CAUSES AND CONSEQUENCES OF DECLINING SEX RATIO IN NORTH INDIA
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It is clear from the preceding chapters that almost in all the Indian state in general and north Indian states in particular there are low representation of women. The cause for such an imbalance sex ratio cannot be put down to natural or biological factors, but it is most likely due to socio-cultural and economic factors. While deprivation and malnutrition are some of the economic factors that has been used to explain existing imbalances, where as infanticide, foeticide, dowry deaths, infant mortality among female and discrimination in their health care have been understood to be the result of specific socio-cultural practices which are responsible for lasting consequences.

4.1 CAUSES OF DECLINING SEX RATIO IN NORTH INDIA

Like other societies Indian society is patriarchal society i.e. a male oriented society and there is a strange invisibility of girl child. Based on purely biological factors number of females should exceed or at least equal the numbers of males in a given population. However this is not the case in India in general and north India in particular. The short fall of women has termed as missing women or declining sex ratio. India’s sex ratio have been decline over century as discussed in previous chapter from 972 in 1901 to 933 in 2001 i.e. a drop of 39 points and there are various reasons for such a wide gap between male female ratio. According to census 2001 the declining sex ratio in India is
due to “neglect of the girl child resulting in their higher mortality at younger age, high maternal mortality, sex selective female abortions, female infanticide, change in sex ratio at birth” (Census of India, 2001: 91). Thus there are numbers of causes for declining sex ratio in such a complex patriarchal Indian society, where son preference a deep rooted social value. It is found that crime against girl child (women) are committed by most impoverished and despaired that is far from true. In the heart of the most prosperous pocket of the country there is a darkness that has manifested itself in some of the most damming statistics to emerge from the 2001 census in previous chapter. As independent India move ahead its attitude toward the girl child has, as the census 2001 suggests, regressed to the dark age. What is more revealing is that the imbalance in most pronounced in some of India’s wealthiest parts. The worst offender are Haryana, Punjab, Delhi and Rajasthan. The fashionable and most affluent district of Delhi has witnessed a 50 point drop in the past decade (Desai and Patel, 1985: 20).

In this way the physical neglect of females, female infanticide, sex selective abortion etc. are evident in Indian society and the degree to which these practices occur can vary from region to regions due to various other factors. In north Indian states there are numbers of factors which are responsible for such practices like sex selective abortion, infanticide of practice of dowry (bringing girl child is like the watering of neighboring plant), hypergamous marriage, preference of male child for mokesh (material and
spiritual advancement of their parents) etc. These later practices obviously comprise the lowest level of unequal opportunity by their very nature of threatening existence; however they are categorically different than discrimination and domination because they tend to be motivated by social, economical and religious pressures rather than gender ideologies. It is estimated that 1.20 crore girls are born in India every year, about one-fourth die before their fifteenth birthday because of female infanticide, discrimination in health care and maternal mortality, malnutrition and as victims of rape, dowry death and molestation (Bhadra, 1999, Ghadially, 1988). Thus there is a social acceptance of neglect of girl child which is rooted in Indian traditional social structures, institutions and ethos, and this is almost a pan-Indian phenomena. Hence following are the major causes of declining sex ratio in north India.

