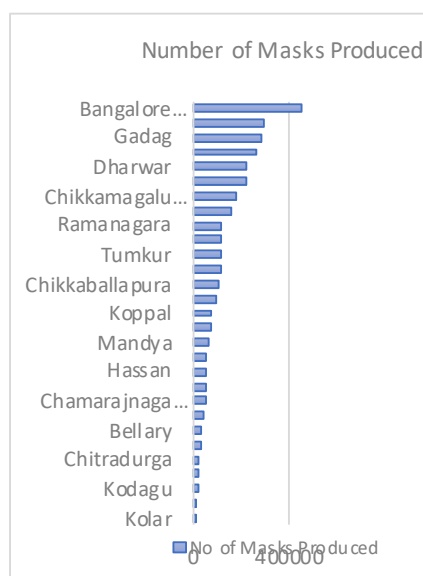


Figure 2: Details of the total number of masks produced

"Sincerity and discipline, which are the usual qualities of women SHGs, were evident in their fight against Covid-19 in Gadag district," reported Dr. Anand K, CEO, Gadag ZP.

Through this discipline and effective management, nearly 2,000 SHGs were activated across Karnataka, and in total, over 3.4 million masks were produced.

After viewing the success of cotton mask production by tailors and SHG women, the same networks were tapped to produce other equipment required by medical and frontline workers. Tumkur district was the first in which SHGs began production of face shields provided to police officers on COVID-19 duty.

In Udupi District, SHG women surpassed all expectations, with just 82 women from 38 SHGs stitching nearly 60,000 hospital gowns for doctors, nurses, and staff in government hospitals. SHG members produced approximately 90,838 head masks and 1,16,962 hospital gowns. In addition, SHGs in the Ramanagara district made 50 liters of sanitizer for local consumption.

Table 3: Medical equipment produced by SHG women by District

Name of District	Item produced	Quantity
Chitradurga	Hospital Gowns	57,000
Udupi	Hospital Gowns	59,962
Tumkur	Head Mask	40,000
Koppal	Head Mask	40,831
Ramanagara	Head Mask	10,007

(This data has been collected until 31.05.2020)

(3) Food security through community kitchens and dry ration distribution

As the lockdown extended and many low-income families saw their savings reduce, hunger became a significant area of concern. Members of SHGs paved the way towards food security, first through ensuring doorstep delivery of essential grocery items and later on by providing nutritious, cooked food and ration packets to the most vulnerable families. In other areas, women established collection points for surplus vegetables or grains that could be distributed amongst struggling families during the lockdown.

Adivala Hiriyur taluk in Chitradurga district served as the headquarters of the GPLF. Due to its proximity to National Highway 4, it saw a large floating population. After the lockdown announcement, many families dependent on daily wages struggled for food. The GPLF core committee members and SHG members from nearby villages extended their helping hands by giving away nearly 600 kg of rice in just a few days. Officials of KSRLPS helped procure food items and maintain stock for distribution.

According to Honnamba, CEO Chitradurga ZP, SHGs “were able to stitch enough masks to meet the district administration needs and earn for themselves, but they also were instrumental in giving away nearly 600 kg rice. To the poor and needy during the lockdown.”

Using funds earned through one enterprise to support families in a time of need is just one-way SHG women prioritized people over profits during the pandemic.

Table 4: Details of SHGs and members involved and households provided with dry ration by District

Name of District	No. of SHGs Involved	No. of SHG Members Involved	No. of Households provided with Dry Ration
Bagalkot	14	140	1,400
Bangalore	38	380	14,548
Bangalore Rural	1	10	1,750
Chitradurga	12	72	19,890
Koppal	13	130	194
Mysore	335	3,350	39,558
Ramanagara	10	100	17,690

(This data has been collected until 31.05.2020)

Through their actions, over 4,182 women across Karnataka provided dry ration and vegetables to vulnerable families over and above distributions done under expanded government programs. This provided additional security to 95,030 families during a difficult time.

(4) Supporting families through local economic activities

The local-market structure of SHG activities allowed women to remain breadwinners in their families despite many sectors of the Indian economy being in a slowdown.

Women sold 750 quintals of vegetables door-to-door in Uttara Kannada district during the lockdown. This coordinated effort involved 2,000 SHG women and earned appreciation from the district administration. Similar vegetable sales took place in other districts across Karnataka.

