HIDDEN POCKETS COLLECTIVE
Annual Report 2020-2021
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VISION

A future free of sexual shame

MISSION

We provide non-judgmental information on your rights so that you can make decisions about your body. No matter who you are, we care for you.
ABBREVIATIONS

MTP
Medical Termination of Pregnancy

HPC
Hidden Pockets Collective

SRHR
Sexual and Reproductive Health and Rights

CRY
Child Rights and You

PLD
Partners in Law and Development

POCSO Act
Protection of Children from Sexual Offences

NCAAC
National Coalition Advocating for Adolescents Concerns

DM
Direct Message

CSE
Comprehensive Sex Education

PHC
Primary Health Centre
About Hidden Pockets Collective

Hidden Pockets Collective is an India based charity organisation run by young people focussed on rights based framework on abortion and adolescent sexuality. We conduct research and gather community driven information on sexual and reproductive health and help policy makers in making community assisted decisions.
THOUGHT LEADERSHIP FROM HPC

AISHA LOVELY GEORGE
on Podcasts & its Necessity in Comprehensive Sexual Education

Podcasts are our tool to flatten the curve of inequalities in accessing technology. We make podcasts and share them widely on-ground with the communities we work with.

In those communities where the youth do not have easy access to smartphones, computers or internet, these audio tapes come extremely handy in generating conversations about SRHR and Comprehensive Sex Education (CSE) in particular. They also make it easy in disseminating the right information. With the help and support of the school staff in a government school or the community leader or volunteer in the community, these podcasts can be played to the students in the classroom or to the children from the underserved community. What would otherwise have been socially conditioned uncomfortable and awkward moments for youth in the communities, are thus completely turned around using the storytelling approach through these podcasts.

In those underserved communities where the youth can easily access smartphones, computers or the internet, these audio podcasts which are present in the digital world can be used to get correct information. The adolescents can share these with each other and can save it and keep it with themselves to use it later. Some of these audios can be downloaded also and shared with each other like people share MP3 music with each other.

ATHIRA PURUSHOTHAMAN
on reproductive justice

Reproductive justice is important because it links reproductive rights with the social, political, and economic inequalities that affect a woman’s ability to access reproductive health care services. Oftentimes, people think the term reproductive justice is synonymous with reproductive rights. However, the two are distinctly and philosophically different. Reproductive rights are centered around the legal right to access reproductive health care services. What good is a right if you cannot access the services that right has provided? This is why reproductive justice is critical. As the attacks on reproductive rights continue to grow, it is more important than ever to build and strengthen a new generation of people who will fight for unrestricted access to comprehensive reproductive healthcare.
JASMINE LOVELY GEORGE
on Alternatives

Throughout 2020, we have realized that there is a need for looking at alternatives that are away from the mainstream options. We pushed for telemedicine in all our policy and advocacy networks when there were discussions on abortions during the pandemic. But for HPC, it is not just about the pandemic! We are rooting for telemedicine as the future of abortion, irrespective of the pandemic. We have been pushing for rethinking laws as the only means to address issues around sexual and reproductive health. As young leaders from India, we have been the collective voices for using alternatives approaches.

MANU RAVEENDRAN NAIR
on technology and need to integrate on Sexual and Reproductive work

Through Open Street Maps, and leveraging other open source
Through Open Street Maps, and leveraging other open source tools
HPC researched and audited 8 abortion clinics in the state of Karnataka, India, so that we solve the problem of lack of access to abortion, for those in need.
On top of providing data access, such initiatives inspire us and others to nurture open source cultures and attitudes which are key foundations in empowering public health initiatives and building a support ecosystem of tech-enthusiasts.