**Female Infanticide**

Female infanticide is an age old practice among human populations to regulate the numbers of children and eliminate the unwanted offspring. It was prevalent among the Greeks, the Romans etc., and it is little known in India prior to the Britishers and this practice was first noticed by Jonathan Duncan who while residing at Banaras, found it to be prevalent in the Rajkumars and the Raghuvanshi clans of Rajputs of Benaras Division in, 1789, He also discovered the same practice among the Rajput of Kathiwar and Kuch. This practice was also noticed by William Carey in 1794, when he witnessed “the dedication of children to Ganges, to be devoured by crocodiles and sharks.”
Near his home at Ganga Sagar (Calcutta), where a grand festival was held every year, Carey saw that mothers threw their children into the sea. However, since then, female infanticide has been widely prevalent in spite of the female infanticide Act 1870 (The Act. Abolishing the practice of infanticide in India) amongst several communities like the Rajputs, the Khatris, the Gkkhars, the Khokhars, the Malhotras, the Seths, the Bedis, the Moyal Brahmans, the pure Pathans, the Mohammadans of Punjab, the Jats (Sikhs of punjabs) etc. (Goswami, 2007: 39-79). Regionally the practice of female infanticide was/is confine mainly to the northern part of India from Gujarat in the West to the eastern border of Uttar Pradesh, the only example of infanticide from north-eastern India is that of tribal Nagas. Examples from the central (Madhya Pradesh) and south India are very few. These scattered examples of infanticide outside north India are provocative cases demanding their own explanation, that these groups, like so many tribal groups, practiced infanticide primarily because of its “family planning”effects. Thus daughters/girls are drowned in the basin of milk, poisoned by opium applied to the breast of mothers, and strangulated to death are some of the methods being used by these communities to eliminate the girl child (Miller, 1997:53-55).

In India in general and north India in particular the nature of infanticide was very much different from other part of the world. Here, superstition, pride, poverty, prejudice toward girl child and preference for sons, the existing dower system, the exorbitant demands of the Charans and the Bhats, the endogamous,
the exogamous, the hypergamous and the isogamous marriage rules and illicit relationships resulting in illegal pregnancy led the people to opt for the practice of female infanticide as well as foeticide.

Historically, the main reasons for this practice in India included the system of hypergamy, where by women must marry into a social group above their own, a custom which forbids the marriage of a woman with a person of lower social standing. This invariably led to the giving of a large dowry to secure a bridegroom of high caste or of high social status, moreover the marriage customs like the touching of knee or taking hold of the knee of the bride groom’s by the bride father, further worsened the whole scenario and hence persons of high caste, unwilling to humble themselves for the sake of a daughter. Thus the financial burden of marring off a daughter, the social status of high caste and social stigma of having an unmarried daughter at home, forced people to kill (their daughter) infant girl at birth. There were also some superstitious beliefs which lent credence to prevalence of female infanticide. A common belief was that if you kill a female child, the next one is sure to be male. Another belief was that as mention in previous chapters that female children bring ill luck to the family, and could bring possible disgrace to the family honour because of their youthful exuberances. Thus practice of female infanticide in India in general and north India in particular did not arise from any religious motive. It develop under specific conditions and was conditioned by particular political, social and economic circumstances. It was a practice
which arouse out of social customs, institutions and prevalent notion of the superiority or inferiority of a particular caste, clan and marriage (Goswami, 2007). Similar reasons are suggested to explain the resurgence of female infanticide in modern India in general and north India in particular and more due to the existing laws relating to abortion which prevents people to go to any hospital or clinics to abort the foetus, thus people reviving the practice of infanticide to eliminating the girl child after her birth. In rural north India, the practice apparently never died out (Jeffery, 1984). Their study in the 1980’s in some villages in north India report that the practice is spreading across the social spectrum to caste groups among whom it never practiced. Thus the evil practice of infanticide is still prevalent even in 21st century and has not dwindled away with the passage of time in a society where the people are more educated and affluent than before where there are various laws relating to such a heinous crime. Every now and then, we come across such incidents which force us to think about the sad flight of girl children and in developing India the sophisticated technology make the situation more worse.

**Female Foeticide**

Female infanticide as we have seen in the earlier paragraphs was a practice, which was prevalent in different part of the country in general and north India in particular at different period of history. The neglect of and discriminatory behaviour against girls leading to access female mortality has also been widely documented by several studies (Das Gupta 1987, Kishor 1995,
Miller 1089, Visaria 1971 etc). But the recent increase in the juvenile sex ratio discussed in previous chapter has very likely resulted from the rapid spread of ultrasound and amniocentesis tests for sex determination in many parts of the (North India) country followed by sex selective abortion, other latest method are Ericsson method, Pre-implantation Genetic Diagnosis etc. (Patel,2007:69).

