Gender Discrimination and Declining Sex Ratio in Jammu

*Poonam Dogra & **Dr. Shashi Manhas

**Professor and Head, P.G Department of Home Science, University of Jammu, Jammu.

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ABSTRACT: The present investigation was undertaken to know the perception about gender discrimination and declining sex ratio on a sample of 800 respondents including 200 family members, 100 ICDS Functionaries and 100 community members. Multistage random sampling technique was used to draw sample for the study. Interview schedule and interview guide were used as a tool for data collection. The sample was selected from ICDS projects of Jammu district. Findings revealed that major ways of discrimination exist with girls in society in the form of female foeticide, restrictions imposed on social mobility and dowry system. Overwhelmingly majority of respondents were aware about the phenomenon of declining sex ratio through electronic Media (T.V, Radio) and neighbourhood and society. Majority of respondents were aware about the facility of prenatal sex determination but they were aware only about the ultrasound method. Respondents were got aware about the prenatal sex determination through surroundings and neighbours, medical personnel and T.V, Newspapers.

Key Words: Gender discrimination, Pre-natal sex determination tests, Declining sex ratio, Female foeticide,

Introduction Girls in India are discriminated against in many ways as well-fewer months of breastfeeding, less nurturing and play, less medical treatment if they fall ill, less special food, less pre natal attention. As a result, girls are far more susceptible than boys to disease and infections leading to poor health and a shorter life span. It is this lifelong discrimination in nurturing and care that is the real killer of girls, less visible and less dramatic, but as equivocally lethal as female foeticide and Infanticide (UNICEF, 1998 and Madan and Khanna, 2011). Female foeticide is one of the extreme manifestation of violence against women- a social problem that is now spreading unchecked across the country. Female foetuses are selectively being aborted after pre-natal sex determination, thus denying a girl’s ‘Right to life’ (Siddharam et al. 2011). These sex selective abortions are a matter of great concern (Visaria, 2004). Perhaps what is detestable is that the people who commit this crime belong to the educated class (Singh et. al 2015). The issue of female child has always been a question. There is a strong son preference or “Son Syndrome” as male child is considered asset while female child is considered a liability. Sons are considered essential to keep the family alive; run generation and for that reason all family members pray; O God, grant the birth of son here and daughter elsewhere” (UNICEF, 2007). Birth of a girl in the family is unwelcome and bringing up of a girl is considered or thought to be “watering in neighbour’s garden” (Singh et al. 2015). The long standing tradition of son preference now gives to the status conscious Indian families, the choice between payment of large dowry for their daughters or elimination of daughters (Yadav and Purohit, 2015). It is not poverty alone that kills baby girls—the choices made by the parents and family have a greater role to play in curtailing her life (Balodi and Balodi, 2013).

The latest modern medical sciences, the tests like amniocentesis and ultrasonography are even being abused. These tests, which were originally designed, for detection of gender related congenital abnormalities of the foetus are now being abused particularly in India and other Asian countries primarily to detect the sex of the foetus with the intention of getting it aborted if it happens to be that of a female. The practice of killing the female child after her birth has been prevailing in our society for many years. But foeticide is the legacy and contribution of the progress made by the medical science (Jena, 2008). Advances in technology and diagnostic facilities have opened up avenue for the girl child haters leading to serious disturbances in the sex ratio as a result of female foeticide (Singh et. al 2015).

Child sex ratio (0-6 years) is a more realistic indicator of trends of female foeticide. The increasing incidences of female foeticide and sex selective abortions can lead to a drastic decrease in the number of girls to boys in the 0-6 years age group. 15th Indian census reveals that the child sex ratio has diminished from 927 in 2001 to 914—the lowest ever since independence reflects continued preference for a male child. In 1961, there were 978 females/1000 male children, by 2011 the figure had declined to 914. Till the 1980’s,
The child sex ratio was much higher than the overall sex ratio, then it starts declining (Kashmir Times, 2011). Studies have found that the abortion of female foetuses is believed to be one of the main reasons for the adverse child sex ratio (Sen, 2002).

The 2011 census data about alarming declining sex ratio in J&K has surprised all of us. J&K has shocking 859 sex ratio from 941 with variation of 82 points in comparison to national child sex ratio of 914. J&K – one of the three major states showing a decline in sex ratio (Hindustan Times, 2011). On the other hand, Jammu and Kashmir is well on path of achieving 100 percent literacy rate from 55 percent to 68.74 percent in 2011. At district level, juvenile sex ratio has declined in all districts of J&K, which places them at an alarming place. Figures of 2011 census reveal that in Jammu district, the girl child sex ratio declined from 819 in 2001 to 795 in 2011 which indicates prevalence of sex selective abortions. In Jammu region, six districts out of ten have child sex ratio below 900 (source: www.pcpndtjk.in/statistics.php?link=static).

