

Campaign for the Elimination of Violence Against Women

“UDAAN Project 2025”



November 25 to December 10, 2025
Chhatrapati Sambhaji Nagar (Aurangabad) District, Maharashtra



The Campaign for the Elimination of Violence against women was a 16-day initiative that was held between November 25 and December 10, 2025. This 16-day activism initiative ended on December 10, which commemorates the International Human Rights Day. The initiative is an effort to highlight the issue of violence against women so that various entities including the government, healthcare facilities, and common citizens participate towards ensuring the eradication of such violence.

Udaan project on Violence Against Women is being implemented in Gangapur and Paithan blocks of Sambhajinagar (Aurangabad) district. The project is being implemented jointly by MASUM and CEHAT. Health care facilities (HCFs) which are a part of Udaan, participated in this exercise through awareness-raising sessions on issues allied to domestic violence and women's health such as mental stress.

The awareness sessions emphasized issues related to mental stress and its symptoms, causes, and impact. In addition, other healthcare staff including LHV, doctors, staff nurses, ANMs, CHOs, and MPWs, also participated in the initiative. ASHA workers were also present.



In all, close to 500 persons (including about 300 women) from various rural regions participated in these sessions, held at PHCs, sub-centres, rural hospitals, and health units in the Gangapur and Paithan blocks of Sambhajinagar district.



The awareness sessions were conducted at several facilities. For rural women, sub-centre facilities are less distant and therefore more accessible from their homes. Therefore, many sub-centres were specifically covered. Awareness sessions were held at **PHC Vihamandva's sub-centre at Vadavali, Health Unit Paithan, PHC Adool, Rural Hospital Pachod, PHC Nandar, PHC Nandar's Sub-Centre at Harshi Wadaji, PHC Pimpalwadi, PHC Lasur Station, PHC Siddhanath Vadgaon, PHC Siddhanath Wadgaon's Malunj Sub-Centre, PHC Siddhanath Wadgaon's Phulshivara Sub-Centre, PHC Nilajgaon's Bokud Jalgaon Sub-Centre, Rural and Cancer Hospital Bidkin, PHC Shendurwada, and PHC Jikthan's Sub-Centre at Turkabad Kharadi.**

Talks covered factors that contribute to mental stress along with mechanisms to deal with the issue. Factors triggering stress, preventive measures and impact of mental stress on physical health were explained. Coping mechanisms were covered as was the connection between physical and mental health. The sessions also explained proper nutrition as a means to ensure better physical and mental health.

Giving an overview about mental stress and its effect on quality of life, counsellors and healthcare staff sought to explain possible contributing factors like excessive workload, problems in interpersonal relations and even poor physical health, which can become triggers for mental stress. Ways of taking care of physical and mental health like daily walks, nutritious food, participating in hobbies were also shared.

Participants were made aware that problems related to mental health should not be stigmatized as insanity or a weak personality.

The overall effort was to emphasize that every person including women are entitled to being stress free and physically fit. Participants were made aware of factors that ensure good mental wellbeing: sufficient sleep, balanced diet, regular exercise, and balance of work or studies and time for favourite pastimes.



Apart from mental health and stress, sessions covering allied topics like menstrual health and child marriage were also conducted.

Interactive sessions and response:

The sessions were sought to be made participatory and interactive. At one of the sessions, a



pregnant woman approached the Counsellor through the ASHA and confided that her nutritional intake was not sufficient leading to her being underweight and suffering from weakness. The woman was asked if there were any issues she was facing but she said she had been underweight even before her marriage. She was counselled on ways to improve her nutrition.

Some women shared that having someone to help with the issue of mental stress was a positive

step that would help the women. Women also shared that they would share this information among other women in their neighbourhood. The participants also shared that the session would motivate them to take care of their own mental and physical health.





One woman shared how her married daughter underwent severe mental stress at her marital home. The parents realized something was not right as their daughter had stopped being communicative. They visited her marital home and brought her back to their place. The daughter is now back with them since the last 6 months and they have taken steps to annul the alliance. The sessions thus served as a means of a conversation between women in the

community and healthcare staff.

At one session, some women shared that they have no time to take care of themselves. Health staff then explained to them why it was important to prioritize their health and wellbeing.

Apart from sessions on mental stress, sessions on child marriage and its adverse effects were also conducted. After one such session,



participants shared their own views on the subject. One woman shared that her daughter's early marriage had led to early motherhood and this had adversely affected her health. During the interaction, the issue of incomplete education of the girl due to child marriage also came up and participants agreed that this too was a concern. The participants became oriented to the issue of early motherhood and how it adversely affects the woman's health and educational status, both.