Thus in the recent time, infanticide has taken the shape of female foeticide, i.e. Killing the baby inside the womb, more popularly known as abortion. Because of sophisticated machines and Medicalinasation of birth it has become easier for parents to get rid of their “unwanted girl child”. Though there have been gender bias and deep rooted prejudice against girl child and women down the centuries. What is still more disturbing is that how the discrimination begins in the womb itself. The latest advances in modern medical sciences have quickened the pace of death of a girl child from the born to unborn stage(Goswami,2007:335).

Times of India, March 8,2007 reads that five million girls were eliminated between 1986 and 2001 because of foetal sex determination done by unethical medical professionals. The rate of extermination continues to increase after census 2001 results. Sex determination and sex selective abortion was traced to an Amritsar clinic in 1979 and has now growing to a Rs. 1,000 crore country wide industry. In recent time, the misuse of ultrasound has reached in remote tribal areas in inaccessible villages and emerged even in parts of India where women were better treated, such as kerala, Assam and the Kashmir vally
(Geroge, Times of India, 2007:16). But this evil practice is deeply rooted among the people of north India, where son preference has become daughter hatred in the recent decades. Due to the widespread 'legitimisation' of this form of violence against women in the earlier 1980's families in Punjab who have two or more girls went in for sex determination; by 1995 some families in Punjab, Haryana, Delhi resorted to the practice in the first pregnancy itself they wanted a son first. In 1994, parliament respond to the misuse of Pre-Natal Diagnostic Techniques by enacting the PNDT Act. However the government did not implement the law. Ultrasound has multiple use but the continued decline of sex ratios at birth reveals that the foetal sexing is a significant misuse of ultrasound. The supreme court directed the government to implement the PNDT Act. In May 2001 Later parliament amended the law to made it more stringent. Manufacturer could sell the ultrasound machine only to registered clinics. However there was a decline in sales of ultrasound machines in 2002 but on the contrary the registration of clinics has increased from 600 to 30,000 since May 2001 and the regulation of ultrasound has yet to be done. Thus law should be properly implemented. The Health Ministry has to be more proactive to stop female foeticide (Abid).

Just as we analyzing the bad news from 2001 census, The Lancet came out with a startling article written by two researchers. They had collected data from a national survey conducted among 1.1 million households in 1998. Their finding were both distressing and shocking. Around 10 million female
fetuses may have been aborted in India over the past two decades they said because of ultrasound scanning and preference for male child. This kind of pre-selection, they said had caused the loss of about 50,000 female fetuses every year (Aravamudan, 2007:47).

Thus Female foeticide is a reflection of the social psyche in India. The preference for a male child can be attributed to the socio-cultural-economic and religious traditions of a society. In a patriarchal society, a daughter is generally unwelcome “Guarding her chastity” and expenditures by way of dowry are a heavy burden on parents. A son on the other hand continues the family line and provide the parents with emotional and financial security and perform the last rite i.e. male child is important for moksha. People feel that they will only be able to achieve moksha transcending the circle of reincarnation via the performance of good deeds through their sons. The importance of sons continued beyond one’s life on earth. It is on this account that a man experiences an affirmation of his masculinity in the birth of a son.

In a society where girls live under a constant fear of being exploited both within and outside the family. Where the evil of dowry is so rampant despite anti-dowry laws, in which daughter are killed and tortured, where a daughter in-law or wife is thrown out of house for giving birth to girls, where there is no security provisions for old ages and parents having daughters are left alone after their daughter marry without any physical, economic and emotional security, where religious beliefs enjoin that the last rites can be
performed only by sons. Thus in search of a male child they practice such an evil of female foeticide (Jain, 2006:15-17).

