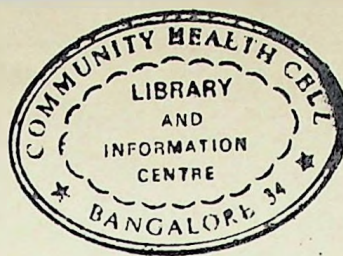


Report of the
National Workshop on
The Girl Child





REPORT OF THE NATIONAL WORKSHOP ON THE GIRL CHILD

27-29 December, 1987

India International Centre,
New Delhi

WOMEN'S DEVELOPMENT DIVISION
National Institute of Public Cooperation &
Child Development
New Delhi-110 016

INTRODUCTION

The integration of the female child into the mainstream development process is a continuing cause of concern to activists, administrators and policy planner in the South Asia Region. This concern needs to be operationalized into manifold goals and concurrent objectives, both long term and immediate. The ultimate goal is to have an active, healthy, confident 21st Century female child unfettered by limiting traditional roles, and unrestrained by socio cultural stereotypes that deny her opportunities to information and options or limit her choices regarding herself, her body and her community. Briefly the perspective visualized is a female child with high self perceptions and self-esteem not merely in recipient roles but in active productive roles; not merely as the bearer of peace and pacifist roles but as a 'personae' with concern for all denied human dignity. The image is of an equal, gender-aware, unshackled female child in control of her destiny and environment.

A "stock taking" after the end of the International Women's Decade has revealed the fact that special programmes meant for the development of women could create only limited and superficial changes. This situation is a reality in the developing world and more so in our country. At the end of the United Nations Decade for women, the world conference which met at Nairobi, while recording satisfying advances, also reminded people that a lot remains to be done to equip women to participate effectively in development and share its rewards.

In India, to be a female is often less than to be human. Woman's role in society, her limited rights, considerable duties and the shabby treatment meted out to her in all walks of life originate from the fact that she is basically considered a handicap and a burden on the family right from birth itself.

The SAARC Conference on South Asian Children of 1987 gave an urgent call for improvement of the mother-child life cycle beginning with the girl child. The neglect and discrimination the girl child is subjected to are extensive and deep rooted in a complex set of social, cultural and historical factors. It was recommended that the response to this situation should include a major effort to educate parents and the community to accept boys and girls as equals.

About 42 percent of the Indian population comprises of children. Nearly half of these young Indians are girls, just as nearly half of the total population is female. The biological advantage of the female sex is negated by the negative attitudes reflected in their declining sex ratio, lower life expectancy, higher rate of female mortality, lower nutritional status and many other allied factors. However, the most important fact, as revealed by research studies, is that the socio cultural factors are the root cause for this discrimination. The malignancy, though noticed in almost all states of the country, is at its worst in the North and North West India.

The gender based discrimination starts even before the birth of a female child. Amniocentesis which is to be used for clinical diagnosis of genetic defects is being misused to identify the sex of foetus leading to 'female foeticide'.

Gender roles are conceived, enacted, taught and learnt within a complex set of relationships in the family and community at large. The girl grows up with a notion of temporary membership in her natal home. She is always considered a burden that has to be disposed of along with assets in the form of dowry. Her productive role is limited to being a household drudge and a reproductive machine. As a result of this even after forty years of independence the female literacy

rate is just 24.82 percent which is about half that of males (45.89 percent). Female enrolment in schools has quadrupled since 1950, but six out of every ten school age girls are still out of school for various reasons including drop outs.

Research studies carried out in various parts of India, seem to indicate that rural and urban poor women remain over-worked and under-rewarded. Amongst this population, a major part of domestic chores including cooking, cleaning, fetching fuel, fodder and water, as well as looking after younger siblings falls upon the girl child. Girls accompany parents to fields to help them in sowing, transplanting, weeding and harvesting, collecting fuel and scaring away birds. They also accompany them to the market place with loads on their heads and backs. Girls are involved on a large scale in the unorganized sector too. For instance, a large number of girls are working in such industries as the match, coir, carpet, lock, glass and beedi gem polishing, making of paper bags, garments, cotton pad and groundnut shelling, brass ware, zari embroidery, etc. Equally distressing is the plight of a large number of girls in the domestic service, rag picking, news paper vending and so on.

The National Child Labour Policy seeks to create a beneficial impact upon the health, education and nutrition of the working child in a setting where different labour laws are being implemented. This does not, however, bring into its purview working girl child because she largely works at home and her specific problems have not been given any particular consideration in National Policy.

The media, which is such a powerful tool in bringing about attitudinal changes, is extremely indifferent towards issues related to girl children. The print media, whether in school syllabus or otherwise, portrays girls in traditional stereotype roles. Audio-visual mass media utilizes the female body for marketing consumer products. Cinema and television portray conventional images of women either as Sati Savitri or Hunterwali, a lady phantom at work. The personified portrayal of girls or women is insufficient. Girls get coverage in newspapers only in the form of hard saleable news like rape, suicide etc.

The integration of the female child into the mainstream of development, the complexities and cons-

traints of growing up as female in Indian society and her specific needs have somehow eluded the attention of academicians, administrators and policy planners. There is no denying the fact that a girl child is usually discriminated against in most spheres of life, be it healthcare, nutrition, education, employment, training or social justice. A complete situational analysis of the girl child in India calls for a serious thought in developing her as a self-confident active and productive person in all aspects.

It is increasingly evident that this indifference at all levels towards the women and girls will adversely influence India's developmental goals. The nation cannot afford another decade of this indifference which can create an alarming situation. It is imperative to ensure that the girl child is given priority in programming for development.

In the context of the above concern and the need to evolve strategies to enhance the status of the girl child, the National Institute of Public Cooperation and Child Development organised a three day National Workshop on the Girl Child at the India International Centre, New Delhi from 27-29 December, 1987. The main objectives of the workshop were to table and discuss issues related to the status of young girls in the age group 0-20 years, and pertaining to their nutritional health and educational status, in the context of the prevalent gender bias, patterns of socialization, implications of early marriage, and child labour; also listed for discussion were concerted programming efforts and evolution of strategies for the overall development of the girl child.

PARTICIPANTS

The workshop provided a forum for policy makers, demographers, activists in the field, representatives of voluntary agencies, administrators, social scientists, media personnel and representatives of international agencies to discuss major issues and strategies to improve the status of the girl child. There were 70 participants including resource persons and observers. They represented a cross-section of activists and academicians engaged in the field of women and child development.

A SITUATION ANALYSIS OF WOMEN FROM BIRTH TO TWENTY*

— Meera Chatterjee

This workshop marks the beginning of a process — the process being the Project on Women from Birth to Twenty which aims to produce a comprehensive status report on the female child in India. NIPCCD has undertaken this project at the urging of the Department of Women's Development of the Ministry of Human Resource Development and UNICEF has kindly funded it. The Project defines the female child as women from 0-20 year age group. The report will contain recommendations for action to be taken by the government as well as non-governmental agencies and citizens — for the improvement of the status of this very important and vulnerable group. We hope to go beyond this to seeing actual implementation of actions and schemes within a fairly short time, and also to have suitable strategies introduced into the Eighth V Year Plan — and subsequent plans, as the problems cannot be solved in five years.

We are dealing here with almost half of half the population of the country. The female population accounts for about 49% of the total population and 46% of females are under the age of 20. So this is no mean task that we have set for ourselves in this Project. To meet these objectives we felt it imperative to get together a variety of people from different parts of the country — practitioners, researchers, planners, bureaucrats, activists, and communicators — in the fields of health, nutrition, education, social development, media, vocational training, labour, law and many others for a joint consultation. The seminar has gathered a notable and heterogeneous group. Over

the next few days we will be hearing from Sociologists, Educationists, Doctors, Demographers, Psychiatrists, Lawyers, Nutritionists, Bureaucrats, Planners, Film-makers, Theatre people, and Journalists; and may be even some politicians! Thus, I see the purpose of the seminar, and particularly of the Situation Analysis (that I have been asked to present), as: to table issues, ideas and information, to ask each other questions, and to argue (if need be) on many controversial points that surround this subject. But eventually we have to hold hands so that our final recommendations deserve serious consideration from the nation at large. They will be considered seriously if we focus on real problems and if our recommendations are realistic and implementable.

In fact, a situation analysis will emerge from the workshop so I cannot presume to lay it before you. What I will do is to raise some issues and questions which are uppermost in my mind — and to which I feel we must seek answers. I have arranged these questions thematically and I shall present them first verbally and then at the risk of repeating myself I shall show you some slides to illustrate the points.

Theme I: The Girl is Unwanted

The first theme that I would like to place before you is the theme of femicide — the fact that the girl is unwanted. Under this theme one can include both the abortion of female fetuses after genetic typing and amniocentesis and female infanticide which, although

*Note: This is a draft typescript from the presentation made at the Workshop on the Female Child on December 27, 1987. Sources and references will be supplied in the final version of the report.

outlawed, is still a practice today. Both involve deliberate destruction of the female at an early age. To our knowledge amniocentesis followed by sex selective abortion is a service available at private, readily accessible clinics in both large and smaller urban areas, so that the subject of female feticide which used to be thought of as a middle class well-to-do persons issue is no longer that. It is also an issue that relates to the poor. The poor are being increasingly drawn into this unscrupulous practice as advertising on the subject spreads widely these days. However, the magnitude of the problem is very difficult to estimate. The data that one finds currently are very scattered. Better statistics need to be collected. One example is that in the year 1984, 40,000 female fetuses were aborted in the city of Bombay alone, a frightening figure considering that Bombay is probably not the worst area of the country. Another survey in Bombay found that of 8000 abortions reported only one fetus was a male - showing that the success rate of the technique is high. There is clearly a need for accurate information - from other parts of the country, notably the North where the practice is reportedly widespread. However, given the unethical nature of the practice any information we get is still likely to be an underestimate.

The main issue relating to amniocentesis is whether it can or should be banned by law. Obstetrician-gynecologists have argued that it cannot be banned as it is a necessary medical technology which caters to a positive need. One does sympathize with families who need to have amniocentesis for detection of genetically-linked disorders as well as with mothers over 35 years of age who feel they would like to have the test for detection of Down's syndrome. Thus, it is probably not feasible to ban the technology (without leading to its "boot legging"). What can be banned and we have taken some strides in this direction - is advertising of sex selection. We also need to bring to task (impose heavy penalties on) any cases which are done blatantly for the purpose of sex selection. The question, of course, is how effective will any laws be? What are the "teeth" required to make the laws operative? — a question that lawyers in this group could address themselves to. We also face a situation where the service providers are doing this test for monetary gain.

But if the actual costs of the service have fallen from Rs. 600 four or five years ago to Rs. 100-150 today, it should not be too difficult to combat. There are surely other more useful things the same practitioners could be oriented to do for the same money! The crux of the problem is that—as the practitioners feel—the test is meeting a felt need of society. The families who undertake it do not want a daughter; and if one were born they would not be able to sustain her after birth. She would be left to die or be neglected. So the ultimate question is not really focussed on the medical technology but on the value system that makes the technology "useful" and used. In the long term, therefore, this issue is dealt with only by enhancing the status of the female child and through a concerted series of actions to increase both her economic worth and social standing.

The second part of this theme. (The Girl is Unwanted) is female infanticide similar to feticide in that those who don't want really know the magnitude of this problem. We only know that certain communities practise it more than others. For example, it is believed to be widely practised among Rajput families of Rajasthan. This is one of the states where the status of the female is the worst. There are also the famous Kallurs of Madurai who, it is estimated, poisoned about 6000 female babies in the last decade. These people are landless labourers and marginal farmers who can't meet the expected marriage and dowry expenses (It is shocking that hundreds of female children will be destroyed before the practice of dowry goes!) They believe that the destruction of a female baby will bring a boy as the next child. A Kallur woman who does not dare to destroy her female baby might be abandoned by her husband—a direct link between what is practised on the female child and the status of the adult female. As an aside, it would be interesting to know how the community decides which girl babies are to be allowed to survive—for they are obviously letting some survive to perpetuate the species. Conversely, the question whether the community is dying out because of the lack of women due to their extreme poverty is germane particularly because of the issue of poverty affecting women in other groups in our country.

There are some major differences between the practice of female feticide and infanticide. For one, female infanticide is clearly murder against which there is already a law. So its practice can be brought to book - if it can be detected, which is the more difficult problem. Given the already high infant mortality it would seem impossible to detect female infanticide unless all births are attended and reported and there is at least neonatal follow up and reporting of any sudden deaths. This is still a distant dream. At the moment there may be as much as 40---50% under-reporting of births in some areas and only 15-20% attendance of births by trained personnel who could report and follow them up. Currently births reported as still births or neonatal deaths could actually be cases of infanticide. It would seem imperative to address this issue by putting in place right away a system utilising dais, CHWs, ANMs, AWWs and other village level workers to attend to births and particularly, to report them; to visit homes for the first month and report any untoward deaths.

The question then is to what extent can we attempt to use the law and improve birth attendance and reporting to stamp out the practice of female infanticide. How can we reach into communities to enforce the law and provide adequate supporting services?

The second major difference between infanticide and feticide is that while the latter is born of a modern medical technology, the former is an age old practice - with religious sanction if people's interpretations of the *shastras* are correct. There is a traditional blessing that says: "May you be the mother of a hundred sons" and a prayer: "The birth of a girl grant it elsewhere; here grant a son," from the Atharvaveda. One of the *Sutras* prescribes, "The aim of existence of a woman is to be the mother of sons; daughters are not desirable; a wife who bears only daughters should be abandoned ...". What pressure on mothers to do away with their baby daughters! The irony of course is that fathers are genetically responsible for the gender of their offspring! If we could disseminate this information widely, perhaps mothers would be blamed less for their female born children. Perhaps the status of the female child could be enhanced by pointing out to fathers

their seminal role. If advertising on amniocentesis can spread as it has - so should news about X and Y chromosomes! At Tilonia, a group of performers enacts a play on the X and Y chromosomes to demonstrate that the father is responsible for the sex of the child.

"Preference for sons" is of course based on further religious sentiments - a man needs a son to perform his funeral rites and to derive benefits in the life hereafter. *Manu's Laws* hold that: "Through a son, a man conquers the world; through a son's son he obtains immortality; and through a son's grandson he gains the world of the sun." "One can see the strong inter-generational pressure to bear sons! The issue of the low status of the female child is also related to the stringency of the dowry system and the proscription against daughters inheriting which we shall turn to later.

I would like to point out that while we quote the (Hindu) scriptures for their negative representation of the female child there are also provisions which support the role of daughters. For example, the son of an only daughter - a grandson - may also perform the funeral rites and obtain blessings for his grandfather! In the absence of a son, a father can appoint a daughter to his estate. Perhaps we need to communicate these possibilities as a step towards rectifying the obsession with sons. Of course, the fact of a father's sins being remitted through *Kanyadaan* (giving of a daughter in marriage) is well known, though here there are the unfortunate connotations of dowry to which we shall return.

I've dwelt on the issue of femicide at length because it is clearly the most drastic of actions related to the low status of the female child. There are a number of interesting practices which also link it up to the status of the adult female. For example, women pray to Shiva or Vishnu or one of the Mother Goddesses and observe fasts on their sacred days if the birth of a son is desired. They visit shrines, make offerings and hang up small cradles hoping that baby boys will fill them. Most significant of all the wish can be fulfilled through a prayer to a *sati*. This is not very far from the offering of human sacrifice for the purpose - instances of which come to light ever so often. I have already mentioned

the Kallars of Madurai who believe that by killing a girl baby, a boy child will be born next. Even in other communities, when a child dies (naturally or otherwise) various burial practices are followed in the hope of facilitating the return of its soul to the mother. In some castes in Punjab, dead girl babies are laid under a tree. The next morning the place is examined to see if a jackal or dog has dragged the baby towards its mother's house. If it has, it is a bad omen meaning the mother will give birth to another girl. If it is dragged away it means "a brother will be born." Among the Kandhis of Madhya Pradesh it is believed that if a child dies within seven days of birth it is excluded from the circle of future female births in the family--so there is less chance of females being born. As male children are desired through successive generations this belief could be a powerful incentive to commit female infanticide.

There are also some humorous practices relating to the desire for sons. In the orthodox ritual of *Purnasavana* (now rarely practised), causing a male child to be born, the husband pours a few drops of water down his wife's right nostril and tickles it with a piece of grass! Another practice which still exists today is to make a boy sit on the bride's lap during the wedding ceremony.

The gist of this is that we really must see in a continuum all the issues affecting women from birth to adulthood. They lead ultimately to the low status of the adult woman. Her situation in turn affects the treatment of female infants, children and adolescents--a vicious circle.

From a policy and programme stand-point one must address oneself to these issues by enacting and enforcing relevant laws, by mass education and by providing visible opportunities for girls to develop and to be valued.

Theme II: The Girl is Neglected

The second theme is the Girl is Neglected -- particularly in the areas of health and nutrition. In this life cycle approach to issues affecting the female from birth to twenty, this theme is particularly relevant to the 0-5 year age group, but is really one that stays with the girl through the rest of her youth - or even life.

We know that among 0-5's there is high mortality from pathological causes, high morbidity and low nutritional status. Relative to femicide, the issue of neglect has more data to support it. Macro level surveys as well as micro-level studies show that the nutritional status of the female child between 0-5 years is worse than that of boys of the same age. I shall not repeat studies and figures that many of you would be familiar with. Dr. Shanti Ghosh's recent excellent paper highlights the kind of information that is available on the subject. I however, where data illustrate a point I shall cite them.