DR. NISHITHA AYSHA ASHRAF
on Primary Health Centres, Public Health and Sexual and Reproductive Health and Rights

Primary Health Centres (PHC) are pillars of public health care in India. They are the first point of contact for many for accessing affordable basic healthcare. However, with respect to sexual and reproductive health, many of these PHCs still operate on very basic kits of providing only the barrier methods of contraception. There is a dire need to expand the services such that pregnant women can get safe and legal termination of pregnancy through the medical abortion pills atleast. Given the fact that surgical abortion would need specific requirements of clinical set up which many primary health centres do not have, atleast the small step of making medical abortion pills accessible through the PHCs can make a huge impact in making abortion accessible for many. It should be made mandatory that all PHCs in the country should stock medical abortion pills and routine inspection should be done for the same. Also, the doctors at PHCs need to be trained and sensitized such that all adult women who are within the medical gestation limits of having an abortion through medical abortion pills, can get the pills, irrespective of the usual stated reason to negate an abortion at many other service providers, that, “this pregnancy is not due to contraceptive failure.”
ABORTION

India has one of the most liberal laws in the world for abortion. The Medical Termination of Pregnancy Act, 1971 (MTP) ensures women can access safe and legal abortion anywhere in the country. However, the law is vague about unmarried women’s right for abortion.

The Hidden Pockets Collective (HPC) has been tirelessly working to make abortion accessible for unmarried women too.

With the use of tech platforms such as Facebook, Instagram, Twitter, Soundcloud and Wordpress blogs, the Hidden Pockets Collective is building up the momentum to influence policy and advocacy such that no unmarried woman will be turned away by the law to access safe and legal abortion.

With the existing law, abortion still continues to be a stigma amongst the society. Married or unmarried, women have to bear the brunt of the prejudiced society and the healthcare system when she makes the choice to have an abortion. The Hidden Pockets Collective is bringing in the paradigm shift in the larger conscience of the society and the healthcare system that; abortion is a healthcare need, abortion is a woman’s right, abortion is normal. One step at a time, the Hidden Pockets Collective is ushering in a new era for women that they can access safe, legal, affordable abortion without undergoing shame, guilt and humiliation. The right to dignity is also the right of a woman who wants an abortion.
The Projects On Abortion

For the year 2020, HPC executed two projects viz


2. The SAAF (Safe Abortion Action Fund) project spanning from January 2020 to March 2021.

INROADS PROJECT

The INROADS project paved way for the creation of podcasts on abortion. This is one of a kind podcast series where different stakeholders in abortion were brought together to narrate their lived realities. The 5 episodes series in English had a doctor, nurse, lawyer, ngo staff and a young woman who had an abortion. The podcast was launched on the International Women’s Day 2020 and till date more than 100 people have heard and liked it on platforms such as Soundcloud.org. The significance of these podcasts is that they give the listeners access to real stories related to abortion and help them realize that abortion is a healthcare need which should be devoid of fear, stigma and shame. HPC plans to use these podcasts, as a conversation starter on abortion, in our

THE SAAF PROJECT

The SAAF Project was supported by Cheshire Disability Trust in Bangalore. The project was an extensive one where 4 districts in Karnataka viz Bengaluru Urban, Mysore, Shimoga and Ballari were given a hands-on approach to establish support system and access to safe, legal and nonjudgemental abortion. We identified a dearth of information on abortion for youth of these places and we furnished materials in local languages to address the needs of the youth. We ran social media campaigns tailored for the youth to increase awareness and access to abortion. In spite of the setbacks brought in by the pandemic that severely restricted our access to the youth communities and healthcare providers of these districts, we were able to gather the behind-the-scene stories on abortion from these districts by using our networks and technology.
Blogs Becoming the Conversation Starter

In the current clout of information overload in the wide world of internet, we work to create a niche of most relevant and relatable information on abortion for the youth.

We run the Wordpress blog

www.hiddenpocketscollective.org

Our aim is to demystify abortion amongst the Indian youth who are always under the impression that abortion is illegal and expensive. We also aim to amplify our groundwork with communities through our blogs. The extensive policy and advocacy networks of ours, benefit immensely from the blogs featured in hiddepocketstcollective.org. Most often these articles, circulated through our ELists, bring in similar organizations working towards safe and legal abortion, to the conversation table. As diverse as the world is, somethings are identical for all those who are working towards making abortion a human right. The blogs play a role of seeding the universal tree of connection and support for everyone involved in the cause of abortion.