Table 5: Details of SHGs and members involved and vegetables sold by District

Name of District	No. of SHGs Involved	No. of SHG Members Involved	Quantity Sold (in quintals)
Belgaum	6	60	7110
Chitradurga	1	10	3600
Dakshina Kannada	8	80	5000
Ramanagara	5	60	14009
Uttara Kannada	2	20	20000

(This data has been collected until 31.05.2020)

Other previously initiated activities continued during the pandemic while maintaining COVID-appropriate behavior. SHG members were involved in the production of spirulina-groundnut *chikkies* in Narsapura GP. These snack bars are rich in micronutrients which help children suffering from malnutrition gain weight and build their immunity. SHGs that produced soaps and phenyl saw increased sales during the pandemic as campaigns encouraged the public to wash their hands frequently and maintain clean surfaces within their homes and shops. Many SHG members took up lake desilting at villages through MGNREGA to earn money; they were also digging pits and planting saplings at places identified by the gram panchayats.

As a pilot program in the Kolar district, an SHG group in convergence with Swachh Bharat Mission (SBM) collects wet and dry waste from each household and undertakes segregation. The unit is running successfully at Uttanur gram panchayat, Mulbagal taluk.

Through these activities, SHGs were able to improve group cohesion and provide social and economic support to their members.

(5) Channel of information to local administration

Lastly, SHG women took on crucial tasks to support COVID-19 monitoring. The overall *Testing-Tracing-Isolation* strategy relied on timely and accurate information provided by communities to government officials. Through regular interaction with friends and neighbors, these women were able to counsel those experiencing symptoms to come forward and get themselves tested and assist local health officials in reaching out to primary contacts who may have been infected.

Most districts of Karnataka included SHG members in their District Level Surveillance Activity Plans, having recognized their dedication and status as members of the community. In Shivamogga, Master Bookkeepers trained under KSRLPS helped enforce home quarantine or institutional quarantine at the district/taluk. They assisted ASHA workers and the health department workers in conducting surveys and continuous monitoring of people under home quarantine.

Outcomes & Impact

The 'unlikely leaders' of SHGs have several achievements to their credit:

- Through manufacturing cloth masks, 5,000 SHG women raised over INR 5 crores in revenues, which were their direct earnings, and helped support vulnerable families through the lockdown.
- As they raised funds, many SHGs donated masks, for example, in the Gadag district, to students who had to appear for board exams. SHG women who manufactured soap distributed it free during household visits, imparting a sense of community service.
- Through their efforts as COVID-19 ambassadors, SHG women could promote safe

practices and limit stigma for those infected with COVID-19. Through their emphasis on following quarantine procedures, cases of COVID-19 remained low in rural areas, and the spread was contained.

- The collection points for donated food items were managed openly and transparently, and as community members themselves, women were able to target distribution of surplus grains and vegetables to families in distress.
- SHG women were recognized as crucial stakeholders in ensuring community participation in government programs. Household surveillance visits had an element of public accountability and were more regular when SHG members were inducted into the process.

With the tenth anniversary of NRLM in 2021, some reports have been published on the experience and impacts of SHGs under its banner (Kochar et al. 2020, Kumar 2021). These studies tend to agree that SHG women are classic examples of stakeholders with 'skin in the game'; they are the most invested in creating opportunities for their members and their communities. In an event like the COVID-19 pandemic, it becomes clear that SHGs that are closely knit and have previously demonstrated effective collective action can have an enormous impact. This experience was not limited to Karnataka. The World Bank has keenly documented how 67 million Indian women across 6 million SHGs have been a crucial link between the government and society during the lockdown. Drawing examples from Bihar, Kerala, Jharkhand, and Odisha, the potential of their leadership is clear (World Bank, 2020). If further empowered to identify and mitigate problems plaguing their communities, the SHG model may be leveraged to tackle far-ranging issues from

domestic violence to natural resource management.

Conclusion

The last year has been challenging for both the government and ordinary citizens. However, as the American singer Dolly Parton once said, "Storms make trees take deeper roots." As a result of the determination exhibited by women across Karnataka, possible adverse impacts were severely limited. The leadership potential resides in every person regardless of their background, and in times of adversity, this comes to the forefront.

SHGs have worked closely and reliably with district officials and built their skills. These unlikely leaders have learned how to fulfill bulk orders of various products and access multiple funding avenues. They have created crores of value and demonstrated the courage to help citizens across Karnataka remain in their homes during an unprecedented pandemic. Local Primary Health Centres, gram panchayats, and other similar institutions have recognized the services and support provided by the SHGs and federations. As the state of Karnataka has been recognized for its innovative and effective public engagement in combating COVID-19, a share of the credit must go to the unlikely women leaders across the state who worked tirelessly to make their villages safer.

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