A report on some West Bengal villages in distress (though West Bengal is by no means the worst state) found that the ratio of malnourished females to males among 0-5 year olds was 1.07. If one considered moderate and severe malnutrition only (II and III degree) the ratio rose to 1.40, and it was 1.59 among severely malnourished children. These data illustrate that not only are girl children more likely to suffer from malnutrition, but also that when they do the severity of their malnutrition is greater. The well-known Morinda study in the Punjab many years ago showed that sex was the most significant determinant of nutritional status. However, according to the National Nutrition Monitoring Bureau, the picture is somewhat better for girls than boys. In the year 1980, 51% of girls suffered from mild malnutrition compared with 44% of boys but the frequencies of moderate and severe malnutrition were 25% girls, 39% boys, and 3% girls, 6% boys respectively. These national macro-level data are somewhat at odds with micro-level studies which almost ubiquitously report more malnutrition among female children than males (suggesting that these data deserve a close look) Dr. Ghosh quoted (in her recent paper) data from the Safdarjung hospital which clearly bring out the high ratio of female to male malnutrition particularly in the severe grade. There were 3 normal males to every female, but 3 severely malnourished females to every male examined. Although the NNMB data for the 1-5 year age group are confusing, there is complete agreement between NNMB data and that from other studies on the nutritional status of infants, where females are clearly shown to be more frequently and severely malnourished than males. The usual

explanation for this is that female infants are breastfed less frequently and for a shorter duration as D. Betty Cowan's work in Ludhiana has clearly shown - as well as the work of others (eg. Halder and Bhattacharya; Khan; Vijay Kumar). Although the introduction of supplementary foods is delayed in the case of both sexes of infants, one can deduce from measurements of nutritional status that girls get less than boys of the customary weaning foods. This is true no matter what part of the country one looks at. Boys seem also to get better quality foods as well as more quantity. Dr. Cowan as well as Monica Das Gupta have shown that with the increase in number of girls in a family the status of the girl child declines in terms of health and nutrition. This is true also in case of shorter birth intervals - if another child is born immediately after a girl she is more likely to be malnourished because of shorter breastfeeding and less care by her mother.

I should like to add here that although the NNMB data may show that girls in the age group 1-5 are not necessarily more malnourished, when we look at the dietary consumption data of older girls, age 13-15 years, we find that they consume less than 2/3 of the recommended calorie intake in all states except Karnataka. Those between 16 and 18 years consume less than 3/4 of the calorie RDA (in all states except Tamil Nadu, Karnataka and Andhra Pradesh). The gap between male and female weights in the 16-19 year age group is abnormally large in states like UP, West Bengal, Kerala and Tamil Nadu.

Another study, which I would like to quote, from the CMC-Ludhiana compares privileged male and female children with under-privileged children. There we see that in the privileged group 24% of females were malnourished whereas in the under-privileged group the percentage was 74%, demonstrating the synergistic effects of poverty and gender bias.

The prevalence of anaemia in young girls is also a cause of particular concern. In one study of urban girls it ranged from a low figure of 18% among 6-14 year olds in Madras - to 95% in Calcutta.

In general one assumes that boys and girls of this young age are exposed to roughly the same levels of disease but perhaps because of lower nutritional status, morbidity in girls is actually higher. More

disconcerting is the ubiquitous finding that despite higher morbidity, treatment rates for girls are considerably lower whether one considers out-patient attendance or hospital admission (as in the case of the Safdarjung hospital studies by Dr. Ghosh and others and the Narangwal and Singur studies). Girls tend to be brought for treatment at more critical stages of illness, or taken to less qualified doctors and therefore, their mortality even under treatment is likely to be greater. Kynch and Sen reported data on Bombay hospital admissions showing larger numbers of males. Mankar has described a study where female two to three times larger in number got no treatment when ill compared with males. This phenomenon runs through India whether North or South, East or West. The general feeling is that scarce resources of time or money should not be spent on daughters - that they will get better by themselves. It is perhaps also based on the belief that girls must tolerate pain and suffering, an aspect of their socialisation which we shall discuss shortly.

Ultimately these factors - poor nutritional status, high morbidity and less health care lead to the considerably higher mortality of girls under five years. In fact, figures show that females have a higher mortality than males in India - rural, urban, or combined, particularly in rural areas of most states, although the male-female ratio is closing in urban areas. Also, mortality in the age groups 5-9, 10-14 and 15-19 years is higher for females than males - all India, rural, urban and combined, and in the states, especially in the North and West, though the gap is less in the South. The ratios of female to male death rates in these age groups in rural areas, for example, were 1.17, 1.31, 1.04, and 1.42 respectively. While the figure for 0-4s in the urban areas was relatively lower (1.04), the corresponding ratios for the older age groups were very high - 1.59, 1.40 and 1.57 respectively.

The higher mortality of girls under 5 is largely responsible for the skewed sex ratio with which we are all so familiar. While it is true that female mortality is higher than that of males right upto the age of 35 or 40, the fact is that as the mortality rate of the zero to five year age group is about twenty times greater than any other five year age group the sex differential just in this

group accounts for most of the skewedness in the sex ratio - a point that escapes most people! It is just during these five years that this skewed sex ratio is being caused. As we know the sex ratio declined from 1871 to 1971 (and made a slight upturn in 1981) suggesting that the status of the female child in particular worsened during this period. The so called improvement in 1981 was due to a slightly better situation in only a few areas of the country. Kerala, Karnataka, Andhra Pradesh Orissa, Jammu and Kashmir and Himachal Pradesh had ratios over 950. In the other states, males outnumber females by almost 10 percent.

If we look at the sex ratio in terms of the number of males per 1000 females (the opposite of what we normally do) - the all India figure is 1071 (933 in the other way). At birth the sex ratio is around 1050 because more males are born than females. However, in other countries this figure usually drops to around unity by the age at one - because males are biologically more vulnerable than females during infancy. Not so in India. The male : female sex ratio increases for every age group (upto the age of 35). Among 0-4 year olds it is 1044; 5-9 : 1061; and 10-14 : 1097. It is 1066 for 0-14 year olds. Thus, in the first fifteen years of a cohort we add almost 50 males per 100 females due to deaths of females in this age group (and despite poor reporting of births, particularly those of females). Punjab, Haryana and U.P. are the worst states with 0-19 year male : female sex ratios of 1100 (1119, 1118 and 1136 respectively).

Besides the continued need to motivate parents to value their girl children more, two more issues emerge at this stage. First, are the programmatic issues of whether and how our programmes can be strengthened to take care of little girls so that the gap between male and female children can be closed and all children as a group can be given nutritional and health care. In ICDS areas, of course, this programme is the key - and the issue here is to increase girls' actual attendance. The enrolment figures show that girls are enrolled to the same extent as boys but my own observations at anganwadis suggest that, in fact, they don't always attend. Thus, a stress is required on girls attending the anganwadis - particularly those in the

0-3 age group (as also boys in this age group which is under-covered). However, elsewhere where there is no ICDS, the health services will have to take on this role. In my view the key need here is to make health care more accessible to mothers and women at large. This is a supply issue in addition to demand considerations. There is today a very large unmet demand for health care at the household level despite the large health infrastructure that exists.

The second issue is of course the economic one. There are clear indications that girls are worse off in matters of nutrition and health care in poorer households. There is also evidence that in times of economic stress girl children (and women) suffer more - including the recent story of a father selling his 8-year old daughter during the drought in Rajasthan; "What else could I do. I had to sell my daughter?" The point here is, of course, that unless we raise the level of those below the poverty line, (in their struggle for survival) girls will always be the worst sufferers and fall below the survival line. The gap between the treatment of girls and boys will only begin to close at the level where families are assured of the survival of their male offspring and hence feel they can give a little extra to their daughters. The Telugu saying "Bringing up a girl is like watering a plant in your neighbour's garden" suggests that you have to have enough 'water' to first water your own garden (i.e. food to take care of males) before you can justify watering your neighbour's (i.e. feeding your girl children).

Theme III : The Girl is Undeveloped

The third theme - The girl is Undeveloped - refers to problems in education - specifically to low school enrolment and high drop out, or low retention of girls in school. Once again the data here are more certain and the causes of these problems are perhaps better understood - but as far as I can tell the solutions still elude us.

National surveys put the percentage of girls enrolled at the age of 6 (into class I) at 54% of eligible girls. This contrasts with 80% in case of boys. By class VI only 24% of girls are in school. Only 15% are enrolled in classes VI to XII. These are really disconcerting figures. The national survey done by the NCERT in...

1981 as well as the 1981 census supports this trend. Class VIII must be considered the minimum number of years of school necessary for *really functional* literacy in the sense of the completeness of schooling. In 1981 while male literacy was around 47%, female literacy was only 25%. There has been a trend of increasing enrolment of girls in school but it has been very slow. If we look at figures from 1950-51 to 1980-81, over this 30 year period boys enrolment at the primary level went up from 61% to 100%, whereas girls enrolment went from 25% to only 66%. At the middle school level (Class VI to VIII), enrolment of girls went up from 5% to 27%. We also know that rural residents and underprivileged groups have larger gaps between males and females, and that there are severe regional imbalances in the country. While 73% of women in Kerala are literate only 12% in Rajasthan are; while 75% of girls in Kerala in the 5-14 year age group are in school, this figure is only 10% in Rajasthan. Therefore, although female enrolment is increasing the gap between males and females is perhaps widening. This may be largely due to socio-economic factors related to the need for girls to work both in and out of the house - versus the low returns perceived to their education. Also related is the continuing practice of early marriage of girls. And not the least it is due to the poor availability of facilities for girls in the way of girls schools, female teachers and the quality of the facilities in girls schools. Thus, on the education front there is clearly a lot to be done to improve the status of the female child. The recent report of the National Conference on Women's Education (1985) is excellent on the subject of what needs to be done for girls in school.

A brief representation of women in higher education is in order. This subject is well within our purview as we are dealing with girls up to the age of 20 which includes those in higher education, at least to the graduate level and in professional courses. Although the percentage of girls enrolled in higher education has increased from 10% of total enrolment in 1950-51 to almost 38% in 84-85, this is still low. However, it does show that once certain social and economic hurdles have been crossed by girls they can compete well and enter into higher education. The issue here is not so much quantity perhaps as quality. Girls make gender-

biased choices of disciplines as they enter into higher education. There are very few women in engineering, agricultural and veterinary sciences and commerce. The ratio of women to men entrants into medicine and the sciences has fallen in the last 30 years and is only 4:10. This ratio is 6:10 in the arts; and 9:10 in education. Despite this last relatively favourable ratio in education, girls are not entering into the school teaching profession in sufficient numbers to break the vicious cycle of low school enrolment of girls! Only 25% of teachers at the primary level in 1980-81 were women; and at the middle level only 30%—a figure that shows a decline since 1960-61. Thus, the issue of wastage in female education is also pertinent.

Although non-formal education is perceived as the alternative to formal education (and a solution to some of the above problems) there is an ongoing debate on whether it should resemble formal education (i.e. be oriented to the 3 Rs) - which would give it the middle class status associated with formal education - or whether it should be oriented towards skill-generation and/or home making. Many NGOs in the country have shown the way to improve income-generating skills of women through training. This issue merits great attention by this Workshop. The well known Mahabubnagar study done in the early 1970s showed that the integration of non-formal education and health and nutrition services had very positive effects on the status of women.

Theme IV: The Girl is 'Used'—Reasons

In fact, while we attach value to girls going to school, it may not be literacy that we are after at all, but exposure to ideas and concepts - whether in science or maths or biology or literature. Unfortunately our society attaches value to just the opposite. Girls should not be exposed to worldly ideas and to the dangers associated with them. Girls are withdrawn from school, firstly, because of no economic gains associated with their education by their natal families (as by the time education leads to earning they will be part of their marital families). Secondly, if girls are to be married their virtue must be protected. As they near menarche or enter puberty with its first signs of breast budding around the age of 9 or 10 (that is

around class III or IV) they are potential objects of sex abuse so they can't be left to walk through villages or to other distant or neighbouring villages. They cannot be left to the mercies of male school teachers. By the time a girl actually menstruates (around the age of 12 on an average) the potential of contact with males has to be absolutely minimised. The third reason for withdrawing girls from school or never sending them in the first place is a combination of the above two. Not only are they safer at home but they are more useful. If there is any economic value attached to young girls it is that they can help their mothers perform a variety of domestic and home-based income earning tasks. Mothers expect a great deal from their daughters because they are over-burdened themselves. Young girls mind children younger than themselves--it is not unusual to see a six year old girl looking after a four year old brother. They fetch water, fuel, wood, look after buffaloes, etc. They are involved in home-based industry such as weaving, basket-making, bidi rolling, match and fireworks, etc. (even in sweet shops). We cannot ignore this contribution. Recent estimates say that 1.4 crores of children are engaged in wage labour. Another 3 crores are engaged in economic activity and unpaid family labour. These figures total to two-thirds of the children out of school and the majority of these are girls.

Among 0-14 year old girls there was a 32% increase in "main workers" during 1971-81, compared with a decline of 3.5% among boys in this age group. This is probably because more boys are being sent to school and consequently more girls being drawn into the labour force. The largest growth rate among five year age groups was in the 15-19 year age group, where the female work force grew by 63% (compared with a 27% increase among males in this age group - the largest increase among males was in the 20-24 year age groups). Altogether the female "main worker" force grew twice as much as the male but, of course, on the whole there are still fewer females than males 'working' (under this definition). Twenty percent of all working females are under 20 years of age and 84% of working females are illiterate. Projections for 1981-2001 suggest that the participation rate of females will grow faster

than that of males particularly in the 0-14 and 15-19 year age groups.

This issue is also related to the lack of alternative education and training opportunities for young girls both in terms of preparation for work (skill learning, etc.) as well as of opportunities for young working girls to learn. These lacunae are the basis for further discrimination both within the family and in terms of employment of women. The system also substantiates the traditional work roles played by women as well as the low pay, back breaking jobs, poor working conditions, exploitation, and the infamous double burden faced by women. Literacy and employment are correlates of better health, of better use of health facilities by women, of survival of children, and of use of family planning. (Though this last is not the main reason to improve literacy and employment among women - I am pointing out the far reaching benefits of doing so.)

Theme V : The Girl is a Liability

The fifth theme is the 'liability' that young girls pose to their families. This explains much that is happening - or not happening in the education of girls and also refers to the phenomena of early marriage and early child bearing. At an early age girls become conscious that they are only temporary residents of their natal homes, through the constant references to 'going away' to a marital home and certain associated rituals which they are made to perform. While at a young age, a girl can "play" her 'learning by doing', domestic work prepares her for her eventual roles as wife, mother and daughter-in-law. The acquisition of these roles is precipitated by puberty.

Puberty changes a great deal for girls. While the pre-pubertal girl is considered pure, in puberty she acquires impurity. The average age of menarche in Indian girls is around 12.3 years - which is a rather delayed age compared with the West, due, it is thought, to the poorer nutritional status of young girls in India. Girls are often secluded at the first menses and although they may be given new clothes and special food and so on, their movements are restricted so that their interactions with males are minimised. We have already referred to the effect this has on schooling but the other major correlate is marriage and child-bea-

ring. Most puberty-associated rites focus on the girls "readiness" for marriage and motherhood. It is interesting to note that while menstruation is considered an auspicious event in some communities, particularly those in South India, in the North the emphasis is on the pollution aspects and the liability the girl subsequently poses. Girls must be "kept away from the sun" which is considered a fertilising agent as they are 'ready to be fertilised'. Moving girls into the 'inner quarters' or into purdah is another response to puberty. Along with their seclusion, a behavioural change is demanded of daughters of this age. Because they are vulnerable they cannot be 'loose'. They must be shy and modest, look down, restrain their speech, and so on. Also they begin to practise rituals and undertake fasts to pray for a good husband.

The issues of girl child 'neglect', 'under-development' (i.e. lack of investment in them) and 'liability' are closely inter-related. When girls are actually handed over to their marital families at the time of the wedding there is a symbolic return to the natal family of what has been consumed during the girls' years of residence at the father's house. This is somewhat ironic given the fact that girls consume so little. Although she has been given little, the notion that she must return it is strong. Girls have no right to anything within their natal homes, and their obligations also are focussed on their marital homes.

The practice of early marriage still exists today despite the Child Marriage Restraint Act which specifies a minimum age of marriage of 18 years for girls. In the 10-14 year age group 6.6% of females are married, compared with 2.6% of males. In the 15-19 year age group this figure jumps to 43.5% of females but only 12% of males. By 20-24 of course the percent of females married is almost double that of the 15-19 year of age group. In 1981 the mean age of marriage for girls was 18.3 compared to 23.3 in males. Being close to the legal lower limit of 18 years, this suggests that for every female getting married over the legal age there is one marrying under the legal age - a clear example of how our laws are not enforced or, probably in clear example of how our laws are not enforced or, probably in this case, unenforceable. If we look at age of

marriage by education level, we find that it increases with education; there is a significant difference of 5 years in the age of marriage between illiterate girls - average age 16.8 years - and graduates for whom the mean age of marriage is 21.9 years. Other social linkages of the early marriage phenomenon are well known. As the highest marriage rite is that in which a father gives away his daughter decked with gold ornaments (her dowry), the higher the girl's age at marriage, the more dowry she is required to have. In fact, it is a "sin" for a father not to marry off his daughter as soon as she reaches "marriageable age" (defined differently by different communities).

On child bearing - if we look at the age-specific fertility rate of women between 15 and 19 - it was 97.6 for women in rural areas. That is, among every 1000 girls in this age group there are 97.6 births. In the 20-24 age group this figure jumps to 266, roughly three times as much. Among married girls in the former age groups (15-19 years) the age specific marital fertility rate is about 170. Eighteen percent of births occur among women less than twenty years old; 50% by the age of 25; and 75% among women under 30.

A look at the survival chances of infants born to women married at different ages reveals the importance of "maternal competence" among girls in early childbearing. Among those who were married before the age of 18 years, the infant mortality rate is 156; those married between 18 and 20 years had an IMR of 132; above 21 years the rate is 90 which is close to the current all India average IMR. Similarly, the IMRs of women of different literacy levels reveal that the more literate the girl is the lower is mortality of her infants. Besides low infant survival, low birth weight and high maternal mortality are also correlates of early childbearing.

Are these practices ordained by the *shastras* which could help to overcome some of the negative aspects of a girl's upbringing reported above? In fairness to Manu, to whom we usually ascribe the low status of women, his laws make a very interesting point: "Pregnant women are to be honoured. A man should first feed his guests, next the pregnant women, then infants and the aged." This may explain a little of why a women's aspirations are to be married and become

pregnant - that may be the only way out of her deprivation trap, the only state in which she gets some attention!

Theme VI : The Girl is Exploited

The issues of social and sexual abuse - harassment, rape; prostitution - constitute the sixth theme : The Girl is exploited. These problems are related to the "polluted" status of the pubertal or post-pubertal female. I shall not discuss them here at any length as they will undoubtedly be touched on by other speakers at this workshop, but I should like to mention a few facts and figures.

As mentioned earlier, a major reason for girls' seclusion after menstruation has begun is not only her family's fears of her molestation by men (leading to unwed pregnancies) but also of malignment of the family. Various practices are followed to restrain the sexuality of girls, such as proscriptions against "hot" foods and physical exercise. The body is covered from neck to ankles, and so on. The corollary of this is that any young woman not observing these customs becomes fair game. We know this from the common occurrence of eve-teasing of girls in urban settings. Almost 25% of reported rapes are of girls under 16 years of age. As much rape goes unreported and even occurs within the family context, this figure is probably an underestimate as young girls are likely to be the most susceptible.