We published 15 blogs in hiddenpocketscollective.org in 2020. Out of these:

9 were in English
3 were in Hindi
3 were in Kannada

Based on our ground work, we know how languages can play a role in exclusion and thus we make it a point to have articles published in multiple languages such that no one is left behind through our SAAF project in Karnataka.
The significance of knowledge archives in local languages on abortion:

Language has a power to make people feel excluded. In our years of work on abortion with local communities, we realized that many information materials that exist for them do not capture their local context, sensitivities and unique challenges. Most importantly, we realized that the medico legal terms on abortion have not been demystified in local languages such that the community members actually grasp the needed information on abortion that can empower and help them make informed choices. All the existing materials had a biomedical-legal language that was very exclusionary towards them. Also, there is a limited vocabulary in local languages on many aspects of abortion that have a Western biomedical origin. For our work on abortion to be received and comprehended well by the communities, we realized we need to address this exclusion set by the language. We specifically focussed on all these limitations this year and addressed them through creating contents in both Hindi and Kannada languages. Such a move also facilitated deeper engagement from the communities and this proved highly beneficial in the policy and advocacy spaces we are involved with. Seldom, are the voices from the grassroot levels reach the larger echelons of policy and advocacy. But our work with the communities, through the local languages, strengthened us to ensure that their voices reach the needed spaces.
Social Media Campaigns & Collaborations On Abortion

Social media campaigns are an important tool for HPC to create awareness and provide accurate information on safe abortion. The participatory nature of the campaigns bring out the spirit of solidarity and community in addressing challenges to make abortion accessible for all. As part of the SAAF project, HPC launched the campaign ‘Abortion is Care’ which focuses on 4 districts of Karnataka viz Bengaluru Urban, Mysore, Shimoga and Ballari. The campaign brought the conversation on abortion to the forefront, which otherwise was an unthinkable feat for smaller cities like Shimoga and Ballari.

A whole band of activities were included under this banner ‘Abortion is Care’. Starting with the launch of Youtube videos in both English and Kannada about the SAAF project, there were also Tweetathons, Facebook lives, Instagram lives, podcasts, posters, webinars with college students and communities. The field work for this campaign had to be suspended due to the lockdown imposed by the pandemic and the subsequent social distancing, access restrictions in the post lockdown period. However, we adapted by notching up our activities in the net world to strengthen the campaign.
The Tweetathons are done with the larger goal to bring together the organizations working at the grassroots level, to collaborate with them and influence the policy and advocacy on abortion rights. The space is a hub for information exchange, addressing existing issues in a multi pronged approach of identifying the concomitant challenges at the policy levels, the changes the policies need to have, and the alternative-immediate solutions to these issues until there are changes in these policies. Apart from the advocacy role these Tweetathons play, they have immensely contributed in creating a knowledge base for the larger public, thus strengthening and mobilizing the youth to take charge of their sexual and reproductive health, demanding what their due rights are and demanding the changes that are to be made in the laws. Like the butterfly effect, these empowered youth too will sooner or later make an impact in the larger complex system of SRHR policies and advocacies in the country.

The organizations with whom we collaborated this year for Tweetathons on abortion are the changemakers in their respective countries. Their works have heavily contributed for the cause of abortion since years and they continue to mark milestones of victories in making abortion a basic human right.

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**Countries to look towards during #CovidAbortion #TeleMed**

a) US  
b) Australia  
c) Canada  
d) Colombia  
e) Moldova

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**Intl. Campaign for Safe Abortion @Safe_Abortion**

Replying to @Safe_Abortion

Some states in the US, as well as parts of Australia and Canada have introduced similar measures, while there are independent projects running within other countries, like Moldova and Colombia, where these pills are being provided during this time.