This is not to say that the shift to this modern technology has been sudden. Traditional system of medicine and healing has also contributed their share. Ayurveda lists a numbers of practices for determining the sex of the foetus after conceptions, and for selection at or after conception. But rampant misuse of modern technology designed for the detection of genetic abnormality in the child, a collective failure of medical ethics and an inability to shed notions of a male have pushed the female foeticide in affluent India to a shocking high, 16 states and union territories with 70 districts have recorded an abnormal decline in the girl population between 1991 and 2001. In urban India the girl population decline drastically, states of north India such as Delhi, Haryana and Punjab have the lowest sex ratio. The most affluent pocket in north India show the sharpest drop, South west Delhi for instance, where some of the richest and most educated of India’s reside has child sex ratio of only 845 as against 904 in 1991. This is the sharpest decline in the country and is largely due to the heinous practice of female foeticide.

“If the enactment of the law was the only thing to curb this menace, this would have stop long ago” says ex-union health Minister Sushma Swaraj. “But it is the social beliefs and cultural values and more than that the consideration of female children as the ‘economic burden’ are resulted into female foeticide. Even the rising education levels have not shattered the myth
that having a sons is the solution to every emotional, economical, spiritual and social problem in life. Delhi is a prominent field, Swaraj feels that excessive availability of machines could be fueling female foeticide.

In April 2001, the Akal Takhat, the supreme temporal seat of the sikh faith banned female foeticide, reaffirming the principle of branding Kudimaar (the killer of daughter) a coordinal sinner. But till now the clergy has not received a single complaint. Paradoxically, the number of god men offering concoctions and blessings to facilitate the birth of a son continue to proliferate in Punjab, And female foeticide continue to thrive."Punjab has become more patriarchal than it was in beginning of the last century and the girl child is now seen as a bigger liability, says Punjab university sociologist Rajesh Gill. A 2002 study by Chandigarh based institute of Development and Communication reveals that 92 percent of educated high income group women who went in for sex-determination test were aware it was illegal while 77 percent of those who opted for female foeticide knew it was a crime so on. All across the north India the birth of the male child is announced triumphantly with the beat of a brass thali and the distribution of sweets and money while that of a girl is met with silence, if not condolence (Vasudev,2003). An aminent demographers Ashish Boss has observed that female foeticide is an important contributing factor to the declining sex ratio in Rohtak district (847 females per 1000 males) which has been describe as the ‘fulcrum of female foeticide’ (Bhadra,1999).
In this way female foeticide is one of the extreme manifestation of violence against women and is a prime cause of declining sex ratio. Female fetuses are selectively aborted after pre-natal determination, thus avoiding the birth of the girl child. In India where infanticide has existed for centuries, now female foeticide has joined the fray and is increasing each day. The reasons for this evil are thus the introduction and the proliferation of pre-natal diagnostic test and sex determination clinics and cheaper ultrasound machines that the determining the sex of a child before it is born. But the root cause for all this is the dowry system which is deeply rooted in north India which makes the girl child (liability) most disadvantage.

To restrict the killing of baby girls in the womb and after birth, central and state government has passed the acts such as the Prenatal Diagnostic Techniques Acts, 1994, But like the dowry prohibition Act. this Act only barks but doesn’t bite i.e. not properly implemented, Because the figure of 2001 census clearly reveals that in many places the Act has been violated with impunity. Prior to the PNDT Act. Enacted in 1994, determination of the sex of the child or having a gender selective abortion was not illegal under Medical Termination of Pregnancy (MTP) Act. 1971 that specifies the reasons for which an abortion can legally be performed. The PNDT Act was the end result of a campaign which was started in 1986 by women’s group and other social activists. In 2003, acting on the order passed by the supreme court, the PNDT was amended and it is known as PCPNDT Act. and its covered all kinds of pre-conception
and prenatal diagnostic techniques. But in 2005, “demographer Ashish Bose was asked by journalist Madhu Gurung whether the amendment Act. had helped to checked the spiraling sex ratio ‘ without insulting the supreme Court order, he replied ‘it has not helped. How can anyone question why sons are required over girls? He told her that he was not opposed to law as it created’ an enabling environment to create awareness against female foeticide. But he felt that basically it was not possible to implement the PNDT Act.” (Aravamudan, 2007:94-95). It may be concluded that law cannot be implemented unless attitude changed and attitudes would not changed unless the law was in forced.