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The sale of daughters - which I mentioned earlier in connection with the drought in Rajasthan - fills the brothels of Bombay and elsewhere. We know of the *devadasis*, daughters of lower castes dedicated to the goddess Yellamma - prostituted to priests and other men. In Bombay, they are also known as *Bhavin* (beautiful 'wantons'), *devli* (attached to the gods) or *naikin* (one of a gang of prostitutes). Forty percent of Bombay's prostitutes are *devadasis*. Two hundred girls a year are "dedicated" in this way. In addition, girls are sold into bonded labour, to landlords and money lenders.

Girls are also abandoned or run away and may end up in institutions such as orphanages, remand homes, hostels, and so on - where their plight leaves much to be desired. Legal and protective issues are key here, as well as strategies to rehabilitate these young women to a happier and productive life.

In this workshop we have included a session on media - both to discuss how its "negative" role - the lurid portrayal of young women and their devaluation - can be eliminated, and to identify strategies for more positive outcomes. There is clearly a need to reach young women and those who look after them at all stages of the life circle toward improving their prospects. We must also focus on how the media can rectify and not exacerbate - problems of girls' socialization which form the basis of further neglect, deprivation in health and nutrition, and discrimination and exploitation in social and economic spheres. Can the media be used to change attitudes and act as a "counter-socialising" force? How can its reach be extended to promote genuine development options for girls from birth to 20? In this context too we must see in a continuum the life of a woman from birth through childhood and adolescence, into adulthood and old age. Our workshop is timely in its focus on the roots of discrimination - and it is fortunate to have the blessing of Manu : "Where women are honoured, there the gods are pleased. Where they are dishonoured, no sacred rites can yield rewards."

THE GIRL CHILD : DISTURBING DEMOGRAPHIC ASPECTS

— Ashish Bose

In the International Year of the Child (1979), the Ministry of Social Welfare had commissioned a book which was published under the title, *Profile of the Child in India : Policies and Programmes* (New Delhi, 1982). In my paper on "Demographic Perspective", I had observed : "Our analysis reveals that the highest priority must be given to the female child in rural areas... In order to focus attention on the neglected female child in India, the Government of India should announce a massive programme for improving the lot of the female children in particular and declare the 1980-90 decade as the decade of the neglected child in India" (p. 41). The Seventh Five Year Plan (1985-90) did give added importance to programmes for Mother and Child Health (MCH) and Prime Minister Rajiv Gandhi himself launched an intensive immunisation programme in 1985 (Universal Immunisation Programme) and declared "Immunisation for all by 1990" as a national goal. I would still plead for a bold and vigorous programme in the Eighth Five Year Plan (1990-95) focussing attention on the girl child.

I congratulate the National Institute for Public Co-Operation and Child Development (NIPCCD) on organising this important seminar on the Girl Child in India. In my short presentation, I would like to focus attention on three disturbing demographic aspects, namely, the adverse sex ratio, the higher infant and child mortality rates of females and the persistence of the low age at marriage of girls in rural areas. Vigorous policy intervention is called for to rectify the state of affairs.

Declining Sex Ratio

As per the Indian census practice, figures for the sex ratio in India are presented in terms of the number of females per 1000 males. In most western countries and in the United Nations publications, the sex ratio is calculated in terms of the number of males per 1000 females. Before commenting on figures for the sex ratio, one must make sure of the definition adopted.

The continuous decline in the sex ratio of India has caused concern to our planners and policy-makers. One encouraging feature of the 1981 Census was the reversal of this trend : the sex ratio figure increased in 1981 compared to 1971. The sex ratio in India as a whole was 972 in 1901, 964 in 1911, 955 in 1921, 950 in 1931 and 945 in 1941. After independence, it increased slightly to 946 in 1951 but it declined to 941 in 1961 and 930 in 1971. It increased to 933 in 1981.

While we welcome the increase in the sex ratio in 1981, one must keep in mind two statistical points : (i) the increase by 3 points per 1000 is by no means spectacular and (ii) one cannot judge the trend from one single observation and conclude that the trend has reversed. One must see how things are at least in 1991 and 2001 before concluding that the declining sex ratio has been stalled or even reversed.

The All India figures tend to be deceptive. It is important to look into the state figures. Take Tamil Nadu for example, a state which is rated high for its efficient administration, a state where the growth rate of population has been the lowest in the 1971-81 decade. How come in this state, the sex ratio declined

from 978 per thousand in 1971 to 977 per thousand in 1981? In Table 1, I give some selected figures to indicate diverse patterns. While interpreting these figures, it is important to realise that the statewide figures for sex ratio are not only influenced by differential mortality by sex but also by migration. For example, if the emigration from the state is predominantly male (as in Kerala and many other parts of India), the sex ratio will increase because of this sex-selective migration. If the MCH programmes work well, there should be a dent on the female mortality rates also and the differential mortality by sex should narrow down. The attitude of the people towards the female child is also an important factor. If health care revolves round sons only and not round daughters also the mortality differentials will persist. If expenditure on medicines and health care is largely concentrated on male children, the mortality differentials will persist. The analysis of sex ratio is, therefore, quite complex. Nevertheless, it does give a summary picture of the demographic scene.

In Bihar and Orissa, there has been a considerable decline in the sex ratio. This should cause us concern. Even about the all-India figure, one should note that though the sex ratio has increased from 930 in 1971 to 933 in 1981, the figures remain much below the figure for 1951. Thus we have still not recovered the loss on this front even in the post-Independence era. Therefore, there is no room for complacency.

Male-Female Differentials in Infant and Child Mortality

The slow decline in the infant mortality rate (number of children who die within one year of birth per 1000 live births), especially in the rural areas of India has brought despair to our health planners and administrators. In Table 2, I present the IMR figures for the last ten years released by the Registrar General of India (SRS data). The rural IMR continues to be over 100, a figure which is shockingly high by modern standards. Japan, it is worth noting, has an infant mortality rate of only 6 per thousand.

Table 1: Sex Ratio in Selected States, 1981
(Females per 1000 males)

States	1971	1981	Difference (1981 minus 1971)
India	930	933	+ 3
Andhra Pradesh	977	975	- 2
Karnataka	957	963	+ 6
Kerala	1016	1032	+ 16
Tamil Nadu	978	977	- 1
Bihar	954	946	- 8
Madhya Pradesh	941	941	0
Orissa	988	981	- 7
Rajasthan	911	919	+ 8
Uttar Pradesh	879	885	+ 6
Maharashtra	930	937	+ 7
Gujarat	934	942	+ 8
Punjab	865	879	+ 14
Haryana	867	870	+ 3

Source : Census of India, 1971 and 1981

Table 2: Infant Mortality Rate in India

Year	Rural	Urban	Combined
1975	151	84	140
1976	139	80	129
1977	140	81	130
1978	137	74	127
1979	130	72	120
1980	124	65	114
1981	119	62	110
1982	114	65	105
1983	114	66	105
1984	113	66	104
1985	107	59	97

Source : Registrar General, India (SRS data).

In Table 3, the data are presented sex-wise. In the rural areas, the IMR for females tends to be still higher than for males. The situation in the urban areas in recent years is somewhat encouraging and is in keeping with the trend in developed countries where the female mortality is lower than that for males.

The SRS figures on IMR have to be interpreted with caution because a whole set of methodological issues like sampling and non-sampling errors, etc. are involved. Instead of looking into individual figures, one should look at the trend. As far as rural areas are concerned, there is no evidence that the female IMR is

Table 3: Infant Mortality Rates by Sex, India

Year	Rural		Urban	
	Males	Females	Males	Females
1976	133	146	78	82
1977	136	146	80	82
1978	132	143	74	75
1979	129	131	73	71
1980	123	125	65	65
1981	119	119	63	62
1982	114	114	70	60
1983	113	114	69	63
1984	113	114	68	64
1985	N.A.	N.A.	N.A.	N.A.

In 1985, only the total figures were presented by R.G. For 1985 only the overall figure is available for rural and urban areas separately but not for males and females separately.

lower than the male. Relentless efforts have to be made to bring down the IMR both male and female and both in rural areas and urban areas. But the degree of effort required will be more in the case of the female child. In several parts of India, the arrival of the second or third female child in the family is considered most unwelcome, to say the least.

which arises out of this discussion is : Can family planning succeed in states like Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh in the face of such high infant mortality rates ?

Mean Age at Marriage

The Office of the Registrar General has estimated

Table 4: IMR in Selected States, 1985

States	Rural	Urban	Combined
Uttar Pradesh	154	78	142
Orissa	137	84	132
Madhya Pradesh	131	79	122
Rajasthan	114	76	108
Assam	112	96	111
Gujarat	112	64	98
Bihar	109	62	106
Andhra Pradesh	90	57	83
Karnataka	80	41	69
Tamil Nadu	95	53	81
Kerala	32	30	31

Source : Registrar General (SRS).

Table 4 shows the shockingly high infant mortality rates in several states of India, figures which should be totally unacceptable to health planners and policy-makers.

It will be seen that the rural IMR in Uttar Pradesh is almost five times the rural IMR in Kerala. This shows the futility of having blanket policies for MCH and family planning for the whole country. The higher literacy rates in Kerala (for rural females) does make an impact on the MCH programme as well, apart from other considerations like physical accessibility, the health and education infrastructure, the expenditure on health, the attitude of the people and other historical and allied factors. One policy implication

the mean age at marriage for males and females, based on the 1981 Census data on marital status. The mean age of marriage in India as a whole, works out to be 23.3 years for males and 18.3 for females in 1981. It may be noted that according to the Child Marriage Restraint Act, the minimum age at marriage of males is 21 years and 18 years for females. The all-India averages are above these figures. Here again, the figures are deceptive because of the wide statewide variations as revealed by Table 5. In large parts of India, the mean age at marriage of females is much below the legal minimum. However, there has been some improvement compared to the situation in 1971.

Demographically speaking, Kerala and Punjab are the most progressive states from the point of view of

Table 5: Mean Age at Marriage of Females, 1971 and 1981

States	1971	1981
India	17.2	18.3
Rajasthan	15.1	16.1
Madhya Pradesh	15.0	16.6
Bihar	15.3	16.6
Uttar Pradesh	15.5	16.7
Andhra Pradesh	16.2	17.3
Haryana	16.6	17.8
Maharashtra	17.5	18.8
West Bengal	17.9	19.2
Karnataka	17.8	19.2
Gujarat	18.4	19.5
Tamil Nadu	19.6	20.3
Punjab	20.2	21.1
Kerala	21.0	21.8

Source: Registrar General

the mean age at marriage, while the situation in the large states of Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh is very unsatisfactory.

Enforcing the Child Marriage Restraint Act in a situation where millions are violating this Act poses formidable problems, apart from the inadequacies of the Act itself. The age at marriage of girls cannot go up simply because there is a law which prohibits child marriages. Our field work in the rural areas of Rajasthan shows that even in Rajasthan, the people are opposed to child marriage but in their perception, a girl ceases to be a "child" after she attains puberty. Thus most villagers do not understand how marrying a girl of 15 or 16 amounts to a "child" marriage. It was also pointed out to us by many villagers that a person

who grows a mustache is no more a "child" but a man. So marrying a "boy" of 19 or 20 is not a "child marriage" though according to the Child Marriage Restraint Act, it is a child marriage. To complicate matters, according to Indian law, a person becomes a major when he or she is 18 years but according to the Child Marriage Restraint Act, a young man of 20 is a "child". We recommend that the present Child Marriage Restraint Act should be replaced by an *Early Marriage Restraint Act* and the law should be enacted in a manner which is capable of implementation. But even when this is done, it is doubtful if the age at marriage will go up unless there is a vigorous social reform movement striking at the deep-rooted prejudices of Indian society, the massive illiteracy of women, the perverse system of "dowry" and other social evils.

EDUCATION AND SOCIALISATION

—Sasheela Kaushik

Socialisation is an informal process of education—it starts from the time a child is born. It precedes formal educational process.

Such a socialisation on how and why a child should behave in certain ways based on its gender, is carried through the way a girl child is dressed, the toys she plays with (usually indestructible, cloth made dolls that in turn carries explicitly the gender differences), the food and nutrition given to her and the avenues of freedom and restrictions on movements. A boy child is usually given toys which are destructible, have science and technology implications (cars, planes, guns etc.) and promote constructive aptitude (like tools, blocks, etc.)

Education is the formal sphere and comes much after the socialisation process has been initiated; educational process tends to reinforce the socialisation process—for girls to become—peaceful, non-violent, tolerant; for boys to become active, scientific, violent. Sports in the school reflect this; girls indoor, or not too far; minimum infrastructure needs; passive, collective and peaceful. Boys outdoor, active, involving a good amount of facilities; energy and free movement.

Education thus confirms rather than changes the preceding socialisation process. If education is to be a process of resocialisation and counter traditional stereotypes—

- (a) it needs to educate parents and teachers first; students later
- (b) should not equate education for girls with literacy—this is responsible for huge drop out rate by the

time they are ten or twelve—knowledge of 3 Rs is not enough. Aims and targets should be higher.

- (c) Raise its content to include a scientific approach; science education and technical aptitude development should be compulsory for girls.
- (d) Should include body mechanism and body knowledge.
- (e) help girls to sort out the immediate technical problems in their scientific/technical activities in which they are all the time engaged. Education will thereby become meaningful, and parents will be cooperative.
- (f) Need to change the whole educational system and values for girls; presently it is oriented to making women serve the needs of men (and not of society) and not even of family. Both education and socialisation process are aimed at making girls better wives and eligible for good marriage prospects.

Strategies for Action :

- (i) Strategies to relieve girls of the household duties such as child care, bringing fuel, water etc. and release them for education. Provision has to be made for availability of these things nearby.
- (ii) Facilities in terms of establishing schools which are close by; have suitable working hours, and provide security etc.
- (iii) Uniform education with identical facilities.
- (iv) Sports and extra curricular activities and cultivation of group activities.

EDUCATION AND THE GIRL CHILD IN INDIA

—Usha Nayar

The conscious and unconscious neglect of the girl child by the society in general and by education in particular has caused irreparable damage to the nation. A nation that has emerged as a space power and potentially a great industrial power, has left behind a trail of illiteracy and poverty. The worst sufferers are the women and girls of marginalized groups i.e. the rural and the urban poor, the deprived castes, tribes and certain minorities.

India accounts for the bulk of the world's illiterates. For every 100 boys enrolled in the school, only 55 girls are enrolled. Of those who are not attending school, three fourths childrens are girls. Again, of those enrolled only two out of every ten girls are able to complete elementary education. At the secondary stage, there are only 29 percent girls compared to 39 percent boys... The failure to universalise elementary education is largely on account of the inability of the system to enrol and retain the poor, more so in the case of females. In the age group 15-35 years, we have one hundred million illiterates of whom 69 percent are females. This age group is a 'lost generation'—women and men in reproductive and productive age group without literacy. They were born in the era of independent India, after the adoption of a Constitution, committed not only to equality of all regardless of sex, caste or creed but also with enough provisions to grant a special status for females for protective discrimination to remove their educational and economic disadvantages which have been handed over to them since ages :

It may be argued that so far education has consciously done little to alter the situation of females. The rhetoric of equality between sexes never got translated into action. Planned development by passed women and gave them at best a 'beneficiary' status, never recognising their worth. The system succeeds in reinforcing the unequal image of women.

Education has not touched the lives of 75 out of every 100 women at all. Besides quantitative shortfalls, the type and quality of education merely confirms and extends female's nurturant, subservient and family centred roles. Further, it sends the women to the labour markets to work in unskilled, low skilled, low prestige and low paid occupations. The NEP, 1986 commits itself to women's equality. The education policy does not rest content with provision of enhanced access of girls to education but also thinks of strategies that could help retain them in the system till they complete at least eight years of schooling. For the first time the nation has given a thought to sociological questions like poverty and inability of parents to spare girls for schooling. Demand for segregated schooling for girls as well as for women teachers has its resonance in the policy. For instance, at day-care centres, creches, anganwadis, balwadis, and primary schools it is mandatory to hire female teachers. The policy further calls for interventions like provision of safe drinking water and cheap fodder and fuel for the poor families—the reason being that like care of younger siblings the above said tasks take away better part of the time of women and girls from poor

households. The PO is replete with numerous ideas and programmes that need to be launched, towards the goal of women's equality.

In the Indian context, any strategy for human resource development has to take into account gender inclusiveness. Discriminatory practices manifest themselves in many forms such as institutional benefits and structural processes. Hence a positive interventionist approach needs to be taken to understand and eliminate the general discriminatory barriers against girls and women. For example, the conscious and unconscious sexist bias in the school curricula and educational programmes prevents the women and girls from realizing their full potential.

Twin Pronged Attack

For any meaningful intervention responsive to girls education and development, female literacy and a general climate of awareness must be promoted to serve the purpose in the following way. One, it should serve as a precursor to change in the low status of the

girl child and, two it should serve as a concomitant to their systematic liberation from ignorance and low self image. Hence, redesigning and reorientation of the curricula, and recommendations of the teachers the instructors, and the educational administration is important. Schools can either continue to play second fiddle to society's power structures, or they can be turned into a powerful instrument of change in social perceptions and societal interactions. As a powerful instrument of change, they can promote values of sex equality through activities beyond teaching. While the boys and girls are encouraged for complementary roles based on values of sharing the equality, they could also be trained to be watchdogs of media. Further, there is the need for resocializing little boys and girls as well as older men and women to accept the value of equality and to develop a belief in it. The parents, the teachers, the administrators, and the policy makers would do well by giving a very special place to the girl child, for she is truly our future.

GIRL CHILD LABOUR

— Dr. Sharda Jain

If Acts of Parliament could make men moral our society would present an altogether different picture now. Child Labour continues to remain a serious problem, not for lack of formal legislation. There are a large number of laws in India (the latest being that of 1986) which forbid the engagement of children in some employments and regulate the conditions of work in other employments. But laws affecting children (like most other social legislation) have generally remained unimplemented, because neither parents nor employers, surprisingly not even Government, have taken them seriously. The harsh reality of child labour persists despite statutes, because the root cause rests in the existing Socio-economic structure, which on the one hand breeds poverty and social inequality and on the other creates a vested interest in the employment of children. Unfortunately, legislation does not strike at the root cause.