@Hidden_Pockets #TeleMed
With SAAF (Safe Abortion Action Fund), IndiaMeToo, SHEROES, YANSL (Youth Advocacy Network Sri Lanka) we had separate Tweetathons on themes such as ‘How to ensure access to safe abortion during the lockdown’, ‘Access to essential SRH products and services during the lockdown’, ‘Women’s rights to choose during a crisis’. We also attempted to bring in telemedicine to make medical abortion accessible during the pandemic.

Under the existing guidelines for telemedicine in India, abortion has no mention whatsoever, even when many countries around the world had adapted to the pandemic by making medical abortion accessible through telemedicine. We organized a multi-participatory Tweetathons with organizations from across the world to show India that telemedicine is a possibility that the country badly needs especially during the pandemic. Women Help Women, Gynuity Health Projects lit the torch for the telemedicine conversations with us for the larger impact on the policy and advocacy networks on SRHR in India.

At the various stages of unlock in India, we noticed that abortion continued to be inaccessible to many. This was inspite of the government declaring abortion as an essential service! We hosted a campaign on Twitter #knockingoncloseddoors to bring attention to the promises not kept. At the national level, we joined hands with Pratigya Rights and Global Concerns India and conducted the Tweetathon on ‘Impact of COVID-19 on safe abortion services in India’.

At the international level, we brought in Lend a Voice Africa, Safe2Choose, the WiseUp Initiative, Rural Women Rights Structure, BALDSA, Global Media Foundation and COHERINET to have Tweetathons on ‘Covid-19 and impact on safe abortion services around the world’.
The tech spaces where the youth flock in, are Instagram and Facebook. At HPC, we have realized the pulse of the youth lays in these tech platforms. Our works gave a face and voice to make the youth understand that abortion is normal, there is nothing sinful about it and that there is always help for them to access safe, legal and non-judgmental abortion.

The pandemic made us rise to the challenge and we mapped what the youth wants. We hosted a series of lives on Instagram and Facebook to spread the word that abortion is real, abortion is normal, abortion is necessary for those who want it.

We collaborated with YANSL (Youth Advocacy Network Sri Lanka), Indian Women Blog, SHEROES, Rangeen Khidki Foundation, Good Universe NGO, FPAI to host one-on-one lives. The platforms were inundated with questions from the youth on the hot-chair themes of the day. We covered themes such as ‘Men and their support for women’s SRHR during a crisis’, ‘The role of sexual and reproductive health counselors during the lockdown. How is Hidden Pockets Collective helping the young people of our country’, ‘SRHR concerns during the lockdown’, ‘Access to SRHR during the lockdown’, ‘Pregnancy, Abortion and other Sexual and Reproductive Health Concerns’.
Webinars, Workshops & Community Building

Community is the heart and soul Hidden Pockets Collective’s work. We are not just about the communities of lawyers in the policy and advocacy networks, nor doctors, nurses in the health service networks but also thriving communities of youth and locals who really are the ones we hold hands with to bring changes to the SRHR landscape in India.

With the onset of the pandemic, we had to suspend all our field works with the youth groups and local communities. We used the tech tools to tide over this crisis. For the student communities of Christ University, Bengaluru, we conducted a webinar on two themes viz ‘Reproductive Health Concerns and Regulations’, and ‘International Day for the Elimination of Violence against Women’. Unintended pregnancies is one of the many consequences of violence against women. Our webinars on both the themes initiated the youth to delve deeper into issues not just from a legal point of view, but also a community approach view. The necessity to have alternate solutions, rooted in communities, to tackle many challenges in SRHR was introduced to them.