The constantly declining sex ratio is a proof to the malfunction of laws against sex determination tests and large extent of incidence of sex choosy abortions regardless of fact that PNDT act forbid sex selection which indicate not just the insufficiency of existing laws in J&K but also an entire communal and authorized negative response to the extremely disturbing situation. The falling trend of the sex ratio is a hazardous drift for the civilization and is a caution sign for the state government to awaken. The societal and demographic repercussions of female foeticide are severe and it may have adverse result in the future in case this trend is not forth with because an imbalanced sex ratio not only predicts monetary and public tragedy but also mean an unsure future and a deprived quality of life for existing girls and their potential.

Keeping in view the above said facts, the present study was planned on 200 family members (including 200 mothers, 200 fathers and 200 grandmothers), 100 ICDS functionaries (100 Anganwadi workers) and 100 Community members (including 50 multipurpose health workers and 50 elected representatives) to get an in depth outlook about existing way of gender bias, sex determination and female foeticide. The respondents were selected as part of society, who either are accountable for this social immorality or the ones who would finish up this social evil.

Research Methods The sample for the present investigation comprised of 600 family members (200 mothers, 200 fathers and 200 grandmothers), 100 ICDS Functionaries (100 Anganwadi workers), 100 Community members (50 multipurpose health workers and 50 elected representatives) from six ICDS blocks of Jammu district i.e. Gandhi Nagar, Jammu, Bishnah, Kot Bhalwal, R.S Pura and Marh. Random sampling technique was used to select the sample for the study.

Tools used for data collection: Respondents were personally contacted for data collection. Data was collected using a self-devised interview schedule and interview guide. Before finalizing the tools, pre-testing was done on 10 percent of respondents to see the appropriateness of the interview schedule and interview guide in the form of additions and deletions keeping in mind the objectives of the study so that it could be used to get detailed information required from the respondents and the necessary corrections were done and then the tools were finalised and applied on the respondents.

Data analysis: Collected data was entered in Microsoft excel and analysed by using both quantitative and qualitative methods to derive in-depth knowledge about gender prejudice and female foeticide.

Research Findings and Discussion The perception of the respondents towards gender discrimination, declining sex ratio and pre-natal sex determination was drawn out by using an interview schedule and interview guide. The following major aspects were investigated and related findings are detailed out below:

Fig 1 reveals the age of the respondents. Majority of the respondents were in the age group of 21-40 years.
Fig 2 shows educational status of respondents and revealed that (27.3%) respondents were educated up to matric, (22.7%) were illiterate and (16.3%) respondents were educated up to middle.

**Fig: 2 Educational qualification of respondents**

Fig 3 shows overall perception of respondents about ways of gender discrimination. Major ways of discrimination exist with girls in society were in the form of female foeticide according to (67.8%), restrictions imposed on social mobility for girls (54.8%), dowry system (45.2%) and early age marriage of girls according to (44.3%) respondents. Similarly a study conducted by NIPCCD in 2008 revealed that respondent women, men and mother-in-laws agreed that girls should remain indoors. Singh and Dhanda investigated in 2008 and found that majority of the respondents gave freedom and encouragement to the son as compared to the daughters. Dudi and Raj in 2010 and Davara et al in 2014 found that respondents were aware about existence of female foeticide.

**Fig 3: Overall perception of respondents about ways of gender discrimination**

Fig 4 highlights awareness on declining sex ratio as reported by the respondents. Findings revealed that overwhelmingly majority (79.8%) respondents were aware about the problem of declining sex ratio. Related study conducted by Singh et al in 2015, Srivastava et al in 2014, Dadwani and Tintu in 2014 also observed that majority of respondents were aware of the declining sex ratio.

**Fig 4: Respondents awareness on declining sex ratio**
Table 1 shows source of information about declining child sex ratio. It reveals that (49.5%) respondents were aware about declining child sex ratio through electronic Media (T.V, Radio) and neighbourhood and society according to (36.8%) respondents. A study carried out by Dewan and Khan in 2009, Khichi and Bir 2012, Singh et.al in 2015 reveals that majority were aware about the declining sex ratio in the society and the information comes from T.V, radio, health department and peer group.

**Table 1: Source of awareness about declining child sex ratio**

<table>
<thead>
<tr>
<th>Source of awareness about declining child sex ratio</th>
<th>Group A</th>
<th>Group B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mothers (N=200)</td>
<td>Fathers (N=200)</td>
</tr>
<tr>
<td>Electronic Media(T.V, Radio)</td>
<td>85 (42.5)</td>
<td>94 (47)</td>
</tr>
<tr>
<td>Print Media (Newspapers)</td>
<td>34 (16.5)</td>
<td>28 (14)</td>
</tr>
<tr>
<td>Neighbour</td>
<td>74 (37)</td>
<td>81 (40.5)</td>
</tr>
<tr>
<td>Religious Leaders</td>
<td>1 (0.5)</td>
<td>3 (1.5)</td>
</tr>
<tr>
<td>Office Functionaries</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Doctors/Health Workers</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Census Surveys and Area surveys</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Not aware about the declining sex ratio</td>
<td>37 (18.5)</td>
<td>51 (25.5)</td>
</tr>
</tbody>
</table>

*Multiple responses*

Table 2 shows association of socio-demographic characteristics with the awareness about declining sex ratio. This table shows that respondents in the age group of 21-40 years were aware about the problem of declining sex ratio and respondents who were educated up to matric were also aware about the phenomenon of declining sex ratio. Insignificant association was found with age and educational qualification.