While concern for child labour dates back to our Constitution (Article 24) the concern for girl child labour is a recent phenomenon. Until recently child labour was almost synonymous with boys, who worked for a wage to supplement the family income. True, the girl child worked much more than the boy but it was not considered 'labour' in market terms. Even in the National Policy on Child Labour there is no separate consideration of girl child labour and her special problems.

Lack of Statistics & Data

The most crucial, but sadly neglected segment of the rural population from the view point of improving

the quality of women's life, is the girl child who does a major part of the domestic chores from cooking, cleaning, fetching fuel, fodder and water, looking after younger siblings to doing farm jobs. Since concern for the girl child labour is a recent development, there is paucity of information on the working girl child. Specific data in respect of working girls (specially in low calibre, menial, non-monetary domestic and non-domestic labour) in the rural or urban areas is unavailable.

Figures provided by the census 1981 and National Sample Survey 32nd round relate mainly to the category of wage-labour which is only the tip of the ice-berg. A very large majority of girl child labour is involved in non-monetary work-domestic as well as non-domestic. As far as wage-labour is concerned in rural areas girl child works with the elders in the family as farm-labour or in construction work and the payment for her labour is also received by the head of the family.

In urban areas, the wage labour for the girl child is largely as domestic help, often substituting for the mother/aunt/sister-in-law, in menial jobs such as cleaning utensils and washing clothes. The adolescent girl rushes from one household to another, often working in 4-5 houses twice daily. Young harijan girls start work at a very early age helping their mothers or grandmothers in sweeping and collecting garbage. The wages are collected by the elders in the family.

While several categories of children subjected to abuse and neglect are not considered child labour

there are large numbers who can be treated as child labour, such as girl child prostitutes or beggar girls and boys.

There is an urgent need for more research and data on the working girl child. Even in respect of rural working women the census data do not reflect the true picture. In Bharatpur district (Rajasthan) where I work with rural women, the census data of 1981 report over ninety percent rural women (age 12) as 'non-workers', though almost all women work as agricultural labour (non-wage), in animal husbandry, besides attending to their daily domestic drudgery.

There are practically no figures on domestic and non-monetary child workers (who are mostly girls), girls engaged in marginal economic activities and those working as unpaid household help. In case of wage-labour, where statistics are available, it is a sad reality that while the percentage of rural child workers (5 to 14 age group) to the total rural population of the same age fell for boys in the decade 1971-81, it almost doubled for girls of the same age group (from 4.57 percent in 1971 to 7.79 in 1981). Taking figures together for rural and urban child workers, in comparison to total workers the percentage of girl child workers increased almost four times (from 2.39 in 1971 to 8.65 in 1981), while that for boys has remained almost constant. This clearly reflects that more girl children are entering the labour market.

The above figures are based on CHILD IN INDIA (A Statistical Profile, 1985, Ministry of Social and Women's Welfare).

Alternative Strategy

It is fanciful decrying child labour/girl child labour. Complete chocking it off the labour market is not going to be possible. Poor families do need extra earning. Even the poverty alleviation programmes like IRDP/MREP/RLGEP will not help to prevent GCL because beneficiaries under these programmes receive only subsistence support; their rock-bottom income compels them to send their children to work for whatever meagre wages they can bring.

To wean the GCL away from exploitative, demeaning or low calibre work an effort has to be made to bring them in the fold of healthy, non-hazardous and creative occupations after proper training. Effective

and meaningful programmes for GCL will have to be based on survey of the local situation under which a child labourer lives and works. A handful of people sitting at the helm and planning educational and training programmes can only churn out general formula for all areas and situations which remain non-concretised and hence unapplied. The National Policy on Child Labour presents special part-time and vocational courses for children and micro-level planning for the Non-formal Education Centres. So does the National Policy on Education and the Programme for Action. But giving content to these programmes at the grass-roots level is still to be made a reality.

It is necessary to link training to the job market, but unless new jobs are created in abundance training will be purposeless. To talk of self-employment after training is easier said than done. The major part of girl child labour comes from the disadvantaged and indigent sections of the society. It is too much to expect that an year or two of skill training will also equip them with the ability to start and manage their own work.

Micro-Planning and District Authorities.

For micro level planning heavy responsibility falls on district level agencies specially the District Rural Development Agency (DRDA) and District Industries Centre (DIC). Armed with statistical knowledge of the area, leverage over infrastructure and control over funds, the DRDA and the DIC must make an in-depth study of what new rural employment can be created in the area within the parameters of available raw material, training facilities and the possible local markets. Providing facilities to supportive village level production units or small industrial units will surely help open up new job opportunities. The grass-root organisations such as a gram-panchayat or a voluntary agency working in a village may not have easy and reliable access to such information. The district level agencies must get seriously involved in micro-planning and not just dish out funds and/or lord it over the voluntary agencies in the field. Without the basic involvement of the district authorities at all points and in all situations, the micro-planning envisaged by rational planners will remain hollow.

Sex-Discrimination

To improve the lot of the girl child labour, the bias against the female child has first to be rooted out. The neglect and discrimination a girl child is subjected to are extensive. The bias exists at various levels, in rural and urban areas, inside and outside homes, in the social milieu itself. To give an example-although there are no rules restricting bank loans to unmarried girls, bank managements are wary of giving them loans on the plea that after marriage they might go away beyond the reach of the bank's lending branch. In village Sevar (district Bharatpur) a group of scheduled caste young women (including 7 unmarried girls) were trained under the TRYSEM Programme. After the training was over, the trainees submitted their loan applications to the local branch of Central Bank. The applications of the unmarried village girls were rejected on the plea that they will move out of the village after marriage. Such are the unintelligent conventions which stunt the wholesome growth of a girl child.

There is need to reduce the lower age limit for eligibility under TRYSEM from 18 to 14 years in case of

girls, to draw them away from demeaning physical labour into promising training programmes leading to gainful employment. A probable offshoot of this will also be that parents will be in no hurry to marry off their daughters before the statutory age of 18 years.

The demon of girl child labour cannot be exorcised by the mere use of a charm or cantation of a 'mantra'. Imaginative and hard decisions have to be taken. Young girls, specially in the rural areas, have to be brought within the fold of educational programmes with an emphasis on vocational training. Since girl child labour cannot be abolished altogether in our existing situation (unless the basic Socio-economic situation is revolutionised) endeavor has to be made to make her labour more purposeful & gainful, supplemented by relevant educational & vocational inputs. With rural industrialisation as Governments declared policy, girl child labour between the ages of 14 and 18 could be made its main sustaining force.

Employment of unmarried girls in healthy, non-hazardous and gainful jobs is perhaps a very important step in bringing about social and demographic change.

SIGHT UNSEEN : REFLECTIONS ON THE FEMALE WORKING CHILD

-Neera Burra

Introduction

From a rapid survey of the literature, it would appear that there has been little research focussed upon the female working child. Neither the Employment of Children Act of 1938 nor its avatar, the Child Labour (Prohibition and Regulation) Act of 1986, addresses the distinctive concerns of the female working child. Data regarding the subject of this paper have been culled from studies on child labour in general or women's studies or labour studies. Admittedly, these data are sparse but this paper seeks to raise some basic issues concerning the status and future of the female working child.

Demographic aspects

According to the 1981 Census, there are 263 million

children in India constituting 39.5 per cent of the total population of the country. Nearly 78 per cent of the child population is in the rural areas and the rest in the urban areas. The share of males in the child population is 51.64 per cent.¹ Little more than two-fifths of the children in the age-group 5-14 years were counted as literates. Only half of the male and one-third of the female children had attained any degree of education. Nearly two-thirds of the urban children are literate, whereas the share of literates in the rural areas is only one-third. Approximately 11.2 million children were notified as main workers and 2.4 million as marginal workers. Main workers were those who were involved in full-time economic activity and marginal workers were those who were not working full-time. The table below gives the percentage of children 0-14 in the work-force (all ages) according to the 1981 Census.

Table 1

	Persons	Males	Females
1. Main Workers			
Total	5.02	4.17	8.35
Rural	5.78	4.88	8.86
Urban	2.12	1.80	4.58
2. Marginal workers			
Total	10.97	19.64	9.38
Rural	11.32	21.29	9.59
Urban	5.02	5.59	4.56

Source : As given in Nangla 1987:70

The table above indicates that while a larger proportion of girls is involved in full-time economic activity, a larger proportion of boys is marginal workers. This is partly because boys also go to school for some hours of the day.

Interestingly, a comparison of the work participation rate (WPR) of male and female children shows that between 1971 and 1981 there has been an increase in the WPR of girls compared to boys. (The WPR of children is the percentage of child workers to the total child population.)

Table 2 gives the WPR for child workers (main) by sex for both the 1971 and the 1981 Census, showing an increase in the WPR of girls and a decrease in the WPR of boys. However, some observers have noted that female participation rates tended to be under-estimated in the 1971 Census since women respondents did not consider household work as productive work.

The bulk of the female working child population is to be found in the rural areas where children are engaged in looking after younger siblings, cooking, fetching and carrying. This releases adults for more productive and remunerative work. In the rural areas, little girls can be seen carrying small pots on their heads, following their mothers or elder sisters to the well and what, at first, is little more than play develops soon into a useful help in the work which has to be done in every household. Girls accompany parents to the fields to help them in activities such as sowing, transplanting, weeding and harvesting, collecting fuel and scaring away the birds. They also accompany their mothers to the marketplace with small loads on their heads or backs.

According to a recent study undertaken by Ishrat Ali Siddiqui,

"A study by two experts from the Bangalore-based Indian Institute of Sciences shows that a girl child

Table 2
Work Participation Rates for Child Workers(Main) by Sex 1971 and 1981

	Males		Females	
	1971	1981	1971	1981
Total	6.65	5.46	2.63	2.95
Rural	7.56	6.30	3.05	3.63
Urban	2.75	2.46	0.82	0.88

Source : Nangia 1987 : 74

While these are some general statistics, the child labour force according to the 1981 Census is 13.59 million. The National Sample Survey Group (a Baroda-based organization) figures of 1985 on child labour are 44 million. The reason for these wide variations is that while the Census counts only those children as workers who are engaged in economically productive work, the definition of child labour according to the Operations Research Group is more broad-banded and includes all children between the ages of 5 and 15 who are at productive work may be paid or unpaid, and busy any hour of the day at home or outdoors.³ They recognise that not all work that children do is remunerative and therefore, their figures are more realistic.

spends 29 per cent of the total time on fuel-wood gathering, and 20 per cent on fetching water. In eastern Uttar Pradesh, where a woman spends between one and four hours daily on household activities in addition to a back-breaking day on the field, at least 30 per cent of the burden is shared by the girl children between the age group of 6-11. And in a country where women share 45.57 per cent of the agricultural work, more than 20 per cent is shared by girl children".⁵

While the participation of the girl child in almost all sectors of the economy is pervasive, it is most striking in rural India. According to Arun Bhattacharjee:⁶

"the social belief that a female child is an economic liability can be countered by the argument that in

rural India a girl works for 9 hours a day and an average of 315 days in a year, in the fields and at home providing the family an annual labour which at minimum wages could have cost Rs. 2,200 to hire. By the time she ceases to be a child she has provided economic help to the family worth Rs. 39,600 surviving on food below nutrition level and struggling against prejudice and discrimination".

Significantly, while the girl child is very visible in rural India, this is not so in the urban unorganised sector. In the latter area, girls are found to be working in some concentrations of child labour but not in others. For example, in Sivkas, in Tamil Nadu, of the 45,000 working children in the match industry, approximately ninety per cent are girls below the age of 14 years.⁷ Girls are found in large numbers in the coal industry of Kerala and in home-based industries like incense making and paper preparation.⁸ Girls are involved in substantial numbers in the *beedi* industry and gem polishing industry of Jaipur⁹ and the making of paper bags and garments, cotton-pod shelling, groundnut-pod shelling, hand embroidery, grain cleaning, block making, sub-assembling electrical and electronic items.¹⁰ There are, at a rough estimate, approximately 6,000 girls working in the gem polishing trade of Jaipur. Hundreds of girls are working in the lock industry of Aligarh, the brass-ware industry of Moradabad in Uttar Pradesh, the carpet industry of Jammu and Kashmir and the *zari* embroidery industry of Varanasi. But these are essentially invisible children who do not go to work in factories and in workshops and therefore, do not come under the purview of the law. We shall return later in the paper to this theme. A large number of girls are to be found in domestic service, rag-picking, newspaper-vending and so on.¹¹ Most of them accompany their parents to work as they cannot be left behind at home.

Constitution, law and government policy

The most recent legislation in this area came into force when the Child Labour (Prohibition and Regulation) Act of 1986 was passed by Parliament. The new Act takes the place of the Employment of Children Act of 1938 and has as its objectives the identification of processes and industries that are hazardous for children

(so that employment of children in these may be banned) and the regulation of child labour in non-hazardous industries. According to Article 24 of the Constitution of India, children below the age of fourteen are not to be employed in any factory or mine or be engaged in any hazardous employment. This is a Fundamental Right. The Constitution also directs the State (Article 45) to endeavour to provide free and compulsory education for all children until they reach the age of fourteen. Another provision (Article 39 (e) and (f)) speaks of the need to see that the tender age of children is not abused and sets the objective of not allowing citizens to enter avocations unsuited to their age or strength on account of economic compulsions.

In the public debate that ensued following upon news of impending legislation, two distinct points of view emerged. Government and its spokespersons stressed the argument that the Constitution did not ban child labour *per se* but only prohibited it in factories, mines and hazardous employment. Had the intention been to wholly ban child labour, it could have been unequivocally so stated in the Constitution, the argument ran. The opposing point of view urged the reading of Article 24 in the light of the spirit of the Directive Principles of State Policy regarding free and compulsory education and the prohibition against allowing citizens to work at jobs unsuited to their age or strength by reasons of poverty.

In pursuance of Constitutional mandates, the Government of India has announced the formulation of a National Child Labour Policy. A Child Labour Technical Advisory Committee has been constituted to identify hazardous processes and industries and action programmes are reportedly being formulated in ten select industries. The basic thrust of the National Child Labour Programme is to better coordinate and intensify on-going developmental programmes for income-generation and employment in child labour concentration areas. A sum of Rs. 11 crores is expected to be spent every year to cover 30,000 children in the ten project areas keeping in mind their needs in the fields of nutrition, education and health. The Government has also announced its intention to implement effectively provisions of different laws relating to child labour. How will this programme

affect the working girl child? Since the thrust of governmental policy is in relation to the urban unorganized sector, we shall examine it in that context.

Types of child labour

Guy Standing and Gerry Rodgers of the ILO usefully classify child work to include a) domestic work b) non domestic non-monetary work c) bonded labour and d) wage labour. In the domestic arena, both in the urban and in the rural areas, work is done primarily by female children which releases the parents for more productive work.¹³ This bias against the female child is both cause and effect of relegating her to such a role in contrast to the more productive type of work that the male child is typically engaged in. Examples of non-domestic, non-monetary work - often as part of family labour - can be found in the tending of cattle, the grazing of goats, the collection of fodder and so on; beginning with these jobs from the age of five or thereabouts, the rural male child soon gets involved in a whole-time way with agricultural operations.

The existence of bonded labour in India has been recognized for long.¹⁴ Almost 73 per cent of child labourers are put to work by their own parents or guardians.¹⁵ Children are bonded not only in the rural agricultural sector but also in the urban unorganised sector.¹⁶ The method of payment for children is usually by the piece-rate system which puts an enormous pressure upon the child.¹⁷

Health hazards

While not much is known about health hazards faced by girl children in the carpet industry of Jammu and Kashmir, Abdelwahab Boudhiba reports the health problem of children in the Iran carpet industry:

"The girls who weave the magnificent carpets of Iran, which are a source of admiration to all and of wealth to some, spend the entire day on narrow planks. They are unable to move and their work makes them adopt a squatting posture, invariably doubled up. Despite their youth, some children suffer from a form of ankylosis of the whole of the lower part of the torso. Many are sickly, suffering from tuberculosis or anaemia. By the time they become adults, they are often round-shouldered and have deformed arms and legs. In regions such

as Kerman, where many young girls work in this industry, a large number of them are subsequently sterile or have very difficult pregnancies because of the fixed posture that they have had to adopt"¹⁸

The zari embroidery industry where a large number of girls are working is another potentially hazardous industry, says P.M. Shah. According to Shah:

The eyesight of young girls working for 12-14 hours a day in micro-computer factories or in the 'zari' embroidery industry is reported to be damaged within a period of 5-8 years".

These industries are some of the largest employers of girl children. There are other industries where girls are working but in relatively smaller numbers and the specific health hazards faced by them are unknown.

In many sectors of the economy, children are working in extremely hazardous conditions. Says Vishwapriya Iyengar about the match industry:

"Children mixing chemicals in the boiler room get lungfuls of toxic fumes, suffer high degrees of intense heat and run the risk of being badly injured in fire accidents. Children who stamp frames on the metal sheet too suffer heat, toxic fumes and excessive strain on the arms and shoulders which have to remove and place the heavy frames with great rapidity. Delay of a second... can cause the entire frame to go up in roaring flames which could cause instant death. Shrini, a child of 10 who passes over 6,000 frames a day, admitted that the strain of heat and the heavy frames often made him feel dizzy and faint, but he had to keep all his reflexes sharp while on the job for otherwise he might set fire to himself..... According to the children, fire accidents occur when match-heads rub against the friction side in the course of putting the box together too quickly. These children also complained of severe back- and neck-aches."²⁰

The beedi industry is another hazardous industry. Mohandas says about beedi workers:

"As the beedi rollers are exposed to the tobacco fume during the entire working time, the incidence of serious diseases happens to be very high"²¹

Says Mohandas:

"In fact beedi rolling leads to two types of occupational diseases. One is caused by the injurious effect



of inhaling tobacco fume and the other is the result of long hours of continuous sitting in an unhealthy atmosphere doing a monotonous job. Diseases like TB, asthma, allergy and continuous cold belong to the former while backache, body ache, stomach ache, gas trouble, piles and rheumatic complaints belong to the second category.²²

In other industries children die of silicosis in the slate factories in Madhya Pradesh.²³ They are exposed to lacerations and burn-marks in the glass factories of Firozabad,²⁴ byssinosis in the powerloom industry of Bhivandi in Maharashtra,²⁵ pneumoconiosis in the lock industry of Aligarh.²⁶ Even if the children could afford the treatment, many doctors are not trained in occupational health and blithely ascribe illness to poverty.