HPC also played a key role as facilitator in webinars hosted by WGNRR (Women’s Global Network for Reproductive Rights). The HPC team conducted webinars on ‘Young people, Reproductive Justice and, Abortion rights’, and ‘Young people, Reproductive Freedom and, Bodily Autonomy’ to a global audience of youth activists and youth groups. Such a platform proved to be very fruitful in knowledge exchange. It emerged that there are always parallels between HPC’s challenges and the ones faced by many similar organizations. Thus information exchange on problem solving proved highly valuable in these webinars.
Gendered violence emerged as the ‘shadow pandemic’ this year. Unplanned pregnancies are one of the numerous consequences of gendered violence. HPC hosted a webinar on gendered violence, focussing on the alternative solutions that came to the rescue during the pandemic. The webinar ‘Shades of Violence’ saw the active participation of organizations such as Aahung (Pakistan), Youth Advocacy Network (Sri Lanka), Global Concerns India (Bengaluru, India), Vishaka (Rajasthan, India).

When the first wave of pandemic subsided, with the help and support of the Cheshire Disability Trust and the Care India org, we conducted two workshops on the field with the communities of women with disabilities and women who work as ragpickers. For both the communities our workshop was an eye opener. We covered a range of topics, starting from the basics of reproductive anatomy to menstruation and pregnancy. Through our workshops the women from these communities had a first hand knowledge on how to take ownership of their sexual and reproductive health. The sessions were not just about human biology and hygiene but also about their right to dignity and autonomy for their bodies. We informed and empowered them about preventing child marriage and early pregnancy. Through our workshops, the communities had access to information as well as help on any matter related to pregnancy and abortion.

For community strengthening, we have an exclusive Whatsapp group with 72 youth members from diverse backgrounds who take an active role in their own social milieu to advance the SRHR goals of HPC. Periodically we have discussions in these groups, spearheaded by our Digital Advocacy Manager to broaden the youth’s awareness on SRHR matters. Our larger goal is to demystify sexual and reproductive health, especially on termination of unwanted pregnancy.
Audits of Hospitals During the Pandemic

In the pre-pandemic months extensive mapping and plans were made to audit both public and private hospitals in the four districts of Karnataka viz Bengaluru Urban, Mysore, Shimoga and Ballari. Access to quality care for safe, legal and most importantly non-judgemental abortion is still a challenge for many youth and we wanted to address this through our audits. With the weeks long lockdown in place and the ensuing months of the pandemic, we found it impossible to physically be present in these hospitals. We adapted by converting our audits to tele-audits.

The findings were a mixed bag. We have had doctors who really understood the predicament of the youth in accessing abortion. At the same time, we have also had doctors, one of whom blasted and hurled accusations at us for being baby killers! She even went onto rage at us that the youth are nothing but “serial abortionists”. Some doctors were more civil in their reluctance on providing abortion to unmarried youth. The reality that the pandemic was a serious setback for numerous people in accessing contraceptives and abortion was lost on all such doctors.

Some of the worrying findings were doctors stating there has been an increase in the number of adolescent pregnancies in the months after the lockdown. One of the doctors confided to us that she is in a dilemma to do the mandatory reporting of such pregnancies under the POCSO Act, as some of these pregnancies happened due to consensual sex between adolescents who are in love. She was concerned that the law will take a punitive course and this can be scarring for the adolescents.

Another doctor reported how there has been an increase in the usage of medical abortion pills procured from pharmacies and some of the pregnant women developed complications due to incorrect usage of these pills, in the absence of medical supervision.

The findings from all the audits have been captured as 5 long form articles which were published in the HPC’s blog. They were widely circulated in elists and social media and showed the public as well as the policy makers what exactly was going on in these 4 districts.
Walking The Talk
ADOLESCENT SEXUALITY

In the Indian legal frameworks, adolescent sexuality is a matter which garners little empathy and significance. The existing laws in the country that address a wide variety of issues on minors* do little to acknowledge and validate adolescent sexuality. Some of the laws which were intended to protect the adolescents are in fact turning against them by meting out punitive actions without giving them their due right to dignity and bodily integrity and right to privacy. In the law’s eyes, the age of marriage (18 years) is the age of consent and thus the age to engage in consensual sexual activities. Any expression of adolescent sexuality, even if it is between two “consenting” adolescents who are under 18 years of age, is a punishable sexual offence in India.