Thus female foeticide is greatly responsible for such a worse male female ratio in affluent pockets of North India in particular and India in general. This practice not only eliminate the girl child but the repeated practice may be dangerous for the mother of the child.

**Unsafe Motherhood And Unsafe Abortion**

There are no reliable estimates of maternal deaths available for the country. The maternal mortality is calculated as the number of maternal deaths per 100,000 live births. This is an indicator of how safe motherhood is. This is also greatly responsible for declining sex ratio in India. India’s maternal mortality is highest in south Asia 540 deaths per 100,000 live births or one women dying roughly every five minutes. An estimated 1,36,000 women die in India every year due to pregnancy related setbacks. The number of maternity related deaths which occur in a week in India is equivalents to what occur in
a whole year in Europe. One of the reason why women in India succumb to reproduction related complication is the lack of timely transportation to the nearest hospital (Azmi, 2007, Times of India 8th March, 2007) the rate of maternal mortality vary from state to state, from 28 in Gujarat to 707 in Uttar Pradesh for the year 1998. But according to the National Health Survey-3, the maternal mortality ratio is estimated to have been decline from 400 maternal death per 100,000 live birth in 1997-98 to 300 in 20001-03 (NFHS-3, 2005-6:4). From this statistic it is clear though the maternal mortality is responsible for declining sex ratio but female foeticide is much more than it as it reduced by 100 as compared to 1998. Among the direct causes of maternal deaths, obstructed labour due to mal-position and mal-presentation of uterus is the most prominent one. Anemia along with tuberculosis are among the indirect causes of maternal death. Poor nutrition, inadequate and imbalance diets, stemming as much from economic poverty as from the discriminatory treatment meted out from childhood resulted in the poor health conditions of women as they grow up. Lack of awareness and discriminative attitude towards women are much more responsible for maternal mortality in India.

In India the Maternal Mortality Rate (MMR) is highest in the world and has worsen in the recent years. More than eighty thousand women die in India every year during child birth. There is a wide range of variation and this is due to variation in the health care as more than 90 percent of birth is attended by a trained health professional in south India but this is not the case
in North India and it is seen that most deliveries take place at home without professional assistance often under unhygienic surroundings. It is also due to adolescent marriage. The National Family Health Survey reports that the median closed birth interval among adolescent was 24 month, compared to 29 months among those aged 20-29. The experience of early and closely spaced child bearing is risky for adolescents some times lead to the death of mother as well as the child and this is more prevalent in north India than other region of the country due to shortage of women. Thus the sex ratio in North India is much lower as compared to south Indian states of the country (Santhya and Jejeebhoy, 2003:4371).

Frequent child bearing among women is often an offshoot of male preference and the repeated abortion in search of male is also lead to death of mother (NFHS-2). Majority of abortions are done illegally by untrained village practitioners who did not constrain women in the process of delivering their services in the following ways that governmentally approved clinic did. Thus lead to death of mother which is a double loss in women’s population leading to worse sex ratio in the country.

**Child Mortality**

As male and female are not identical in all aspects so is the case in child mortality rates that there are more female deaths as compared to male children. Thus the population sex ratio is very sensitive to the effects differential mortality between the sexes in childhood because life expectancy
depends strongly on mortality at this ages. Das Gupta and Bhat (1997) have shown that sex differential for mortality did not change between 1981 and 1991. Though India’s 2001 census shows a six points increase in the population sex ratio to 933 females per 1000 males (vs. 927 females/1000 males in 1991) this still show the female deficit. Alarmingly the female male ratio among children less than 6 years decreased from 945 in 1991 to 927 in 2001 (Sudha and Rajan, 2003:4361). In 1995 UN suggest that females life expectancy was lower than males, female were projected to have a slight advantage thereafter (Griffiths, 2000).