The roots of bias

But while many of these factors are common to both working boys and working girls, the girl child is exposed to cumulative inequality - discrimination by the parents as well. In many cases, the employers discriminated against girl employees.²⁷ Parental discrimination is based on several factors. According to a pilot study conducted by Maithreyi Chaudhuri amongst agricultural labour households in a village of Bolpur-Sriniketan Block in Birbhum district of West Bengal, one of the possible reasons for sex bias in child nutrition may be the traditional belief regarding the greater economic value of male children.²⁸ In this study it was found that in no agricultural labour household were aged parents economically dependent either on daughters or on the son-in-laws or daughter's sons.²⁹ This is, by and large, the case all over India.

Exploitation: the female adult and the girl child

Several studies - particularly among *beedi* workers - show that, in part, the exploitation of the female child is directly a result of the exploitation of women. A report on *beedi* workers of Hazarabad in Andhra Pradesh states :

"In most places these days it is customary for even the poorest to at least enroll their children in school, even if they are sent to school only when there is no work to be done at home. But Sanghatana activists

did not find a single (female) child of a *beedi* worker attending school. They stay at home to do the work their mothers cannot do. And once they are sufficiently grown up they go to the factory to 'help' their mothers. It is true that the Act prohibits child labour (section 24) but if children insist on filially helping their mothers, what can the poor seth do? And, in the process, the seth also acquires well-trained new recruits whose training pays for itself. Is he to be blamed?"³⁰

Mothers and daughters

It is ironical that while women are discriminated against in all walks of life, it is they who are chiefly responsible for discriminating between their own sons and daughters. Several studies have documented the nature and extent of this problem. Leela Gilati's study of working women is revealing in that it shows how women perceive the roles of male and female children. Mothers are by and large indulgent towards their male children.³¹

Female children are kept away from the educational process as Malavika Karlekar shows in her study on women sweepers in Delhi. Her respondents felt that daughters could help the family by looking after younger children so that mothers could be released for wage-earning.

"Of the entire sample, there were only four girls who were studying beyond Class VIII and two happened to be the daughters of two clerks. Further, six mothers admitted that while they had sent out their young daughters to be sweepers, their sons were still in school".³²

Says Karlekar :

"If most mothers were somewhat motivated to keep their sons in school, far fewer were so inclined for their daughters. Apart from the opportunity cost argument, women accepted the conventional sex stereotypes for their daughters; in addition they were pessimistic about the chances of their daughters achieving occupational or social mobility through education."³³

Phoolbathi, a sweeper, told Karlekar that :

"... nearly all our girls work as sweepers. Why should I waste my time and money on sending my

daughters to school where she will learn nothing of use... So why not put my girl to work so that she will learn something about our profession as well as be able to cook. My elder girl who is 15 years old will be married soon. Her mother-in-law will put her to cleaning latrine somewhere. Too much of schooling will only give girls big ideas, and then they will be beaten up by their husbands or be abused by their in laws".³¹

Says Leela Gulati :

"I too can one complain about sex discrimination in wages or weaker commitment of men to their families, when the same women themselves practise discrimination against their own sex in their own houses? In my studies I found that (a) boys stayed longer in schools than girls; (b) were not expected to do virtually any household chores; (c) boys were allowed much greater freedom to spend whatever wages they earned; and (d) boys got relatively better food in terms of claim to rice against tapioca.

On the other hand, I observed that (a) a girl has to do all the supporting household chores even when she goes to school; (b) she is withdrawn from school when she is needed full time in the house; and (c) she has to contribute most of what she earns to the house when she goes out to work.

Possibly, the reasons for this attitude on the part of the women are that (a) they hope to be looked after by their sons in their old age; (b) while the sons bring in a dowry, the daughters are a liability; and (c) a son can hope to move into a better paid, skilled, and sometimes possibly a regular, permanent job, whereas the daughter will work all her life for a low wage and be hard up."

Several issues arise which require consideration regarding the female working child. Part of the problem is that both for the parents and for the law, the work of the girl child is invisible. For the parent, the exploitation of the girl child is linked closely to the treatment meted out to the mother and therefore, an accepted part of social behaviour. And so even the parent differentiates between the male and the female child with respect, amongst other things, to the amount of work the female child is supposed to do.

The piece-rate system

As to the law, Article 24 stresses that child labour is banned in factories, mines and hazardous employments and this is the premise on which the new Child Labour (Prohibition and Regulation) Act, 1986, has been framed. It assumes that since there is a specific ban in three areas of economic activity, children can be allowed to work in other sectors. On account of various social and cultural reasons, very few girl children are to be found working in factories, mines and hazardous employments. In the case of hazardous work and the word 'hazardous' itself has not been defined anywhere, in the Act or in the Constitution. The well-known occupations where large numbers of girls are employed are the match industry, the carpet industry, the zari embroidery industry and the beedi industry. In the case of the match industry, girls go to work in factories and in workshops. This is a fairly rare occurrence because girls are seldom sent out but it can be explained. According to a recent study undertaken by the Madras Institute of Development Studies (MIDS).

"... while the daily earnings from match work are about Rs. 3.50 to Rs. 4.00 per day, they amount to 75 per cent and 50 per cent respectively of the female and male agricultural wage rates".³⁶

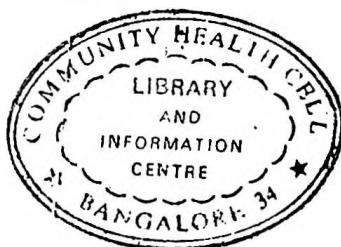
According to this report :

"The fact of the matter is that at such a low piece-rate, essentially a child-rate, only a given number of adults will come to work".³⁷

Further, it is pointed out :

"... female workers both adults and children, are far more widely employed in the match industry than male workers. They are universally employed in piece-rated work and are not used in any kind of work requiring supervisory capability. On the other hand, there are cases of boys serving as apprentices or helpers in functions in which at least a small number will continue after growing up".

One reason for the large number of girl children in the match industry is that the work in the factories is poorly paid and does not lead to skill-formation. Men and boys do work which is more remunerative and skill-based and the women and girls are relegated to



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more routine and unskilled, low-paid jobs. The adult males prefer to do agricultural work when it is available for it is better paid. The wages paid to children are usually less than a third of those paid to adults for the same job.³⁹ Interestingly, one possible reason for the large concentration of girl children in Sivakasi is that the bulk of the labour force belongs to the Scheduled Castes : the relatively greater freedom females amongst them enjoy permits them to go out into the man's world.

Working at home

If Sivakasi affords an example where poverty forces children to work and cultural traditions allow girl children to participate in this work, other parts of India present a different picture. Many child labour concentration areas have craft-oriented industries and traditional craftsmen, who are mostly Muslim. Whether it is the gem polishing industry of Jaipur, the lock industry of Aligarh, the carpet industry of Jammu and Kashmir or the *zari* embroidery of Varanasi, the constraints placed upon the Muslim female prevent her from going out of the house to work. Yet, there are large numbers of girl workers who practise their trade at home. The law is blind to their existence and deaf to their needs. In the *agarbatti* and *beedi* industries, the adult female worker is paid at so low a rate that, even in order to earn a pittance, she enlists the help of her female children. Ela Bhat writes about home-based workers :

"Their earnings for an eight hour working day are not more than Rs 3 as in the case of skilled *zari* workers in Delhi, and as low as Rs. 1 for lacemakers. Home based workers earn the lowest of all categories of workers. Jennifer Sebstad in her study on self-employed women finds that in Ahmedabad the average monthly income for home-based workers is Rs. 130 as compared to Rs. 250 for vendors and Rs. 170 for labourers".⁴⁰

Being home based and using family labour, the *beedi* industry which is banned under the Child Labour Act continues regardless to use the female child worker. In fact, it has been observe that :

"Home based piece rate workers are not included as workers in the Factories Act and so are not covered by most labour laws. Furthermore, most

trades are not listed under the Minimum Wages Act and even where they are, home-based workers are not mentioned."⁴¹

The same study goes on to say that :

"There is no official policy to ensure employment for home-based workers or to improve their lot".⁴²

Government's policy and programme

The Government of India has recently short-listed ten priority areas in the urban unorganized sector to provide health, education and nutrition to working children and to re-activate the income-generation and employment oriented schemes for the parents of working children. The ten industries are the gem polishing industry in Jaipur, the glass industry in Firozabad, the lock industry of Aligarh, the diamond cutting industry of Surat, the brass-ware industry of Moradabad, the carpet-weaving industry of Varanasi, Mirzapur-Bhadohi and Jammu and Kashmir, the match industry of Sivakasi and the slate pencil industry of Mandsaur and Markapur.

In many of these industries where boys go to work in factories and workshops, girls also contribute their labour but within the closed confines of their homes. In the gem polishing industry of Jaipur, girls are engaged in *bindai ka kaam* or drilling holes in beads and stringing necklaces. In the lock industry, while people are able to give some estimates of the number of working boys, there is no count of girls who help at home making levers, springs and other essential components for locks. The carpet industry of Jammu and Kashmir used girl children employs a as part of family labour and the *beedi* industry employs a large number of girls but mainly as part of family labour. The diamond cutting industry does not seem to employ girls, but this may be due to the fact that most of the boys are migrants from the adjoining villages and girls are rarely sent to work alone when they have to commute long distances.

One reason why girl children are not taken so seriously is because their work is not directly remunerative even if it is productive. The girl child helps increase the total quantum of work done by the mother whether it is in the gem, lock or *beedi* industry. The boys also go to work in those industries but because they go out to work, even if they are not paid

anything under the guise of apprenticing or training, their work is seen by parents as an investment leading to earnings in the future. When girls learn skills like *bindu ka kaam* or zari embroidery it sometimes reduces the dowry burden on parents and, therefore, the girl is made to work harder.

The Child Labour (Prohibition and Regulation) Act, 1986 does by default overlook the female working child. The basic premise of labour legislation is that there must be an identifiable employer and an identifiable employee whose working conditions can be regulated and wages fixed. But in the case of the girl child there is often no identifiable employer because she is working as part of family labour. Even if legislation were to reach out to the mother, the daughter would still not come under the purview of the Act at all.

The National Child Labour Policy seeks to have a beneficial impact upon the health, education and nutrition of the working child in a setting where different labour laws are better implemented. It follows from the foregoing analysis that whatever impact will result will affect only the male working child. For in the scenario sketched above, the female child is working—but largely at home. Many women who work for hours beyond count at home do not consider what they are doing as 'work': their daughters' contribution would be even less entitled in their minds to such an appellation. The girl child will be well outside the radius of the

development programmes envisaged—be they to do with stipendiary education or vocational training or supplementary nutrition—and as the labour laws are to be implemented at a factory, mine or in hazardous employment, they will leave her untouched. In fact, since not much research has been undertaken on the female working child, we do not even know what kinds of health hazards she is exposed to at home under the relentless pressure of the piece-rate system. When male working children receive the attention bestowed by governmental intervention, this will most likely reinforce in the minds of parents their already poor opinions of their female children. In turn, greater discrimination against them will follow.

It is not without irony that the same cultural stereotypes that keep the girl child at home protect her from the hazards and the exploitation that the boy child routinely faces. Yet to remain at home is to be hidden from public view. The female child in the unorganised sector is by and large unseen: she is the blind spot of child labour law, policy and programme. Clearly, the first step is to sight and locate her in all her variegated contexts and fix the coordinates of her being. More research is needed to illuminate the darkness that surrounds her. When we comprehend the space that she inhabits, attention can then be directed to see how the instrument of law, the contours of policy and the concreteness of programme can be fashioned and shaped in her favour.

References

1. Nangia, Poovent: *Child Labour cause-effect syndrome*. New Delhi: Janak Publishers, 1987, p. 54.
2. Naxya, Rohini: "Female Participation Rates in Rural India". *Economic and Political Weekly*, Vol XXII, No 51, December 19, 1987, p. 2207.
3. Khatu, K K, et al: *Working Children in India*. Baroda: Operations Research Group, 1983, p. 69.
4. See Nair, Ravindran: "Education: why do more girls drop out?" *Kumkumshetra*, Vol XXXI, No 13, May 1-15, p. 15; Dasgupta, Biplob, et al: *Village Society and Labour Use*. Delhi: Oxford University Press, 1977, pp. 46-48; and Sawant, S.D. & Ritu Dewan: "Rural Female Labour and Economic Development." *Economic and Political Weekly*, Vol 14, June 30, 1979, p. 1095.
5. Siddiqui, Ishrat Ali: "Focus on the girl child." NMC-UNICEF media workshop on 'girl child' at Hotel Kanishka, New Delhi, October 12-14, 1985, p.4.
6. Bhattacharjee, Arun: "The Girl Child A Being That Does Not Exist For The Media". NMC-UNICEF media workshop, op. cit 1985, p. 2.

7. Nair, Ravindran : "Education : why do more girls drop out ?" op. cit. 1983, p. 15.
8. Jhabvala, Rehana and Jennifer Sebstadt : "To be self-employed... and a women." *Himmat*. Vol 17, No. 15, 1980-81, p. 29; and Krishnakumari, NMC : *Child labour in Bangalore City*. Delhi : Published by I.S.P.C.K., 1985.
9. "Beedi Workers of Nizamabad", *Economic and Political Weekly*, August 8, 1981, p. 1305. See also Burra, Neera : *A Report on Child Labour in the Gem Polishing Industry of Jaipur, Rajasthan, India*. Prepared for UNICEF, October 1987.
10. Bhat, Ela : "The Invisibility of Home-Based Work : The Case of Piece Rate Workers in India" in Singh, Andrea Menefee and Anita Kelles Vitanen (eds.) *Invisible Hands*. New Delhi : Sage, 1987, p. 30.
11. Karlekar, Malavika : *Poverty and Women's Work. A Study of Sweeper Women in Delhi*. Delhi : Vikas Publishing House Pvt. Ltd., 1982; Patil, H.R. : "Child workers in Bangalore I". *Financial Express*, January 3, 1986; and Juyal, B.N. et al. *Child Labour : The Twice Exploited*. Varanasi : Gandhian Institute of Studies, 1985.
12. Rodgers, G. and Guy Standing : *Child Work, Poverty and Under-development*. Geneva : International Labour Organisation, 1981.
13. Kishwar, M. and Ruth Vanita (eds) : *In Search of Answers : Indian Women's Voices from Manushi*. London Zed Books Ltd., 1984.
14. Gang, R.H. : "Fair Deal for Children." *Patriot*, New Delhi, November 28, 1980; Marla, Sarma : *Bonded Labour in India : National Survey on the Incidence of Bonded Labour, Final Report*. New Delhi : Biblia Impex Private Ltd. 1981, pp. 13-14.
15. Juyal, B.N. et al. : *Child Labour : The Twice Exploited*, op. cit. 1985, 73; Ganguly, Piyus : "Child Labour Rules Flouted with Impunity". *The Telegraph (Calcutta)* April 16, 1984; and Singh, Musafir et al. : *Working Children in Bombay - A Study*. New Delhi : NIPCCD, 1980.
16. Kulkarni, Mann N. : "Match making Children in Sivakasi." *Economic and Political Weekly*. Vol XVIII No 43 October 22, 1983, p. 1855; Mehta, Payam : "Mortgaged Child Labour of Vellur, Women Beedi Workers Tale of Woe", *Mainstream*, Vol XXII No 1 September 3, 1983, pp. 15-16; and Gangrade, K.D. and Joseph A. Gothia : *Women & Child Workers in the Unorganised Sector*. New Delhi : Concept Publishing Company, 1983, pp. 4-5.
17. Burra, Neera : "Child Labour in India : Poverty, Exploitation and Vested Interest". *Social Action*. Vol 36, July - September, 1986; Iyengar, Vishwapriya L. : "Pyre of Childhood : Child Workers in the Match Factories of Sivakasi" in Gupta, Manju and Klaus Voll (eds). *Young Hands at work. Child Labour in India*. New Delhi : Atma Ram & Sons, 1987.
18. Boudhaba, Abdelwahab : *Exploitation of Child Labour, Final Report*. Special Rapporteur of the Sub-Commission on Prevention of Discrimination and Protection of Minorities. New York : United Nations, 1982, p. 11.
19. Shah, P.M. : "Alternative Health Approaches for the Health Care of Working Children" in Shah, P.M. and Nigel Cantwell (eds). *Child Labour : a threat to health and development*. Geneva : Published by Defence for Children International (2nd revised edition) 1985, p. 39.
20. Iyengar, Vishwapriya L. : "Child Labour in the Match Units of Southern Tamil Nadu". Paper presented at a seminar on Child Labour in India. New Delhi : Indian Social Institute, August 9, 1986, p.5.
21. Mohandas, M. : "Beedi Workers in Kerala : Conditions of Life and Work." *Economic and Political Weekly*. Vol. 15, July-December 1980, p. 1522.
22. *Ibid*.
23. Rao, Anjan : "Silent Deaths of State Workers." *Economic and Political Weekly*. Vol 15, July - December 1980, p. 1883; Mitra, Nirmal : "The slave children of Mandaur". *Sunday*. June 15-21, 1986, pp. 100-108.
24. Burra, Neera : "Glass Factories of Firozabad I - Plight of Workers". *Economic and Political Weekly*. November 15, 1986, pp. 1981-1985; "Glass Factories of Firozabad II - Plight of Child Workers". *Economic and Political Weekly*. November 22, 1986, pp. 2013-2016; "Child workers who 'play' with fire". *The Hindustan Times Sunday Magazine* November 30, 1986; Barse, Sheela : "Glass Factories of Firozabad I : Children Playing With Fire". *Indian Express*, April 5, 1986; "Glass Factories of Firozabad II : Fleecing of Hapless Labour". *Indian Express*, April 6, 1986; "Glass Factories of Firozabad III : Nelson's Eye to Worker's Safety." *Indian Express*, April 7, 1986.
25. Barse, Sheela : "Child labour hit by powerloom closure". *Indian Express*, November 15, 1985.
26. Burra, Neera : *A Report on Child Labour in the Lock Industry of Aligarh*. Prepared for UNICEF, March 1987, pp. 22-25; Burra, Neera : "All this masala gets into our eyes." *The Times of India*. Sunday, June 21, 1987.
27. Pachhadya, K.R. : "Child Labour in A Metropolitan City, (A Study of Ahmedabad)". *Indian Journal of Labour Economics*. Vol XXII No 4, January 1980, p.c. 101; Jhabvala, Rehana and Jennifer Sebstadt : "To be self-employed... and a woman". op.cit. 1980-81, p. 29-24.
28. Chandhok, Matreyi : "Sex Bias in Child Nutrition." Paper presented at NMC-UNICEF media workshop on 'girl child', op. cit 1985, p. 4.
29. *Ibid.*, p. 5.
30. "Beedi Workers of Nizamabad." *Economic and Political Weekly*, August 8, 1981, p. 1305.
31. Gulati, Teela : *Profiles in Female Poverty. A Study of Five Poor Working Women in Kerala*. Delhi : Hindustan Publishing Corporation 1981, 12, 82, 100; Singh, Brinda : "Daughter of Migrant Workers : A Case Study". Paper presented at NMC-UNICEF media workshop on 'girl child' op. cit. 1985, p. 2.