HPC acknowledges that adolescents are sexually active. Adolescents reach out to us to get help through technology portals such as emails and direct messages on social media. Owing to the existing laws in the country we are in no position to directly intervene and help them. Thus we redirect them to the NGOs that work directly with adolescents. However, we have come to realize the lacunae in the existing laws, which make the adolescents fear that they will be shamed and punished for getting any help for their sexual and reproductive health.

We have thus extensively campaigned with the grass root organizations working to bring changes in the law such that adolescents are empowered to make informed decisions about their sexual and reproductive health.

We had two important co-travellers in our journey this year for our advocacy work on adolescent sexuality viz CRY (Child Rights and You) and PLD (Partners in Law and Development). CRY is one of the leading NGOs in India working exclusively on Child Rights. PLD is a legal resource group pursuing the realisation of social justice and equality for women, and specifically working to dismantle laws which restrict SRHR of women and young people.

Using Instagram and Twitter, we did online campaigns on relevant themes such as ‘COVID-19 and Child Rights’, ‘Age of consent, Sexuality and Young People’. One of these campaigns was held under the banner #ConseXt and specifically focused on complexities of age of consent.

Through these online conversations we have realised that most of the young people are sexually active but the laws are limiting their sexuality by putting an age bar to sexual consent. The conversations brought out the demands that the laws are to be made according to the social situations and evolving capacity of the individual; and that laws should be focussing on protection rather than punishment.

These campaigns broadened our presence in the policy networks. We contributed to the conversations on adolescent sexuality based on our ground works with the youth.

Our works on adolescent sexuality are not confined to online spaces and policy advocacy groups alone. Our Collective actively engages with adolescent communities by conducting workshops on laws, the POCSO Act (Protection of Children from Sexual Offences) in particular, such that they are aware of the laws that directly affect them. The POCSO Act has been a double edged sword as by intent it is meant to protect the children, but in execution it has caused a lot of trauma to them as it metes out punitive measures to them for engaging in any form of sexual activities. Through our workshops, we have made the adolescents realize when can POCSO be protective for them and when can it be punitive.

Another thorny issue on adolescent sexuality is the age of marriage. In India, currently there is an ongoing increased momentum at many spaces to increase the age of marriage to 21. As part of the NCAAC (National Coalition Advocating for Adolescents Concerns), we have been contributing to the conversations, based on our vast experience of working with adolescents in both online and offline spaces, to help policymakers have an informed picture about the ground realities.
"Whenever disaster strikes, nobody talks about sexual and reproductive health," said Jasmine Lovely George, who runs Hidden Pockets, a platform that improves access to sexual and reproductive health. She said that her organisation’s care line saw a sudden spike in calls during the lockdown.

Even buying a pregnancy testing kit was hard for some women as they were stuck at home, she said.

"It was a pretty scary situation," says the helpline’s founder, Jasmine Lovely George, who talked Gupta through the termination. “It’s very scary if you’ve been bleeding for hours and nobody has counselled you. You’re in a lot of pain and you don’t know what is happening to you.”

George says that in India there is “a disdain for sexual and reproductive health. The attitude is – there is a crisis happening and you want to talk about condoms?” She adds: “Who takes the brunt of it. It’s always women.”
THOMSON REUTERS

ABORTION IN A LOCKDOWN: INDIA SAYS ‘YES’ BUT WOMEN WONDER HOW

“Lockdowns affect women very differently. In reproductive health, people only talk about menstruation as if nothing happens after a period,” said lawyer Jasmine Lovely George, founder of Hidden Pockets, which runs the helpline.

George said most of the women contacting her helpline worked or studied in cities, but had returned home in the lockdown and were now back with family in villages and small towns.