According to NFHS-3 Infant Mortality is 57 per 1000 live birth as a whole, it is 56.3 for male children and 57.7 for female children, but the child mortality is 14.2 for male and 22.9 for female children. Thus it is responsible for declining sex ratio in India, though NFHS-3 recorded decline in infant mortality from 77 in 1998 to 57 in 2005. In this way there is discrimination among the sexes, Girl child is discriminated against even when it comes to breast feeding, supplementary nutrition and care giving, some time the female baby is never fed by their parents and leave to die due to ill prejudice and bias attached to them and due to the forth coming fear of dowry. Thus female disadvantages in child mortality is rightly taken as one of the indicators of gender bias in India and large number of death in early childhood account for the skewed ness in the overall sex ratio.
Dowry And Dowry Death

“The day grooms become available without a hefty price tag attached to them, families would stop killing the girl child in the womb.” (Jain, 2006)

From the above mention causes of declining sex ratio in Indian society. It is clear that the root cause of eliminating of girl child is the economic burden in the form of marriage, dowry, etc. that parents consider them as economic drain, paraya dhan (other’s asset) because of the money which has to be spent on her dowry. The argument that it is better to kill the girl child in the womb than see her killed for dowry is outrageous. Thus if some parents desire to have daughters but due to fear of dowry death they not dare to have a girl child. Times of India, Oct., 13, 2008 read as, “Sangeeta resident of Trilok Puri Lane, New Delhi, a 25 year old pregnant women’s decomposed body was found stuffed into a diwan (bed box) the motive behind killing according to her family members was dowry”. Thus the dowry and the fear of dowry has drunk the blood of innocent girls and women.

In a study of unnatural deaths of young married women in Delhi for the year April 1981 to March 1982, Khan and Ray (1984) found that according to the official record of 179 cases of unnatural death, twelve percent were dowry related. Of these two-third were cases of suicide and the rest homicide, sixteen percent of the unnatural deaths were estimated to be dowry related of these, three out of five cases were suicide and other homicide (Ghadially, 1998).
Dowry is a deep rooted reality in the country and it has social and cultural sanction. In its origins dowry was one of the few indigenous women centered institution in an overwhelmingly patriarchal and agrarian society. Historically, it was an index of the appreciation best owed upon a daughter, a conception that daughter should have something to fall back upon in the times of crisis, this is so deep rooted in the minds of the people that ornaments particularly of gold are regarded as security and this gave a special position in the in-laws house. Thus it was a matter of preserving the status of girl/daughter. Transfer of wealth at the time of marriage, enable a girl to enter into a desirable mach. Technically dowry is what is given to the son in law or to his parents on demand in cash or kind, dowry become paying groom price. (Toward equality,1974). Thus making a dowry demands is a cultural oxymoron that bears no resemblance to the historical meaning and practice of the institution. Demands for dowries today have grown in response to the exponential increase in cash, agricultural land and urban property i.e. in the form of moveable and unmoved able property, and over the past several decades it spread throughout in India. Caste group following hypergamy have had a high incidence of dowry, Lower castes viewing dowry as a status symbol have adopted the custom with even more zeal than the upper caste. The dowries in present times frequently cost the bride’s family two to three times their yearly income. Refusal to offer dowry seals a girls fate as a spinster and shames the family name. Failure to deliver the offered dowry may
resulted in dowry death or dowry burning, in some cases suicide by the women are also recorded.