Women in India-A Statistical Analysis

—M.S. Yadav
Omraj Singh

1. Female Population, 1981

Sector	No. of Million
Rural	256 (77.4%)
Urban	75 (22.6%)
Total	331

Source : Census of India, 1981.

2. Growth Trend of Population, 1901-1981

Year	Total Population (in million)	No. of females (in million)	Sex ratio (females per 1000 males)
1901	238	117	972
1911	252	124	964
1921	251	123	955
1931	279	136	950
1941	319	155	945
1951	361	175	946
1961	439	213	941
1971	548	264	930
1981	685	331	933

Source : Census of India, 1981.

3. Rural-urban Sex Ratio in 1981

Area	Females per 1000 males
Rural	952
Urban	889
Total	933

Source : Census of India, 1981.

32. Karlekar, Malavika : *Poverty and Women's Work. A Study of Sweeper Women in Delhi*, op. cit. 1982, p. 120.
33. *Ibid.*, p. 121.
34. *Ibid.*, p. 122. See also Karlekar, Malavika : "Education." In Desai Meera and Maitlurey Krishnaaraj (eds.) *Women and Society in India*. Delhi : Ajanta Books International, 1987, p. 162-163.
35. Gulati, Leela : *Profiles in Female Poverty. A Study on Five Poor Working Women in Kerala* op. cit. 1981.
36. *The Match Industry In Sivakasi, Sattur : Towards Removal of Child Labour*. Madras : Madras Institute of Development Studies. August 1985, p. 54.
37. *Ibid.*, p. 55.
38. *Ibid.*, p. 39.
39. *Humanising Child Labour. A Report on the IYER Project on Child Labour in India 1983-85*. West Bengal : Institute of Psychological & Educational Research, 1985, p. 23.
40. Dhat, Ila : "The Invisibility of Home-Based Work : The Case of Piece Rate Workers in India", op. cit. 1987, p. 30.
41. *Ibid.*, p. 31.
42. *Ibid.*

4. Distribution of Population by Sex and Broad Age Groups 1981

Age Groups	Population Millions	
	Males	Females
0-14	140	132
15-24	66	62
25-49	103	96
50+	45	41
Total	354	331

Source : Census of India, 1981

5. Expectation of Life at Birth (1901-1981)

Year	Expectation of life at birth (in years)	
	Males	Females
1901-11	22.6	23.3
1911-21	19.4	20.9
1921-31	26.9	26.6
1931-41	32.1	31.4
1941-51	32.4	31.7
1951-61	41.9	40.6
1961-71	46.4	44.7
1971-81	52.6	51.6
1981-86	55.6	56.2
1986-91	58.1	58.7
1991-96	60.6	61.2
1996-2001	63.1	63.7

Source : i) Census of India, 1981;

ii) Figures 1981-86 to 2001 are projections-office of Registrar General, India, Ministry of Home Affairs.

6. Work Force Participation Rate by Sex and Area 1961 to 1981

Area	1961			1972		1971			1981		
	M	F	P	M	F	P	M	F	P		
Rural	56.96	25.66	41.60	53.46	13.09	33.81	52.62	16.00	34.76		
Urban	51.56	9.13	32.13	48.82	6.62	29.33	48.54	7.28	29.23		
Total	55.94	22.85	39.90	52.50	11.85	32.92	51.62	13.99	33.45		

Source : Census of India, 1961 to 1981.

7. Mean age at Marriage, 1901-1981

Decade	Males	Females
1901-11	20.2	13.2
1911-21	20.5	13.6
1921-31	18.4	12.6
1931-41	20.2	15.0
1941-51	19.8	15.4
1951-61	21.4	16.1
1961-71	22.2	17.2
1971-81	22.4	17.2
1981	23.2	18.3

Source : Census of India, 1981, Series I, Paper 2 of 1983.

8. Literacy Rate, 1901-1981

Year	Percentage of literates to total population		
	Males	Females	Persons
1901	9.83	0.69	5.35
1911	10.56	1.05	5.92
1921	12.21	1.81	7.16
1931	15.69	2.93	9.30
1941	24.90	7.30	16.10
1951	24.95	7.93	16.67
1961	34.44	12.95	24.02
1971	39.45	18.72	29.46
1981	46.89	24.82	36.23

Source : Census of India, 1981, Series I, India paper 2 of 1983, Registrar General & Census Commissioner of India.

9. Literacy Rates Among Scheduled Castes, Scheduled Tribes and rest of the Population in India from 1961-1981.

Year	Scheduled castes population		Literacy rates Scheduled tribes population		Rest of the population	
	Total	Females	Total	Females	Total	Females
1961	10.27	3.29	8.53	3.16	27.86	16.59
1971	14.67	5.44	11.30	4.35	33.80	17.11
1981	21.38	10.93	16.35	8.04	41.22	29.51

Source : Seventh Five Year Plan 1985-90 Vol. II Planning Commission, Govt. of India, New Delhi. 1985

13. Infant Mortality Rate by Sex (1972-1983) in India

Year	Infant Mortality Rate	
	Males	Female
1972	132	148
1973	132	135
1976	124	134
1978	123	131
1979	119	121
1980	113	115
1982	104	106
1983	105	105

Source : Officer of the Registrar General, India, Ministry of Home Affairs

14. Women Candidates Contested and Elected to the Lok Sabha from 1967-1984

Year	No. of Contestants		No. of elected	
	Total	Women	Total	Women
1967	2369	69	520	31
1971	2784	86	518	21
1977	2439	70	542	19
1980	4620	142	542	28
1984	5313	164	528	42

Source : Election Commission of India, New Delhi

15. Women Candidates Contested and Elected to the State Legislative Assemblies 1970-83

Year	No. of Contestants		No. of elected	
	Total	Women	Total	Women
1970-72	14273	387	3264	161
1977	17282	408	2852	74
1979-80	17826	420	2590	117
1982-83	8656	241	1530	44

Source : Election Commission of India, New Delhi.

10. Literacy Rate by Sex and Rural, Urban in 1981

Area	Males	Females	Total
Rural	40.62	17.90	29.57
Urban	65.58	47.65	57.19
Total	46.72	24.88	86.12

Source : Census of India, 1981

11. Percentage of Main Workers to Total Population by Activity and Sex in India in 1981

S.No.	Activity	Males	Females	Total
1.	Cultivators	22.56	4.65	13.91
2.	Agicultural Labourer	10.10	6.46	8.34
3.	Household industry	1.64	0.64	1.16
4.	Other workers	17.32	2.24	10.04
	Total	56.62	13.99	33.45

Source : Census of India 1981, Series I, India Part II B (i) Primary census Abstract, General Population, Registrar General and Census Commission, India New Delhi, 1983

12. Work Participation Rates by Age in India

Age Group (in years)	Females	
	1971	1981
0-14	2.63	2.95
15-19	15.78	18.48
20-24	18.12	20.32
25-29	20.01	22.52
30-39	21.70	25.31
40-49	22.63	25.97
50-59	19.64	21.56
60 +	10.64	10.19
All ages	12.06	13.99

Source : Census of India, 1981, Series I India Paper-2 of 1983 Key population statistics based on 5 per cent sample Data, Registrar General and Census Commissioner for India, New Delhi, 1983

SOME ISSUES IN NUTRITIONAL DISCRIMINATION AGAINST THE FEMALE CHILD

—Anuradha Sahasrabudhe

1. Background

That women are discriminated against in our society in every respect is a widely acknowledged fact. It is all well known that they enjoy a status lower than that of third class citizens.

1.1 Some Relevant Socio-Cultural Factors :

A woman in our society has no individuality. Her identity is wholly defined by her relationships to others*. This selflessness is carefully cultivated throughout her life time. The main instrument in this nurturing routine is self-negation and sacrifice. The discrimination we believe in, begins at birth of a female child. However, technological development has managed to advance the same to a stage before the actual birth.

An important result of the general discrimination and an attitude of condemning the female to third class citizenship, is total disregard for her health status. In fact, nurturing her to believe in silent suffering as an asset to womanhood is an integral part of the Indian culture.

The National Committee on Status of Women (1971-74), points to religion, systems and age at marriage as some of the chief factors conducive to lowering of female status. The observations of the Committee are briefly described in the following paras :

- (i). Effect of religious upbringing : Hinduism preaches complete subservience to men-folk and a life without recognition and development of 'self'. The Koran regards men and women as equals,

but the Muslim tradition and law does not accord equal status to women. The basic tenets of Christianity too have intermingled with local traditions, which accord preferential treatment to men.

- (ii) Decent Systems :— Two decent systems are followed in India. The patrilineal system, which is followed by the majority, leads to discrimination between sexes in all respects. Since social compulsion in such a system is to 'give away' the daughter, she tends to be looked upon as a burden and discriminated against in areas of nutrition, medical care and education.
- (iii) Early marriage and lack of education also contribute to poor health status of women.
- (iv) Cultural upbringing :— Sudhir Kakar (1982) points out that internalization of low self-esteem in the Indian culture also presupposes that girls and women have no sphere of their own and no independent livelihood. Thus considering the reason for their very being to be of service to others, it is ingrained in the mind of every Indian girl that thinking of her own welfare is a grave sin. Only 'educated' girls 'complain'.

Given such a biased cultural upbringing, it is not difficult to trace the reasons for women always keeping themselves on the lowest rung of the ladder, where sharing of family resources is concerned. She is proud to do so. In fact, the ultimate sacrifice for her would be to give up that

* Kakar Sudhir, "Psycho Social Matrix of Infancy : Feminine Identity in India"; Mothers and Infants; The Inner World, Oxford, 1982; 56.

little share too, in the name of 'love', 'motherhood', etc.

The reason for dwelling on the socio cultural bias is its obvious impact on sharing of food resources and resultant malnutrition and ill health amongst the female population of this country.

II SIGNIFICANCE OF FEMALE MALNUTRITION IN FEMALE CHILD HEALTH:

The consequences of maternal malnutrition, its relationship with child birth and growth have been widely studied. However, most of these studies seem to disregard issues pertaining to the effect of maternal malnutrition on the female child as distinctly different from those having effect on generalized childhood malnutrition.

This paper wishes to raise the relevant issues in the light of the socio cultural factors described in the preceding paras and the possible effect of these on the health status of the female child.

III. RELEVANT FACTORS CONDUCTIVE TO FEMALE MALNUTRITION:

- (1) **Sharing of Nutritional Resources:** Food in an average Indian household is a limited commodity. There have been several studies that prove that the women get a qualitatively as well as quantitatively, smaller share of these resources. The ICSSR study group (1971) had 48.53 per cent respondents indicating that the women serve the family first but eat last.

The sharing pattern of food resources is generally found to be as follows:

The earning men folk first, other males and children next (boys first and girls after that), followed by older women and lastly the housewife.

At this point it would be worthwhile to consider the eating habits of Indians. Generally a maximum portion of the meal is taken up by cereal based food preparations with pulses, meats, and vegetables serving as mere accompaniments, meaning that the total quantity of these 'side' dishes is limited. Since sharing in the family is unequal, it is not rare to find the young housewife left with an inadequate quantity of the staple

cereal preparation, and a diluted gravy, if at all, of the meat/pulse/vegetable accompaniment.

The young house-wife besides being a woman, who thanks to the discrimination, has always had the lesser and the inferior share, is rendered even more vulnerable to malnutrition and ill-health under such circumstances.

- (2) **Special needs of a House-wife:** The woman who is being referred to as a young house-wife in this paper is:

in the child-bearing stage of her life, besides being in an age-group when maximum physical work is expected of her.

Her health and nutritional status prior to this stage, i.e. her childhood nutritional status would have a definite bearing on her health status at this stage.

(a) Some Reasons for Early Child-hood Malnutrition amongst Female Children:

It is difficult to trace the history of early childhood malnutrition in the case of a female child. It is more likely than not that she is a child born to a malnourished mother who herself was a product of maternal malnutrition, early nutritional discrimination, early motherhood, etc.

(a.1) The Effect of Prematernal Malnutrition:

(i) Fewer complications in pregnancy, fewer premature births and healthier babies result when the mother is well-nourished prior to conception. Labour is also easier in healthy women of better height. The pelvis of a well-nourished woman is well developed and rounded, which facilitates labour. On the other hand, early childhood malnutrition resulting from discrimination due to social practices and cultural conduct—especially rickets, would lead to under developed or mal-formed pelvis and difficult child-birth. Similarly early childhood nourishment being directly linked with the development of the body, the effect of an under-developed body on child-birth as well as health of the mother and child is too obvious to warrant further discussion.

Shah and Shah (1981) have found that nutrition has a significant relationship to birth weight,

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- (2) **Special needs of a House-wife :** The woman who is being referred to as a young house-wife in this paper is :

in the child-bearing stage of her life, besides being in an age-group when maximum physical work is expected of her.

Her health and nutritional status prior to this stage, i.e. her childhood nutritional status would have a definite bearing on her health status at this stage.

(a) Some Reasons for Early Child-hood Malnutrition amongst Female Children :

It is difficult to trace the history of early childhood malnutrition in the case of a female child. It is more likely than not that she is a child born to a malnourished mother who herself was a product of maternal malnutrition, early nutritional discrimination, early motherhood, etc.

(a.1) The Effect of Prematernal Malnutrition:

(i) Fewer complications in pregnancy, fewer premature births and healthier babies result when the mother is well-nourished prior to conception. Labour is also easier in healthy women of better height. The pelvis of a well-nourished woman is well-developed and rounded, which facilitates labour. On the other hand, early childhood malnutrition resulting from discrimination due to social practices and cultural conduct- especially rickets, would lead to under developed or mal-formed pelvis and difficult child-birth. Similarly early childhood nourishment being directly linked with the development of the body, the effect of an under-developed body on child-birth as well as health of the mother and child is too obvious to warrant further discussion.

Shah and Shah (1981) have found that nutrition has a significant relationship to birth weight,



the pre-pregnancy weight being the determining factor affecting foetal nutrition. The major factor contributing to the low birth weight of infants, was found in their investigations, to be mother's chronic malnutrition, probably since childhood. It was also found in the study that frequency of low birth weight infants was higher amongst anaemic mothers.

Rajkeshwari (1980), in her studies amongst low income women in Gujarat, demonstrated that premenstrual malnutrition proves to be a handicap at birth, i.e. the same means small body size and poor storage of nutrients in case of the mother.

(ii) Prenatal nutrition :

The nutritional status and nutritional intake of the mother during pregnancy are the most important aspects of the 'matro-environment'*

The body's requirements for food during pregnancy* are different and increased in order to cater to the demands of :--

- (a) The growing foetus ;
- (b) Development of the placenta;
- (c) Nutritive requirement of the mother's own body;
- (d) Development of the reserve stores for delivery and labour.

The effects of physical and biochemical changes during pregnancy if not monitored adequately may well contribute to the generally prevalent state of malnutrition. To quote a few examples-- the biochemical changes may cause depressed stomach functioning; the reduced secretion of hydrochloric acid may have a depressing effect on calcium and iron absorption; the reduced mobility of the gastro-intestinal tract may result

Table 1A: RECOMMENDED DAILY ALLOWANCES FOR WOMEN BY NATURE OF ACTIVITY AND SPECIAL NEEDS OF PREGNANCY AND LACTATION.

Particulars	Calo- ries	Pro- teins (gms)	Cal- cium (mg)	Iron (mg)	Vit. A B-Reti nal (mg)	Thia- Or car-globin (mg)	Ribo- (mg)	Niacin (mg)	Vit. C B ₁₂ (mg)	Vit. Acid (mg)	Folic (mg)
Normal conditions :											
-- Sedentary worker	1900	45	0.4				1.0	1.0	13	50	
-- Moderate worker	2200	45	to	30	750	3000	1.1	1.2	15	50	1
-- Heavy worker	3000	45	0.5				1.5	1.7	20	50	
Pregnancy (Second half of pregnancy) :											
-- Sedentary worker	2200	55					1.2	1.2	15	50	
-- Moderate worker	2500	55	1.0	40	750	3000	1.3	1.4	17	50	1.5
-- Heavy worker	3300	55					1.7	1.9	22	50	
Lactation (upto 1 Year) :											
-- Sedentary worker	2600	65					1.4	1.4	18	80	
-- Moderate worker	2900	65	1.0	30	1150	4600	1.5	1.6	20	80	2
-- Heavy worker	3700	65					1.9	2.1	25	80	

Source : Nutrition Expert Group, 1968.

* A word coined by J.C. Goan to describe the physiological, biological and socio-cultural environment that the mother provides her infant.

** See Table Nos. 1A and 1B.



Table 1B: RECOMMENDED AND ACTUAL DIETARY INTAKES OF PREGNANT AND LACTATING WOMEN OF LOW INCOME GROUPS.

Nutrient	Intake			
	Pregnancy		Lactation	
	Actual	Recommended	Actual	Recommended
Calories (Kcal)	1400	2500	1860	2900
Protein (gms)	40	55	40	65
Iron (mg)	18	40	18	30
Calcium (mg)	260	1000	300	1000
Vit. A (mg)	304	750	304	1150

Source : ICMR BULLETIN, Vol. 4, No. 6, June 1974.

in constipation; a relaxed cardiac sphincter may produce regurgitation and 'heart burn'; appetite and thirst may increase during the first trimester; there may be nausea, and cravings for certain foods; 'Pica' or desire to eat non-food items may often be *traditionally* fostered; digestion and assimilation is generally affected. All these are contributory to erratic dietary practices and malnutrition.

(iii) The Role of Food Fads/Taboos and General Nutritional Ignorance :

Lack of knowledge about nutritional needs, myths about foods, traditional food taboos, all contribute to conditions of malnutrition.

It has been observed that the poor status of the Indian wife in terms of family acceptance and emotional well being, changes dramatically once she becomes pregnant. The prospect of motherhood holds out a composite solution for many of her difficulties. (The improvement in an Indian wife's social status once pregnant, has been universally noted by cultural anthropologists). For the first time her welfare receives attention, and her wishes are likely to be fulfilled.