In most cases, their movements were restricted, according to campaigners operating the helplines, with many unable to visit the local pharmacy to get a pregnancy test kit.

THE SOUTH CHINA MORNING POST

A HELPING HAND, A LISTENING EAR: ABORTION HELPLINE IN INDIA, WHERE 10 WOMEN A DAY DIE FROM UNSAFE TERMINATIONS, OFFERS COUNSELLING AND ACCESS TO A SAFE CLINIC

In January 2019, Bangalore-based Hidden-Pockets Collective launched Careline, a WhatsApp based helpline for abortion care. Careline offers a solution to those looking for a “reliable, affordable and non-judgmental abortion service in their city, and a safe space to turn to with their questions and concerns”, says Jasmine George, a lawyer and founder of Hidden-Pockets.

....“We get over 200 clients every month,” says Aisha George, a counsellor at Careline, and one of Hidden-Pockets’ four team members.

....“A lot of women carry guilt for seeking abortion due to the stigma attached,” Aisha says.

....“We find that to avoid doctors, a lot of young girls put their reproductive health and lives at risk,” Aisha says.

....“Some girls even overdose on the contraceptive pill, thinking it would help them abort their pregnancy,” Aisha says.
Jasmine Lovely George, founder, Hidden Pockets, a Bengaluru-based platform for sexual and reproductive health services in India, says, "After every natural disaster, sexual and reproductive health services are rarely treated as essential in our country. So, we weren’t surprised when the Indian government did not include it in their first list of essential services after the lockdown." Hidden Pockets began in 2015 as a mapping project to identify non-judgmental medical facilities for women to seek abortion. They also run a careline, which connects pregnant women to abortion clinics. "Ours is a real-time service as our clients can chat with counsellors on WhatsApp. We saw a sudden spike in the number of calls during the lockdown. We received about 40 messages per day throughout April, till mid-May. Most of these came in from Tier 2 and 3 cities like Nashik, Bhubaneshwar, Puducherry, etc. Initially we were wondering how and later realised that the working population had gone back to their hometowns. They knew of Hidden Pockets as they had worked in big cities before the pandemic," George adds.

....In the last five years of working with abortion clinics across the country, George says Kerala state has been the most problematic. "Several doctors in Kerala refuse to provide abortion services to single women in the absence of a parent. We had a case in the first week of April, when a 25-year-old woman wanted to terminate her pregnancy, and had to run between eight clinics," George says.

“While the World Health Organisation (WHO) declared abortion an essential service, this wasn’t included on the list of essential services which were released by the Indian government in the last week of March," explains Jasmine Lovely George, the founder of Hidden Pockets, a referral platform for sexual and reproductive health for women. “It was added later, only on April 14, but even so many women are still facing difficulties in accessing these services.”

.....“She was alone and didn’t know what else to do, this ‘doctor’ charged her around Rs 50,000 and the procedure wasn’t even done correctly. Shortly after, she realized that she was still pregnant, when she called our helpline,” says Jasmine.
TECHNOLOGY

India has 448 million mobile phone internet users in 2020. Population studies predict that the population in the age group of 15 - 34 will increase to 464 million by 2021 and decline to 458 million by 2026. India is heading to be one of the youngest countries in the world and that too a tech savvy young country.

However, India is still catching up with shame free, guilt free, fear free access to sexual and reproductive health services and rights. HPC has realized that if there is one way to make the youth feel that they are heard, supported and helped, it is through the aid of the tech platforms.

The highlights of tech platforms are that it can be anonymous and it can ensure privacy. These play a huge role in the youth reaching out to HPC. Instagram DM, Twitter DM as well as emails are all used by the youth to get help on SRHR matters, especially when they are in distress such as unplanned pregnancies. For us, the technology is a powerful bridge that closes the gap between youth and SRHR. There is immense potential to educate and engage people in need through technology.