**Table 2: Association of socio-demographic characteristics with the awareness about declining sex ratio**

<table>
<thead>
<tr>
<th>Socio-demographic Characteristics</th>
<th>Awareness about declining sex ratio</th>
<th>X²</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes (n)</td>
<td>No (n)</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-30 years (n=254)</td>
<td>208 (26)</td>
<td>46 (5.75)</td>
</tr>
<tr>
<td>31-40 years (n=247)</td>
<td>206 (25.7)</td>
<td>41 (5.12)</td>
</tr>
<tr>
<td>41-50 years (n=94)</td>
<td>78 (9.75)</td>
<td>16 (2)</td>
</tr>
<tr>
<td>51-60 years (n=129)</td>
<td>96 (12)</td>
<td>33 (4.12)</td>
</tr>
<tr>
<td>61-70 years (n=76)</td>
<td>51 (6.37)</td>
<td>25 (3.1)</td>
</tr>
<tr>
<td>Total (800)</td>
<td>639 (79.8)</td>
<td>161 (20.1)</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illiterate (n=182)</td>
<td>124 (15.5)</td>
<td>58 (7.25)</td>
</tr>
<tr>
<td>Primary (n=60)</td>
<td>41 (5.12)</td>
<td>19 (2.37)</td>
</tr>
<tr>
<td>Middle /elementary (n=131)</td>
<td>100 (12.5)</td>
<td>31 (3.87)</td>
</tr>
<tr>
<td>Matric (n=219)</td>
<td>189 (23.6)</td>
<td>30 (3.75)</td>
</tr>
<tr>
<td>Intermediate (n=126)</td>
<td>113 (14.1)</td>
<td>13 (1.62)</td>
</tr>
<tr>
<td>Graduate and above (n=82)</td>
<td>72 (9)</td>
<td>10 (1.25)</td>
</tr>
<tr>
<td>Total (800)</td>
<td>639 (79.8)</td>
<td>161 (20.1)</td>
</tr>
</tbody>
</table>
Fig 5: gives an insight into awareness regarding prenatal sex determination. Majority (74.6%) respondents were aware about the prenatal sex determination tests. Srivastava et al. in 2011, Chavada and Bhagyalakshmi in 2011 had similar findings with majority were aware of sex determination.

**Fig 5: Respondents awareness related to prenatal sex determination test**

![Graph showing percentage of respondents aware of prenatal sex determination](image1.png)

Fig 6 provides awareness on different methods of prenatal sex determination. This graph shows that (45.7%) respondents were aware about the ultrasound method. Dadwani and Thomas in 2014 found that majority of study population were aware about various sex determination methods. A study conducted by Metri et al. in 2011 and Shidhaye et al. in 2012 found that majority were aware about sex determination through sonography. Walia 2005 found that small percentage of respondents were aware about amniocentesis technique.

**Fig 6: Awareness on different methods of prenatal sex determination**

![Graph showing awareness on different methods of prenatal sex determination](image2.png)

Fig 7: provides source of information about prenatal sex determination methods. It was found that respondents were got awareness about the prenatal sex determination methods through surroundings and neighbours (20.5%) medical personnel (18.8%) and TV, Newspapers according to (16.7%) respondents. In a study by Manhas and Banoo in 2013 majority of mothers and fathers were aware about ultrasound method and major source of sex determination were relatives, doctors and media.

**Fig 7: Source of information about prenatal sex determination methods**

![Graph showing source of information about prenatal sex determination methods](image3.png)
Dwindling sex ratio is a question of vital alarm. The growing difference in sex ratio is known as a multifaceted and critical problem and needs to be addressed head on. From the results of the study it appears that respondents were aware about the facility of pre-natal sex determination and ultrasound method for determining sex of the foetus. They were quite aware about the trend of decreasing sex ratio but in spite of that number of girls continues to decline. So the need of the time to start awareness programmes for the public about the importance of the girl child. Community level workers should also be included in giving mass information to change the mindset of society towards the girl child. Besides this, schemes should be launched for families having only daughters, parents should treat children at home equally without any discrimination and provide education to make girls independent.

References:


27. www.pcpndtjk.in/statistics.php?link=static