The impact of this situation on her eating habits and nutritional status, could be positive as well as negative. As attention is focussed on her well-

being, the family members would make sure that she eats well. However, possibly because it is such an important event in her life, food fads abound—some are traditional. Some result from the biochemical changes already described, while others may have psychological origins—for example, it is the only time she can demand to eat what she likes. Studies indicate that in almost all regions of India, the food taboos are for those items which have a high nutritive value, especially considering the special needs of pregnancy and lactation*. Besides avoiding the concentrated sources of most relevant nutrients, it is also widely believed that staying or under-feeding the mother would ensure a smaller baby and therefore safer delivery.

It is known through medical and nutritional investigations that nature ensures normal development of the foetus even at the cost of mother's nutritional reserves. This phenomenon would render the malnourished woman even more vulnerable during delivery.

(iv) Effect of Pregnancy Wastage :

The potential effect of maternal nutrition on the course of pregnancy and its outcome and later the nutritional status of the infant is thus seen to be profound.

* The list of food taboos include papaya, green leafy vegetables, banana, etc. believed to induce abortion. There are other foods labelled as 'hot', eg. Jaggery and still others like citrus fruits, etc. labelled as 'cold' sprouted legumes are considered gas forming.

A study by Gopalan and Naidu (1972)* indicates that pregnancy wastage (abortions and still births) of malnourished mothers was as high as 30 per cent in 1972. Still births constituted 11 per 1000 live births. Prenatal mortality was found to be a result of maternal malnutrition and iron deficiency anaemia. In the same study it was observed that higher birth orders and frequent pregnancies cause protein malnutrition which was another cause of infant and maternal mortality. Ten to Twenty per cent deaths, according to these investigators, are due to nutritional anemias and 16.44 per cent due to pregnancy complications and morbidity—including psychiatric morbidity which is more prevalent among women than men (as per a WHO report, 1966).

The prospect of raising her status in the family, and importance attached to attainment of motherhood, probably forces a woman to take chances of pregnancy despite her poor health status. Increased *panty* means further depletion of nutritional resources and possibility of further wastage. It is a never-ending cycle, especially if a woman delivers daughters instead of sons, because in the Indian society, it is important to be a mother, but the woman's status is slightly upgraded only if she produces sons in order to ensure family continuity in a predominantly patrilineal decent system.

It may be noted that the sex determination being possible in pregnancy itself, thanks to the advanced technology, the pregnancy wastage is higher, as women quite willingly go in for abortion in the event of the foetus being discovered to be of the female sex.

(a.2) Delivery and After care of the Mother and the Female Child

The physiological stress of delivery and non-repletion of the losses due to tobacco, sometimes identical to those during pregnancy, leave behind a woman whose very survival may be considered miraculous when judged by parameters

of adequate health and nutritional status.

The lactating mother soon reverts to her position on the last rung of the ladder of resource-sharing which limits her chances to recover the nutritional losses.

b. The Aggregate Effect of Prematernal, Prenatal and Postnatal Malnutrition on her Health Status :

The cumulative effect of prematernal (birth to pregnancy), prenatal (during pregnancy) and post-natal (after delivery), malnutrition is bound to have a profound effect on the woman's health status.

As already mentioned, if the child born to such a woman is of the female sex, not only would this tradition-bound woman discriminate against the female child while feeding, but would also bring up the daughter to think it is the right thing to do and thus perpetuate the vicious circle.

The female child is going to get the lesser and inferior share of food resources—if she has a brother, she would drink black tea while the brother gets a glass of milk, she would wean on normal adult food, whereas her brother may receive special attention for the same.

The nutritional stress of adolescence is uncared for and the cumulative effect of early childhood malnutrition and not catering to special female nutritional needs of adolescence would render her unprepared for the expected stress of pregnancy after an early marriage (see Fig. 1A and 1B.)

C. Physical Activity :

Since the central character of this paper is the young house wife in her prime, it would not be out of place to consider the nature of her physical activities and its relevance to her nutritional and health status.

This stage in the life of a woman may be termed as a peak for expected duties which are physically taxing. WHO studies as well as investigations by Randhawa (1975) and Chakrabarti (1975)** have

* Gopalan, C., and Naidu, A.N., "Nutrition and Fertility"; The Lancet : No. 18, 1972.

** Study quoted by Nail C. In her paper, "Nirakshar Wa Alpashikshit Streeyansanthi Shalkshanik Karyakann"; (Educational Programmes for Illiterate and Semi-literate Women). (Marathi): 1983, unpublished.

Fig. No. 1 A : THE VICIOUS CIRCLE OF MATERNAL MALNUTRITION AND BIRTH OF A SUB-NORMAL FEMALE CHILD

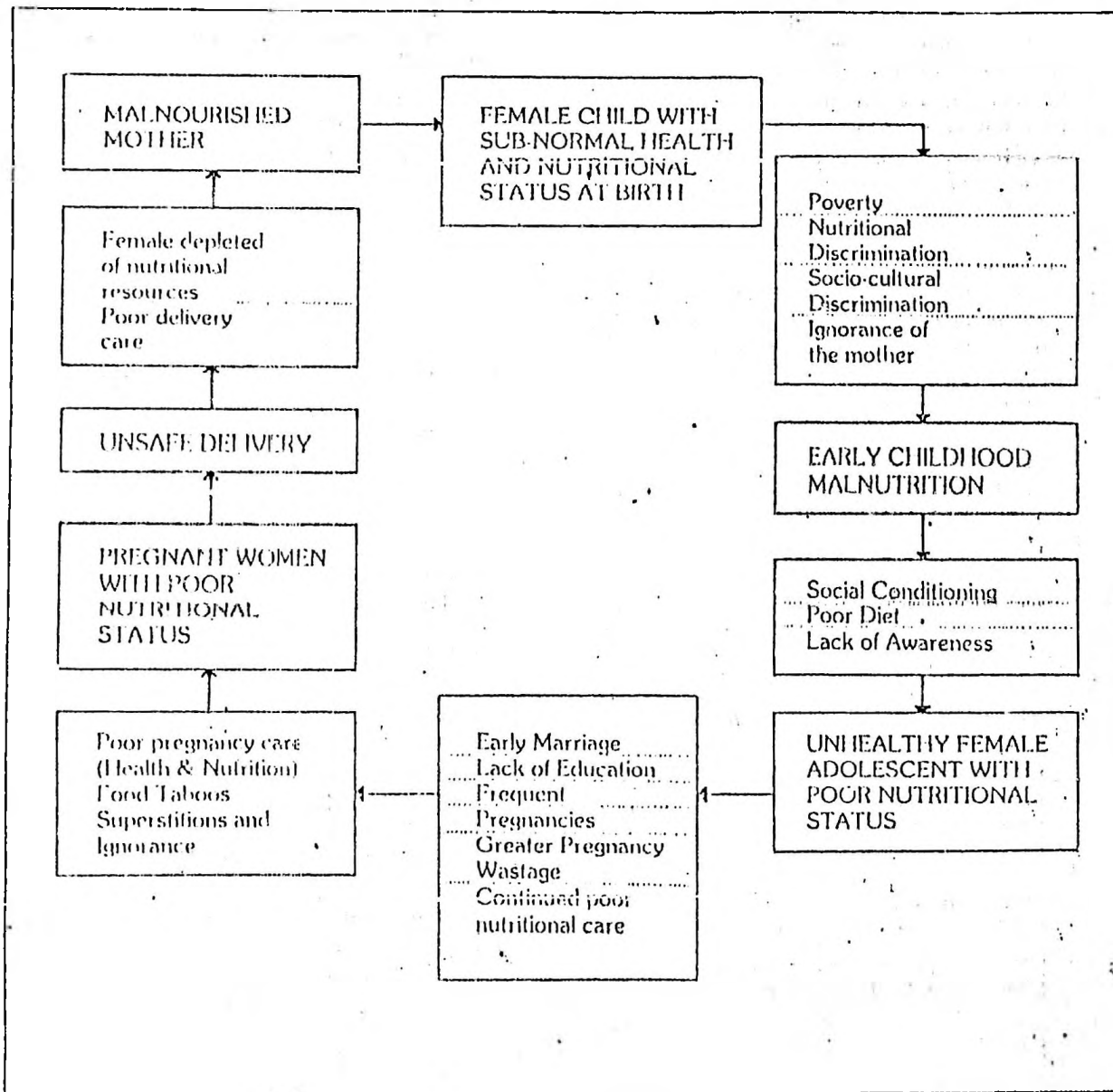
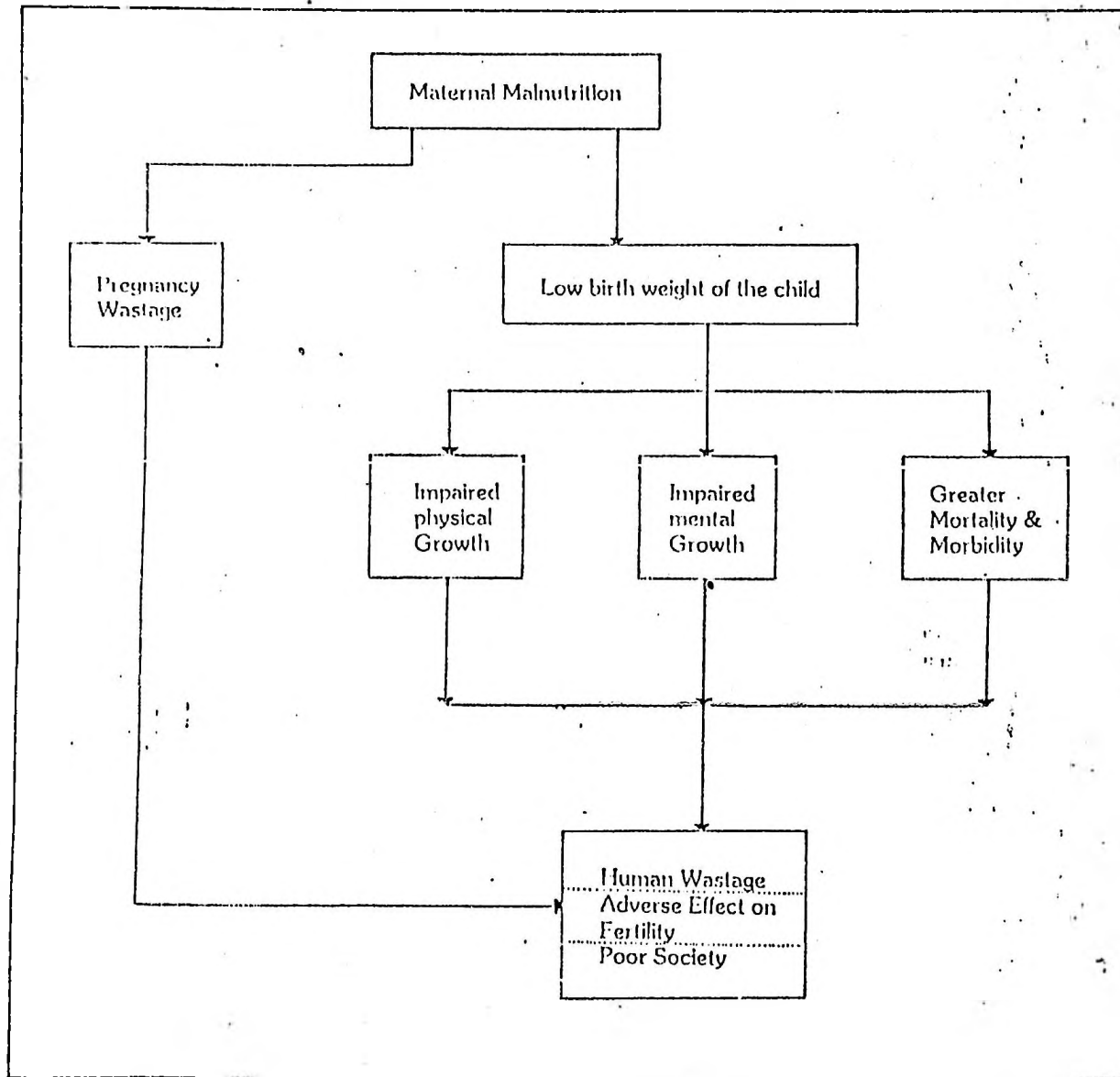


Fig. 1 B: EFFECT OF MATERNAL MALNUTRITION ON POPULATION



shown that an Indian woman, on an average, works for 13 to 18 hours every day. The daily chores she is expected to perform are all physically taxing without time for respite.

When this fact is coupled with the physiological stress of pregnancy and delivery, studies in the light of the socio-cultural conditioning that considers non-complaining nature of a woman as one of her most important virtues, and given the inadequate, often unacceptable health care facilities, it is not at all surprising to find a female mortality rate which is higher than male mortality rate in India or an adverse sex ratio (Table No. 2).

Table 2 : SEX RATIO IN INDIA
(1901-1981)

Year	Sex Ratio (No. of women per 1000 men)
1901	972
1911	964
1921	955
1931	950
1941	945
1951	946
1961	941
1971	930
1981	935

Source : Census of India, 1981, Series— I; India Provisional Population Totals; Paper I of 1981.

IV. Remedial Educational Programmes :

The nutrition/health education plans for women fail to see the problem in its totality. The status of child health too is studied as a single phenomenon, when the special problems of the female child, (some of which this paper has attempted to highlight) need special and separate consideration.

Firstly, whether a boy or a girl, a malnourished mother's child is bound to be delivered with a handicap*. If it is a female baby the handicap is peculiar and needs special attention with full regard to the socio-cultural constraints.

The bias needs immediate removal and appropriate training of educators highlighting the root

causes of early female childhood malnutrition is indicated.

The neglect of women, seen in the light of discussion thus far, would ultimately mean neglect of the human race. For even to have the 'precious' male-heirs, the baby-producing machines** have to be maintained in perfect order. The producers of babies require good nutrition and health care from the day they were themselves conceived. The above could serve as educational messages for training programmes for relevant learners. The male-members and the older female decision-makers of the families need to realize the importance of women's nutritional status, and an emphasis on educational programmes for these members of the society is indicated for improvement of the health status of the housewife.

The present day programmes usually focus on the education of the mothers. But given the fact that an average Indian housewife has very little power in family decision-making, she cannot take steps for improvement even when convinced of the need and trained in the method. It has been reported by field workers, working in the area of nutrition education/rehabilitation, that the nutritional advice or supplements provided in MCM programmes are often looked upon as a challenge to the authority of these traditional decision-makers and therefore have a contra-effect.

V. Conclusions :

An attempt has been made in this paper to outline the issues pertaining to the prevalence of chronic malnutrition among Indian women. The malnutrition and ill-health, it is felt, are a combined result of her status in the family and society, religious training, ignorance of correct nutritional practices, and perpetuation of malnutrition through generations as a result of cultural practices.

The female child is generally not given a separate status in relevant scientific investigations. Educational programmes fail to change the situa-

* Low birth weight malnutrition, and other problems.

** As is the status of woman in the Indian Society.

NUTRITION AND HEALTH DISCRIMINATION AGAINST GIRLS FROM 0-20 YEARS OF AGE

Indu Capoor

Introduction

Women in the developed countries after a hard uphill fight during this century, have managed to gain for themselves the right to be considered free independent individuals in their own rights. Through education, organization and single minded determination they have managed to win more and more fundamental rights following from the previous basic recognition. They have made important gains in political, social, economic, educational and occupational fields and are contributing equally to the process of development.

In the developing countries the situation is rather different. A woman is not considered to be a separate entity in her own right. Her role in society, her limited rights, considerable duties and the treatment meted out to her in all walks of life, stem from the fact that she is basically considered a handicap and a set back for the family from her birth. She is reluctantly allowed to grow up (though even this by no means assured with the advent of amniocentesis, and withholding of adequate nutritional and medical support), and as an adult her only worth to anyone is as a household drudge and reproductive machine. If she fails in these last two duties she may forfeit her very life after having so perilously reached the threshold of woman hood.

Nutrition and Health Conditions Regarding Girls

The most pernicious and callous attitude regarding girls is discrimination in the field of nutrition and health. Let me quote a few examples from our field experiences.

Recently there was a training for health workers going on at a village. A girl child of a deserted woman, got suddenly ill and required urgent medical attention. The organizers of the training agreed to bear the travel expenses of the girl child to take her to the nearest medical centre. But the woman's father refused the offer saying that it was unnecessary to spend money on a girl child. Such examples are not uncommon. Girls are expected to recover through home remedies while a great deal of time, money and energy will be spent on the boy child. There is no realization that curative attention whenever required should be without sex bias and dependent solely on seriousness of the illness. Invariably alongwith the dubious home remedies, it is also the women who are the victims of the shocking practice of branding as a possible cure while most of the boys continue to be taken to PHCs and hospitals for their ailments.

To quote another example, CHETNA visited several feeding centres all over the Sabarkantha district of Gujarat. In a house to house anthropometric survey, females in all age groups were found to be more malnourished than males. The reason for this was not difficult to pin point. Superstitions, taboos and socially enforced customs ensured a beggerly treatment of the girls. Economics of scarcity come up with their own rationalizations. Allocation of choice foods and larger portions to boys and men are justified on the grounds that men are the bread winners of the family and therefore need special attention. Women are told that the nutritionally rich foods should not be eaten by

tion because they are geared to deal with the wrong target group - young mothers having no decision making powers. Hence the need of recognizing the problems of the

female child as distinctly different from those of the male child, acknowledging the socio-cultural influences and finding appropriate solutions which are practicable are indicated.

References :

1. Bogart L.J.; Briggs, C.M., et. al. "Diet for Pregnant and Nursing Mothers"; *Nutrition in Health and Disease*, 1961.
2. Burton Benjamin, T., "Human Nutrition", Tata McGraw Hill; New Delhi, 1980.
3. Fleck, Henrich; "Nutrition in Pregnancy and Lactation," *Introduction to Nutrition*; 1962.
4. Gopalan, C., Rama Sastri, B.V.; Balasubramanian, S.C.; "Nutritive Value of Indian Foods"; NIN; Hyderabad, 1981.
5. Gopalan, C.; "Nade A.P.; "Nutrition and Fertility," *The Lancet*, No. 18, 1972.
6. Gwatkin, D.R.; "Health and Nutrition in India"; *Recommendations for Ford Foundation Support*; 1974.
7. ICSSR, "Status of Women in India"; A synopsis of the Report of the National Committee on Status of Women; (1971-74).
8. Iyengar, L., "Influence of the Diet on the Outcome of Pregnancy in Indian Women", *Proceedings of 9th International Congress on Nutrition*; Mexico, 1972; Kager; 1974, 48-53.
9. Nale, C.; "Nude-shar Va Alphashishit Streeyansanthi Shikshani Karyalam I (Educational Programme for Illiterate and Semi-literate Women), Marathi, 1983, Unpublished.

them as they would not agree with them. Another practice which automatically sees to it that this unjust allocation of nutritional input carries on is the custom of women eating last after the menfolk. In poor households this invariably means eating the least both quantity and qualitywise.