We have used the technology to its full potential during the year 2020. The pandemic goaded us into doing so. The details of these are available in this annual report under sections ‘Abortion’, ‘Adolescent Sexuality’ and ‘Pandemic & HPC’.

*as of December end these numbers are.

HPC supports creation of relevant SRHR content and saving it for posterity through Open Archives and Open Source Voice Technologies.

CLICK HERE

Not only do these ensure long term access, but they act as snippets in the timeline of the historical narratives of SRHR and the evolution of movement building and education in India.

A much deserved recognition came to us when HPC was invited for the festival hosted by Alliance Francais to talk about ‘Leveraging Technology to Benefit Local Communities’. Jasmine Lovely George and Aisha Lovely George discussed with Natacha (Project In Common, France) the open source journey HPC has made so far.
PANDEMIC AND WORK FROM HOME

Roller coaster ride will be the apt word to describe this year. There were days of exuberant jubilation when a high point was achieved by the team, but there were also days of frustration for being unable to be together in the office space to collaborate, discuss and plan things. Real, in-person talks and the conveniences brought by it were sorely missed this year.

At the tech front, the team quickly picked up and adapted to tech tools such as Asana, Slack, Skype, Zoom and made sure that they are using these resourcefully. Occasional, informal team calls brought the team together beyond the work talks.

For the Careline team, the challenges were more acute, as they were not only handling SOS messages from distressed youth, but also figuring out options to help the youth during the lockdown. Emotional labour from the Careline team to ensure that the youth feel secure, heard and helped was very large.

To address the emotional fatigue that can happen during these demanding times, HPC held a group therapy session with an external moderator.
Pandemic & HPC

At the onset of the pandemic we were inundated with pleas for help from the youth through our social media portals, emails and whatsapp careline as they were facing challenges in accessing abortion, which was not declared as an essential service in healthcare during the early weeks of the lockdown.

Also, during the lockdown, there was a breakdown in healthcare systems at many places in the country as the out patient as well as in patient systems refused to give medical help unless and until it was an emergency.

Amidst all the vagueness and confusion across the country, in understanding what is an essential and nonessential commodity, we were aghast to see that basic menstrual hygiene products such as sanitary napkins were not listed as an essential commodity. The supply chains have not been functioning to replenish the depleting the depleting stocks in the shops.

With our campaigns and collaborations through social media, we made sure the voices of the youth are amplified. The Government of India soon added menstrual hygiene products in the essential commodities list, abortion was declared as an essential service.

LOCKDOWN, POST LOCKDOWN, AND TECHNOLOGY

Technology was the lifeline during this pandemic. The whole of the pandemic year has been jet-set-travel using technology. During the lockdown when the whole country was brought to a standstill, we were in full throttle rides in the social media platforms. Numerous events and campaigns were conducted online during the lockdown period. Major highlights from these are as follows: Domestic violence & shelter homes during the time of COVID-19 (Global Concerns India), Love in the time of lockdown - Digital Privacy (The Bachchao Project), Menstrual health & hygiene during the lockdown (Mission Sanscar), Women, Queer Individulas and Privacy during the lockdown (Body & Data), How to manage your menstruation during the lockdown (Rangeen Khidki), campaigns such as #BleedingPaused, (Rangeen Khidki, Mission Sanscar, Red is the New Green & Project Khel). The core challenge in SRHR viz safe, legal and nonjudgemental abortion was tackled head on during, as well as post lockdown. More on this can be read under the Abortion section in the report.
The Future

As much as we are active at the grassroot levels, we would also like to be an influential contributor at the regional, state and national level participatory meetings for policy and advocacy. For 2021, this is a main goal that we shall focus upon. We need these policy and advocacy meetings to bring changes to the laws because our groundworks have given us enough wisdom to see without the blinkers that the existing systems in SRHR are out of reach for many, especially the youth, and also not all existing laws in SRHR are validating the agency of a person. It is high time that the systems listen to us, high time that the laws make the needed changes and we are looking forward to making it happen in 2021.
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