Dowry is an all India phenomenon, but it is rampant in north India particularly in the Punjab, Haryana, Delhi, Uttar Pradesh, Bihar, Rajasthan etc. and practice of hypergamy among some communities in north India has resulted in establishing high rate of dowry. In 1961 less than two decades following independence, the Dowry prohibition Act was promulgated by the parliament. It was however soon realize that the Act, instead of controlling it failed to prevent its spread in a drastically altered form to most castes and classes, what catch the attention of women’s groups was a large numbers of accidental death of young married women. These deaths on investigation by women’s group called the Mahila Dakshata Smiti (New Delhi 1977) were discovered to be murdered or abetment to suicide by incessant harassment. The initial investigation in 1978 by the anti-dowry committee of Mahila Dakshata Samiti revealed that more than 350 women were burnt to death for dowry in Delhi alone. As Pramila Danavate, the then secrétaire of the smiti observed these were cases of girls pushed on the burning stove or driven to suicide for not bringing dowry. The Ministry of Home Affair observed 1285 cases in 1986. The compendium of policy statements in the parliament reported, on the basis of the data from early seventies to mid-eighties of the bureau of public research and development that crimes against women has doubled. The Home Ministry Crime Bureau clocked a ‘dowry death’ at every 102 minutes and
informed that between 1987 and 1991 dowry death has increase by 170 percent. It was reported in The Hindu, 17 April, 1994 under the caption 'The Darkness Has Not Listed For Women' by Visa Ravindran (Toward Equality1974:71-75.,Sheel,1999:127). In this way this was resulted in skewed sex ratio in the country and parent due to fear of rising dowry demand eliminate the girl child after birth and even before birth which is again resulted into decline in women/girl population.

Thus the problem of dowry may be solved by increasing social consciousness particularly among women’s, reform in marriage custom to simplify the ceremony, increasing opportunity for employment, a reassessment of the value of household work and home making as socially and economically productive and the enforcement of the anti-dowry laws effectively, but problem is not solved alone by the law, as the present law may be regarded as the proof of growing social consciousness about the evil practice of dowry, what is needed is the change of attitude against the girl child.

A part of the above mention causes there are various other causes which are responsible for declining sex ratio in a complex, patriarchal and agrarian society in India, but the above mention causes are some of the major one. It has been seen that society with more number of males remain at risk of social unrest with increase in crime and violence against women.
4.2 CONSEQUENCES OF DECLINING SEX RATIO IN NORTH INDIA

As mentioned in above paragraphs a continuing declining sex ratio has many potentially serious consequences, although there are no historical models by which to learn about the implications of a lack of women relative to men, one fairly obvious social consequence is that there are not enough women for men to marry and the institution of marriage would lose its relevance. This scarcity of brides might lead to the child betrothal and early marriage (child marriage) to cope with the problem. Increasing numbers of child brides will further contribute to the poor status of women, as will be less likely to finish the school or develop skills before marriage. Young brides and their children are also more likely to suffer from the increased morbidity and mortality associated with early childbirth. Thus there are serious socio-economic and health implications of declining sex ratio (Makinson, 1985). Another consequence of scarcity of women is the increase in dowry i.e. payment of exorbitant dowry, daughter are often sold to higher castes and even poor men often paid a bride price to obtain a wife. Among the Jats in particular and various others in general the scarcity of women led to widespread systems of polyandry.

Thus if this trend of gender imbalance continues one of the serious repercussions would be a rude shock to the institution of marriage in the decades to come. It has severe consequences especially in North Indian states of Punjab and Haryana which are characterized by inability of men in marriageable age to find suitable partners, The Hindustan Times, July 12, 2003.
read as “in Hathin (Haryana), because of shortage of women men buying brides from other states like Assam, West Bengal and from far away villages of Bihar. The price put on such a girl is much less than what people pay for cattle, after marriage they are condemned to a life of slavery (Jain, 2006; 22).

An associated phenomenon is the abduction and trafficking of girls. Thus shortage of brides would be resulted in expansion of the sex industry with the magnitude of spreading Sexually Transmitted Diseases (STD) and deadly disease like HIV/AIDS would increase manifold. In this distorted social scenario marked by growing anti-social behaviour, crimes against women like rape, molestation, eve teasing, child marriages, forced polyandry etc. is also expected to rise.

Conclusion

From the foregoing discussion one may concluded that cause for such a balance sex ratio cannot be put down to natural or biological factors, but it is most likely due to socio-cultural and economic factors. Thus Infanticide, Foeticide, Maternal and Child Mortality, practice of hypergamy, Dowry, the preference of male child for achieving moksha a deep rooted social value, sex selective migration etc. are some of the major causes for such a worst sex ratio, which is greatly responsible for social unrest with increase in crime and violence against women in such a complex patriarchal Indian society in general and north India in particulars.