At these same feeding centres, when we looked at the register of attendance, to no one's surprise there were more boys registered than girls. Where only restricted number of children were permitted, the parents preferred to send their boys as they felt they needed that extra nutrition to do better in life.

To cite examples from drought conditions, men and women strive equally, shoulder to shoulder on relief work which involves intensive physical labour. But once again in the time honoured fashion a woman's extra nutritional needs are not met at home. If a wife dies, she can be easily replaced, but horror of horrors if a man dies.

Long Term Implications of Nutrition and Health Discrimination

Biologically the female child is born a little sturdier than the male child judging from the slight edge they have over the males in the initial survival ratio. However, after years of conscious and deliberate discrimination against her in the nutrition and health fields, she is unable to reach her full development potential at maturity. She is like a stunted neglected plant which grew up willy nilly.

It is at this point that the downward spiral in her health status begins. When she starts to menstruate, her under-nourished body is unable to replace the monthly iron loss. Nutritional anaemia sets in. In India, custom dictates that girls are married as soon after puberty as possible. A woman in India has no control over reproductive choice. Pregnancies and deliveries follow inexorably in quick succession specially if the greatly desired male child does not arrive. It further depletes her body and her inner reserves and it is a miracle that she survives the great demands on her body as well as delivering babies under unhygienic conditions often without immunization coverage. Certainly she begins to suffer from a number of gynaecological problems

such as white discharge etc. which will plague her for the rest of her life.

Government Help

Recognizing some of these problems government has started many programmes for women but still the emphasis in the allocation of these services is on her role as a future mother. She now gets some attention at the pre-natal, natal and post natal stage. But however commendable this may be it is still an example of too little too late. *It is high time we started thinking of the importance of nutrition and health status of women as individuals and in terms of human resource development and not only in terms of her maternal status.*

All women need to be healthy in order to be productive individuals. Healthy women are a national investment, they form 50% of the population and can contribute to a great extent to the process of development if they are allowed to reach their full health potential. We must ensure that from birth to adulthood a woman is given equal share of food available and not be discriminated against in health care.

Non-Governmental Organizational Effects

Many voluntary organizations would like to focus on the fact that women should receive medical attention not only when they are about to become mothers. The unmarried girls and those who do not become mothers are equally entitled to their share of medical help. The gynaecological problems of this section of the population should be as important as the potential mothers and mothers. Otherwise these women will be doomed to remain in a perpetually anaemic and unhealthy state which cannot help but affect their productive capacity and quality of life.

CHETNA Programmes

Several ongoing programmes of CHETNA focus on the special needs of the girl child e.g. while it is widely criticized that a large portion of the young girl's time is spent on CHILD CARE which keeps her away from school, CHETNA is trying to make her task easier by training these young child minders through the activity oriented approach, through our CHILD to child pro-

gramme so that using the knowledge gained she is better skilled to carry out her task more efficiently and which leaves her more time for self development.

In another programme CHETNA is training adolescent girls attending child labour classes in fertility awareness education so that such a girl has the knowledge and wide power to opt for the reproductive choices when she is ready to become a mother. Such an education also prevents many molestation and rape cases as often such girls become victims out of ignorance on this subject.

Awareness generation camps make women in the rural areas aware of the benefit schemes which are available to them through government and non-government support. This plays a vital role in encouraging their development, and increasing their income generating capacity and confidence. It has a direct

positive bearing on their active participation in the many developmental programmes thereby making them more effective.

Conclusion

It is high time that the barbaric practice of discriminating against the girl child on such a fundamental issue as nutrition and health came to a stop forthwith. Future government programmes which plan for maternal and child health should be specially conscious of treating the woman in her totality and seeing that her individual needs are met from cradle to the grave. This alone can ensure that women reach their full potential and lead productive and happy lives. Only when we have reached this stage will we be able to claim rightful place in the 21st century.

The Basic Education Centre for Girls : Lakshmi Ashram

— Rina Bhattacharya
Ratna Sudershan

Lakshmi Ashram was founded by Sarala Behn in 1946 to serve the women of the Kumaon, with a special emphasis on Gandhiji's educational philosophy of Nai Talim, otherwise known as Basic Education. The Ashram is dedicated to the Gandhian philosophy and ideology of life. Thus it took an active part in the movement for Bhoodan, Gramdan and Gram Swarajye, not only in the hills of Uttarakhand but in other parts of the country. As Lakshmi Ashram's main concern has always been the women of Uttarakhand, it has taken a special interest in problems that directly affect their daily life, and has taken an active part in the liquor prohibition movement and the eco-development movement.

Lakshmi Ashram as a system functions almost like a two layered concentric circle where layers are overlapping in nature, wherein comes its role as a school and as extension service centre. As a basic education centre here the Kutali and the darati, the loom and the charkha, have the same value and importance as tools of education as do books and pens. Thus the garden and the gaushala, the udzogshala and the daily hostel life as a large family all have equal importance alongside formal education. In all the daily activities the teachers and pupils work together.

The motto of the Ashram is "Swawlabhan" - this means that the hill girls should develop their self confidence and individual, independent personalities. The girls go on to become teachers in the Ashram school, take training as nurses, become Sarvodaya workers of Kasturba Trust Sevaks.

Lakshmi Ashram as School : Lakshmi Ashram, nestling in the Himalayas at Kausani, is a residential school for girls, where age is not a criterion for studentship. There have been on an average 80-100 girls going upto high school, a dozen or more teachers, another dozen teacher trainees. Less than half of the girls pay their own fees, some pay part of it and some have been given scholarships and live free. One problem that the Ashram faces is that it can provide accommodation to only a small number of students. At present there are 40 students in the Lakshmi Ashram. The distribution over different classes is given below :

Table 1.1 Classwise Distribution of Students

Class	No. of students
1st "	3
2nd "	3
3rd "	2
4th "	4
5th "	4
6th "	3
7th "	8
8th "	2
9th "	4
10th "	3
Total	36

The school follows the Gandhian mode of pedagogy where the divisions between childhood and adulthood, manual and intellectual work, domestic and productive labour are not recognised; children live as they would in live in their homes and are aware of

social/environmental issues. Emphasis is placed on the development of a sense of responsibility to oneself & others. There is no discrimination based on caste, creed or religion. Respect for manual labour is inculcated, and creativity encouraged. The day begins at 5 a.m. and ends at 10 p.m. A roster giving details of the activities undertaken each day is presented in appendix 1.

In order to have the school free of discrimination, Lakshmi Ashram follows its own policy which is not in line with the national educational policy, and hence the Ashram cannot avail of govt. aid. The national education policy approves of positive discrimination towards those who belong to what are called the "backward classes" - the tribals and the "lower" castes - and demands that the school keeps special records of such children. Then the school gets special grant-in-aid as these children are entitled to free education. However, such identity keeping brings the stigma, from the village where the markedness is a feature of social relationship into the classroom, the child's refuge from the negative discrimination she experiences in the village. So, Lakshmi Ashram refused the grant and barred the inspector of schools from entering.

So far as curriculum is concerned, the school evolved a curriculum suited to the natural environment, the life styles and aspirations of the hill people. This once again is not in accordance with the state education policy, and the state refused to certify, "recognise" the school unless it changed the books, the course, the timings. The school is striving to keep the doors open for its graduates to enter "the rest of the world" but does not want to sacrifice "appropriate" education, tried and proven as one which does not alienate a child from its environment and its creative intelligence, its past, hence, the school has now started following UP state government syllabus and course books. The students sit for board examinations at 5th grade, 8th grade and 10th grade. Classes are held from 1.30 p.m. to 4.30 p.m., and the format of these classes is similar to that in other schools, with one difference that an attempt is made to let pupils study at their own pace. There is less pressure to achieve a particular standard, and no criticism if the pupil cannot do a particular task. However, one may

say this is possible because not many students study in a class. The strength of the classes varies from 2-12 students in the present academic session. Another interesting feature is that unlike other schools homework is not considered to be a burden. Students when ever feel difficulty in doing some home work ask the teachers and they help them, just at the spot because one of them is always present at the home work time.

Lakshmi Ashram places a special emphasis on inculcating religious values and awareness of health issues. In order to learn the main values of religions, for three major religious festivals the Ashram organises a function where students play and act. These festivals are Christmas, Janamashtami and Budh Jayanti. This is done mainly to keep alive a sense of religion.

Health education is given importance. The girls are taught how to nurse and treat the sick. From the age of 12 or 13 they are given a lesson on menstrual cycle. They are also taught to maintain a register noting the dates. This is done under the guidance of the teachers. They are also given sex education. The teacher gives a set of lectures on the process of the development of sex organs, and the kind of physiological changes that take place, in such a way that a girl child is made to understand her physical constitution, gain an understanding of herself and learn how to take care of herself. The lesson on hygiene seems to be specially emphasised. In the hill regions, and against the family background the girls generally come from, they totally lack a hygienic sense. So the teachers make them aware of the importance of maintaining clean toilet and taking regular baths. Then, there are certain common diseases prevailing in the region of which they are warned well in advance, and made aware of preventive as well as curative measures.

Ashram as Extension Service Centre: Another important objective of Lakshmi Ashram is to help the poor and the needy by providing some services. Some of these are included in the daily activities of Lakshmi Ashram. The Ashram runs a village service centre, known as the Udyog Mandir, in Kausani. It includes a flour mill and oil press, library and reading room, all for the use of the general public. In the bazaar the Ashram runs a Khadi Bhandar, managed by one of the Ashram workers who is responsible for both sales and book-

Table 1.2 Age Distribution

Age in Years	No. of Students.
10	1
12	5
13	5
14	2
11	1
15	1
16	2
17	2
19	2
22	1
Total	22

Table 1.3 Family Size.

Serial No.	No. of Sisters	No. of Brothers
1	8	1
2	6	1
3	1	1
4	3	2
5	3	1
6	2	1
7	2	2
8	3	1
9	4	1
10	4	—
11	2	2
12	5	1
13	5	1
14	4	2
15	4	1
16	1	3
17	2	1
18	3	1
19	1	1
20	5	2
21	4	2
22	2	—
Total :	74	28

keeping. Also, Lakshmi Ashram has been working for the past eight years in Dhaulakdevi Block Village. Its initial activities were the opening of Khadi Bhandars in Panuwanaula and Danya, and the encouragement of spinning for income generation. The raw wool is supplied by the Ashram, and the distribution and management done by its workers in the field. Since 1962 the Ashram has run a bakwari scheme in the block, centred on Danya, with some twenty bakwaris in different villages run by local girls. Every year a Bal Mela is organised for all the children in the different bakwaris, the children coming along with their teachers to Danya. Besides the bakwari work, the Ashram has encouraged awareness in the local women of their power, and this has resulted in their spontaneous efforts in protesting against the consumption of liquor, a serious problem in this area as elsewhere in the hills.

The Lakshmi Ashram is an active agent of change. It faces many problems; one of these is financial, and it has found it necessary to accept foreign, private funding since very limited govt. aid is given to it. In order to carry out the motives of providing basic education and making girls self-reliant and independent, there is an urgent need to strengthen the system. The rate of drop out will be reduced and its services will reach many more than it does today. However, this will

remain a dream until or unless some financial assistance is provided to support the system.

Background Analysis of Present Students : A Preliminary Report

This section presents the findings of interviews conducted at the Lakshmi Ashram. Twenty two of the forty students presently registered were interviewed give an indication of their backgrounds, and their perceptions of Ashram education. As it happens, all except one of those interviewed come from villages in the Kumaon, although the school has had students from places as far away as Assam.

It can be seen from the table that the number of students in younger age categories exceeds that in older ages. This reflects the fairly high drop out rate.

It appears from Table 1.3 that all these girls are from families with more girls than boys. This may have been a factor prompting parents to send them to the ashram.

Table 1.4 Parents Education

Serial No.	Father's Education	Mother's Education
1	5th grade	Illiterate
2	10th	-do-
3	Uneducated	-do-
4	-do-	-do-
5	8th grade passed	-do-
6	7th grade passed	-do-
7	High school	-do-
8	B.A.	-do-
9	Intermediate	10th grade passed
10	Literate	Illiterate
11	-do-	-do-
12	B.A.	-do-
13	8th grade passed	-do-

14	5th grade passed	-do-
15	—	—
16	10th grade passed	Illiterate
17	Illiterate	-do-
18	10th grade passed	5th grade passed
19	8th grade passed	Illiterate
20	Intermediate	5th grade passed
21	Illiterate	Illiterate
22	B.A.	-do-

It is evident from the above table that very few fathers are educated upto B.A. or even Intermediate level. Percentage analysis indicates that 93.5% of fathers are illiterate and only 18% are graduates. Amongst the mothers 13 out of 22 are illiterate, and 4.5% are high school passed and 9% of them are 5th grade passed.

It is clear from table that among the fathers 45% of them are in service mostly in the armed forces but in a lower cadre. Among them four have died. However, wives get pension. 13% of them have shops but these are petty shops. Among the mothers only two were reported to be home based workers.

Table. 1.5 Parents' Occupation.

S.No.	Father's Occupation	Mother's Occupation
1	Looking after Land	Housewife
2	Hawaklar	-do-
3	Looking after land	Looking after land
4	Keeps at Home (Ailing)	-do-
5	Retired Service (dead)	-do-
6	Shopkeeper	dead
7	Punjab National Bank (Service)	Housewife
8	Service	Making sweaters and Wollen garments
9	Service (dead)	Housewife (dead)
10	Shopkeeper	dead
11	Service (Navy)	Knitting
12	Looking after Land	Looking after land
13	-do-	-do-
14	—	—
15	Army Service (dead)	Looking after land
16	Looking after Land	-do-
17	Service (dead)	-do-
18	Looking after Land keeps goat	Housewife
19	Shopkeeper	Housewife
20	Land work	Housewife
21	Service	-do-
22	—	—

Interviewing the girls about their attitudes towards further education, it was found that all of them with one exception, would like to study upto 10th grade. The exception was a girl who wished to study beyond that.

On marriage, all again with one exception said they did not want to marry, and saw themselves as becoming independent earners, associated with the Lakshmi Ashram in some capacity. The exception was a girl who said she would like first to earn her living and only subsequently to marry.

All these girls had come to the Lakshmi Ashram through some personal contact, either with Director of the Institute or other teachers, or occasionally former students.

These perceptions about themselves, education & marriage reflect the ideology of the Ashram. This preliminary study directs us to address other questions. The extent to which the education received by these girls influences the future course of their lives is the primary issue.

Life in Laxmi Ashram is basically aimed at learning and leading a community life. Here each one has to work. No one can just go without work. The main feature of this Ashram life is that each one is considered to be a member of the ashram and they develop a sense of responsibility for work. No discrimination is maintained among them in terms of caste, creed and religion. They live together as one family. Teachers are always around the students as elder brothers and sisters in the family.

The routine prescribed is followed by all. The students and teachers rise up in the early morning, then some time is spent for refreshing. Then time comes when students along with teachers clean the school room, courtyard and other attached rooms. After doing all this work, all of them assemble to report about their performance to the teachers.

All the activities are divided between groups, for example one group is given the responsibility of kitchen whereas other takes the responsibility of cleaning. Each group has a leader who supervises the

Appendix I

Daily Activities (Winter)*

Rise up and personal cleaning	5.30 - 6 a.m.
Preparation for lessons	6.00 - 7 a.m.
Cleaning the school room	7.00 - 7.30 a.m.
Break	7.30 - 8.00 a.m.
Spinning and Weaving and Knitting	8.00 - 8.45 a.m.
Breakfast	8.45 - 9.15 a.m.
Shram (Physical activity)	9.15 - 11.15 a.m.
(It includes gardening, ploughing, watering the plants, looking after the animals etc.)	
Washing/bathing	11.15 - 12.15 p.m.
Eating (Lunch)	12.15 - 1.15 p.m.
Rest	1.15 - 1.30 p.m.
School Starts	1.30 - 4.30 p.m.
Gardening	4.30 - 5.30 p.m.
Storing Water	5.30 - 6.00 p.m.
Playing	6.00 - 7.00 p.m.
Prayer	7.00 - 7.30 p.m.
Dinner	7.30 - 8.30 p.m.
Evening, doing home work	9.00 - 9.30 p.m.

* In summer, activities start half an hour earlier, but follow the same routine.

work of the group. Immediately after the break they go to the training centre known as "Udyogshala" for spinning and weaving and knitting of wool, the duration of which is about an hour. Breakfast follows after this. Each activity has to be done within a time limit. One teacher always keeps track of the activities. As soon as the activity is over she strikes the bell warning the students about the timing as well as reminding them of the next activity.

For about two hours again students who are taking training go to their training centre for work. Others who are solely students go to the field for gardening, and ploughing. They come back to ashram for taking bath and cleaning, then comes the lunch with a duration of about an hour. One important and noticeable feature is that each one takes his thali and sits on the seat. The dining room is attached to the kitchen. Here all sit in line and take the lunch including institute's director and also the lower cadre workers, students, teachers, etc. Finishing the food all of them wash their own thalies themselves.

Post lunch session starts, with a milan of the duration of another 15 minutes for health and moral values, extra knowledge and this is followed by the

periods. This continues for 3 and $\frac{1}{2}$ hours. They follow the syllabus given by the U.P. State Government and teach all the subjects accordingly.

Following this the period of kitchen, gardening takes place. All students go for gardening. Teachers also go with them, help them whenever they feel difficulty. This can be taken as a part of curriculum. Each class has its own share of land, in which it grows different types of vegetables, flowers and fruits.

Another half an hour is devoted to storing of water. There is a regular practice of playing. In the winter students play indoor games. However, in the summer they go out for playing in the field.

The last activity for the day is milan that takes place for about half an hour. During milan each leader of the group explains its activities. If they face any difficulty they report to the concerned teacher. It may be other way round, if teachers find that students have not done their work satisfactorily, they make them understand their fault and so on. Also during this time they say prayer i.e. Sarvadharm prayer according to Gandhiji's ideology and a few mantras from Ramcharitmanas. At 8 p.m. the dinner takes place in the dining room. With a rest-pause of fifteen minutes practice learning starts.